

Meeting Somer Valley Forum

Date Thursday, 19th February, 2015

Time 6.00 - 9.00 pm

Venue Midsomer Norton Town Hall - The Island, Midsomer Norton BA3 3HQ

INFORMAL SESSION (6PM)

Open public session with representatives of Public Services. (Members of the Forum may attend this if they wish).

TEA BREAK

	Subject	
1.	Welcome and Safety Announcement Chairman of Forum, Terry Taylor	7pm
2.	Introductions and Apologies Chairman of Forum, Terry Taylor	
3.	Minutes of the Last Meeting - November 2014 (Pages 3 - 12) Chairman of Forum, Terry Taylor	
4.	Matters Arising (Pages 13 - 42) Chairman of Forum, Terry Taylor	
5.	Brief Update from Public Services Dave Dixon	
6.	'Your Care, Your Way': Let's Plan Community Services Together NHS BaNES Clinical Commissioning Group and the Council are working together to review community health and social care services and identify what's needed in the future. Presentation, Q&A session and round table discussions	7.30pm
7.	Somer Valley Presentation 25th November 2014	

8.	Action Planning (Pages 47 - 48) Chair of the Forum, Terry Taylor	8.30pm
9.	Future Agenda Items (Pages 49 - 50) Chair of the Forum, Terry Taylor	
10.	Dates of Future Meetings	



Minutes SOMER VALLEY FORUM

Tuesday 25th November 2014, 7.00pm Beacon Hall, Peasedown St John

Present:

Name	Organisation Represented	Status
Terry Taylor (TT)	Norton Radstock Regeneration (Chair)	Voting Member
Cllr Rob Appleyard (RA)	Bath and North East Somerset Council	Voting Member
Ed Bramall (EB)	Regional Manager, Neighbourhood	Public Services
	Services, Curo	
Cllr Sheila Clarke (SC)	Timsbury Parish Council	Voting Member
Tracey Cox (TC)	Clinical Commissioning Group	Public Services
Dawn Clarke (DC)	Clinical Commissioning Group	Public Services
Cllr Paul Crossley (PC)	Bath and North East Somerset Council	Observer
Cllr Doug Deacon (DD)	Bath and North East Somerset Council	Voting Member
Cllr Marilyn Deacon (MD)	Timsbury Parish Council	Observer
Simon de Beer (SdeB)	Group Manager, Planning Policy, B&NES (part)	Presenting
Dave Dixon (DD)	Stronger Communities Manager, B&NES	Support
Peter Duppa-Miller (PDM)	Avon Local Councils Association	Observer
Cllr Brian Edwards (BW)	Camerton Parish Council	Corresponding
		Member
Cllr Michael Evans (ME)	Bath and North East Somerset Council	Voting Member
Alex Francis (AF)	Healthwatch	Observer
Cons. Mark Graham (MG)	Avon and Somerset Police (part)	Public Services
Cllr Nathan Hartley (NH)	Bath and North East Somerset Council	Voting Member
Cllr Liz Hardman (LH)	Bath and North East Somerset Council	Voting Member
Wera Hobhouse (WH)	Prospective Parliamentary Candidate for North East Somerset (part – 7.15pm)	Observer
Cllr Eleanor Jackson (EJ)	Bath and North East Somerset Council	Voting Member
Louise Jones (LJ)	Avon and Somerset Police	Public Services
Cate Le Grice-Mack (CLGM)	Radstock Regeneration (part – 7.15pm)	Voting Member
Cllr Les Kew (LK)	Bath and North East Somerset Council	Voting Member
Cllr Sue Langdon (SL)	Timsbury Parish Council	Observer
Cllr Barry Macrae (BMc)	B&NES	Voting Member
Cllr Lesley Mansell (LM)	Radstock Town Council (Vice Chair)	Voting Member
Cllr Paul Myers (PM)	B&NES	Voting Member

Suzanne Norbury (SN)	Somerset Guardian	Observer
Cllr Veronica Packham	Timsbury Parish Council	Voting Member
(VP)		
Andrew Pate (AP)	Strategic Director of Resources, B&NES	Presenting
Penny Routledge (PR)	Norton Radstock College	Voting Member
Cllr Bryan Wallbridge	Westfield Parish Council	Voting Member
(BW)		
Alison Wells (AW)	Community Projects Officer, B&NES	Support
Rob Wicke (RWi)	ReGenerate	Observer
Cllr Les Wild (LW)	Paulton Parish Council	Voting Member
Robert Williams (RW)	Prattens Westfield Amateur Sports Club	Voting Member
Pauline Young (PY)	Clerk – High Littleton Parish Council	Voting Member

Apologies:

Richard Baldwin	Divisional Director, B&NES	Support
Lynda Robertson	Midsomer Norton Society (Vice-Chair)	Voting Member
Tina Veater	Midsomer Norton and District Chamber of	Voting Member
	Commerce	
Royston Knight	Radstock Action Group	Voting Member

		ACTION
1.	Welcome	
1.1	The Chair welcomed those present and gave a safety briefing	
2.	Introductions and Apologies	
2.1	All introduced themselves. Apologies as above.	
3.	Declarations of Interest	
3.1	There was none.	
4.	Minutes of the Last Meeting	
4.1	These were proposed by PDM; seconded by ME and agreed as a true record by majority. ME asked whether the Somerset and Dorset Railway Heritage Trust now have a vote. AW confirmed that they do.	
5.	Matters Arising	
5.1	EJ said that the Radstock and Westfield Economic Forum is now established, although it had taken some time. DD said due to the cyclical nature of the Town and Parish Council meetings, it had taken some time for their representatives to be formally identified. The next meeting would take place on 1/12/14.	

6.	Consultation Items	
	Placemaking Presentation	
6.1	TT welcomed Simon de Beer to present on Placemaking. AW to circulate the presentation with the minutes.	AW
6.2	SdeB said the Placemaking Plan Options Document is now on the Council's website. Parish and Town Councils will receive a hard copy of the document but it is also available on-line http://www.bathnes.gov.uk/services/planning-and-building-control/planning-policy/placemaking-plan .	
6.3	When the Placemaking Plan is adopted, it will complement the Core Strategy, which is a broad requirement – Placemaking provides more detail and gives clarity on applications. It has been broken down into four areas: Bath; Keynsham; Somer Valley and Rural. Planning Policy is consulting on the document until 30 th January 2015. They will then work collaboratively with Town and Parish Councils and local communities to draft the document. This will be examined externally in a process similar to the adopted Core Strategy. In terms of the Somer Valley, the sites should be familiar but are they right? Are any missing? Are they deliverable? What will the impact be in terms of access, highways, landscaping etc?	
6.4	Over the next six months, there will be a Housing Development Boundary Review and B&NES will work with Town and Parish Councils on this. As part of the consultation process, B&NES will be holding exhibitions, undertaking publicity and holding drop in events. If any villages would like to host an event, or combine this with another, contact Planning Policy. Support with publicity would also appreciated.	ALL
6.5	SdeB said the Council appreciates the work put in by Parishes to date – it is important to get policies right as they will be used by Planning Committees when considering applications. TT thanked SdeB for his presentation and asked if there were any questions.	
6.6	BMc asked SdeB to confirm that the consultation and contributions will not overturn or supersede the Core Strategy. He said that housing is a key issue and wondered whether Town or Parish Councils could overturn the recommendations in the Core Strategy by identifying other sites – which document has priority? SdeB said the Core Strategy is strategic and should not be contradicted by Neighbourhood Planning.	
6.7	NH said that Peasedown should not have more housing allocated to it — the village's amenities and services still need to catch up. Also, Paulton and Peasedown seem to be paired in documents but should be seen separately. The Somer Valley Forum can work together but also needs to recognise communities' differences. Peasedown Parish Council has voted not to change allocations as part of the Housing Development Review — will they be listened to? SdeB said no new sites have been identified in Peasedown. He appreciated the feedback re separating Peasedown and Paulton and this can be done going forward. The	

