

COMMUNITY FORUMS: OCTOBER 2006**Issues presented at more than one Forum:****Community Forums/Partners and Communities Together**

Presentations were given at each Forum by:

Chief Inspector Sue Thomas

Inspector Peter Gebbie

Local Police Officers

Each Forum began with a brief outline of the changes that were taking place with Community Forums. Chief Inspector Sue Thomas and Inspector Peter Gebbie attended Forums to explain the changes and to introduce some of the local police in each area, who would be attending future Forums. The presenters explained that Herefordshire Council and West Mercia Constabulary were working in partnership to improve the way they engaged with local residents and responded to the priorities and needs of local communities. As a result, this would be the last round of Community Forums in the current format, pending the outcome of a pilot round of new-style Forums in November. There would be nine new-style Community Forums covering the County, which would be attended by representatives of the main agencies responsible for key services in the County. The nine areas were based on the revised policing areas, which were co-terminus with electoral wards. Some wards had been grouped together depending in population, geographical proximity and the demands on police resources in the areas. The new-style Forums would focus on listening to the needs and concerns of the community in each area. There would be no presentations or formal agendas. Instead, members of the public would be invited to raise issues and concerns, and these would be dealt with in the most appropriate way after the meeting. Information about the issues raised and how they had been addressed would be available at the next Forum. The public were urged to support the pilot round of new-style Forums and to encourage their communities to do so. In response to questions, the following points were made:

- The Police Liaison Committees would continue;
- Leaflets were not currently available in Braille, but this matter would be taken up later;
- The Chief Constable had made the decision to limit the powers of CSOs. Their function was to be out and about being the eyes and ears of the community, rather than deal with paperwork, which accompanies more powerful roles. CSOs received extensive training and there was a good retention rate, with positive public feedback.

Hereford Hospitals NHS Trust public consultation “Your Hospital in Your Hands”

One or two representatives of the Hereford Hospital Trust attended each Forum. They were:

John Campbell, Foundation Trust Programme Director

Helen Blanchard, Director of Nursing & Quality

Peter Harper, Medical Director

Martin Woodford, Director of Finance

Peter Goring, Foundation Trust Secretary

Alison Budd, Director, Inpatient Care Group

Alan Dawson, Director of Service Delivery

The presenters explained that Hereford Hospitals NHS Trust was one of the best performing Acute Trusts in the West Midlands and was a National Exemplar Site for Cancer services. This had provided the opportunity to become a Foundation Trust.

A Foundation Trust was a not-for-profit hospital business that was free from central Government control and from the Strategic Health Authority, and was therefore accountable to the local community. This meant that decisions were made locally and Trusts benefited from strong partnerships, particularly with GPs. Although Foundation Trusts had to be financially viable, they were not required to break even each year. This provided scope for long term planning and enabled Trusts to use their funding flexibly to improve services. Trusts were regulated by "Monitor", a Watchdog organisation set up to ensure Trusts provided a full range of quality services.

There were risks attached to opting not to become a Foundation Trust. Because the Government was committed to offering all NHS Trusts the opportunity to apply for Foundation Trust status, there was a possibility that hospitals that failed to do so could be integrated with larger groups of hospitals. This could mean a reduction or relocation of services currently provided.

Representatives of the Trust outlined the structure of Foundation Trusts, and explained the roles of the Board of Directors, Council of Governors and members. There was a proposal that the lower age limit for Members should be 14. 80,000 consultation documents had been circulated throughout the summer and 85% of respondents supported the Foundation Trust proposal. The plans for Foundation Trust status were being updated as a result of feedback from the public.

After the close of the consultation, updated plans would be circulated to the Department of Health in November, and there would be an external Financial Review of the Trust in November to December 2006. A decision to proceed to the final stage would be expected in January 2007, and an assessment by the Independent Regulator would be made early in 2007. Members of the public could register an interest in becoming a Member now, and were encouraged to do so.

