

NORTHERN HEALTH AND SOCIAL SERVICES COUNCIL

Minutes of a meeting of the Northern Health and Social Services Council held at 1.30pm in Ballymena Business Development Centre on Wednesday 5 November 2008.

PRESENT:

In the Chair: Mr Tom Creighton

<u>Members:</u>	Mrs Beth Adger	Mrs Noreen McClelland
	Mrs Maureen Anderson	Mr Sam McClelland
	Mr Jim Brown	Mr Tommy Nicholl
	Mrs Irene Johnston	Mr Mark Nolan
	Prof George Kernohan	Mr Ian Stevenson
	Mr John Millar	Mrs Kate Swain
	Mrs Rae Morrison	

In Attendance: Mr Noel Graham
Mrs Jacqui Erwin
Member of the public

88/08 **APOLOGIES**

Apologies were received from Ms Armstrong, Mrs Montgomery, Mr Quinn and Mr Wilson.

89/08 **CHAIRMAN'S BUSINESS**

The Chairman welcomed a member of the public to the meeting and welcomed Mr Nolan back after his period in hospital. On behalf of members he offered condolences to the Chief Officer on the recent death of his mother. The Chief Officer thanked members for their messages of sympathy.

Mr Creighton reported on his attendance at a meeting of the Modernisation and Improvement Programme Board where it had been reported that the handover to the new Patient and Client Council was progressing well. A workshop, to be held on 20 November 2008, would provide delegates with the opportunity to discuss key themes in relation to the implementation of the changes and ensure that there is a consistent approach across the range of reform and modernisation projects. At the Northern Health and Social Care Trust Board meeting discussion had taken place on efficiency savings and the care of patients in Orchard Manor Care Home, Antrim. Mr Creighton offered to follow-up an issue raised by Mrs Adger at the next Trust Board meeting.

90/08 **MINUTES OF THE MEETING HELD ON 8 OCTOBER 2008**

The minutes were agreed and signed.

91/08 **MATTERS ARISING FROM MEETING OF 8 OCTOBER 2008**

80/08 Complaints

Issues relating to the impact on Health and Social Services Councils resources in terms of dealing with prisoner complaints about health and social care remained unresolved. A meeting had been requested with the South Eastern Health and Social Care Trust and Council Information/Complaints Officers were compiling a composite list of areas which needed addressed.

80/08 Prescriptions

Topping-up Prescribed Drugs

Members drew attention to the new package of measures announced for England, which overturns the ban on patients paying for drugs while accessing NHS care and wondered if this would be passed on to Northern Ireland.

Free Prescriptions

Issues raised in relation to the abolition of prescription charges had been drawn to the attention of Dr Morrow, Chief Pharmaceutical Officer at the Department of Health, Social Services and Public Safety. A response was awaited.

Minor Ailments Scheme

The Chief Officer had sought an update from Dr Morrison, the Northern Health and Social Services Board's Director Pharmaceutical Services, on the position with the Minor Ailments Scheme.

Dr Morrison explained that the Scheme was set up in 2005. Provision for additional ailments such as diarrhoea, head-lice and athlete's foot was introduced during the summer, along with enhanced payments for pharmacists. He pointed out that the service had not been withdrawn by the Department of Health, Social Services and Public Safety but that most community pharmacists across Northern Ireland have refused to operate the

enhanced scheme. Four pharmacists are currently participating in the Northern Board area.

Dr Morrison shared a recent statement from the Health Minister in which he stated that the Scheme remains available to community pharmacists and that he has been proactive in encouraging pharmacists to join. The Minister had agreed to consider a number of points raised at a meeting with the Pharmaceutical Contractors Committee. A further meeting had been scheduled at which the way forward would be discussed.

80/08 Rheumatoid Arthritis

The issue of parity in the provision of rheumatoid arthritis drugs here and in the Republic of Ireland had been raised with Dr Morrow, Chief Pharmaceutical Officer at the Department of Health, Social Services and Public Safety. A response was awaited.

80/08 Palliative Care Unit, Antrim Hospital

The Northern Health and Social Services Board had been asked to provide the Council with regular updates on the progress of the Business Case and details of any further developments relating to the provision of a palliative care unit at Antrim Hospital.

83/08 Joint Council Event – Visit to NI Assembly

Members and staff from the four Health and Social Services Councils had visited Parliament Buildings on Wednesday 22 October 2008 to learn about the work of the Assembly and to meet the health spokespersons for the main political parties.

The limited knowledge about the new Patient and Client Council was highlighted, however, the Chief Officer pointed out that this would be detailed in the secondary legislation.

80/08 GP Referrals

Mrs McClelland sought clarification on whether the reason why patients from the Antrim area were being referred to out-patient clinics in Magherafelt and Whiteabbey was being communicated to them.

Members agreed to accept the offer of a presentation by the Northern Health and Social Care Trust's Patient Services General Manager.

86/08 Choice of Nursing Homes

It had been established that the change in policy by the Northern Health and Social Care Trust which would limit a person's choice of Nursing Homes stemmed from a Delayed Discharges Related to Patient Choice – Regional Protocol issued by the Department of Health, Social Services and Public Safety in December 2004 whereby Trusts were required to develop their own detailed procedures and fully implement by March 2005.