	Housing Development Review is there to correct any anomalies.	SdeB
	Housing Development Neview is there to correct any anomalies.	Sueb
6.8	WH asked how the Council aims to engage the public in the process? SdeB said this is not always easy and they usually become more involved when development is planned. However, undertaking local events should help, as should the support of the Somer Valley Forum in raising the consultation profile locally.	
6.9	LH said Paulton is closer to the Cam Valley than the Somer Valley. She asked whether the development highlighted here is industrial or housing? SdeB said it is the Old Mills employment site. The Council supports this designation but the Government requires a view, so a decision needs to be made on whether this use is appropriate.	
6.10	BE said some communities do not have the infrastructure in place to support additional development. This includes the impact on the road networks of neighbouring communities, such as Camerton, which has seen increasing volumes and speed of traffic as a result of nearby development. There were S106 agreements in place regarding the recent housing development in Paulton but nothing seems to have happened. SdeB said there are no sites in Camerton coming forward and 50 dwellings allocated to larger villages. It will be important to speak with Transport and Highways about these issues.	
6.11	EJ said local employment, with jobs at a reasonable distance is the answer. The area seems to be losing employment space to housing. SdeB said the Council will work with Town and Parish Councils on local communities' wishes. However, it is not possible to hold on to undeliverable employment sites as developers may win on appeal.	
6.12	BMc said we've got a Core Strategy with which we are broadly happy and there is a growing number of employers at Old Mills – a minority wish to see it developed as accommodation. SdeB said there is Greenfield allocation to the west of the existing employment building which has not come forward in ten years.	
6.13	ME asked for clarification of 'SUDS'. SdeB said it is a sustainable open drainage system which allows water to be absorbed into the ground first.	
6.14	RW said developers will do what they want, even if 90% of people object. SdeB said the Council was vulnerable when there was no Local Plan in place and some sites were lost. However, it is now able to resist and refuse applications.	
6.15	EJ said she is worried about Greenfield developments in Paulton as it may merge with Midsomer Norton – there does not seem to be enough protection. SdeB said Greenfield sites are not being looked at in this area – Old Mills exists from the 2007 Local Plan. Housing boundaries should protect merging of communities. Developers will try and there are a couple of appeals taking place but the Council is working to resist these.	
6.16	CLGM said statistics show the changing pattern of employment to an increase in home-working. SdeB said the latest Census data relating to	

	commuting should be available before the end of the year.	
6.17	SC said that, in Timsbury, there is an industrial owner that wants housing. SdeB said that rather than engage in detailed disussion about individual communities, he will speak directly with the Parish Council on this.	SdeB
6.18	BW asked what would be done to encourage appropriate infrastructure to support development. There are employment sites that no-one wants because of the road network. SdeB said employment sites are situated in or near town centres. There is also an infrastructure delivery plan relating to the Core Strategy, which includes education as well as roads. It is difficult as the development proposed is low level and the related CIL money will not be enough to fund major road building. Most new growth has been allocated to Bath and Keynsham to avoid transportation issues.	
6.19	RA asked whether 9 weeks, over Christmas, is enough to allow the community and Town/Parish Councils to respond. SdeB said this is the start of a process and the Council will be working with Town and Parish Councils over the next 6 – 9 months.	
6.20	TT thanked everyone and introduced Dawn Clarke and Tracy Cox of the B&NES Clinical Commissioning Group.	
	CCG Presentation	
6.21	TC said the CCG is pleased to have been invited and would like to attend Forum meetings more regularly in future. As an introduction, they will present this evening on their 5 Year Strategy and Primary Care in the Somer Valley.	
6.22	Clinical Commissioning Groups replaced Primary Care Trusts (PCTs) in 2013 as part of a re-organisation of the National Health Service. More clinicians are now involved in commissioning front-line services. The CCG is made up of 27 GP practices in B&NES. There is a Governing Body which is accountable to them. The Somer Valley is represented on this by a GP from St Chad's surgery.	
6.23	The CCG are not responsible for GPs, opticians, dentistry and some specialised treatments. They have a £213m budget and work closely with B&NES to join pathways of care. There are some areas where they jointly commission, such as mental health. They also commission some services from The Circle Hospital and BMI Bath Clinic as well as the RUH.	
6.24	While the CCG is performing well, it will face challenges going forward related to reductions in public sector funding. It is important to understand local communities when planning current and future services, which is done through the Joint Strategic Needs Assessment (JSNA).	
6.25	GP practices are grouped into 5 clusters and regular meetings are held between them. For the 5 year strategy, they have been asked to set out a plan in relation to the national financial picture. There is currently a £20m funding gap, so some services will need to be delivered differently.	

- 6.26 Future challenges in B&NES are similar to the national picture people are living longer so we need to be ready to deal with an increasingly elderly population. If services continue to be delivered as now, there will be a £60m shortfall.
- The strategy looks at a shift to where care is provided. Hospital care is expensive, so there is emphasis on preventative care. The new model also looks at provision in local communities. There is focus on self-management and care as well as support from third sector providers. The strategy is on the CCG website http://www.bathandnortheastsomersetccg.nhs.uk/publications.

6.27 There are six priorities:-

- There is a 7% increase in diabetes, so emphasis on preventative and self-care in relation to this.
- MSK is musculo-skeletel services pain and orthopaedics spending more on that than expected at present. Solution may be to increase physiotherapy services.
- Urgent A&E
- Other priorities relate to community services, mental health etc.
 Working with B&NES on how community services might be delivered.
- The CCG want to engage with local communities on their views between January and April 2015. There will be a series of events and they will be seeking the Somer Valley Forum's input.

Quality - Dawn Clarke

- DC said the CCG is also concerned with ensuring the care received is safe and of a high quality, delivered by caring staff. They work closely with providers to ensure this, utilising:-
 - Quality schedules: safe-guarding/complaints
 - CQUIN: incentivising providers to improve the patient experience
 - Cost improvements across services: quality impact of care
 - Site visits: GP clinical leads, nurses, lay members, wards and departments talk with people about first hand experiences of both staff and providers.
- 6.30 The CCG doesn't commission primary care this is done by NHS England. GP practices now publish details on their websites of how they are performing. Grades are 1 to 6, with 6 being the highest. All those in the Somer Valley are graded 5 or 6. There is also a GP survey, with the latest published in July. Practices in B&NES are above the national average.
- 6.31 TT thanked TC and DC for their presentation and asked if there are any questions.

		T
6.32	BMc said it was a very helpful overview. He asked why the local cluster had been named Norton-Radstock – it should be Somer Valley now, with all public services 'singing from the same hymn sheet'. TC will take this back to the CCG.	тс
6.33	LH said she had been informed that services formerly provided by children's centres will be picked up by health visitors. TC said there has been an increase in the number of health visitors but the CCG do not commission this – it is the responsibility of the Council. It is an important role in terms of prevention and early intervention. A new role will also be created around health visitors for the elderly. There are only three of these at present but the service will expand. LH asked who funds the health visitors. TC said NHS England – the CCG is accountable to them. The Council will pay when services transfer.	
6.34	RW asked whether patients can still choose where they receive treatment. TC said in some cases private treatment can be commissioned and paid for by the CCG but some specialist care comes from NHS England.	
6.35	PDM asked about Out of Hours Primary Care – will patients see the same or different doctors? TC said GP's services are generally 8.30am – 6.30pm. In 2006, GPs could opt out of providing out of hours care. The CCG do commission this and re-tendered it this year. It was awarded to Bath Doctors' Out of Hours Care. Patients can ring 111 for access. PDM said, so it could be the same GP but funded from a different source. TC said yes.	
6.36	EJ said she sits on the Scrutiny Panel for Wellbeing and is aware of deficiencies in commissioned services. The 111 service is not functioning well and asked how they can be held to account? TC said it depends on the contract but sometimes penalties/warnings are possible. They can also terminate contracts and go elsewhere.	
6.37	LM said there is a rising number of people with dementia and asked what provision there is for care. TC said work is taking place to identify patients with dementia in the local area. The CCG has commissioned dementia support workers who will connect individuals and their families to relevant services. There is also a RICE memory clinic undertaking research in Bath. The RUH is a dementia pathway. Sirona provides aids and adaptations and the need to further invest in this is being evaluated.	
6.38	WH asked who set the priorities and how flexible the plan is. Mental Health is not one of the 6 priorities, despite a drive to change this and put it on a par with physical health. TC said there is a need to provide further beds at Hillview and they are working with the Avon and Wiltshire Mental Health Trust on this. Priorities were set in relation to areas requiring most transformation. Stakeholder feedback is important and the setting up a Wellbeing College is planned.	
6.39	NH said the challenge for the CCG is being accountable and accessible. They have a lot of public funding and people need to feel their views matter. Consultation should not be tokenistic. Parish Councillors and	