In response to questions, the following points were made:

- It was understood that Neville Hall, Abergavenny would not close, but the A & E would reduce to a Minor Injuries Unit;
- The Hospital catchment area was large, including Brecon, Radnor and parts of Monmouthshire and Shropshire;
- The hospital had a good relationship with the ambulance service, which it planned to maintain;
- Predictions on population and patient numbers had been built into the plans for three years ahead;
- The Trust aimed to have 85% bed occupancy to allow flexibility. Forecasting showed that the hospital could run with the current provision, but there were contingency plans to increase provision if necessary;
- Since the new barrier-controlled system had been installed at Hereford Hospital, the car park had been full on only two occasions for a very short time;
- The Trust would be required to have sufficient numbers of Governors and Members, and this could increase administrative costs;
- The Trust was working to ensure that the hospital would be financially viable for the future;
- Non-executive Directors could be appointed from outside the Hospital;
- The Trust had a responsibility to ensure that cancer treatment was clinically safe and affordable. The population was not large enough, and there were not sufficient numbers of particular types of cancer in the Hereford Hospital catchment area to warrant a cancer centre which would make such treatment available in Hereford.

For that reason, specialist cancer services would continue to be provided at Cheltenham and other large centres. However, chemotherapy could now be provided in Hereford and Hereford now provided up to 90% of chemotherapy. Radiotherapy would continue to be provided in Cheltenham. The Trust worked closely with Cheltenham to ensure patients needs were met as well as they could be;

- The Trust was working towards providing a MacMillan Cancer Centre in Hereford;
- The Secretary of State for Health would decide whether the Hospital could apply for Foundation Trust status, and an Independent regulator would make the final decision;
- The hospital had been achieving the target 98% of patients within 4 hours for A & E for the past 12 months;
- The Trust was working with other Trusts to build partnerships and ensure consultants were available at Hereford, for example, one of the top cardiologists was in Hereford four days a week;
- Foundation status would help to ensure the future of Hereford Hospital;
- Administration costs could increase under Foundation Trust status, but it was thought that this would represent a sensible investment and would benefit the community;
- The directors of "Monitor" generally had a business background, for example, financial consultancies. They were appointed independently of the Department of Health and government;
- Under Foundation status, 95% of patients would be NHS patients;
- The recently published quarterly figures showed that, of the 45 existing Foundation Trust Hospitals, 43 were operating in financial surplus and, in the published league table, 87% of FT hospitals were rated Very Good or Good, compared with 10% of other hospitals;
- Although the aim of the FT would be to attract patients to the hospital, pressures would be managed by managing the use of beds. This would depend largely on maintaining strong links with primary care, such as GPs and Community Hospitals, and with Social Services Departments, to ensure that patient care was provided in the most appropriate setting, including home care where possible. Discharge planning would continue to improve;
- Problems with recruiting medical staff existed everywhere, and Herefordshire was no exception. Salary was not the issue as national pay scales were set. However, Hereford Hospital had appointed some very high calibre staff and the quality of life offered in Herefordshire was proving to be an attraction. It was more difficult to recruit Nursing staff as they tended to gather in big cities. Foundation Trust status could make the hospital more attractive to staff;
- The Trust would engage with Members and Governors to encourage their involvement and increase their knowledge, ensuring that they were able to influence decisions made by the Trust in an informed way. The Board of Directors would be responsible for the day-to-day running of the hospital and for key decisions;
- Preventative measures were the responsibility of the Primary Care providers, although hospital patients were advised about health matters;
- Members would be appointed for life, while governors would have a three year tenure, which would be staggered to ensure continuity. Governors could be elected for two consecutive terms, but not a third, although they could be re-appointed later;
- The government would put pressure on PCTs to ensure that the FT received payment for work carried out;

- The application for Foundation status would not include proposals to take over any Community Hospitals. These were run by the PCT and were a valuable asset;
- The Trust was drawing up a membership strategy to determine the conditions of eligibility. The recruitment of members would be actively managed;
- Monitor kept a close eye on the financial situation of FT hospitals and if the hospital was found to be failing to manage its finances, the NHS would take over the hospital;
- Although, in theory, members could form factions to lobby for policies that went against the FT principles, there were plans to avoid such situations and the Council of Governors could head off any potential problems;
- The health of the nation was always a political tool and, consequently, the NHS would be likely to undergo further changes in the future;

Money Matters: Your services, Your Council Tax, Value for Money

Presentations were given at each Forum by either:

Sonia Rees, Director of Resources, or
David Powell, Head of Financial Services

The presenters outlined the context in which Herefordshire provided services. The population was currently around 180,000. By 2011, it was expected that there would be 1.7% growth, but aging at twice the national rate and with 11.7% fewer children and 1.1% fewer working people. Population density was the third lowest in England, but with seven areas falling within the most deprived. The County provided 800 different services. Some of the major services were adult services (helping people to live at home and help with housing), community services, such as libraries, open spaces and Tourist Information Centres, Children and Young People's services provided for 101 schools and 41,700 children and young people. The cost of all these services was £200m a year, of which half was the cost of education. 22% was spent on social services, 14% on culture, environment and planning and 8% on highways and transportation. The main sources of funding were: 46% from government grants, 22% from Council Tax and 18% from business rates. Overall, funding received from government grants and the schools grant was 19% lower than the national average. Despite this, Council Tax was the 8th lowest for Band D properties out of 46 councils. In terms of value for money, the Council had achieved a 3 out of 4 inspection score, with a performance score of 3 out of 4 stars and judged to be improving adequately. There had been a number of achievements in 2005/6, including the opening of three new children's centres, the "Signposting" scheme to help 1,300 vulnerable adults, 25% of household waste recycled and an award winning transport scheme. £2.5m cash savings had been achieved and the Council was in a sound financial position. The Council was making progress on a number of service improvements this year, including arrangements for safeguarding children, a reduced number of homeless people and cleaner streets. Although the budget this year was tight, financial management was strong and efficiency targets were on track. The Government spending review would set public spending plans for the three years to 2010/11. Among the issues affecting spending would be the aging population and globalisation. National spending priorities would be education, health, security, neighbourhood policing and sport. It was expected that there would be an overall reduction in public spending and a reduced share for local government, with little or no growth in government support for Herefordshire. It was also thought that capping rules would be tighter. The corporate priorities for Herefordshire were expected to be Children and young people, schools, adult services, homelessness, regeneration activities and waste and recycling.

In response to questions, the following points were made:

- The cost of Housing Benefit and Council Tax Benefit was met by Central Government, not the Council;
- Seasonal workers did not represent a drain on public funds, and were liable for Council Tax;
- The police were required to provide interpreters for foreign workers where necessary;
- In the longer term, the funding received from Central Government could reduce;
- The underspend last year was an isolated occurrence and would be unlikely to occur next year;
- Whilst it was not always possible to meet the cost of the preferred social care for adults, the Council was committed to meeting the cost of their needs;
- Government grants did not always cover the cost of the responsibilities placed on local Councils, making it necessary to raise funds from Council Tax;
- Waste and recycling was one of the priorities for the next financial year, and 72% of homes now had recycling collections. However, it was important to balance resources and recycling was not viable in sparsely populated areas;
- Rateable values for businesses were assessed by the Valuation Office and the rate in the pound determined by the government. Although the Council received some of the rates, it had no power to levy taxes on business;
- Fees and charges collected by the Council were for such items as library services and trade waste, where the Council had discretionary powers to vary the amounts;
- Because the government was trying to make services evenly available in all areas, rural areas tended to lose out in favour of urban areas. This was an issue that needed to be taken up by MPs in rural areas;
- There was a legal responsibility to deliver care for adults needing it, and the creative use of all resources, including home care, care villages, joint working with the PCT and other care agencies, would ensure that appropriate care was available. Adult Services would bid for a share of the £1.3m contingency fund;
- The current proposals for Council Tax in 2007-8 were for a 4.7% increase. However, this was subject to a full Council decision which would be made in March 2007. The strategy was constantly updated to reflect changes;
- The Police and Fire Service would set their own increases
- Capping rules were set by the government after all local authorities had set their Council Tax. The cap was likely to be 5%;
- There was no direct financial benefit for the Council from the 5,000 – 6,000 foreign workers in the County each year. However, there was an indirect benefit to the community from such workers;
- Wales received more funding from central government, so was able to spend more on areas such as roads. Herefordshire was doing well in terms of road maintenance;
- The Council was continually reviewing its capital assets and considered all options for making assets work for the benefit of the community. Assets were currently valued at £30m. 60 – 70 smallholdings, covering some 6,000 acres of land were currently let. However, rents were low, and the amount that had to be spent on maintenance and servicing meant that very little was made from rents. The Council had to show that it was getting value for money from these publicly owned assets and, while property increased in value, rents did not. The inherited rent arrears had been cleared with no evictions. Where a tenant died or gave up a smallholding, the

asset would be sold at the best price, and no discounts would be given. It was estimated that this could release £1m a year for 10 years;

