

NORTHERN HEALTH AND SOCIAL SERVICES COUNCIL

Minutes of a meeting of the Northern Health and Social Services Council held at 1.30pm in the Willowbank Business Park, Willowbank Road, Millbrook, Larne on Wednesday 6 April 2005.

PRESENT:

In the Chair: Mr T Creighton

Members: Mrs M Anderson Professor G Kernohan
Ms R Armstrong Mr J Millar
Mr P Boyle Mrs J Montgomery
Mrs J Drummond Mr R Montgomery
Mrs D Hamill Mrs C McCambridge
Mrs I Johnston Mr M Nolan
Mrs L Johnston Mr I Stevenson

In Attendance: Mr N Graham
Mrs J Erwin
Dr M Devine – Agenda Item 5
Mr A Macarthur, Antrim and Ballymena Local
Health and Social Care Group

36/05 **APOLOGIES**

Apologies were received from Mrs Adger, Mrs Baker, Mrs Beattie, Mrs Morrison and Mr T Nicholl.

37/05 **CHAIRMAN'S BUSINESS**

Mrs Drummond welcomed members to the Larne Borough Council area on behalf of the Mayor, Councillor Roy Craig who had sent his apologies.

Mr Creighton thanked Mrs Drummond for attending the United Hospitals Trust Board meeting on his behalf and commented upon his attendance at meetings of the Health and Social Services Councils Working Group and with Dalriada Urgent Care.

38/05 **MINUTES OF THE MEETING HELD ON 2 MARCH 2005**

The minutes were agreed and signed.

39/05 **MATTERS ARISING FROM MEETING OF 2 MARCH 2005**

30/05 Avian Flu

Members had sought information on the planning within Northern Board for dealing with such an outbreak. Mr Graham had written to Professor Watson, Director of Public Health, NHSSB. He advised that clearly pandemic influenza would have a major impact on the health and welfare of the population and that work is currently underway to plan for such an eventuality. This work is being developed by a multidisciplinary group with representation from Board, Trusts, Primary Care and Northern Ireland Ambulance Service. An invitation was extended to the Council to have representation on the group and this was accepted by Mr Millar. The next meeting would be held on Tuesday 14 June 2005. Mr Graham would enquire if any other user representation would be sought.

31/05 Homefirst Community Trust Draft Strategy

Members had agreed to be represented at a consultation event, however, this had been postponed as the Trust was not satisfied that the strategy was ready for consultation. Individual requests for one to one meetings would proceed as the Trust would welcome the opportunity to hear views which might inform the strategy development.

34/05 Sudan 1

Mrs I Johnston had enquired about what assurances were being given to the public that food is now completely safe and free from Sudan 1. Mr Graham had written to both Professor Watson, Director of Public Health, NHSSB and the Food Standards Agency.

The Food Standards Agency had advised that because of the levels of exposure involved, the risk is very low and no groups, whether young, in hospital, elderly or pregnant are exposed to anything other than a very small risk. With regard to contacting households directly, the Agency has a number of mechanisms for communicating with the public such as via the media, the internet and a free text message service. In addition the Agency makes public health information available through Health and Social Services Boards, who then are able to disseminate this to relevant interested parties in their areas.

The Agency has also been working closely with environmental health officials in local authorities.

Advice prepared by the Agency in relation to consumer concerns would be copied to members.

Dr Devine, Consultant in Communicable Disease Control, NHSSB, had advised that the letter sent to the NHSSB had been referred to the Food Standards Agency so it was likely that a similar response would be given.

40/05

PRESENTATION – OVERVIEW OF CHILDHOOD IMMUNIZATION AND INFLUENZA VIRUS, INCLUDING AVIAN FLU

Mr Creighton welcomed Dr Devine, Consultant in Communicable Disease Control, NHSSB, to the meeting.

When talking about childhood immunization Dr Devine listed the vaccine preventable diseases as being measles, mumps, rubella, diphtheria, tetanus, pertussis (whooping cough), polio, HIB (Haemophilus Influenza Type b, a bacteria infection which causes meningitis), Meningitis C and influenza. He particularly commented upon uptake of MMR (measles, mumps and rubella), pertussis and HIB in each of the 10 District and Borough Council areas covered by the NHSSB. Uptake rates were higher for pertussis and HIB than for MMR.