	Officers know what people think and it is important to engage with them. TC said the CCG has just written an engagement strategy. There is reference to the Somer Valley Forum and local Town and Parish Councils in it. NH said it is not possible to vote out CCG reps in the same way as Councillors.	
6.40	Alex Francis of Healthwatch B&NES introduced herself and said this was set up in April 2013 to act as an independent consumer champion for health and social care services, such as GP surgeries, hospitals, dentists, pharmacies, care homes and social services. They speak to members of the public to find out whether the services they have received are good, bad, or could do with some improvements. They then share this information with service providers and commissioners, including the NHS, hospital trusts, local authorities and the Care Quality Commission, and work with them to shape services based on the needs of the people that use them.	
6.41	Healthwatch B&NES is run by The Care Forum, a charity based in Bristol. The Care Forum also runs Healthwatch schemes in Bristol, South Gloucestershire and Somerset, enabling them to have an overview of a wide geographical area and the provision of health and social care services across it. Each Healthwatch scheme has its own priorities that are unique to the district and communities within it.	
6.42	The priorities for B&NES include: public/patient transport, long-term conditions, older people and dementia, children with physical impairments and the transition from children's to adult services. These are specific communities or services that they are particularly interested to hear about, however they are keen to encourage people to get in touch with them about any aspect of health or social care within B&NES.	
6.43	AF said her role as Healthwatch Development Officer is to speak to members of the public and gather as much feedback as possible about their experiences. She does this through visiting groups and attending events, or alternatively people can get in touch directly through the contact details listed below. Healthwatch B&NES also has a range of volunteer roles available, giving people the opportunity to help shape and improve local health and social care services – for further info visit www.healthwatchbathnes.co.uk .	
	T: 01225 232401 E: info@healthwatchbathnes.co.uk	
	TT thanked everyone for their contributions.	
7.	Standing Items	
7.1	DD introduced Mark Graham and Louise Jones from Avon and Somerset Police.	
7.2	MG said that since the last Forum meeting, the Carnival had taken place in Midsomer Norton, Radstock and Westfield. Overall it was well received by the public but there were a few teething problems to address for the	

	attend such a meeting to get their input.	
10.	Any Other Business	
10.1	There was none.	
11.	Date of Future Meetings	
11.1	DD asked whether any Parishes interested in hosting the next meeting could get in touch with him or AW.	ALL

SOMER VALLEY FORUM Workshop Feedback 31st July 2014

Group 1 Discussion

- Who is missing from the Forum? (eg people/agencies)
- What sub-groups might we need to take forward the agreed priorities
- What are the key/emerging themes (which might determine the focus of sub-groups)
- How might we reach consensus about a new Action Plan?

Group 2 Discussion

- How to accommodate items such as Community Safety and Highways whilst also remaining focussed on the 'big picture'.
- Place-making
- Council budget setting
- Developing work with the Clinical Commissioning Group

Feedback 1 (Looking at Group Discussion 1)

Who is missing from the Forum?

- Education/schools
- Health professional/doctors
- Pensioner groups
- Unemployed
- Youth representation

Summary – possible mismatch between what's important and who is present

What sub-groups might we need to take forward the agreed priorities?

Sub-groups should:-

- be free to debate without being constrained
- should be tasked by the Forum agreeing issues.
- possibly develop broad plans/proposals before engaging with B&NES

What are the key/emerging themes (which might determine the focus of sub-groups)?

- Transport
- Economy
- Youth
- Health & Wellbeing
- Double Taxation

How might we reach consensus about a new Action Plan?

- It will be difficult to do
- Via voting but don't allow a veto or seeking unanimity to water down action plans
- Reward those prepared to work on sub-groups?

Feedback 2 (Looking at Group Discussion 1)

Who is missing from the Forum?

- Industry
- Transport
- Health & Special Needs
- Education
- Arts and Culture
- Sport & Leisure
- Tourism (promoting ourselves)
- Environmental

What sub-groups might we need to take forward the agreed priorities?

- Formed out of priority (or crisis)
- Evolve groups as and when ideas come forward

What are the key/emerging themes (which might determine the focus of sub-groups?

- Jobs in the area to prevent out-commuting
- Community Services (eg doctors etc)
- Quality retirement accommodation
- Transport infrastructure
- Preservation of Town and Village centres
- Social isolation especially in villages

How might we reach consensus about a new Action Plan?

- Select our priorities maybe half a dozen. Work though these and add as we go
- Help each other it is important to work together and think of your neighbours.

Overall: We want the ideas to come from the community

Feedback 3 (Looking at Group Discussion 1)

Who is missing from the Forum?

- Health (CCG) and want as presentation
- Churches Together
- Young People
- Children's Services
- Business Community

What sub-groups might we need to take forward the agreed priorities?

- Need clarity/remit
- Health

What are the key/emerging themes (which might determine the focus of sub-groups?

- Health: childhood obesity, cancers, diabetes, poor child dental health, mental health
- Poverty: deprivation
- Jobs & Employability: job availability
- Transport: rural isolation
- Early Years Learning: vandalism, entertainment opportunities (young people)

How might we reach consensus about a new Action Plan?

- Clear about powers to get things done
- Clarity about point of contact with B&NES
- Compact

Feedback 4 (Looking at Group 2 Discussion)

How to accommodate items such as Community Safety and Highways whilst also remaining focussed on the 'big picture'

- Do not want regular attendance from highways/police as and when
- Quarterly (informative) report through steering group
- Specific problems how will these be addressed Forum approach with a consensus or knowledge of each parish
- Non-political. Use sub-groups (Chairs report to Forum).

Place-making

- Parish/Town Councils continue process but liaise not-fragmented voices
- Ensure resource comes out from B&NES authority and 'Bath' decisions do not conflict

Council budget setting

- How might link not working via B&NES Councillors political remit on priorities
- Somer Valley needs (eg young people's services)
- Forum sub-group authority who has to listen

Developing work with the Clinical Commissioning Group

How to influence discussion and ensure and allocation of resources to meet needs

How will Forum work to respond to our objectives. Possible structure:-

- 2 Forum meetings per year interim budget setting, placemakng, sub-group conclusions, actions, achievements.
- Forum Assembly reports and sub-groups
- Sub-groups 2 monthly meetings (non-voting)
- Co-ordination key
- B&NES meeting/activities/consultations

Keep it non-political – don't want party politics

Need to be positive – can't become B&NES bashing – they won't listen

Placemaking - Neighbourhood Plans is where CIL is

Can't be fragmented – Bath has a big voice

Parishes need to work together in Somer Valley and liaise with Keynsham and Chew Valley – larger voice

Get funding out of Bath to local services

Place-making plans need to complement each other locally

Sub-groups – all of us meeting twice a year but sub-groups meet regularly and report back

Feedback 5 (Looking at Group 2 Discussion)

- Full and frank discussion
- Less densely populated concern that Forum should be larger
- Mendip Links/K&CV important
- Also Mendip District Council esp CIL and S106
- Decisions made effect MSN, Westfield etc
- Budget limited effect. Statutory Services get bulk
- Budget decided in Feb but parishes already decided precepts by then
- CCG positive to develop
- Sub-groups theme based not geographic
- Task and finish with timetable
- Employment local rather than ou-commuting
- Good attendance tonight see what it's like in 12 months.

Somerset Council

Bath and North East Somerset Placemaking Options Document **Bath & North East**

To cover:

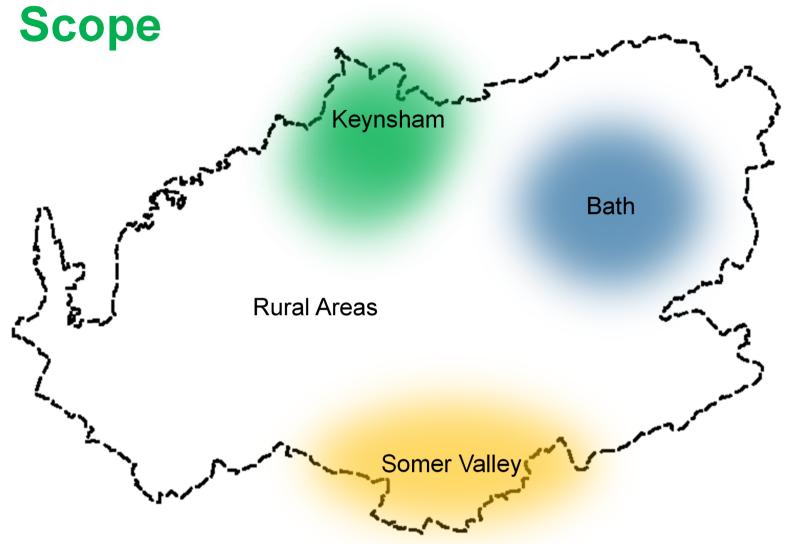


- » Overview of scope
- » programme
- » Options document content
- » Public consultation
- » Next steps working towards Draft Plan



Placemaking Plan Scope & Purpose

- » Complement Core Strategy Local Plan Part 2
- » Allocate sites for development alternatives, land use mix, design principles
- » Designate Local Green Spaces
- » Update infrastructure requirements align provision
- » District-wide policies