- The sum of £2m spent on equipping the Plough Lane offices was for ICT equipment, and would have had to be spent wherever the offices were located;
- The Council had security of tenure at Plough Lane until 2009;
- The Council Tax base was buoyant because of the growing number of houses. This meant that revenues from Council Tax would increase independently of increases in the rate of taxation;
- There was pressure on the Council to increase fees and charges

Hereford City, Committee Room 1, The Shire Hall, Hereford	Monday 9 October 2006
Present: Cllr D Fleet (Chairman) Cllr Mrs J French (Cabinet representative) Cllr Mrs A Toon Cllr M Wilson	Chief Inspector Sue Thomas, West Mercia Constabulary <u>For Herefordshire Council</u> David Powell, Head of Financial Services Marc Willimont, Principal Environmental Health Officer (Air & Water) Sally Cole, Committee Manager (Executive) <u>For Hereford Hospital Trust</u> Martin Woodford, Director of Finance Alan Dawson, Director of Service Delivery
Members of the public	9

Agenda:

- Community Forum/PACT meetings
- The Sewage Works (update)
- Air Quality Report
- “Your Hospital in Your Hands” – Hereford Hospital Trust Consultation
- Money Matters – Your Services, Your Council Tax, Value for Money

Community Forum/PACT meetings

See main report.

The Sewage Works (update)

The number of complaints received by Herefordshire Council had been increasing between 2003 and 2005, but had reduced in 2006. Problems were caused mainly by the high rate filter tower at the Welsh Water Sewage Works at Eign and Rotherwas. The Eign high rate towers had been rebuilt during September and October 2006, with an option to odour abate, and the Rotherwas high rate filter would be odour abated in January and February 2007. The sludge area would have its odour abatement repaired by January/February 2007. United Utilities were also responsible for some problems, but they were regulated by the Environment Agency and not by the Council. There were proposals to lobby the Environment Agency to step up regulation of the United Utilities waste treatment. The number of complaints would be kept under review during 2007. In response to questions, the following points were made:

- Whilst it was acknowledged that odours caused a major nuisance to those affected, the number of homes affected should be reducing;
- The Council would flush drains through with water during the summer if odours from drains were brought to their attention.

Air Quality

The 2001 government targets for nitrogen dioxide had been exceeded in the area from Belmont Roundabout to Widemarsh Common. The air quality at Edgar Street roundabout had been monitored on an hourly basis for a number of years. The Council was required by law to report annually to the government on air quality. 15 Action Plans were proposed to deal with Air Quality in the City and, linked with that, traffic in the city had been modelled to 2010, 2015 and 2025. The boundary of the Air Quality Management Area might have to be reviewed. Monitoring of the situation would continue for the purposes of evaluating the impact of the action plans. In response to questions, the following points were made:

- Climate change would be likely to exacerbate pollution from traffic fumes, but this would be more of an issue in Leominster than in Hereford City;
- The 15 Action Plans may not be implemented for up to five years, as it would be necessary to see whether current action was addressing the problems;
- Air quality was monitored for the impact on homes, rather than on motorists, but it was acknowledged that motorists were also affected.

“Your Hospital in Your Hands” – Hereford Hospital Trust Consultation

See main report.

Money Matters – Your Services, Your Council Tax, Value for Money

See main report.

Question and Answer session:

- Belmont roundabout was controlled by the Highways Agency, not by the Council;
- It was understood that the Highways Agency would not consider a pedestrian crossing from St Nicholas Church to St Nicholas Street in the next four to five years. It was suggested that Councillors should support an invitation to Highways Agency officials to visit the site;
- The issue of phasing traffic lights at non-rush hour times had been on the agenda at meetings between the Council and the Highways Agency;
- Commercial Waste Companies dealt with the recycling of commercial waste, but the market for recycled glass had reduced considerably;
- An appraisal of parking in the City would be carried out and, if insufficient parking spaces, the Council would look at providing more;
- Although there were a number of empty shops in the town, it was felt that the ASDA development was unlikely to affect town centre trade as it provided a particular type of shopping.

Cllr David Fleet was thanked for his work in chairing the Forums in the past.

