Cinque Port Town of New Romney

Mrs C. Newcombe
Town Clerk

Town Clerk's Office
Town Hall
New Romney
Kent TN28 8BT

Tel: New Romney 01797 362348

Ref: CN/3005

12th November 2025

Dear Councillor / Committee Member,

Meeting of the Health & Wellbeing Committee

A Meeting of the Health & Wellbeing Committee will be held in the **Assembly Rooms, Church Approach, New Romney** on **Tuesday 25th November 2025** commencing at **10.00am**. The favour of your attendance is requested.
Yours sincerely,

C. Newcombe

Mrs. C Newcombe – Town Clerk
Email: town.clerk@newromney-tc.gov.uk

The afore-mentioned meeting will commence at 10.00am.

Members of Public are welcome to join this meeting. However, a number of matters discussed by the Health & Wellbeing Committee are likely to be discussed in private and confidential session due to their sensitive, legal or contractual nature. Members of Public and Press and Council Members who are not Members of the Health & Wellbeing Committee will be required to leave the meeting at that time.

PLEASE NOTE: New Romney Town Hall and New Romney Assembly Rooms all have restricted access for people with limited mobility; please enquire for details.

PUBLIC PARTICIPATION AT TOWN COUNCIL MEETINGS

1. Who can participate in this New Romney Town Council meeting?

All Members of the Public may attend this meeting, except at such times as certain sensitive, legal or contractual matters may be considered in private and confidential session, when Members of the Public will be required to leave the meeting.

Agendas and reports for meetings will be available at least 3 working days and usually 7 weekdays before the date of the meeting on the Town Council website. Any supplementary sheets will be available the day before the meeting and can be viewed at www.newromney-tc.gov.uk

THE LAWS OF LIBEL AND SLANDER

• These laws are very strict.

• If, in public, you say something about a person that is not true, even if you believe it to be true, you may be sued and have to pay compensation. Therefore, you need to be very careful about any criticism you wish to make of people in any written submission to the Council.

• Councillors are able to speak more freely and bluntly while in Council or Committee meetings than members of the public.

• You, as a member of the public, do not have the same protection.

NEW ROMNEY TOWN COUNCIL
HEALTH & WELLBEING COMMITTEE MEETING
TUESDAY 25TH NOVEMBER 2025 AT 10.00AM

AGENDA

Welcome and Introductions.

1. APOLOGIES:
To receive and note the apologies of councillors / committee members unable to attend.

2. DISPENSATION TO PARTICIPATE:
To receive and note any applications granted by the Town Clerk, on behalf of the Town Council, for dispensation to participate in Meetings of New Romney Town Council.

3. DECLARATIONS OF INTEREST:
Councillors to declare any Disclosable Pecuniary Interests or Other Significant or Personal Interests they may have in items on the agenda for this meeting.

4. MINUTES (Encs*):
To approve the minutes of the **Health & Wellbeing Committee Meeting** held on **2nd September 2025.**

5. HEALTH CENTRE FOR ROMNEY MARSH:
To receive and note Chairman's report and take any such action thereon as deemed appropriate.

6. EXCLUSION OF PUBLIC AND PRESS:
To consider exclusion of public and press in accordance with Standing Order No.34 (a), which states that *'in view of the special and confidential nature of the business about to be transacted, it is advisable in the public interest that the public and press be temporarily excluded [from the meeting] and they are instructed to withdraw'* due to the fact that elements of the agenda items as listed above may relate to matters of a sensitive, legal or contractual nature.

7. CONCLUSION OF PRIVATE SESSION:
To consider concluding private session, if applicable.

Mrs. C Newcombe - Town Clerk

Copied to Health & Wellbeing Committee Members and to all other Councillors for information only.

MINUTES
Of
A Meeting of New Romney Town Council's
Health & Wellbeing Committee
Held in the Assembly Rooms, New Romney
on Tuesday 2nd September 2025
Commencing at 10.00am

PRESENT: Councillors J Rivers, J Hiscock, J Davies, P Coe, P Thomas
P Carey
CEO - The Community Hub
NHS Representatives: 3
Member of Public - 1

In the Chair: Councillor J Rivers

In Attendance: Mayor's Secretary – Mrs J Vicary

208/2025-26 **APOLOGIES FOR ABSENCE**

Apologies were received and noted, as follows:

Rev Cn S McLachlan – For personal reasons
2x NHS Representatives - For personal reasons

209/2025-26 **DISPENSATION TO PARTICIPATE**

No new requests for Dispensation to Participate had been processed by the Town Clerk.

