

SOUTHERN HEALTH AND SOCIAL SERVICES COUNCIL

**Minutes of the Ninety-third Meeting held in the Offices of Dungannon and South Tyrone
Borough Council on Tuesday 21 November 2000 at 10.00 am**

93/1 PRESENT: Mrs Margaret Campbell
Mr Jim Cavanagh
Mr Robert Cummings
Mrs Roisin Foster, Vice Chairman
Mr Gordon Frazer
Mrs Angela Gray
Mr Joseph Loughran
Mr Jim McCammick
Mrs Mary McNally
Mr Charles Smyth

IN ATTENDANCE: Mr Seamus Magee, Chief Officer
Mrs Nancy Downard, Office Manager
Mr Sean McKeever, Director of Resources and
Contracting, SHSSB and Mrs Rosemary Hulatt, Assistant
Director [for part of the meeting]
Mr Bryce McMurray, Programme Planner, SHSSB [for
part of the meeting]

APOLOGIES: Mrs June Allister
Mrs Joan Baird
Mr Pat Brannigan
Mrs Fionnuala Cook, Chairwoman
Mrs Sue Cunningham
Mr Isaac Hanna

Mr Jim Cavanagh, on behalf of the Dungannon and South Tyrone Borough Council, welcomed members of the Council to the Dungannon area and in particular to the offices of the Borough Council.

In the absence of the Chairwoman, Mrs Fionnuala Cook, the business of the meeting was conducted by the Vice Chairman, Mrs Roisin Foster.

93/2 MINUTES OF PREVIOUS MEETING

Minutes of the previous meeting which were circulated were agreed and signed.

93/3 MATTERS ARISING

1 92/6 Craigavon Area Hospital - Acute Services Pressures

Mr Loughran asked for an update on the closure of a 20 bedded ward in Lurgan Hospital. The Chief Officer informed him that the ward remained closed and that the Board was

endeavouring to source beds from alternative providers including Newry and Mourne HSS Trust. He said there were difficulties in opening additional beds in Daisy Hill Hospital because there was a shortage of nursing staff. He said nurses were not keen to take up posts which only offered temporary, short term contracts. Mrs Campbell said additional funding was required for care in the community which would help alleviate the problems being faced by local hospitals.

Mr Frazer said it was imperative that nurses be recruited on permanent contracts in order to encourage them back into the profession. Mrs Foster commented that because nursing was now an academic profession students who were not of an academic nature were not applying to be trained. Mrs Campbell wondered if the problem could be overcome in the short term by establishing a bank of retired nurses who were still capable and willing to work on a part time basis. It was agreed to ask the Board for further information on the numbers and grades etc of nurses working within its area.

93/4 CHAIRMAN'S BUSINESS

1 Fracture Services

The Chairman read a letter from the Minister for Health, Social Services and Public Safety in response to the Council's letter of 20 September regarding fracture services for patients in the Southern Board's area.

The letter stated that it was a matter of considerable regret to her that any patient, irrespective of which hospital they were in, should have to wait for more than 48 hours for an operation to treat a fracture. It also stated that the Minister had some sympathy with the Council's view that Craigavon Area Hospital should have a fracture service but this was unlikely to be resolved in the short term given the current shortage of orthopaedic surgeons. The Minister referred to a recent meeting between senior officials from her Department and the Professor of Trauma and Orthopaedics, Prof David Marsh to discuss the situation and said that some useful ideas had come out of the meeting. A report would be drawn up setting out what action could be taken to bring about improvements in the response time for treating patients.

Mr Cummings expressed concern about the current state of the fracture service and wondered if Musgrave Park Hospital could not be used in emergency situations to reduce waiting lists. Mr Cavanagh endorsed Mr Cummings suggestion and asked that the Council reply to the Minister stating that members of the Council were disappointed at the contents of her letter, that a clear plan of action must be set out and suggest the intervention from Musgrave Park Hospital.

2 Dermatology Ward - Lurgan Hospital

The Chairman read a letter to members from the Chief Executive of Craigavon Area Hospital, formally advising the Council of temporary bed closures at Lurgan Hospital over the Christmas period. This was due to reduced seasonal demand for inpatient admissions to the Dermatology ward at Lurgan Hospital. The ward would be closed from Friday 22 December 2000 at 1.00 pm to 9.30 am on 2 January 2001. Emergency admissions would be admitted to Ward 1 South at Craigavon Area Hospital.

