

TREDEGAR TOWN COUNCIL

Minutes of the Special Meeting of Council held via Microsoft Teams / hybrid on Wednesday, 31st January, 2024 at 6.00 p.m.

Present: Councillors K. Phillips (Chair)
E. Griffin
M. Turner
A.E. Tippings
G. Badham
E. Jones
D. Rowberry
H. Trollope
S. Trollope
C. Walters

In attendance: Clerk – Ms. C. Aherne

By invitation: Aneurin Bevan University Health Board
Director of Strategy, Planning & Partnerships, Hannah Evans
Divisional Director of Primary Care and Community Division, Lloyd Hambridge
Assistant Director of Communications, Karen Newman
And;
Kier, Ian Rees

294) Apologies. Councillors A. Evans, A. Jones, B. Rees, J. Thomas, K. Waldron and G. Walters; and ABUHB, Prof. Tracy Daszkiewicz

295) Declarations of Interest

The Chair reminded Members to make their declarations as and when necessary.

296) Invitation extended to Aneurin Bevan University Health Board and Kier Construction UK to provide an update on the Tredegar Health and Wellbeing Centre and respond to concerns raised

The Chair extended a welcome to the representatives of the ABUHB and Kier, who had been invited to attend this meeting of Council to provide an update on work being undertaken in respect of the Tredegar Health and Wellbeing Centre and respond to concerns raised.

The Director of Strategy, Planning & Partnerships thanked Council for the invitation to attend and invited Members to outline concerns in order for representatives to respond and address matters accordingly.

- Following the pandemic, there had been ongoing issues in respect of communication in addressing concerns of residents of Tredegar, brought to the attention of Town Council, and concerns of Members also. Prior to restrictions, meetings had been held regularly with the Health Board and members of the community, but this had fallen away since.
- Concerns were raised in respect of the two surgeries amalgamating into one; 1) unfortunately neither County Borough Councillors nor Town Councillors had been spoken with beforehand, 2) should both surgeries had been demolished simultaneously as there were no facilities for car parking at the moment. Therefore, as the lower surgery was running efficiently, should this practice continued to have run in the meantime.
- Patients / visitors had to park in the Recreation grounds and walk to the Wellbeing Centre – for those experiencing ill-health, the disabled and the elderly, this was a trek especially in inclement weather.
- Council and residents wished to reiterate their support of the development, which was welcomed, but emphasised the need for communication in order that concerns could be addressed. A Member had attended every consultation; he would have expected Council to be kept updated as soon as planning and work commenced, rather than being informed at the same time as everyone else.

The Director of Strategy, Planning & Partnerships firstly apologised for the comments in respect of lack of engagement; she said there was clearly not enough and the ABUHB welcomed feedback for continued learning and improvement. This was a great facility and the Director hoped this would be a facility everyone was proud of and only expressed disappointment in the breakdown of communication.

The Divisional Director of Primary Care and Community Division said that although communications had been sent to Members and local residents in respect of the movement of both surgeries, he fully accepted there could have been errors in the manner these letters had been distributed, and could have been sent to Councillors in advance, and extended his apologies. He thereupon provided an update of the plans in place in terms of time scales and the parking facility element to enable a new car park, following the removal of the old sites and the operation of the two sites. The two practices worked closely together and the Health Board had wanted to make sure the surgeries were integrated at the same time, for patient population, to ensure an equitable approach.

- Kier had neglected to place signs to say that the pathway was closed. As Kier had not erected signage, any pedestrians travelling from the direction of the town centre had to cross a very busy road to access the entrance to the Wellbeing Centre. Members said, as far as planning was concerned, this was not working in partnership with relevant parties.
- Concern was expressed that there was no facilities for the disabled to park, as access was problematic even for the able-bodied, and little forethought appeared to have been given in respect of car parking facilities. Concerns had been received from residents in respect of the closure of both surgeries and the length of the walk to access the new surgery.

The Divisional Director said that current car parking operating was an area deemed for staff parking that had been opened up for access to the disabled and this was made clear on signage. There was seventeen car parking places available and staff were currently parking on the Recreation ground – there were five places allocated to ‘on-call Doctors’ and the pharmacy. A Member suggested, with the lack of car parking facilities, a park and ride facility should be provided to transport patients / visitors from the Recreation ground to the Wellbeing Centre, particularly taking into account the dark winter nights.

The Kier representative said that Phase 2 would provide a further fifty-eight car parking spaces, following demolition of the building, split into disabled and other users. The electronic barrier would remain raised during surgery hours during this period. The Director added that a risk assessment could be undertaken to ascertain what mitigating actions should be undertaken and feed back to Council.

- A Member said that, pre-pandemic, communication with the site manager had been considered reasonable and communications pre-planning with residents’ meetings; however since Covid residents had not been contacted at all post-pandemic and communication stopped / broken down.