210/2025-26 **DECLARATIONS OF INTEREST**

None.

211/2025-26 **MINUTES**

The Chairman presented the minutes of the Health & Wellbeing Committee meeting held on 20th May 2025, which were duly received and noted and it was:

PROPOSED BY: Councillor Coe
SECONDED BY: Councillor Davies

RESOLVED UNANIMOUSLY – that the minutes of the Health & Wellbeing Committee meeting held on 20th May 2025 be hereby approved as a true and correct record.

212/2025-26 **NEW ROMNEY NHS PROVISION:**

No updates.

213/2025-26 **LOCAL HEALTH & WELLBEING NEEDS AND ISSUES (ENCS*):**

(i) The Committee discussed Changes to the Government's 10yr plan for Community Diagnostic Centres, noting that the details indicate a better fit for the Romney Marsh. A proposed New NHS Operating Model was also reviewed and it was noted that it appeared to be clearer and more strategic than the current operating model. Discussion ensued regarding the common problems associated with the current levels of service and it was agreed that the local GP Surgery representatives would provide the Town Council with a comprehensive list of services before the next meeting of the Health and Wellbeing Committee, which is scheduled to be held on 25th November 2025.

(ii) The Committee compared an extract of NHS aims for local healthcare provision with the current NRTC document, 'Making a Case for a New Romney Medical Centre', noting good links that support the progression of this campaign.
It was noted that staff at the local GP surgeries indicated a preference for the GP surgeries to remain and additional services to be provided at any new Community Diagnostic Centre.
It was again agreed that any successes of the local GP surgeries should be published and it was requested that details of any successes be provided to the Town Council by local Practice Managers before the 18th October 2025 for publication on the Town Council website.

The Committee Chairman reported that he would continue to push forward with arranging a meeting with the ICB and the local MP, the outcome of which would be reported back to the Committee.

A draft press release was also presented for discussion and its content was duly considered and commented on. It was noted that the shorter version on P22 of the agenda was preferred for publication in due course, subject to formal resolution.

214/2025-26 **EXCLUSION OF PUBLIC AND PRESS**:
Not applicable

215/2025-26 **CONCLUSION OF PRIVATE SESSION**:
Not applicable

The Chairman thanked those present for their attendance and the meeting concluded **@11.10AM**

NB: All documents referred to herein are available for perusal on request, except for those documents of a sensitive / legal nature discussed in private session, including documents relating to staff matters which remain Private and Confidential in accordance with Data Protection legislation.

Minutes prepared by the Mayor's Secretary

HEALTH CENTRE FOR ROMNEY MARSH

Making the Case for a Romney Marsh Neighbourhood Health Centre

Executive Summary

The UK Government's new 10-Year Health Plan commits to moving care out of hospitals and into neighbourhoods, delivered by multidisciplinary Neighbourhood Health Services operating from Neighbourhood Health Centres that are open extended hours and bring diagnostics, rehabilitation, mental health and community nursing "under one roof." A modern, integrated medical centre in New Romney, serving residents, workers and visitors across the whole Romney Marsh, is exactly the kind of scheme the Government wants systems to back. It aligns with national policy, Kent & Medway's primary care strategy and the NHS programme to expand Community Diagnostic Centres (CDCs) and out-of-hours access.

Why here, why now: Romney Marsh is a rural/coastal area with significant health needs, an older age profile, transport barriers and workforce challenges, issues highlighted by the Chief Medical Officer and Kent Public Health. A local, integrated centre reduces avoidable travel, tackles inequalities, improves same-day access and supports prevention. It also relieves pressure on William Harvey Hospital (Ashford) and the Folkestone Urgent Treatment Centre.

What to build: A Neighbourhood Health Centre in New Romney providing: modern GP facilities (with digital telephony and same-day access), Pharmacy First integration, urgent-same-day care stream, community mental health, rehabilitation, community nursing, health visiting, social prescribing, VCSE partners, and a CDC "spoke" for checks/tests/scans with extended evening/weekend provision. This mirrors the Government model and the NHS's expansion of CDCs now operating 12 hours a day, 7 days a week.

Recommendation: Kent & Medway ICB should place a Romney Marsh Medical Centre on the capital pipeline and progress it as the ***Romney Marsh Neighbourhood Health Centre***, a flagship for coastal/rural care and a tangible delivery of the national plan in East Kent.