92/08 **CHIEF OFFICER'S REPORT**

Accountability Review

The next Accountability Review meeting would be held on Tuesday 25 November 2008. Representatives from the Department of Health, Social Services and Public Safety would review progress on the Council's Annual Work Plan and joint Council objectives for 2008/2009.

Mr Graham reminded members that one of the joint Council objectives was to engage with the Trust on its proposals to meet targets and efficiency savings. He explained that he had not accepted an invitation to participate in the Trust's Comprehensive Spending Review Programme Board as the Council had an obligation to challenge the Trust about its decisions.

The Northern Health and Social Care Trust had now produced its Strategic Response to the Comprehensive Spending Review 2008-2011 and members had been invited to comment on any equality impact of the proposals.

Northern Ireland Ambulance Service

Representatives from the Northern Ireland Ambulance Service would be invited to meet with Council members early in the new year.

Final Joint Council Forum

Members were reminded to return their booking forms for the Final Joint Council Forum to be held on 26 and 27 February 2009.

Expenditure

Expenditure to the end of September 2008 was £86,633.

The Chief Officer informed members that work within the three workstreams was progressing. Particular areas being considered were staffing structures and functions, Standing Orders and Standing Financial Instructions, Workplan for the first year, locations and those areas of work where there is a need to undertake follow-up and/or review from current Council activity and work in progress such as complaints. The Chair appointment had yet to be announced.

Mr Creighton welcomed Dr Flanagan, Director of Medicine and Governance, Northern Health and Social Care Trust to the meeting to provide an update on infection control within the Trust.

Dr Flanagan referred to the Multi Drug Resistant Tuberculosis incident in Causeway Hospital in 2007 and to the subsequent actions taken by the Trust. This included the establishment of a multidisciplinary team, contact with other agencies/organisations and screening. This proved to be a challenging situation, however, following the incident no cases of active TB were identified. There will, however, be ongoing follow up for at least two years of 24 patients with a positive blood test who at some time in the past had been in contact with TB.

Members welcomed the opportunity to raise a number of issues during a question and answer session. Dr Flanagan pointed out that staff had a responsibility to report any health issue, that there was a need to ensure that all relevant health screening was carried out and that regional guidance needed to be developed.

Dr Flanagan then referred to the outbreak of Clostridium Difficile Infection (CDI) within the Trust. He explained that CDI had been a recognised healthcare association infection for many years and that the more virulent type (027) had been associated with outbreaks in Canada and England. Whilst there had been an increase in deaths associated with CDI in the last few years the Northern Health and Social Care Trust usually had lower than the Northern Ireland average. From July 2007 onwards, however, the Trust had seen increased numbers and in September 2007 a case of 027 ribotype was identified. Once the Trust declared an outbreak in January 2008 an outbreak control team was set up and the media notified. An isolation ward was established, enhanced environmental cleaning undertaken and antibiotic use reviewed.

The outbreak was declared over on 31 August 2008. 312 patients acquired CDI from June 2007 to August 2008 and 48 deaths were associated with CDI.

At the Health Minister's request The Regulation and Quality Improvement Authority (RQIA) undertook an independent review of the circumstances contributing to the rates of CDI and identified 027 as the cause of the outbreak, listing pressure on beds, cleaning and use of antibiotics as factors associated with the outbreak. A number of recommendations were made for the Northern Health and Social Care Trust and for Northern Ireland in general.

Having received the final report from RQIA, the Minister felt that two important issues remain unanswered; firstly, how many people died as a result of the outbreak and, secondly, what were the experiences of patients and others who were directly affected by the outbreak? In order to restore public confidence in the safety and quality of healthcare he announced his intention to hold a public inquiry into the outbreak.

Dr Flanagan assured members that meantime a comprehensive HCAI plan has been developed and is being implemented. Staff have been informed not to wear uniforms outside of work, wards have been re-organised to move away from medical outliers, efforts are being made to ensure that patients either stay in hospital for as short a time as possible or avoid hospitalisation altogether and to avoid moving patients between wards. He explained that HCAs are an issue for the whole community and called on the public to adhere to the visiting policy and to hand hygiene. The Trust was taking a zero tolerance to infection control and had written out to all staff to say that it will not tolerate non-compliance.

Members again welcomed the opportunity to ask questions and highlighted the importance of ensuring that the policies and procedures were implemented and monitored. Council views were sought on how the Trust might restore public confidence.

Members took the opportunity to also ask Dr Flanagan about the two maternal deaths in Antrim Hospital which had been the subject of a recent Insight programme. Dr Flanagan explained the causes of the two deaths and confirmed that major changes had since taken place in monitoring of patients. He recognised that the deaths had created major concerns about maternity services.

CONSULTATION ON THE FUTURE OF HEALTH AND SOCIAL CARE SERVICES IN THE NORTHERN TRUST

Members noted the content of the Northern Health and Social Care Trust's vision for the future of health and social care services in the twenty-first century Modernising Health and Social Care Services which outlines the measures needed to realign services in a way that suits the needs of people living in the Trust area. The proposals include developing or enhancing services or restructuring to make more effective use of current resources.