Central Herefordshire Community Forum Wellington Community Hall	Thursday 12 October 2006
Members: Cllr B Matthews (Chair) Cllr D B Wilcox (Cabinet Member) Cllr M Wilson	Alan Dawson, Director of Service Delivery, Hereford Hospital Trust <u>For Herefordshire Council:</u> David Powell, Head of Financial Services, Kate Murray, Assistant Cultural Services Manager, Libraries & Heritage, Herefordshire Council Paul Rogers, Democratic Services Officer <u>For West Mercia Constabulary:</u> Chief Inspector Sue Thomas, Inspector Peter Gebbie PC Neil James PC Pam Epton PC Lawrence Hale Sgt Karen Parker
Members of the public:	9

Agenda:

- Community Forum/PACT meetings
- “Your Hospital in Your Hands” – Hereford Hospital Trust Consultation
- Money Matters – Your Services, Your Council Tax, Value for Money
- The Mobile Library Service

Community Forum/PACT meetings

See main report.

“Your Hospital in Your Hands” – Hereford Hospital Trust Consultation

See main report.

Money Matters – Your Services, Your Council Tax, Value for Money

See main report.

The Mobile Library Service

The Service was currently undergoing some changes. It had reached capacity on the present routes and the three vans that were in use were ten years old. The Council was buying two new vans, and was undertaking a survey of users to get their views on the service. The Service would notify users of the new routes and times. It was proposed to make the Wellington route a weekly service, increasing for one hour to four hours a month. It was noted that the Parish Council had not been approached about the proposed changes. Kate Murray would look into the proposal that the Social Club might be an appropriate stop for the Mobile Library. A member of the public noted that the efficiency and quality of the service was pleasing.

Question & Answer session

The following responses were given to questions raised:

- Tactile paving would be introduced where there were no kerbs, to enable guide dogs to identify the edge of the pavement;
- Cllr Wilcox would look into complaints that e-mails sent to the Council had received no response;
- Heads and Governors of schools wishing to have a 20mph speed limit outside their premises, should contact the School Travel Advisors to discuss this as part of a wider travel plan for the school.

Cllr Bob Matthews was thanked for his work in chairing the Forums in the past.

East Herefordshire, St Katherine's Hall, Ledbury	Monday 16 October 2006
Present: Cllr T Hunt (Chairman) Cllr P Edwards (Cabinet Member) Cllr R Stockton Cllr R Mills	<u>For Hereford Hospital Trust</u> John Campbell, Programme Director Helen Blanchard, Director of Nursing and Quality <u>For Herefordshire Council:</u> Sonia Rees, Director of Resources Hazel Lavelle, Community Forum Co-ordinator <u>For West Mercia Constabulary:</u> Inspector Peter Gebbie Four local police officers
Members of the public	9

Agenda:

- Community Forum/PACT meetings
- “Your Hospital in Your Hands” – Hereford Hospital Trust Consultation
- Money Matters – Your Services, Your Council Tax, Value for Money

Community Forum/PACT meetings

See main report.

“Your Hospital in Your Hands” – Hereford Hospital Trust Consultation

See main report.

Money Matters – Your Services, Your Council Tax, Value for Money

See main report.

Question and Answer session

- HALO was a separate Trust providing leisure services and was among the best in England. HALO received about £1m a year from the Council;
- The cost of democratic services reduced when the Unitary Authority was set up;
- HALC had made proposals to promote the democratic process in Parish Councils, in view of the fact that one of the six criteria for PCs was contested elections. The Unitary Authority ensured that Parish elections took place on the same day as Council elections to save costs.

North Herefordshire, Green Lane Methodist Church, Leominster	Thursday 19 October 2006
Present: Cllr J Stone (Chairman) Cllr R Stockton (Cabinet Member) Cllr Mrs J French Cllr Brig P Jones CBE Cllr J Hope Cllr JP Thomas Cllr J Goodwin	<u>For Hereford Hospital Trust</u> Peter Harper, Medical Director <u>For Herefordshire Council:</u> Sonia Rees, Director of Resources Hazel Lavelle, Community Forum Co-ordinator <u>For West Mercia Constabulary:</u> Chief Inspector Sue Thomas Five local police officers
Members of the public	11

Agenda:

- Community Forum/PACT meetings
- “Your Hospital in Your Hands” – Hereford Hospital Trust Consultation
- Money Matters – Your Services, Your Council Tax, Value for Money

Community Forum/PACT meetings

See main report.

“Your Hospital in Your Hands” – Hereford Hospital Trust Consultation

See main report.

Money Matters – Your Services, Your Council Tax, Value for Money

See main report.