1) National Policy: Direct Alignment

- **Government direction (2025):** The PM and DHSC launched a *"new era for the NHS"* with a Neighbourhood Health Service and Neighbourhood Health Centres that co-locate services (diagnostics, mental health, rehab, nursing), with extended opening (moving outpatient care out of hospital by 2035).

- **10-Year Health Plan (CP 1350):** Rewires the NHS via three shifts
  - hospital → community
  - analogue → digital
  - sickness → prevention
  - and explicitly backs neighbourhood models and local centres.

- **Fuller Stocktake (NHSE):** Calls for integrated neighbourhood teams delivering joined-up primary/community care. This is the operating model for these centres.
- **Primary Care Access Recovery Plan:** Requires modern access (digital telephony, online booking, records access) which a new-build centre can hard-wire in from day one.
- **Community Diagnostic Centres:** National programme accelerating diagnostics closer to home; 100 CDCs now open out-of-hours (12h/day, 7 days/week). A Romney Marsh "spoke" supports this shift.

Conclusion: A Romney Marsh centre is a textbook delivery vehicle for the Government's plan, bringing multiple services under one roof, with digital-first access and prevention embedded.

2) Local Strategy Fit (Kent & Medway)

- **ICB Primary Care Strategy (2024–29):** Prioritises access, proactive care and prevention, and stresses that fit-for-purpose estates are *critical* to workforce and patient needs, exactly what this centre provides.
- **ICB Capital Planning:** Kent & Medway's capital plans already reference local CDC capacity across places; a Romney Marsh centre can align with that estates pipeline and CDC rollout.

Conclusion: The scheme fits the ICB's published strategy and capital approach and should be advanced as an estates priority for East Kent.

3) Need & Inequalities on Romney Marsh

- **Coastal/rural inequality:** The CMO's landmark report shows a persistent *"coastal excess"* of poor health beyond age and deprivation alone. Kent's own Public Health analysis echoes transport barriers and workforce recruitment issues in coastal communities.
- **Core20PLUS5:** NHS England's inequalities framework formally prioritises tackling gaps in access/outcomes, relevant to Romney Marsh populations.
- **Access & travel:** Nearest UTC is in **Folkestone (Royal Victoria Hospital)**, open 8am to 8pm. Public transport to **William Harvey Hospital** typically takes over an hour; driving is 13 to 17 miles depending on start point. A local centre with urgent-same-day capacity reduces avoidable travel.

Conclusion: A Romney Marsh hub directly targets known coastal/rural inequities, identified by national and Kent evidence.

4) Proposed Service Model (what goes in the building)

Core components (co-located and digitally integrated):

1. **Modern General Practice (*2)**: Multi-disciplinary teams, digital telephony, online triage/booking, continuity and proactive long-term-conditions (LTC) care.
2. **Urgent-same-day primary care stream** (8am to 8pm; weekends as demand grows), relieving ED/UTC.
3. **Pharmacy First** suite and prescribing rooms (common conditions, blood-pressure checks, contraception, etc.), integrating with GP and diagnostics pathways.
4. **CDC "spoke" diagnostics**: Phlebotomy, plain X-ray, ultrasound, lung function, ECG/echo and selected pathway tests, with early evening/weekend sessions linked to regional CDC hubs.
5. **Community & rehabilitation**: Physio/OT, post-op and falls clinics, community nursing, palliative care coordination; space for group programmes (cardiac rehab, diabetes education, smoking cessation, weight management).
6. **Mental health & wellbeing**: IAPT/talking therapies, CAMHS/young person's sessions, social prescribing, VCSE partners, debt/employment advice (as envisaged nationally).
7. **Digital-by-default backbone**: NHS App-enabled records access/booking, remote monitoring for LTCs, virtual MDT rooms; accessible alternatives for digitally excluded patients.

Operating model: A **Neighbourhood Health Centre** open **12 hours/day, 6 days/week** as the plan scales nationally; with activity data used to step up to 7-day provision in diagnostics and urgent-same-day slots as demand evidence grows.

5) Benefits & Outcomes

- **Access & convenience:** Fewer long journeys; more evening/weekend options for tests and urgent primary care.
- **Hospital relief & productivity:** Community management of LTCs and post-op care reduces avoidable admissions and outpatient loads, which are explicit Government goals.
- **Health inequalities:** Targeted provision in a coastal/rural setting advances **Core20PLUS5** goals.
- **Workforce & training:** Attractive, modern estate supports recruitment/retention and full MDT deployment (ARRS-style roles / neighbourhood teams).
- **Economic & civic value:** Co-location with VCSE partners (advice, employment support) addresses wider determinants and keeps spend local.