NB SV Forum covers Farrington Gurney; High Littleton; Midsomer Norton; Paulton; Peasedown St John; Radstock; Timsbury and Westfield



Programme

Options Consultation - Nov 2014

Draft Plan – September 2015

Submitfor Exam – Jan 2016

Examination – March 2016

Inspector's Report – July 2016

Adopted – September 2016

Bath and North East Somerset – The place to live, work and visit



Somer Valley



Generic Policies

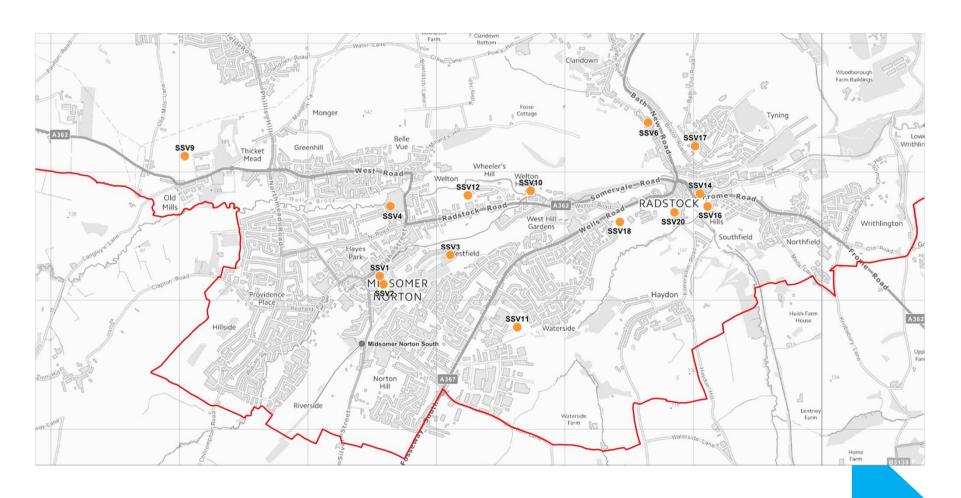
- **Sites**
- Overview
- Midsomer Norton sites & Town Centre
- Radstock sites & Town Centre
- Westfield & Sites
- Paulton and Peasedown St John
- Local Green Space in the Somer Valley

- Housing
- Retail
- Employment
- Transport
- Green Infrastructure
- Lighting
- Energy Minerals
- SUDS
- Local Food
- Renewable Energy

Bath and North East Somerset – *The* place to live, work and visit



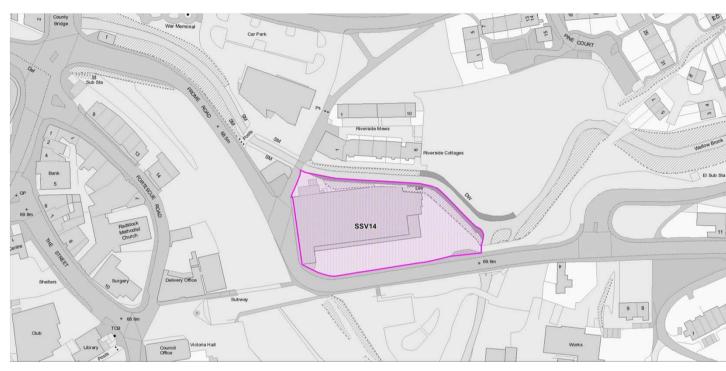
Somer Valley Sites



Bath and North East Somerset - The place to live, work and visit

Site Options, eg

Charlton
Timber
Yard,
Radstock
(SSV14)



- EMERGING DEVELOPMENT & DESIGN PRINCIPLES
- ALTERNATIVE OPTIONS



Rural Areas

This section of the Document includes the SVF villages of:

- » Farrington Gurney (no options)
- » High Littleton (options at Hallatrow only);
- » Timsbury (3 options)

Site options in villages

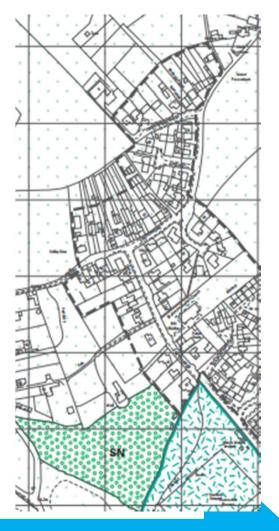
eg Timsbury



Bath and North East Somerset – *The* place to live, work and visit

Housing Development Boundary Review

- » Town & Parish Councils have opportunity to be involved in reviewing HDBs
- » Twofold Update & review against principles
- » Options document outlines principles
- » Reviewed HDBs to be set out in Draft Plan



Consultation

- » 9 week Consultation (27.11.14 –30.01.15
- » Mail outs/publicity
- » Exhibitions/drop-in events
- » On-line consultation system
- » Comments submit by 30.01.15
- » Longer period of collaboration on Draft Plan

Placemaking Plan options consultation

What type of development? Ensuring excellence in new development proposals?

Safeguarding our natural and historic assets?

An opportunity to influence the emerging vision and design principles for development sites in Bath, Keynsham, the Somer Valley and the Rural Areas and to help shape new planning policies.

Consultation ends on 30th January 2015

Find out more about the consultation and to respond online at www.bathnes.gov.uk/placemakingplan

Bath & North East Somerset Council



Options Consultation

Town & Parish Council role:

- » Helping to publicise consultation & events
- » Opportunity to hold own events (B&NES support available)
- » Commenting directly on the document
- » Continue collaborative working



Next Steps

- » Continue collaborative working in preparing Draft Plan
- » 4 main areas of work:
 - » Progressing site allocations
 - » Local Green Space designation
 - » HDB review
 - » Relevant district—wide policies



Next Steps

- » Council will be in touch later this year to:
 - » Outline opportunities to continue to be involved
 - » Circulate guidance/resources to support work
 - » Set out programme of work

This page is intentionally left blank

Community profiles - Context

The 'Connecting Communities' programme is an initiative designed to help public service providers listen to, and meet the needs of, the diverse people and communities who live in the area. The approach has been built around five key principles: 'listen, prioritise, join-up, work with you and share ideas'.

This initiative has come at the right time. Getting the input of local people in order to design the right services is seen as increasingly important. And as there is now much less public funding available, local people and neighbourhoods are



being asked to help run services too. Each area will be supported by a local 'Forum' that will work together to improve local engagement between the public services and the local communities and encouraging local people to talk to each other, share their skills and ideas.

The Forums currently cover the parished areas of North East Somerset, bringing together neighbourhoods, villages and towns to reflect local issues and develop a more joined-up approach to addressing these concerns.

Three Forums have been established so far. These are:-

Chew Valley Area Forum, covers the parishes of, Cameley, Chew Magna, Chew Stoke, Clutton, Compton Martin, East Harptree, Hinton Blewett, Nempnett Thrubwell, Norton Malreward, Publow with Pensford, Stanton Drew, Stowey Sutton, Ubley, West Harptree.

Keynsham Area Forum covers the parishes of Chelwood, Compton Dando, Corston, Farmborough, Marksbury, Keynsham, Saltford and Whitchurch.

Somer Valley Area Forum, covers the parishes of Farrington Gurney, High Littleton, Midsomer Norton, Paulton, Peasedown St John, Radstock, Timsbury and Westfield.

These profiles have been designed to gain a better understanding of the issues and opportunities affecting the local community and set out the shared priorities agreed by partners across the area.

The Chew Valley - At a glance

The Chew Valley lies to the west of Bath and North East Somerset, and has strong links to Bristol. It is a large rural area and identified as an Area of Outstanding Natural Beauty. One of its key features is the Chew Valley Lake, an important site for wildlife which has been dedicated as a Site of Special Scientific Interest and a Special Protection Area.

The Chew Valley Area is covered by 5 electoral wards and 14 parishes. Its population is 9,974. Key villages include Chew Magna, Chew Stoke and Pensford, these are "washed over" by the Green Belt and are junctions to several main transport routes providing access to Bristol in particular.

Poor public transport provision means that the population is very reliant on private transport. The need for community transport has continued to increase particularly for health related appointments and social activities.

Unemployment in the area is lower than the national average. The Chew Valley has a higher percentage of self-employed people, along with a high proportion of people in senior managerial or professional roles. 19% of the workforce either work mainly from home or at home, and for those people that travel to work, the majority travel distances of between 10km and 20km.

There is one secondary school, Chew Valley, which has 1200 pupils including 200 in the Sixth Form. Many of the students travel from bordering areas such as Bristol. The school site also accommodates the leisure centre and a children's centre. There are eight primary schools in the area: seven are run by the local authority and one, Chew Stoke, is an Academy.