The overall uptake of MMR among children reaching their second birthday during the final quarter of 2004 was 88.2%. The uptake was highest in Ballymoney (94%) and Magherafelt (94%). Uptake rates were lowest in Antrim (86.3%) and Newtownabbey (80%).

The HIB vaccine was introduced in 1993 and has led to a significant decrease in the number of laboratory reports of Haemophilus Influenza Type b.

Dr Devine referred to various types of influenza viral infections and to the difficulty in containing them. He explained that the avian influenza was found naturally in and transmitted by wild ducks and that domestic poultry was very susceptible. There are ongoing outbreaks in poultry in Asia, evidence of human infections and speculation over human to human transmission. There must first be a virus before a vaccine can be developed, so there is no vaccine as yet for global production.

There are three requisites for a human influenza pandemic. The emergence of a new influenza strain to which the population has little or no immunity and no currently available effective vaccine, the existence of a virus able to replicate in humans and cause disease and efficient human to human transmission. The latter hasn't happened yet.

Commenting upon the current flu vaccine uptake rates Dr Devine said the 2004/05 targets set by the DHSSPS had been achieved in the NHSSB area and stressed the need to maintain uptake rates as previous vaccinations give some benefit.

Dr Devine then outlined the need to develop pandemic plans to ensure that staff know what to expect when the World Health Organisation announces a newly emergent pandemic strain of influenza. Plans would include what to do to minimise spread, reduce morbidity and mortality, how to cope with large numbers of ill people at home, in the community and in hospital and how to maintain the most essential services. The DHSSPS has already produced a Northern Ireland Interim Influenza Pandemic Plan and the Northern Board has established a multidisciplinary group.

A question and answer session followed. Mr Graham asked if the threat from SARS had gone away and was advised that it remained an important issue and the work done for it was being built upon in addressing avian flu.

Mrs McCambridge sought information on recent media coverage in relation to an outbreak of mumps. Dr Devine explained that the outbreak was among young people most of whom are aged between 16 and 23 years old. Most people in this age group would have only received one dose of MMR, as they received their vaccination before two doses of MMR were introduced for all children. Many of them received a booster against measles and rubella in a special vaccination campaign in November 1994 but did not receive a booster protection against mumps infection at that time. Arrangements have been put in place to enable those in the affected age groups to receive two doses of MMR.

Mrs Montgomery referred to the launch of a recent report discrediting a link between MMR and autism and asked what the NHSSB was doing to maximise this information. Dr Devine confirmed that the MMR vaccination was safe and effective but

did not feel it beneficial to rekindle this issue. The recent mumps outbreak had resulted in an increase in numbers seeking vaccination.

Professor Kernohan asked how the Council could support Dr Devine in his work. Dr Devine asked that through the media the Council comment on MMR vaccination uptake rates and assure the public about its importance.

Mr Graham suggested several reasons as to why uptake of the MMR vaccination can be low. Dr Devine explained that the whole ethos of the immunisation programme was voluntary and that the Board had an obligation to ensure that parents can make an informed choice.

Mrs Montgomery asked if a single vaccine was available and if so if it had to be paid for. Dr Devine explained that the policy was to use the MMR vaccine and that since it is safe he did not think the Board had an obligation to provide an alternative untested treatment.

Mr Creighton asked if there was an increase in tuberculosis (TB) and Mrs I Johnston enquired if there were cases in Northern Ireland. Dr Devine said there was no significant increase, however, a small number of cases do exist and a policy is being developed in the NHSSB area. Generally it is a reactivation of old tuberculosis. Arrangements are in place to offer TB screening at the point of arrival in Northern Ireland and such screening would be automatic for health care workers. Ms Armstrong referred to the numbers of healthcare workers coming into the independent sector with a medical report and x-rays but who are not required to be part of the NHS screening process. Dr Devine said that people coming in to NI to work through Heathrow and Gatwick Airports must go through the system and any cases would be notified to the NHSSB. People, however, are not policed as they move around.