6) Sites & Phasing (outline)

- **Available site:** New Romney Town Council owns land near the centre of town, with bus connections and which can integrate a large car park on site (subject to planning approval).

The anticipated number of rooms both current Surgeries require comes to 45 rooms, excluding those required for other facilities. Therefore, assessment options, such as expansion/re-use of existing **New Romney Clinic** footprint versus new build on public estate, needs to be carried out. A new build seems preferable and matches Government goals.

- **Phasing:**
    - **Phase 1:** Same day/urgent primary care, modern GP access, Pharmacy First, phlebotomy; enable remote diagnostics links.
    - **Phase 2:** On-site imaging/diagnostics “spoke” with extended hours; expand rehab and mental health suites.
    - **Phase 3:** Additional services (e.g., dental rooms) subject to ICB commissioning and workforce.

7) Funding & Approvals: realistic routes

- **ICB Estates Pipeline & Primary Care Estates Strategy:** Secure an in-principle ICB decision to progress to Strategic Outline Case, aligning with the **ICB Primary Care Strategy** estates priorities.
- **CDC capital programme:** Bid to host a **CDC spoke** function in the Romney Marsh neighbourhood centre, tied to the national push for out-of-hours diagnostics.
- **Neighbourhood/cross-government levers:** Use DLUHC's **Plan for Neighbourhoods** where eligible (for co-located non-clinical services like employment/debt advice), complementing DHSC capital.

Governance: Co-sponsor with Kent Community Health, NHS FT, EKHUFT, PCN(s), and Folkestone & Hythe District Council/ New Unitary Council; formal patient/public involvement via the ICS approach.

8) Risks & Mitigations

- **Workforce availability:** Design for MDT working (nurses, AHPs, pharmacists, paramedics), flexible estates and digital tools to enhance productivity; leverage national GP expansion and digital scribe initiatives outlined by DHSC.
- **Capital envelope constraints:** Phase build; maximise modular/Net-Zero estate standards; sequence CDC capability to available kit/staff; explore mixed funding for non-clinical areas.
- **Transport & inclusion:** Co-design with local VCSE and parishes; embed outreach and home/virtual offers for housebound patients; ensure accessible design for older residents.

9) What Councillors and the MP Can Do Now

Immediate Asks

1. **To DHSC & NHSE:** Endorse New Romney as an early Neighbourhood Health Centre site for Romney Marsh, with CDC "spoke" capacity and extended hours.

2. **To Kent & Medway ICB:** Place New Romney Neighbourhood Health Centre on the 2025/26 to 2028/29 estates programme, authorise a Strategic Outline Case and options appraisal this year.

3. **To DLUHC (where eligible):** Align with Plan for Neighbourhoods funding to co-locate wider determinants services (employment, debt, smoking cessation).

Key Campaign Messages (evidence-based)

- *"This is exactly what the Government's 10-Year Plan is for: care closer to home in a Neighbourhood Health Centre."*
- *"Diagnostics are now moving out-of-hours into communities; Romney Marsh should not be left behind."*
- *"Coastal/rural health inequalities are documented by the CMO and Kent Public Health: New Romney is the right place to act."*
- *"A modern estate is critical to access, workforce and quality, as our ICB strategy recognises."*

10) Data Pack the ICB will expect (to assemble locally)

- Population and age profile for Romney Marsh; LTC prevalence (CVD, COPD, diabetes); emergency conveyance rates; avoidable admissions; GP access/continuity metrics; patient travel times and bus timetables.
- Estates condition survey for current premises; growth and housing trajectories; seasonal visitor impact.

  (Source pointers: OHID Fingertips, Kent Public Health JSNA, ICB analytics.)

Appendix

A) Template Letter to the MP / ICB Chair (key points)

- Endorsement of New Romney as a priority **Neighbourhood Health Centre** location for Romney Marsh.
- Request to commence a **Strategic Outline Case** and site options appraisal.
- Ask to integrate a **CDC spoke** with extended hours and to commission urgent-same-day primary care, Pharmacy First suites, rehab and mental health space.
- Commitment to co-design with patients, PCN(s), KCHFT, EKHUFT, VCSE and parishes.