Chew Valley is particularly prone to flooding and 48 properties across Chew Magna and Chew Stoke flooded in September and November 2012 – leading to one fatality.

Housing growth in the Chew Valley over the next 20 years will be limited and any new development will be focused on villages outside the Green Belt that have a wide range of local facilities and public transport. The Core Strategy allows provision for the larger villages outside the Green Belt to identify development sites to accommodate around 50 dwellings, with small villages outside the Green Belt with a more limited range of services/facilities identifying sites to accommodate around 10 to 15 dwellings within the plan period. For those villages within and "washed over" by the Green Belt, new housing provision is limited to small-scale infill development or limited affordable housing to meet local community needs.

Key Facts

- There are 9,974 residents, 22% are under 18, 2% full time students, 22% over 65 and 9% are over 75. 2.1% increase in population since 2001.
- Chew Valley South Ward falls within the least deprived 10% nationally.
- 29% economically inactive, of which 18% are retired, higher than the national average.
- 38% of people have a degree or above – higher than national average (27%).
- 18% of people have no qualifications – lower than national average (23%).
- 1 in 4 children are aged between 5 and 6 years.
- 3 in 10 children aged 10 and 11 are overweight or obese.
- 5.8% of lives "limited a lot" by a disability.
- 120 employment & support allowance claimants.
- Child poverty (5%) is low compared to the UK (27%).
- Chew Valley South Ward has one of the highest rate of under 18 emergency admissions for injuries.
- The Chew Valley car scheme is run by 47 volunteers for medical appointments only. In the last year 170 passenger journeys were made averaging between 2 miles to longer distances eg RUH in Bath.
- There have been approximately 8 floods in the area since 1960. In July 1968, double the normal rainfall fell in just 18 hours, flooding 88 properties in Chew Magna some up to 2m deep.

The Village Agents scheme provides support for local residents to help and support mainly older people and their families throughout a significant life change. This is often triggered by a change in circumstance such as a family member returning from hospital or a loss of a relative. The Village Agents work through the issues in order to help them maintain a healthy and independent lifestyle.

A number of the larger villages have retained their local pub and convenience stores with some provision for post office services, and a supply of library books is part of the 'Hub in the Pub' in Chew Stoke. All villages have a church room, village or community facility, which vary in size and are used by a range of clubs and groups on a regular basis. The mobile library service also operates once a week in the area. Chew Magna acts as a local service hub to the surrounding villages, although more recently the GP surgery in Chew Magna relocated to a nearby village Chew Stoke. Other GP surgeries are located in West Harptree and Temple Cloud.

There are high levels of volunteering, much of which is informal volunteering helping neighbours and caring for relatives. There are many residents who are involved in community activities, such as lunch clubs, local flood wardens, the hub in a pub, and the community car scheme. However with an ageing population the available 'volunteer pool' is likely to reduce and the need for health-related services and adequate transport provision will increase further.

Future Challenges

Many rural communities have experienced significant social change over the last couple of decades and the Chew Valley has experienced the greatest proportion of population ageing across the authority area – the latest census shows an increase of 42% of people aged 75+ (Chew Valley South Ward).

Whilst many of the villages have some services for the local community to access, these are widely spread. Coupled with the lack of public transport in the rural area, accessing doctors' surgeries, schools, shops and post offices requires most people to travel by private transport, either by car or taxi. The increased costs of accessing services together with the increased costs of housing has led to rural living becoming less and less affordable, and for some completely unaffordable. This is particularly a problem for older people, families with young children and young people.

Chew Valley Priorities

The Forum has identified a number of priorities that are of particular concern to the area which are set out below under eight common themes. The Forum recognises that work is already underway in some areas to address these issues, such as Neighbourhood planning, Placemaking, Flood Forum etc. However there are three areas where the biggest impact is being felt by the community, these are:-

Health & Wellbeing

• improve access to services by offering more accessible ways to deliver services recognising the challenges of rural life and reducing inequality, isolation and loneliness.

Transport provision

- increase the health and wellbeing of those more isolated by considering alternative methods to public transport.
- improve connections to the main public transport routes for commuters.
- provide safer routes for cycling and walking.

Economic Development & Enterprise

- support rural businesses to thrive.
- improve the access to broadband for rural businesses.

The Forum will regularly review its eight themes in order to respond to new challenges and changing circumstances. Their other priorities include:-

Children & Young people -

improve the provision of services and facilities for young people.

Developments and Infrastructure-

- ensure the impact of development maintains the identity of villages and provides sufficient improvements to infrastructure such as schools, roads, traffic and health.
- Improve the availability of affordable housing for local people.

Environmental, Sustainability and Climate Change -

- maintain awareness of the threat of Fracking in the local community.
- reduce the impact of flooding by working in partnership with agencies and the community to identify prevention measures and maintenance.

Stronger Communities -

ensure community facilities are accessible and affordable to the whole community.

Safer Communities-

provide a safe community by reducing anti-social behaviour.



Keynsham area - At a glance

The Keynsham area lies in the north of Bath and North East Somerset, and has strong links to both Bristol and Bath. The largest of the areas, Keynsham, is a market town, which serves a number of the nearby villages. One of its key features is that the physical geography is influenced by the two rivers, Avon and Chew, which converge to the north of the town. Historically the rivers were used as a transport corridor: now the A4 from Bath to Bristol provides the principal traffic route for the area.

The Keynsham area is defined by seven electoral wards; one town; and seven parishes. Saltford and Whitchurch are local centres.

Public transport provision for most of the Keynsham area is good with rail, bus, road and cycle networks connecting the main cities and further afield. However the service available to the outlining villages is limited which means that some of the population is reliant on private transport. Keynsham Dial a Ride has seen an increase in its membership over the last five years particularly for health-related appointments. The service also runs a number of social events for its members.

Unemployment in the area is below the national average. The majority of people are employed, working mainly in managerial, professional, administrational and secretarial roles. 19% of the population is retired: this is higher than the national average. The main mode of transport to work is by car or van, travelling distances of between 5km and 10km to work.

There are two secondary schools and nine primary schools that serve the area. Broadlands Secondary and Wellsway Secondary are now Academies. Wellsway Secondary school specialises in Sports and Science and accommodates a leisure centre that is available for wider community use.

Key Facts

- There are 24,763 residents, 20% are under 18, 2% full time students, 23% over 65. 0.4% increase in population since 2001.
- There are some relatively high levels of deprivation in the Keynsham area with, Keynsham North and South and Publow and Whitchurch Wards in the most deprived 50% nationally. Farmborough and Keynsham east both fall within the least deprived 30%.
- Keynsham Dial-a-Ride has approximately 1,200 members. Over 50 groups now use the service.
- 32% economically inactive, of which 19% are retired, higher than the national average.
 - 29% of people have a degree level or above and 20% of people have no qualifications.
 - 1 in 3 children are aged between 5 and 6 years.
 - 1 in 4 children aged 10 and 11 are overweight or obese.
 - 8.5% of lives "limited a lot" by a disability.
 - 455 employment & support allowance claimants.
 - Child poverty (14%) is low compared to the UK (27%).

Over the next 15 years the area will see a significant growth in its population with Keynsham receiving the largest increase of 30%. Around 2,150 homes will be built in Keynsham and a further 200 homes in Whitchurch. The Core Strategy allows provision for the larger villages outside the Green Belt to identify development sites to accommodate around 50 dwelling, with small villages outside the Green Belt with a more limited range of services/facilities identifying sites to accommodate around 10 to 15 dwellings within the plan period. For those villages within and 'washed over' by the Green Belt new housing provision is limited to small scale infill development or limited affordable housing to meet local community needs.

Access to facilities and services in the Keynsham area is good. There are two leisure facilities, one run by Wellsway School and the other by the local authority. There are many community assets including church halls, village halls and community facilities across the area that vary in size and offer a range of activities and events for local people. Keynsham town centre has a newly designed One Stop Shop which includes a new library and access to a range of public sector partners, including the Council, Police and Curo. In addition there is a library in Saltford and the mobile library service visits some of the smaller villages on a weekly basis. There is a Health centre in Keynsham and four other GP surgeries

in Keynsham and Saltford. The smaller villages, Compton Dando, Marksbury, Farmborough and Corston are served by their neighbouring town or village less than 2 miles away. Keynsham area is served by the B&NES Clinical Commission Group (CCG) who are responsible for commissioning a range of local healthcare services for the area, with the exception of Whitchurch which comes under the responsibility of the Bristol CCG.