Mrs L Johnston highlighted a problem with sickness as a result of having eaten frozen chickens from Asia. Dr Devine explained that District/Borough Councils and the Food Standards Agency were the bodies responsible for food safety and that frozen food from abroad had not featured as a problem.

On behalf of members Mr Creighton thanked Dr Devine for his informative presentation.

Members raised a number of issues following the presentation. These included the lack of communication between statutory bodies and with the independent sector, the absence of any sense of accountability in terms of screening for tuberculosis and the inequity that exists in accessing occupational health services.

41/05 **VISITING**

Visiting Programme – April

Arrangements were made for visits to Mountfern Adult Centre, Coleraine and Drumross Adult Centre, Newtownabbey.

Visiting Reports

Rathmoyle Resource Centre, Ballycastle

Rathmoyle is a 55 place Centre which provides day support services for people with learning difficulties, physical disability and sensory impairment, mental health problems and elderly. Opened in 1976, it developed over the years into a specialised centre providing high quality services for adults with a wide range of abilities/disabilities.

Mrs Morrison and Mr Stevenson had visited Rathmoyle Resource Centre. Reporting on the visit Mr Stevenson referred to the variety of activities offered throughout the day, both in the unit and outside. They include swimming, 10 pin bowling, football, horse riding, pool, darts, hockey, bingo, drama and quizzes. A range of therapeutic and sensory stimulation activities are also offered.

The horticultural centre and garden are a real asset and staff were commended for their obvious enthusiasm.

A number of problems, however, were identified and would be raised with Causeway Trust. These included the need for toilets to be upgraded, to include the provision of a toilet for disabled persons and inadequate car-parking space. Some rooms need to be enlarged and door ways need to be widened to facilitate wheelchairs.

Ms Armstrong hoped many of the problems would be addressed with the introduction of new standards and

monitoring by the Health and Personal Social Services Regulation and Improvement Authority.

Glenmona Resource Centre, Cushendun

Glenmona occupies a National Trust property. In 1956 County Antrim Welfare Committee established a residential home on site. In 1991 Glenmona ceased providing residential care and developed day care services in response to identified local needs.

Mrs Anderson, Mrs I Johnston and Mr Millar had visited the Resource Centre. Particular issues raised had included the physical state of the building, its inadequacy for people in wheelchairs and the use of the facility by young men with mental health problems. Mrs Hamill was shocked that young men had to avail of this type of facility. This issue would be raised with NHSSB. Mrs McCambridge cited the positive experience of a relative who attends the Centre.

The team would meet to agree the final content of the report. The report would then be forwarded to Causeway Trust.

Elderly Care Wards, Whiteabbey Hospital

This report would be copied to members and considered at the May Council Meeting.

42/05 TO CONSIDER BUSINESS OF COMMITTEE MEETING

Administration Committee – 10 March 2005

Members had heard details of a meeting between the Chief Officer, the Chairman, NHSSB representatives and Dalriada Urgent Care (DUC) representatives. Discussion had surrounded the setting up of the mutual society and the composition of the Steering Council. A note of the meeting had been prepared by Mr Graham, agreed by the Committee and forwarded to DUC. Following a subsequent DUC Steering Council meeting a letter was received by NHSSC inviting anyone interested in lay membership on the Steering Council to register an interest with the Company Secretary. It was clearly understood by NHSSC and DUC that any individual selected

would attend in their own right and not as a representative of NHSSC.

Members were reminded that Casualty Watch would take place on 20/21 May 2005 in the Mid-Ulster Hospital, Magherafelt. Members were invited to complete a pro-forma advising staff of their availability.

To save time at the Council meeting Mrs I Johnston had suggested at the Committee meeting that visiting reports be sent to Council staff, copied and issued to members with the agenda and papers for the Council meeting. Several members called for the pro-forma to be revised and it was agreed that further discussion was required on this issue. Members were invited to forward any suggestions for improvement to Council staff.