The Chief Officer explained that the Trust was now embarking on an eight-week engagement process to consider the potential impact of the proposals. Details of the changes that the Trust is proposing are included in an overarching Equality Impact Assessment paper 'Strategic Response to the Comprehensive Spending Review 2008-2011.' Once the Trust has received initial views, a second consultation phase, focussing in more detail on individual proposals will run from January to March.

Referring to the Council's commitment to engage with the Trust in relation to its efficiency savings, the Chief Officer suggested that the Trust's Chief Executive be invited to the December Council meeting to present the document. This was agreed by members.

The Trust has identified proposals across its service areas that it considers will, if implemented, contribute to achieving the required savings over the three year period. Since the Trust claims that many of the proposals are not driven by achieving savings but are in keeping with the aims of health and social care to support people to live independently on home, Mr McClelland drew attention to the expense of community care and sought an assurance that buildings would not be wiped out to the detriment of the community.

Mr Brown had raised concerns with the Chief Officer who had confirmed that the Trust proposed to replace five statutory residential units with a range of alternative services as outlined in Section 3 of the over-arching document.

Mr Nolan drew attention to the absence of any reference to the Northern Ireland Ambulance Service indicating that certain changes would inevitably have a significant impact upon the Service.

Members were asked to forward questions to Council staff for submission to Ms Evans in advance of the meeting.

Barn Court Children's Home, Carrickfergus

Following a follow-up visit to Barn Court Children's Home and further to the Northern Health and Social Care Trust's response to the initial visit the Council pointed out that the reference to the placement of a large, log cabin type dwelling within the grounds was intended for staff use, not the children's, to help alleviate pressure on existing facilities.

A further response from Mr Houston, Director Women's and Children's Services/Executive Director Social Work with the Trust indicated that while the provision of a log cabin/portacabin is not currently a pressing priority, it is nevertheless listed as a possibility in the future. The concept behind the cabin, however, would be to offer the opportunity for supervised hobby activities to take place beyond the confined space within the Unit itself. If the cabin is eventually acquired there will be a protocol in place to regulate its use and function. This will take account of any potential safeguarding concerns.

Mr Millar again pointed out the value of such a facility for staff use and Mr Creighton offered to follow this up with Mr Houston.

The Royal College of Psychiatrists – NI Division Launch of 'A Fair Deal for Mental Health: Our Manifesto' – 27 October 2008

The launch marked the beginning of the Royal College's three year Fair Deal for mental health campaign. Over the last twelve months, the College has listened to the issues that matter the most to psychiatrists, the networks of service users and carers and identified eight key areas for change.

Mr Millar would prepare a written report and forward to Council staff for distribution to members.

General Medical Council Consultation Seminar: Confidentiality: A Draft for Consultation – 3 November 2008

Mr Millar attended the Seminar at which views were sought on new guidance for doctors, Confidentiality: A Draft for Consultation, which sets out the principles of confidentiality and respect for patients' privacy that doctors are expected to understand and follow. Alongside the main guidance, the GMC is also consulting on seven

pieces of supplementary guidance. The purpose of the Seminar was to raise awareness of the consultation and to ensure that any issues specific to Northern Ireland are considered in the drafting of the final guidance.

Mr Millar would forward a written report to Council staff for distribution to members.

98/08 **CORRESPONDENCE**

The correspondence list had been circulated with the agenda.

Mr Graham drew attention to the email from Professor Kernohan which brought to the Council's attention reports in various UK papers that cash bonuses were being paid by a number of Primary Care Trusts to family doctors to reduce hospital referrals. The matter had been raised with Dr Harper, the Northern Health and Social Services Board's Director Primary Care, who had confirmed that no such scheme exists in the Northern Health and Social Services Board or in any other part of Northern Ireland to his knowledge.

Additional items of correspondence included:

- Parents and Professionals Autism Northern Ireland Guidance Notes on DHSSPS Action Plan for Autism
- Invitation from British Heart Foundation Northern Ireland to their Annual Meeting on Monday 10 November 2008. Mrs Swain and Mr Stevenson would attend
- Invitation from Northern Health and Social Care Trust to a Personal and Public Involvement Workshop on Friday 14 November 2008. Mr Millar, Mr McClelland, Mrs Adger, Mr Nicholl, Mr Nolan, Mr Brown, Mr Stevenson, Mrs Morrison, Professor Kernohan, Mrs Anderson and Mrs Swain expressed an interest in attending

99/08 **OTHER BUSINESS**

Dalriada Urgent Care Steering Council

Mr Millar advised that he and another individual had resigned as the lay representatives on the Dalriada Urgent Care Steering Council.

100/08 **DATE OF NEXT MEETING**

The next Council Meeting would be held on Wednesday 3 December 2008 in Leighinmohr House Hotel, Ballymena. Refreshments would be available at 10.30am with the meeting commencing at 11.00am.

The meeting closed at 4.10pm.

Chairman

Secretary

Date