The community is very active with high levels of volunteering. It is estimated that there are over 300 community and voluntary groups across the area providing a range of opportunities including, historical societies, gardening clubs, allotments, litter picking, environment groups, lunch clubs, community resources and support and advice groups. There are many community events organised throughout the year including music festivals, village fetes, Christmas events and much more. The Keynsham and Saltford Churches together has strong links within the community and take an active role in local events.

Future Challenges

Nearly a quarter of residents in the area are over 65 years and by 2029 the population in Keynsham will have increased by 30%. There are pockets of deprivation particularly in Keynsham North and South Wards and Publow and Whitchurch compared to the rest of the area. The growth in the population coupled with an increased aging population places and pockets of deprivation places future pressures on public services.

The challenge will be to ensure the area retains its identity, becomes well-connected, and continue to offer good access to services. Keynsham Town centre will need to improve both socially and economically and the local neighbouring villages will need to continue to play an important role in meeting the day to day needs of their community.

Keynsham Area Priorities

The Forum has identified a number of priorities that are of particular concern to the area which are set out below under eight common themes. These are:-

Health & Wellbeing

• Ensure services are accessible and affordable particularly for those more vulnerable and isolated people in the community

Transport provision

- Improve the provision of public transport for access to work
- Ensure provision for health related and reducing isolation and loneliness

Children & Young people

Improve the provision of facilities and services for young people

Developments and Infrastructure

 ensure the impact of development maintains the identity of the town and villages and provide sufficient improvements to infrastructure such as schools, roads, traffic and health

Economic Development & Enterprise

Create more job opportunities and support those people seeking employment

Environmental, Sustainability and Climate Change

Improve the Air quality

Stronger Communities

• Ensure community assets are maintained and retained for future community use

Safer Communities

• Create a safe community by reducing the fear of crime and anti-social behaviour



The Somer Valley - At a glance

The Somer Valley lies in the south of Bath and North East Somerset and has close links with Mendip. The area has strong historical characteristics from a Medieval Market town to the transformation during the industrial revolution. The strength in community and historical identity remains strong. The industrial landscape has been returned to beautiful countryside, and the former Somerset and Dorset Railway route provides a well-used cycling route for access to Bath and Frome.

The Somer Valley Area is defined by 8 electoral wards and is made up of 2 towns and 6 parishes. Its population is approximately 40,555.

Access by car and public transport to Bath and Bristol is reasonable but high levels of out-commuting, coupled with limited opportunities for large scale transport intervention has created high levels of congestion during peak times.

Those people living without private transport in the more rural areas of the Somer Valley may be affected by poor public transport routes. Community Transport is available for those unable to access conventional public transport and is offered by a number of providers including, Midsomer Norton Dial a Ride, Midsomer Norton Community Service Vehicle Trust and Midsomer Norton Community Minibus.

The Somer Valley is at the centre of the Somerset Coalfields and employed up to 4,000 people in the early 19th Century. Although the last pit closed in 1973, in 2013 the Somer Valley contained only 8% of all businesses in Bath and North East Somerset and 16% of manufacturing businesses. Manufacturing industries include printing, binding and packaging and provide important local employment opportunities. There are opportunities to increase the economic competitiveness to attract small and medium scale local businesses and highly skilled entrepreneurs.

Key Facts – Somer Valley

- There are 40,055 residents, 22% are under 18, 2% full time students, 18% over 65. 5.2% increase in population since 1991
- Levels of deprivation vary greatly across the Somer Valley, from Radstock in the most deprived 40% nationally to High Littleton in the least 20% deprived.
- 32% economically inactive, of which 15% are retired.
- 22% of people have a degree or above – lower than national average (27%).
- 23% of people have no qualifications.
- 3 in 10 children are aged between 5 and 6 years.
- 1 in 4 children aged 10 and 11 are overweight or obese (B&NES).
- 83% of residents in good or very good health
- 7.3% of lives "limited a lot" by a disability.
- 815 employment & support allowance claimants.
- Child poverty (14%) is low compared to the UK (27%).

Unemployment in the area in August 2014 was 0.8% (217 people) - 5.2% lower than the national average (6%). The majority of people are employed, working mainly in professional occupations; administrative and secretarial roles and skilled trades, although some wards do have significant employment in 'elementary occupations'. The main mode of transport to work is by car or van, travelling distances of between 10km and 20km to work.

There are three secondary schools, all of which are now Academies: Writhlington, Somervale and Norton Hill. Writhlington School also accommodates a Community Sports Centre offering a range of facilities including a gym, sports hall and outdoor football, cricket and tennis pitches. There are eleven primary schools in the area, one of which, Trinity (Radstock), is an Academy.

During the last 20 years employment growth in the Somer Valley has significantly been outweighed by large scale housing developments. It is important that such development does not continue to worsen the balance between homes and jobs and therefore the focus over the next 20 years will be creating more employment opportunities. The area has the capacity to create more than 2,000 jobs. However it has been predicted that no more than 900 jobs will come forward during this period unless a strong partnership between public and private sectors is developed. There are a significant number of housing commitments already underway in the Somer Valley: future housing will be restrained and

additional housing likely to be restricted to in-fill, windfall and brownfield sites. Greenfield development above existing employment and housing commitments will be limited.

Access to facilities and services in the Somer Valley is good. There are two leisure facilities, one run by Writhlington School and the other by the local authority. There are many community assets across the area that vary in size and offer a range of activities and events for local people. In addition there are three public libraries, one of which, Paulton Hub has recently been developed and is run in partnership between the Council and volunteers. The Hub offers a range of services including a coffee bar, WiFi and a meeting room to hire. The Hub also provides the opportunity for a range of other organisations to deliver their services in an accessible, central village location. The mobile library service also operates once a week in villages where there is no permanent library facility.

There are seven GP surgeries (Paulton; Peasedown St John; Radstock; Midsomer Norton (2); Timsbury and Westfield). The Paulton surgery has recently re-located and expanded its services – particularly around preventative medicine. There is increasing pressure on some of the other surgeries – particularly in Peasedown, Radstock and Midsomer Norton – due to increased housing development and an ageing population.

The community is very active with high levels of volunteering and community organisations providing a range of opportunities including, historical societies, gardening clubs, allotments, litter picking, environment groups, lunch clubs, community resources and support and advice groups. There are many community events organised throughout the year including village fetes, Christmas events and much more.

Future Challenges

Bath and North East Somerset is ranked 247 out of the 326 English local authorities (where 1 is the most deprived), which makes it one of the least deprived 30% of local authorities in the country. However, there are pockets of deprivation and, in the Somer Valley: the Midsomer Norton Redfield and North Wards are the areas which have seen the greatest relative increase in deprivation, worsening by 4,200 and 3,900 places respectively. However, these areas still remain within the least deprived 40%.

Other challenges include a vulnerable local economy dependent on a narrow range of industries and few large employers. There is a number of large, vacant, underused or ageing factory sites and perceived difficulty in attracting economic investment in the area. Also, high levels of out-commuting due to lack of local employment opportunities, traffic congestion and limited opportunities for large scale transport intervention.

Strengths

The area has an outstanding natural environment within and surrounding the individual communities and its mining heritage provides a basis for recreation and tourism. The critical mass of a combined Somer Valley area offers greater potential than individual towns and villages. It has active local communities and existing community networks as well as a local hospital and good schools. In addition, housing is of a relatively lower cost compared to elsewhere in the district.

Somer Valley Priorities

The Forum has identified a number of priorities that are of particular concern to the area which are set out below under seven common themes. The Forum will regularly review its themes in order to respond to new challenges and changing circumstances. The priorities include:-

Children & Young People

improve the provision of services and facilities for young people.

Developments and Infrastructure

 ensure the impact of development maintains the identity of villages and provides sufficient improvements to transport infrastructure

Economic Development & Enterprise

Create more job opportunities to prevent out-community

Health & Wellbeing

- Reduce social isolation
- Quality retirement accommodation
- Community Services (eg doctors' etc)
- Poverty: deprivation
- Health: childhood obesity, cancers, diabetes, poor child dental health, mental health

Safer Communities

reduce anti-social behaviour.

