

NORTHERN HEALTH AND SOCIAL SERVICES COUNCIL

Minutes of a meeting of the Northern Health and Social Services Council held at 1.30pm in Carrickfergus Enterprise on Wednesday 1 March 2006.

PRESENT:

In the Chair: Mr T Creighton

Members: Mrs M Anderson Mr M Nolan
Mr J Brown Mr T Quinn
Prof G Kernohan Mrs K Swain
Mr J Millar Mr A Wilson
Mr S McClland

In Attendance: Mr N Graham
Mrs J Erwin
Member of the Public

28/06 **APOLOGIES**

Apologies were received from Mrs Adger, Ms Armstrong, Mrs I Johnston, Mrs L Johnston, Mr Kinahan, Mrs Morrison, Mrs McCambridge, Mrs McClelland, Mrs McEldowney, Mr Nicholl and Mr Stevenson.

29/06 **CHAIRMAN'S BUSINESS**

Agreement was obtained to continue the business of the meeting should a quorum not be maintained.

The Chairman welcomed a member of the public to the meeting then commented upon his attendance at a range of meetings and events. These included Homefirst Community Trust Quality Conference, United Hospitals Trust Board Meeting, Northern Health and Social Services Board Meeting, the Health and Social Services Councils' Executive Committee and United Hospitals Trust representatives.

Mr Creighton informed the meeting that Mr Mitchell, Chief Executive of United Hospitals Trust had announced that he was taking voluntary early retirement with effect from 31 May 2006.

30/06 **CHIEF OFFICER'S REPORT**

Breast Screening Services, Antrim Hospital

Mr Graham reported that he and the Chairman had met, the previous day, with United Hospitals Trust representatives to discuss the situation with the breast screening services at Antrim Hospital.

A new Radiologist took up post in February, however, as there remains only one radiologist breast screening services are currently suspended in the Northern Board area. Mr Brown voiced deep concern and enquired about the timescale. Mr Graham referred to the difficulty in recruiting Radiologists and advised that the Department of Health, Social Services and Public Safety has requested the situation be reviewed as a matter of urgency. Also the Chief Executives of the four Health and Social Services Boards have been asked to consider the breast imaging service for Northern Ireland and report by June.

Members agreed with Mr Brown's suggestion that the Council write to the Department of Health, Social Services and Public Safety requesting details of planned action to include workforce planning initiatives in terms of Radiologists.

Symptomatic clinics continue and items of new equipment are on order.

Individual reports are being prepared on the fourteen women who were patients at Antrim Hospital and whose breast cancer diagnosis had been delayed.

The investigation by the Health and Social Services Regulation and Quality Improvement Authority into the circumstances surrounding this matter is ongoing and its report should be with the Minister in March.

Service Changes at Mid-Ulster and Whiteabbey Hospitals

Mr Graham also reported that United Hospitals Trust had taken a decision to go out to consultation on service changes at Mid-Ulster and Whiteabbey Hospitals. These relate to unacceptable degrees of risk and the Council understands that the proposals are supported by senior medical staff. A copy of the Trust's press release, summarising the proposals was circulated to members and a copy of the consultative document would be issued to them shortly.

Mr Quinn voiced the concern, shock and disappointment of residents in the Mid-Ulster area and indicated that Cookstown and Magherafelt District Councils would be agreeing an action plan.

Mr McClelland stressed the need for residents of both areas to be fully aware of the implications of the proposals and alternative provision.

Patient and Client Council

The first meeting of the Patient Client Council Working Group would be on Friday 10 March 2006 and members would have the opportunity to hear feedback on progress at a session organised for Thursday 13 April 2006.

Mr Graham reminded the meeting that there remained a lot of action from the joint Councils' Conference and advised that normal Council business may be interrupted as work on the new Patient Client Council continues and preparations are made for the office relocation.

Mr Graham also updated members on the current position with staffing cover and the Agenda for Change process.

31/06 **MINUTES OF THE MEETING HELD ON 1 FEBRUARY 2006**

The minutes were agreed and signed.

32/06 **MATTERS ARISING FROM MEETING OF 1 FEBRUARY 2006**

18/06 Integrated Clinical Assessment and Treatment Services (ICATS)

No date had yet been agreed for the first meeting of the ICATS Public Awareness Group.

18/06 Department of Health, Social Services and Public Safety Consultation on the Primary Dental Care Strategy

Several members commented upon their attendance at roadshows organised by the Northern Health and Social Services Board's Head of Dental Services, Mr Donaldson.