Why Government Should Back It

“Backed by the Government’s **10-Year Health Plan**, the Romney Marsh Health Centre will deliver the promised **Neighbourhood Health Service** for a **coastal/rural community with evidenced health inequalities**. It co-locates primary, community and diagnostic services with **extended hours**, aligns with Kent & Medway’s **Primary Care Strategy** and the national **CDC** programme, and will cut avoidable hospital use, reduce travel, and improve access for residents, workers, and visitors across Romney Marsh.”

Sources (key policy and local evidence)

- DHSC & No.10 press release on **Neighbourhood Health Service / Centres** (2 July 2025).
- **10-Year Health Plan for England (CP 1350)** – GOV.UK executive summary and policy page.
- **Fuller Stocktake** – Integrating Primary Care into neighbourhood teams (NHS England).
- **Delivery Plan for Recovering Access to Primary Care** (digital telephony/online access).
- **Community Diagnostic Centres** (national programme) & **extended hours** announcement (Aug 2025).
- **Kent & Medway ICB Primary Care Strategy** – estates criticality and access focus.
- **CMO Coastal Communities report** & **Kent Public Health (coastal communities) report**.
- **Local access**: Folkestone Urgent Treatment Centre details (KCHFT) and typical public-transport journey time to William Harvey Hospital.

Cllr. John Rivers.
Chairman
New Romney Town Council August 2025

Actions:

- **Having reviewed the Chairman's report (above), to consider the below points and take any such action thereon as deemed appropriate:**

1. The case for a Romney Marsh Health Centre / Community Diagnostic Centre
    a. National Policy
    b. Local Strategy
    c. Need & Inequalities on the Romney Marsh
    d. Proposed Service Model
    e. Benefits & Outcomes
2. Sites & Phasing
3. Funding & Approvals
4. Risks & Mitigations
5. Next Steps
    a. DHSC & NHSE Endorsement
    b. ICB: Strategic Outline Case
    c. DLUHC: collocate wider determinates
6. Campaign messages
7. Data Pack info
8. Template letter to MP/ICB Chair
9. Community Q&A leaflet
10. Key messages
11. Press release
12. **Resolution and Recommendation to Full Council**

Covering Note

Subject: Romney Marsh Community Health Centre

Purpose of Report:

To seek the Committee's endorsement for the proposal to establish a **Community Diagnostic Centre (CDC)** on the **Romney Marsh** as part of the Government's **Neighbourhood Health Service pilot** in East Kent, and to agree the next steps for progressing the initiative.

Background:

The Government has announced **£10 million of initial funding** to support the rollout of the Neighbourhood Health Service, with **East Kent selected as one of the first 43 pilot sites**. The programme aims to deliver care closer to home, strengthen Multi-Disciplinary Teams (MDTs), and reduce pressure on acute hospitals.

Romney Marsh faces significant health challenges, including an older population, high prevalence of long-term conditions, and poor transport links to major diagnostic centres in Ashford, Folkestone, and Canterbury. These factors contribute to delays in diagnosis and poorer health outcomes.

Establishing a CDC for the Romney Marsh community would directly address these inequalities by improving access to diagnostic services locally, supporting community-based care, and aligning with NHS England's national priorities.

Recommendation:

That the Committee approve the attached **resolution**, supporting the development of a **Community Diagnostic Centre in New Romney, for the whole of the Marsh,** and authorising engagement with the **East Kent Integrated Care Board (ICB)** and relevant Government departments to develop detailed delivery plans.

Proposed Resolution:

That the Health and Wellbeing Committee:

1. Notes the opportunity presented by the Government's Neighbourhood Health Service pilot and the £10 million funding allocated to East Kent as one of the first pilot areas.

2. Recognises the clear case for locating a Community Diagnostic Centre (CDC) in New Romney, in response to local health needs, transport challenges, and health inequalities across Romney Marsh.
3. Agrees that the establishment of a CDC in New Romney would strengthen the delivery of the Neighbourhood Health Service and provide measurable benefits to local residents, across the Marsh, through improved access to diagnostic services closer to home.

Proposed Recommendation:

That New Romney Town Council:

- Formally confirms its support for the proposal for a Community Diagnostic Centre in New Romney as part of the East Kent pilot, and
- Authorises the Chairman of the Health & Wellbeing Committee, together with the Town Clerk, to request that the East Kent Integrated Care Board (ICB), with Government support, develop and bring forward a detailed implementation plan, including site options, service scope, and timeline for delivery.
- Authorises the Health & Wellbeing Committee, under the leadership of its Committee Chairman, to engage with local stakeholders, clinicians, and community representatives to ensure the centre meets the needs of the wider Romney Marsh population.

END