The Assistant Director of Communications also extended apologies that Members should have been informed prior to the letter-drop to patients, which was not acceptable, as the Health Board recognised the benefit of working with town councils. She agreed that there had been more engagement pre-pandemic; however, there were a number of avenues used for communication, e.g. dedicated webpage, newsletters, social media and each GP practice received information to ensure patients were made aware of developments. A Member said these types of communication did not appear to work in engaging the community; the representative said that, although a lot of engagement had been undertaken, clearly there was not enough in the areas needed and she was therefore grateful for Members ‘ time at this meeting.

- At the start of the planning process, Council had nominated Councillor Jacqueline Thomas as the conduit to liaise with ABHUB / Kier and the residents, as a point of contact for all communication. For example, the Member had sat on the board when the foreman had been selected for the site, but this engagement had also ceased post-pandemic. The Assistant Director would pick up these matters with the Engagement Team to ascertain what had happened. The Director said there was a need to ensure lines of communication were open in order to rebuild some trust with the stakeholder groups.

Councillor G. Badham arrived at this juncture (6.36 p.m.)

- A Member regularly attended meetings of the Regional Partnership Board and said there was very little information disseminated as to the official opening of the Wellbeing Centre. The Leader BGCBC and the Member had donated a painting of Aneurin Bevan, undertaken by a local artist, and had to make at least four telephone calls for the painting to be collected. He said the painting could be unveiled at the official opening; Council was informed that it was anticipated this would be in the autumn.

The Divisional Director said that the Regional Partnership Board covered the whole of

Gwent and issues associated with it; however, the Wellbeing Centre would be on each agenda of the ISPB meetings – a circa £19m building that the community should be proud of.

- Prior to the opening of Ysbyty Aneurin Bevan, items had taken from the hospital for safe-keeping, e.g. bronze bust, oak pedestal, and five of the six stained glass windows were still in the health centre and should be removed before being damaged. The Director said there was a need look at the condition of the loan for safe housing in the interim, as the Design Team had worked hard to retain as much health-related items in the Terms of Legacy.
- The development site did not appear to be adhering to the planning application submitted, with twenty ton trucks travelling down Market Street. Residents were putting up with this practice, as they wished the development to be completed. The development was now at demolition stage and lorries should exit the site via the staff car park and on to the main road. Market Street pavement had to be repaired on two occasions; the Highways Department had complained to Kier regarding repairs to the pavement, which was actually illegal as lorries were travelling close to front doors, which was a massive risk to residents. Residents had expressed complaints to the County Borough and personnel on site. Loading of lorries was being undertaken in street, sometimes up to an hour, and parking was abysmal. Residents of Park Row had also submitted complaints of damage to their vehicles.

The Kier representative extended his apologies, as the company wanted to leave a positive legacy following a development, e.g. interaction with Schools / community engagement / initiatives. In terms of parking, controls had been put in place in a Staff Management Plan, and if not being adhered to, he would address this with the Team, consulting with suppliers / contractors in respect of routes to and from the site; also lorries should not be off-loading on the road. The Management Team should be enforcing these practices on that site. Members said there was evidence of contractors parking in other areas and there was also a need for new staff / locums to be informed regarding parking. A Plan had been put in place in respect of demolition and this would be shared with Council through the Health Board.

The Director said re-enforcement of the Traffic Management Plan should be actioned. In response to a question raised, it was confirmed that a Dust Management Protection Plan was in place.

Concerns were raised as issues were affecting residents living in the flats at the top of Market Street - one gentleman had a stroke last year, and visitors continually parked outside his home – experiencing issues with noise, car doors, etc. and residents were being lost due to this disruption. The Chair highlighted this disruption was chipping away residents' wellbeing.

- Wellbeing gardens to the rear of the Centre had formed part of the plans, to be mutually beneficial to Bedwellty Park and an Integral Bat House suggested as part of the development, as these were protected species. The route from the Wellbeing Centre into the Park was considered fundamental to the operation of the Health Centre, with access via a gated, secure entrance.

- Local engagement would be undertaken with community events in the town, three Social Value Officers, going forward to capitalise / engage and Kier was integral at the forefront of such communication. In response to a question regarding opportunities for school leavers, the representative referred to STEM engineering side in learning a trade, to the Team was proud of the opportunity to provide a legacy in getting people into work / apprenticeship.

Members welcomed the development being undertaken; the Chair thereupon extended the thanks of Council to the representatives for attending, which was greatly appreciated, and hoped that a good line of communication would be maintained going forward.

297) To make any recommendations arising from discussions

There were no recommendations arising; however, ongoing actions would be progressed accordingly; it was agreed the point of contact would be the Town Clerk and Executive Assistant ABUHB.

There being no other business, the meeting closed at 7.25 p.m.

_____ Chair