Question and Answer session

- There were difficulties associated with placing a bollard in the pedestrian refuge near Rainbow Street because it could restrict access for emergency vehicles;
- It was noted that there was a light out at the pelican crossing near Bridge Court;
- Gulley clearing should occur annually and Members would take up complaints about uncleared gulleys;
- Complaints about fly-tipping and dumping of furniture would be taken up by Members.

Ross-on-Wye, John Kyrle High School, Ross-on-Wye	Tuesday 24 October 2006
Present: Cllr Mrs A Gray (Chairman) Cllr D Rule (Cabinet Member) Cllr H Bramer Cllr Mrs J Davis Cllr J Jarvis Cllr G Lucas Cllr S Thomas	<u>For Hereford Hospital Trust</u> Martin Woodford, Director of Finance Peter Goring, Trust Secretary <u>For Herefordshire Council:</u> Sonia Rees, Director of Resources Marc Willimont, Principal Environmental Health Officer (Air & Water) Hazel Lavelle, Community Forum Co-ordinator <u>For West Mercia Constabulary:</u> Chief Inspector Sue Thomas Two local police officers
Members of the public	9

Agenda:

- Community Forum/PACT meetings
- Air Quality Report
- “Your Hospital in Your Hands” – Hereford Hospital Trust Consultation
- Money Matters – Your Services, Your Council Tax, Value for Money

Community Forum/PACT meetings

See main report.

Air Quality Report

There were government targets for environmental health and air quality, and sampling had been taking place for the last eight years in Herefordshire. High pollution levels had been found around the A40/M50, where there were at least three monitoring sites. The measure of ug/m³ was used to determine pollution levels and the mean measurement was 40. However, this level was unacceptable near residential buildings. The increase in traffic was a factor in the increasing levels of pollution, although speed limits had been shown to reduce levels. There would be a public consultation on the boundary for measuring pollution and the area could be declared an Air Quality Management Area. The Environmental Health department would scope an Air Quality Action Plan with the Highways Agency and monitoring would continue in order to benchmark levels and evaluate the impact of any actions. In response to questions, the following points were made:

- The cottages at Wilton Roundabout were very close to the road, but there were measures that could be taken that might help their situation, such as changing the traffic light sequence, imposing speed limits and erecting noise barriers, which could also help reduce pollution;
- Pollution levels were high at a distance of two metres from the road, but dropped very quickly the further away the building was. At three – four metres, the levels were well below the mean measurement of 40;
- People selling their houses were not required to notify potential buyers that properties were in an Air Quality Management Area;
- Ross-on-Wye town centre had been monitored for the last few years and levels were below 40, although the trend was for pollution to increase;

- Most towns did not have Air Quality Management Areas, the exception being Leominster in this county;
- In Whitchurch, houses were further away from the road than some other areas. The area was monitored at two sites and the only place to fail the target was a service road, where there were no houses. Although the houses near Kirby's factory were under the 40 level, it was undesirable to have new houses any closer to the factory.

“Your Hospital in Your Hands” – Hereford Hospital Trust Consultation

See main report.

Money Matters – Your Services, Your Council Tax, Value for Money

See main report.

Question and Answer session

Golden Valley, Madley Village Hall	Thursday 26 October 2006
Present: Cllr D Taylor (Chairman) Cllr C Mayson (Cabinet Member) Cllr S Thomas	<u>For Hereford Hospital Trust</u> Peter Harper, Medical Director Alison Budd, Director, Inpatient Care Group <u>For Herefordshire Council:</u> Sonia Rees, Director of Resources Hazel Lavelle, Community Forum Co-ordinator <u>For West Mercia Constabulary:</u> Chief Inspector Sue Thomas Sgt Robin Davis PC Christine Griffiths PC Andrew Bundy
Members of the public	16

Agenda:

- Community Forum/PACT meetings
- “Your Hospital in Your Hands” – Hereford Hospital Trust Consultation
- Money Matters – Your Services, Your Council Tax, Value for Money

Community Forum/PACT meetings

See main report.

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See main report.

Money Matters – Your Services, Your Council Tax, Value for Money

See main report.

Question and Answer session

- Although a second river crossing was desirable, it would not be possible at this stage. However, the Rotherwas Relief Road project could be seen as a first step towards improving the traffic situation;
- The Highways department would be asked to look into the issue of signage for the Roman Road. At present, the road was not signed as the route to Worcester;
- The Public Rights of Way Manager would be asked to investigate a request for a Public Right of Way at Madley Airfield.