Work done by the Southern Health and Social Services Council in the southern area on the experience of using the general dental service would be incorporated in a joint Council response.

Mr Millar referred to a recent newspaper article which indicated that dentists in England were opposing the Government's offer. He would contact Mr Donaldson for an update.

18/06 Remuneration of Local Health and Social Care Group Management Board Members

The Chief Officer communicated clarification from Mr MacDonnell, the Chief Executive of the Northern Health and Social Services Board on the potential for conflict of interests for members of the Local Health and Social Care Group Management Boards.

The potential for conflict of interests is particularly pertinent in respect of decisions in relation to the application of funding for voluntary or community organisations and, where any member has an interest in any such organisation. It has been made clear that members should not participate in the decision-making process where they have a specific interest. In certain instances, while members must declare a conflict of interest, they may be involved in discussions around any points of clarification but cannot participate in any further decision-making discussion.

18/06 Proposed Relocation of Whitehouse Medical Practice

Mr Millar updated members on the proposal by Whitehouse Medical Practice to relocate its surgeries from the Whitewell Road to the Abbey Centre at Newtownabbey.

A final Business Case would be considered by the Northern Health and Social Services Board and a decision was likely to be taken in March.

20/06 Presentation on Ambulance Services

Mr Graham shared the content of a written response from the Northern Ireland Ambulance Service to questions raised by members prior to the presentation at the previous Council meeting. Areas covered included ambulance activity, fleet and a specific incident relating to an emergency call.

Mr Brown confirmed that he had obtained the consent of the family to pursue a complaint in relation to the specific incident, however, wished to express his dissatisfaction at the lack of operational information from the Northern Ireland Ambulance

Service which restricts the ability of the NHSSC to take the matter further.

Mr Millar sought a detailed breakdown of type and age of fleet and Mr Brown questioned the validity and value of purchasing rapid response vehicles as opposed to replacing those vehicles outside the guidelines.

Mr Millar agreed to draw up a list of issues for discussion with Mr Deboys, Director of Information, Risk and Performance Management, Northern Health and Social Services Board.

26/06 Dalriada Urgent Care

No further information had been received from Ms Armstrong in relation to the issue raised at the last meeting.

Homefirst Community Trust Review of Mental Health Services for Older People Workshop – 26 October 2005

The Council had drawn attention to the fact that the private sector had not been invited to a workshop organised by Homefirst Community Trust.

In a response the Trust pointed out that initially the workshop was intended for the independent sector as a whole, however, in the event it was considered that key partnering issues to be discussed were largely relevant to the voluntary sector. Consequently the invitation was limited to a range of voluntary organisations from the overall independent sector.

An invitation had been extended to the NHSSC and two members attended in that capacity.

Further consultation with a full range of stakeholders is planned for the draft strategy and this will include the independent sector both voluntary and private.

33/06 VISITING

April Visits

Arrangements were made for visits to The Brook, Coleraine and Ballybrakes Equipment Store, Ballymoney.

Visit Report

The reports on the visits to The Frocess Medical Centre, Cloughmills and Ballymena Health Centre were deferred to the April meeting.

Hawthorns Adult Centre

Mr McClelland reported on his and Mrs Swain's visit to Hawthorns Adult Centre. Initially a 50 place unit, the numbers have increased over recent years and now 74 clients attend. In view of this the visiting team would recommend a third bus be provided.

The Adult Centre aims to promote independence, respect, broaden choices and options, raise self-esteem and confidence by providing support and opportunities for each client. With care and support from staff this appears to be successfully taking place.

The flooring in the Intensive Support unit is bubbled and worn. In the interests of hygiene and safety this should be replaced and the floor in the dining room also requires attention.

The central hall is currently painted in a dark colour and the visiting team felt a light colour would make the whole building brighter and more open.

Money raised by a local voluntary group is earmarked for the purchase of touch screen computers to assist in the development of essential skills, however, the visiting team would encourage the Trust to also purchase a number of these.

The report would be shared with Homefirst Community Trust.

Visit Responses

Lynwood, Newtownabbey

Homefirst Community Trust Chief Executive thanked the visiting team for the very positive report and welcomed the comments and suggestions made.

