

NORTHERN HEALTH AND SOCIAL SERVICES COUNCIL

Minutes of a meeting of the Northern Health and Social Services Council held at 1.30pm in the Social Area, Joey Dunlop Centre, Ballymoney on Wednesday 8 October 2003.

PRESENT:

In the Chair: Mr T Creighton

Members:

Mrs B Adger	Prof G Kernohan
Mrs M Anderson	Mr J Millar
Ms R Armstrong	Mr R Montgomery
Mrs M Baker	Mrs R Morrison
Mrs M Bigger	Mrs C McCambridge
Mr P Boyle	Mr T Nicholl
Mrs J Drummond	Mr M Nolan
Mrs L Johnston	

In Attendance: Mr N Graham
Mrs J Erwin
Ms S McElhinney
Mr V Kennedy and Ms L Kelly, Carnany
Community Association
Member of the press

Mr Creighton introduced Mr Kennedy, Community Development Officer and Ms Kelly, Treasurer, Carnany Community Association and invited them to tell members about Carnany.

Mr Kennedy explained that Carnany is situated on the southern boundary of Ballymoney, approximately one mile from the town centre. There are 189 dwellings in the estate at present, 43 of which house mature residents. In 1990 an inter-agency group was formed after local statutory agencies identified gaps in social provision within the estate. A survey of the tenants was carried out in August 1990 and this formed the basis of an action plan and subsequently the Community Association was formed.

Referring back to the events of July 1998, Mr Kennedy said that the deaths of three children in the estate brought Carnany onto the world stage and almost caused the break-up of the Association. A few people, however, persevered, and secured funding for various programmes such as self awareness for young people, a young women's group, mature citizens groups and so on. Projects include a nature trail, home safety, energy efficiency and litter lifting. Building on the strong foundation, Mr

Kennedy hopes to develop closer links with other agencies and to deliver good educational programmes for all citizens in the estate.

Issues raised in relation to health and social services included the lengthy distance from the Health Centre and the expense of taxis, the difficulty in getting a home visit from the out-of-hours Dalriada Doctor on Call service and lengthy waits at hospital appointments.

Mr Creighton thanked Mr Kennedy for taking the time to meet with members.

86/03 **APOLOGIES**

Apologies were received from Mrs Beattie, Mrs Hamill, Mr Hamilton, Mrs I Johnston, Mrs Montgomery and Professor McKenna.

87/03 **CHAIRMAN'S BUSINESS**

Mr Creighton, Acting Chairman, welcomed everyone to the meeting in particular recently appointed members, Mrs Morrison and Mr Millar, representing Voluntary/Community Groups. He also welcomed the Council's new Research Officer, Ms McElhinney and wished her every success.

Mr Creighton referred to his attendance at a meeting of the Northern Health and Social Services Board, a Workshop on Clinical and Social Care Governance and the Executive Committee of the NI Association of Health and Social Services Councils.

Mr Creighton reminded members that if they declare an interest in a particular subject then they must refrain from speaking on that subject during discussion.

88/03 **MINUTES OF THE MEETING HELD ON 3 SEPTEMBER 2003**

The minutes were agreed and signed.

89/03 **MATTERS ARISING FROM MEETING OF 3 SEPTEMBER 2003**

(i) Presentations

The general opinion among members was that any presentation given at a Council meeting be restricted to 10-15 minutes.

90/03 **VISITING PROGRAMME**

October Visits

Arrangements were made for visits to George Sloan Centre, Ballymena and The Country Medical Centre, Armoy.

Visiting Reports

Day Procedures Unit, Causeway Hospital

This visit had taken place in March. In the absence of a written report, Mrs McCambridge recalled how pressurised the Unit had been and cited staff turnover as a problem area. Mrs McCambridge went on to describe her own personal experience as a day patient 2 weeks before the visit. Mrs L Johnston expressed dismay at the number of patients smoking at the front entrance to the hospital, at the need to transport equipment from Causeway Hospital to Altnagelvin Hospital for sterilisation and at the need for fracture patients to have to travel to Altnagelvin for treatment.

Ms Armstrong stressed the importance of a written report if the Council was to formally raise the issues with Causeway Trust.

Castledawson Surgery

Mrs Baker and Mrs Bigger had visited the Surgery. Since the building is located on a side road it was felt that a sign at the roadside would greatly assist in finding the Surgery. Car parking is a problem, with space at a premium, and although there were no designated parking spaces for people with mobility problems plans are in place to provide two. The building is in good decorative order with a new waiting room and surgery recently completed. Patients spoken to expressed their satisfaction with the service received at the Surgery.

Ellis Court, Carrickfergus

A report prepared by Mrs Hamill was distributed to members. This is a 24 bedded facility for individuals with learning disability, 12 of the beds are registered; 6 for permanent residents and 6 for respite. The remaining 12 beds are used for the Supported

Living Scheme. After a period of assessment and discussion with residents and then with carers, 12 former residents became tenants. Although still in its infancy, and with many adaptations to existing facilities planned, the lives of these tenants have already been enhanced by this scheme.

Although the interior of the building was pleasant and well-maintained, the visiting team felt the state of the garden at the back raised safety concerns. Homefirst Community Trust would be invited to comment on its plans for this area.