Stronger Communities

reduce isolation especially in villages

Transport

- increase the health and wellbeing of those more isolated
- help reduce the impact of congestion

Somer Valley Forum A Introduction to the Clinical Commissioning Group



Page 43

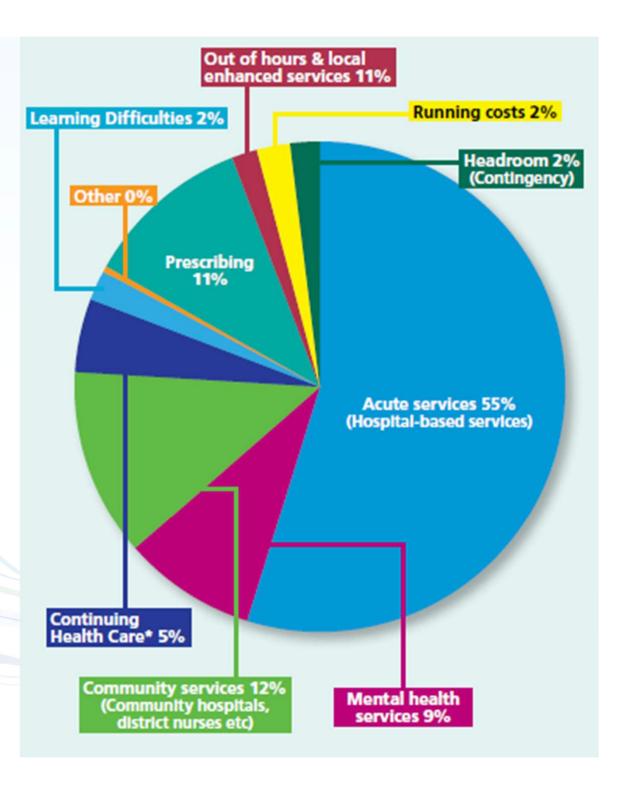
Agenda Item 7

What is a Clinical Commissioning Group?

 Clinical Commissioning Groups are groups of General Practices that work together to plan and design local health services in England.

 They do this by 'commissioning' or buying health and care services including: Planned hospital care, Urgent and emergency care, Maternity and Mental health services. Page 45

How we spend Your money



BaNES CCG

- One of 211 clinical commissioning groups
- 27 GP practices form BaNES CCG
- BaNES CCG is in the top 25% of CCGs
- Stable financial history 2014/15 relatively secure, but challenges coming 2015/16
- Strong working relationship with local authority



Our population

If our population was 20 people



Inequalities in B&NES

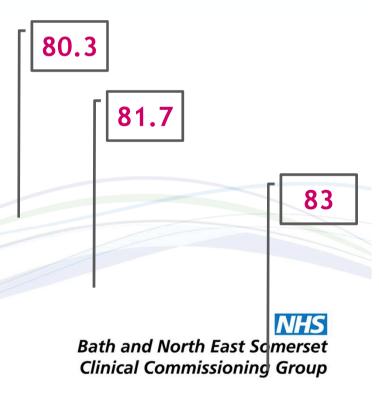
The number 20 bus route

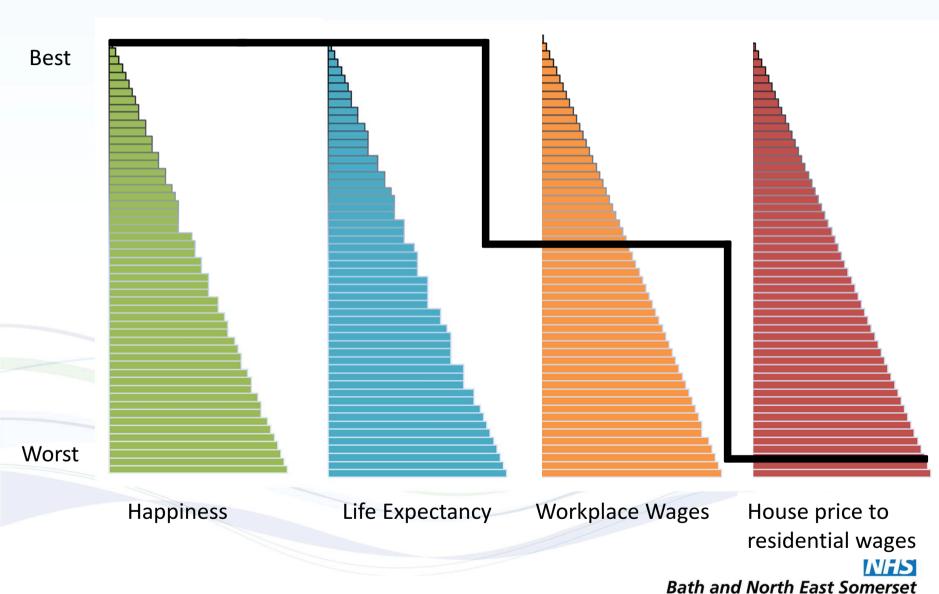


75.5

77.9

Pockets of significant deprivation and a widening picture of health inequalities





Page 50

Bath and North East Somerset Clinical Commissioning Group

In B&NES we group practices into 5 Clusters

- Cluster 1 Norton Radstock
- Cluster 2 Chew Valley & Keynsham
- Cluster 3 Bath East
- Cluster 4 Bath West
- Cluster 5 Bath Central



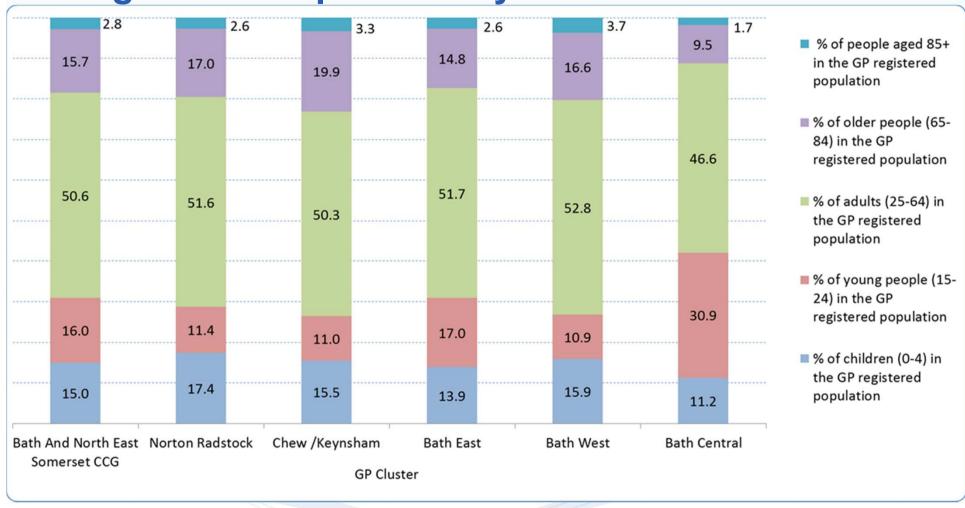
Norton Radstock Cluster 1

- Hope House Surgery, Radstock
- St. Chad's Surgery, Radstock
- Hillcrest Surgery, Peasedown St. John
- Somerton House Surgery, Midsomer Norton
- Westfield Surgery, Radstock
- St. Mary's Surgery, Timsbury
- Elm Hayes Surgery, Paulton