To allow the Council meeting to proceed uninterrupted and allow adequate time for normal Council business to be completed in advance of any presentation lunch would be available between 1.00pm and 1.25pm and any speaker giving a presentation would be invited along at 3.00pm.

43/05 **TO CONSIDER AGENDA ITEMS FOR JOINT MEETING WITH UNITED HOSPITALS TRUST BOARD**

The joint meeting between Council and United Hospitals Trust Board members would be held on Thursday 28 April 2005 at 1.00pm in the Post Graduate Conference Room 1, Braid Valley Hospital, Ballymena. Suggested agenda items included delayed discharges and medical outliers, Developing Better Services, Priorities for Action Targets 2004/05 and updates on fracture services at Antrim Hospital, Endoscopy Review Recommendations, Human Organs Enquiry Recommendations and Pain Relief Clinic at Antrim Hospital.

The joint meeting between Council and Northern Health and Social Services Board members would be held on Wednesday 22 June 2005 at 2.00pm in Committee Room 2, County Hall, Ballymena. Issues would be discussed at a future Council meeting.

The joint meeting between Council and Causeway Trust Board members would be held on Monday 27 June 2005.

44/05 **CONSULTATION ON A HEALTHIER FUTURE – A TWENTY YEAR VISION FOR HEALTH AND WELLBEING IN NORTHERN IRELAND 2005-2025**

The new regional strategy for health and wellbeing presents a vision of how health and social services will develop in Northern Ireland over the next 20 years. It covers issues such as promoting health and wellbeing, protecting and caring for the most vulnerable, delivering services effectively and efficiently with the available resources and closer working between all of the people and organisations who influence health and wellbeing.

Due to the delay in obtaining copies of the document Mr Graham reported that he had responded on behalf of the Council supporting the overall aim of improving the physical and mental health and social wellbeing of the people of Northern Ireland. The response would be copied to members.

45/05 **CONSULTATION ON THE REVIEW OF PUBLIC ADMINISTRATION IN NORTHERN IRELAND**

This document sets out proposals for a major reform of public administration in Northern Ireland designed to transform the way in which public services are developed, organised and delivered, with a view to enhancing both political and financial accountability, as well as improving efficiency and cost effectiveness.

A summary was distributed to members. It was pointed out that there was no significant change to the Department and members asked that other Council support be enlisted to raise this.

46/05 **CORRESPONDENCE**

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

Professor Kernohan and Mr Millar accepted an invitation to attend Arthritis Care's Annual Conference on Friday 13 May 2005 in the Rosspark Hotel, Kells.

Additional items of correspondence included:

- Invitation from FRIENDS group to launch of a report on The Needs of Children and Adults with Special Needs in the Glens Area on 14 April 2005 – Mr Graham and Mrs McCambridge agreed to attend
- Invitation from the Northern Essence of Care Project to a conference on 10 May 2005
- Letter from DHSSPS re: NHSSC budget for 2005/06

47/05 **OTHER BUSINESS**

Advisory Council of NI Cancer Registry

Professor Kernohan agreed to deputise for Mrs Anderson at the next meeting.

Shannon Clinic

Mrs Anderson, Mrs I Johnston, Mr Millar and Mr Graham reported on their visit to the recently opened Shannon Clinic. This is a 34 bed mental health inpatient unit which will provide a regional inpatient service for people with mental illness who require intensive psychiatric treatment and rehabilitation within a structured secure therapeutic environment. The Clinic will be the medium secure unit in Northern Ireland and will form part of the regional network of forensic mental health services which are currently being developed. It will take referrals from special hospitals, courts and prisons, psychiatric intensive care units and community forensic mental health teams. Several concerns raised by members included the possibility of high secure patients being returned to Northern Ireland and downgraded to medium secure status, the layout of the building and staffing.

Eating Disorders

Ms Armstrong drew attention to recent media coverage in relation to the withdrawal of funding for a Belfast eating disorder drop-in centre. Further information would be sought.

48/05 **DATE OF NEXT MEETING**

The next meeting will be held on Wednesday 4 May 2005 in the Magherafelt District Council area.

The meeting closed at 4.35pm.

Chairman

Secretary

Date