91/03 **TO CONSIDER BUSINESS OF COMMITTEE MEETING**

Administration Committee – 18 September 2003

Due to the current difficulty in receiving feedback from those members who attend other meetings on behalf of the Council it was agreed that a pro forma be developed on which members could detail issues raised at the meeting, issues they had raised and issues to be raised with the full Council.

Members discussed the longer term future of the Administration Committee. A range of views were expressed and Committee members would give the matter further thought at their next meeting.

Mr Montgomery referred back to discussions with Homefirst Community Trust on the introduction of the chilled meals service and asked the Chief Officer to follow-up the request for a visit to the facility where the meals are produced. He and others then cited various comments they had heard in the course of the chilled meals introduction throughout the Trust's area. Particular issues raised included loss or reduction of home help hours and the need for comprehensive monitoring of the new service. The Chief Officer agreed to raise these matters with Homefirst Community Trust.

Mr Graham reminded members to submit nominations for the positions of Chairman and Vice-Chairman by 22 October 2003.

An induction session would shortly be arranged for newly appointed members.

92/03 **DHSSPS CONSULTATION PAPER ON COMMUNITY
MIDWIFERY UNITS**

When the then Minister for Health, Social Services and Public Safety, Des Browne, announced his decisions on the Developing Better Services Modernising Hospitals and Reforming Structures proposals on 23 February 2003, he deferred taking a decision on the proposal to pilot two stand-alone, midwifery-led units pending a period of further consultation on a detailed specification for such units. A specification has now been produced and views are being sought on the setting up, on a pilot or trial basis, of Community Midwifery Units.

To help members form an opinion on the introduction of two stand-alone midwifery-led units, Mr Graham summarised the speakers' main points from a recent Seminar "Community Midwife Units in Northern Ireland – Informing the Way Forward".

Mrs Bigger referred to her attendance at an evidence-based midwifery seminar at which she had learnt about the Edgware Birth Centre in England. She favoured mothers having the choice of a midwife-led maternity unit to deliver since often GPs are not supportive of home births and the availability of community midwives can be an added restriction. Some home births occur simply because mothers have left it too late to get to hospital. Having spoken with Mrs Baker and Mr Montgomery she voiced support for such a unit to be sited at the Mid-Ulster Hospital, Magherafelt.

Other members spoke about the need for more choice in Northern Ireland. Mrs Drummond suggested Larne as a suitable location and Mr Nicholl spoke about the need for such a unit together with a minor injuries service in Ballymena.

The meeting agreed on the need for greater choice and supported the development of Community Midwifery Units following piloting. The need for robust planning was highlighted together with the need to include service users in the development of these units.

93/03 **PLANNING FOR 24 HOUR CASUALTY WATCH**

Ms McElhinney referred to the commitment in the Annual Business Programme to undertake a second 24 hour Casualty Watch in a location in the northern area.

The NHSSC had carried out a similar exercise in January 2003 in the A&E department of Antrim Hospital.

Ms McElhinney suggested that a 24 hour Casualty Watch take place in Causeway Hospital A&E department from 9.00am on Friday 16 January until 9.00am on Saturday 17 January 2004. This was supported by the meeting.

Trust agreement and provisional interest among members in participating would be sought. Training for volunteers would be arranged in early January 2004.

94/03 **PODIATRY SERVICES**

Mrs Anderson shared some general information on podiatry services and highlighted several issues. She referred particularly to an article from the July 2002 edition of Podiatry Now and to the more recently published Final Report on the Review of the Podiatry Workforce by the DHSSPS.

Specific issues highlighted in the magazine article included accessibility to podiatry, recruitment and retention, cost of degree courses and prescribing rights.

The recommendations of the Workforce Planning Report include a review of supply and demand on an ongoing basis, the introduction of induction programmes for all new staff, the adoption of a consistent approach to the implementation of work-life balance policies and procedures, the full utilisation of the available workforce and an increased focus on continuing professional development. She suggested that the service be kept under review.

95/03 **REPORTS FROM:**

NHSSB Local Appraisal Group

Due to Mrs Hamill's absence this was deferred until the next meeting.

Trust Annual General Meetings

There had been Council representation at the Annual General Meetings of the three local Trusts. Those who had attended provided feedback.

Winter Pressures

Mrs Adger provided feedback from the last meeting of the Board/Inter Trust and Primary Care Pressures Group Meeting. She particularly drew attention to the approval for a discharge

lounge to be provided in Causeway and Antrim Hospitals and to the pay anomaly within the nursing profession.

96/03 **CORRESPONDENCE**

The Chairman referred to the correspondence list circulated with the agenda.

Mr Graham referred to some additional items of correspondence:

- DHSSPS Proposal for a Draft Primary Medical Services (NI) Order in Council
- Advance Notice of the DHSSPS's Intent to establish HPSS Research Ethics Committees for Northern Ireland

97/03 **OTHER BUSINESS**

Pharmacy Outlet

Mrs Drummond enquired if the Council would be in a position to support a new Pharmacy outlet.

Mr Creighton confirmed that all such applications must be made to the Northern Health and Social Services Board for approval.

98/03 **DATE OF NEXT MEETING**

The next meeting will be held on Wednesday 5 November 2003 in the Moyle Council area.

The meeting closed at 4.56pm.

Chairman

Secretary

Date