Evelyn - can you get pictures of all 7 practices? Tracey Cox, 23/11/14 1

Registered Population by Practice Clusters



Page 54



The CCG's 5 Year Strategy



Demographic changes

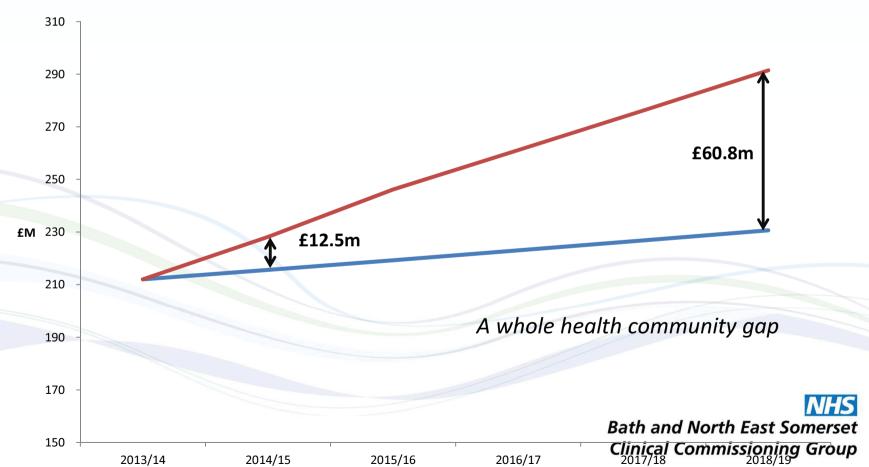




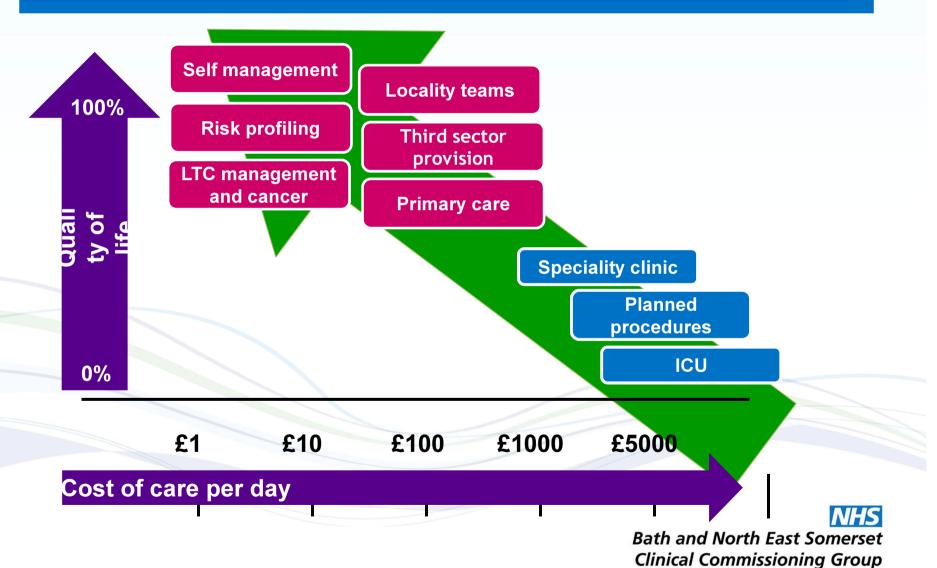
to increase by 20%

Bath and North East Somerset Clinical Commissioning Group



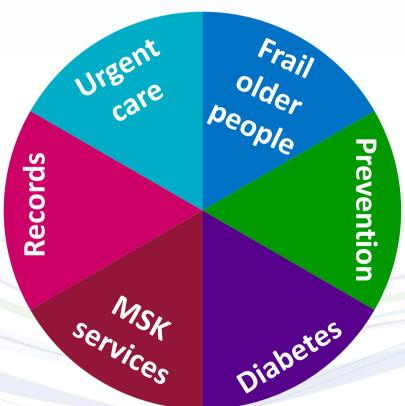


Shifting left



Our priorities in our 5 Year Strategy

Six priorities:





Other priorities

- Re-designing community services
- Commissioning primary care services
- Re-designing pathways in:
 - Mental health
 - Learning Disabilities
 - Children' services
 - Maternity Care



Commissioning for Quality

Quality includes

- patient safety
- patient experience and
- clinical effectiveness of provided services

Assured through

- Quality schedules
- Commissioning for quality and innovation indicators (CQUIN)
- monitoring of the quality impact of cost improvement schemes
- Site visits of our major providers



Quality in Primary Care

	CQC	Response rate	Ease of getting through on phone	Helpfulness of receptionist	Able to get appointment	Overall experience	Recommend ing to new person	Enough support to manage LTC	Confidence in managing own health
National		34%	73%	87%	86%	86%	79%	64%	93%
B&NES		71%	89%	95%	92%	93%	89%	71%	95%
Elm Hayes Surgery	Band 6	44%	95%	96%	92%	93%	93%	74%	97%
Hillcrest Surgery, Peasedown	Band 6	44%	91%	96%	91%	89%	85%	60%	89%
Hope House Surgery	Band 6	36%	88%	97%	93%	99%	88%	63%	98%
St Chads surgery	Band 6	46%	79%	93%	93%	97%	85%	65%	95%
Somerton House surgery	Band 5	47%	90%	96%	89%	89%	91%	67%	99%
St Marys Surgery	Band 6	52%	98%	96%	94%	97%	94%	71%	91%
Westfield Surgery	Band 6	37%	96%	97%	93%	99%	91%	68%	97%

Clinical Commissioning Group



Thank you

Our website:- www.banesccg.co.uk



This page is intentionally left blank

Connecting Communities Action Planning – Somer Valley Forum

We welcome the Forum's thoughts on how the initial priorities raised at the workshop in July might be translated into an Action Plan.

To help inform this, further work on the Area Profiles is being undertaken to develop these further, particularly around the areas where priorities have been identified.

The aim of the Action Plan would be to:-

- help influence public services' plans
- identify particular, local needs
- determine actions and projects that local communities can deliver themselves or in partnership.

Some initial suggestions on the way in which an Action Plan might be developed have been put forward but further ideas are welcome.

Options

- 1. A series of interactive sessions with stakeholders, on specific topics relating to priority areas, over a 12 month period. These would last for about an hour as part of the Forum meetings (although this may involve meeting more frequently eg six times per year rather than four as at present).
- 2. A single workshop event covering all topics, involving key stakeholders working directly with the Somer Valley Forum members.
- 3. A single workshop event covering all topics, involving key stakeholders working with all Forum members (ie Chew Valley; Keynsham; Somer Valley and Bathavon). The various Forums would work separately on their plans but come together at the end to share outcomes and common issues. This could be deemed the North East Somerset Conference event for 2015.
- 4. As Option 3 but a series of workshops involving all Forum members over a limited period.

There is a need for a complementary approach to Action Planning across all Forum areas, so these options will be discussed at the February Forum Meetings for Chew Valley; Keynsham and the Somer Valley.

Feedback from these meetings will be considered by the Forum Sponsors, Chairs and Vice Chairs for the Forums to agree the best way forward.

This page is intentionally left blank

Draft Agenda Plan – Connecting Communities Forum

Date	Bathavon Forum	Chew Valley Forum	Keynsham Area Forum	Somer Valley Forum
July 14	Not established	 Disband CVAP Agree Terms of Reference and Membership Appointment of Chair and Vice Chair 	 Disband CVAP Agree Terms of Reference and Membership Appointment of Chair and Vice Chair 	 SVF disbanded in May 14 Appointment of Chair and Vice Chair Workshop on priorities
Oct 14	Not established	 Working arrangement and membership Core Strategy Update Reviewing priorities/issues Update from Police 	 Working arrangement and membership Core Strategy Update Draft Keynsham Transport Strategy Reviewing priorities/issues Update from Police 	 Agree Terms of Reference (Carried forward from July Meeting) Core Strategy Update Update from Police
Nov 14	Not established	 Ask the Forum Placemaking Plan Area profile Rural Broadband Briefing note 10 in 100 Briefing note 	 Ask the Forum Placemaking Plan Area profile Rural Broadband Briefing note 10 in 100 Briefing note 	Ask the ForumPlacemaking PlanCCG Presentation
Feb 15	Not established	Ask the Forum CCG Community Services Review	Ask the Forum CCG Community Services Review	Ask the Forum CCG Community Services Review
Qtr 1 Apr – June 15	 Area Profiles and Action plans Green Spaces Strategy (Parks and Open Spaces) CCG Community Services Review – Options paper 	 Area Profiles and Action plans Green Spaces Strategy (Parks and Open Spaces) CCG Community Services Review – Options paper Chew Valley Total Transport Pilot (if successful) 	 Area Profiles and Action plans Green Spaces Strategy (Parks and Open Spaces) CCG Community Services Review – Options paper Keynsham and Saltford Air Quality Management Plan 	 Area Profiles and Action plans Green Spaces Strategy (Parks and Open Spaces) CCG Community Services Review – Options paper Economic Development Somer Valley Business Centre Option

τ	
a	
ge	
6	
g	

Qtr 2 July – Sept 15	 Scheduled Capital Highways schemes Rural Broadband Healthwatch – focussing on key themes and CCG priorities (every 6 months) Placemaking update Multi Agency Community Safety Plan 	 AGM Scheduled Capital Highways Rural Broadband Healthwatch – focussing on key themes and CCG priorities (every 6 months) Placemaking update Multi Agency Community Safety Plan 	 AGM Scheduled Capital Highways schemes Keynsham Transport Strategy Healthwatch – focussing on key themes and CCG priorities (every 6 months) Keynsham Fire Station redevelopment Placemaking update Multi Agency Community Safety Plan 	 AGM Scheduled Capital Rural Broadband Highways schemes Healthwatch – focussing on key themes and CCG priorities (every 6 months) Placemaking update Multi Agency Community Safety Plan Transport
Qtr 3 Oct – Dec 15	Budget Fair Consultation	Budget Fair Consultation	Budget Fair Consultation	Budget Fair Consultation
Qtr 4 Jan – Mar 16	Healthwatch – focussing on key themes and CCG priorities (every 6 months)	Healthwatch – focussing on key themes and CCG priorities (every 6 months)	Healthwatch – focussing on key themes and CCG priorities (every 6 months)	Healthwatch – focussing on key themes and CCG priorities (every 6 months)