Braid Valley Hospital, Ballymena

During the visit to the Braid Valley Hospital several concerns had been raised by the visiting team. In responding United Hospitals Trust agreed that the facilities are far from optimum,

with deficiencies in facilities having been acknowledged and well documented by the Trust. Given the age of the building full resolution of these deficiencies can only be obtained with the implementation of Developing Better Services as outlined in the Northern Health and Social Services Board's document 'All our Futures'. However, the Trust is committed to doing what can reasonably be achieved as an interim solution to ensure that patients and staff are not compromised while awaiting future development. To this end the Trust is currently drawing up plans to achieve improvements in both bathing/shower facilities and bed spacing.

The Trust is also working closely with Homefirst Trust and the Northern Health and Social Services Board to agree an action plan to ensure sustained reductions in the number of patients remaining in hospital once assessed as medically fit for discharge.

The Trust thanked the Council for the comprehensive report and would keep it informed of progress.

34/06 **TO CONSIDER JOINT COUNCIL/TRUST BOARD MEETINGS**

The joint meeting with Homefirst Community Trust would be held on Thursday 27 April 2006 at 11.00am in Trust headquarters. Agenda items would be considered at the April Council meeting.

Proposed items for discussion with other Trusts and the Northern Health and Social Services Board would be considered and the need to hold further joint meetings discussed.

35/06 **CONSULTATION ON UNITED HOSPITALS POLICY ON PAY CAR PARKING AT ANTRIM HOSPITAL**

Members debated the draft policy on the introduction of pay car parking at Antrim Hospital.

Mr Wilson expressed concern that the location of Antrim Hospital, the widespread catchment area and the lack of frequent public transport services meant that the majority of patients and visitors relied on private cars.

Mr Nolan drew attention to the time taken to complete assessment, tests and treatment where there was a move to do as much of this on a single visit. This could entail lengthier

stays for some patients which would incur a greater parking charge.

Reference was made to the difficulties at peak times when the car parks at the hospital are full and there is overspill onto the access routes and it was feared there could be a potential misuse of parking when slip roads are provided from the hospital to the M2.

Mr Quinn felt every effort should be made by the Trust to encourage staff to park in the staff car park at the rear of the hospital. He also drew attention to costs incurred if visiting a sick relative over a lengthy period and members felt that there needed to be more clarification on where discretion lay whereby senior nursing staff could waive charges. There was also little by way of explanation as to how those on benefits could park without charge and how this would operate in practice.

Mr McClelland highlighted the benefits of a charging system such as increased security for vehicles and improvements for security generally within the hospital and indicated that charging took place at some other acute hospitals. It was pointed out that the Trust should guarantee that income raised remain and be used within the Trust to improve patient care.

The proposed charges in the document were based on DoE charges with a fifteen minute drop off period. Mr Brown suggested that the Trust should offer a free period which extended for a longer time, possibly one hour, before any charge was incurred.

Mr Graham would incorporate comments and concerns together with any others submitted by members not present in a response to the Trust by the closing date of the consultation.

36/06 **JOINT COUNCIL POLICY DOCUMENTS**

Consideration of the Joint Council policies on Representation on Committees and on Consultation was deferred to the April Council meeting.

37/06 **REPORT FROM:**

Joint Health and Social Services Council's Conference

Mr Wilson said that the conference was worthwhile but felt some disappointment about no clear sense of direction for the Patient Client Council. It was acknowledged that this would now be a task for the PCC Project Team and Mr Graham reminded members of the opportunity to hear feedback about this work at a session organised for 13 April 2006.

38/06 **CORRESPONDENCE**

The correspondence list had been circulated with the agenda.

The Chief Officer would respond, on behalf of members, to the Homefirst Community Trust consultation on Policy on the Use of Restrictive Physical Interventions.

Mr Millar drew attention to the letter from Green Park Healthcare Trust announcing the relocation of neurorehabilitation services to the purpose built Regional Acquired Brain Injury Unit at Musgrave Park Hospital and suggested a future visit be requested.

Additional items of correspondence included:

- Letter from NI Chest, Heart and Stroke Association re: change of name to NI Chest, Heart and Stroke
- Southern Health and Social Services Council Minutes of 17 January 2006
- Invitation to Arthritis Care Northern Ireland's Annual Conference on Friday 19 May 2006 in the Glenavon House Hotel, Cookstown. Mr Millar to attend.

39/06 **OTHER BUSINESS**

Martha McMenimon Memorial Scholarship

Mrs Anderson drew attention to the availability of this Scholarship.

40/06 **DATE OF NEXT MEETING**

The next meeting will be held on Wednesday 5 April 2006 in the Newtownabbey Borough Council area.

The meeting closed at 4.23pm.

Chairman

Secretary

Date