The letter was noted.

3 Armagh Primary Care Commissioning Group

The Chairman referred members to a letter from the Armagh Primary Care Commissioning Pilot inviting representatives to the official launch of a new counselling service for local people. The launch was scheduled for Tuesday 5 December at 2.00 pm in the Navan Centre, Killylea Road, Armagh. Mr Cummings and Mr Cavanagh agreed to attend.

4 Launch of Report 'Access to Primary Health Care for Single Homeless People'

The Chief Officer informed members of the launch of the Report 'Access to Primary Health Care for Single Homeless People' on Tuesday 5 December at 2.00 pm in the Holiday Inn, Belfast. He said the report had emanated from a joint project undertaken by the four Health and Social Services Councils and the Simon Community (NI). Mrs Campbell expressed an interest in attending and it was agreed to forward her an invitation.

5 Visit to Craigavon Area Hospital

The Chairman reminded members of the visit to Craigavon Area Hospital on Wednesday 22 November at 10.30 am. She said Mr Cummings, Mr Frazer and Mr Hanna had agreed to take part in the visit but it would be appreciated if one or two other members could also make themselves available.

6 SHSSB - Cervical Screening Committee

The Chairman read a letter to members from Dr Lorraine Doherty, Consultant in Public Health Medicine and chair of the Board's Cervical Screening Committee. Dr Doherty said it was noted at a recent meeting that no patient representative was involved in the Committee and asked if someone from the Council could be nominated to join the group. Mr Frazer agreed to be the Council's representative with Mrs Campbell as alternate.

93/5 SHSSC - PRELIMINARY SUBMISSION TO ACUTE HOSPITAL REVIEW GROUP SHSSC 2000/50

The Chairman invited the Chief Officer to present paper SHSSC 2000/50.

The Chief Officer referred members to the Council's preliminary submission on the Acute Hospitals Review Group which was compiled following discussions with members of the sub-group. He informed members that arrangements had been made to meet the Review Group on 15 December at 12.30 pm in the Council's offices. Members would have an opportunity at the meeting to discuss the contents of the submission and to raise any relevant issues.

Mr McCammick joined the meeting

In replying to Mr Cummings question on Managed Clinical Networks, the Chief Officer said the system was being piloted in Scotland and he explained the theory behind it. Mr Cavanagh said he would like more information on Managed Clinical Networks. Mrs

McNally said she had noted the large number of acute and community hospitals in Wales with a population of 3.5 million compared to Northern Ireland with a population of 1.6 million. It was agreed to provide Mr Cavanagh and Mrs McNally with further information.

93/6 SHSSB - WAITING LIST UPDATE

SHSSC 2000/51

The Chairman welcomed Mr Sean McKeever, the Southern Board's Director of Resources and Contracting and Mrs Rosemary Hulatt, Assistant Director to update members on the Southern Board's waiting list

Mrs Hulatt outlined the Board's action plan to address waiting list problems in the Southern Board's area. She provided members with background information and highlighted some of the issues which contributed to the long waiting lists. She said the Board's target for action was to maintain waiting lists at the March level of approximately 10,000 patients with a maximum waiting time of 18 months.

The short term action plan included purchasing a range of work from different providers. This included additional activity in relation to ophthalmology, orthopaedics, the purchase of additional day cases at Craigavon Area Hospital and more ENT and children's services being purchased from the Royal Group of Hospitals. Regarding the transfer programme she reported that cardiac patients were being offered treatment at a private hospital in Glasgow, arthroscopy was being offered at the North West Clinic, Urology at the Mater Hospital and general surgery at the Ulster Clinic and Daisy Hill Hospital. A total of 343 offers had been made and of these 182 had agreed to transfer, 52 were no longer interested, 50 declined, 56 did not respond and 3 were deceased.

In respect of short and longer term approaches, Mrs Hulatt said other initiatives included ophthalmology day cases at South Tyrone, urology day cases at Craigavon, ENT day cases at Daisy Hill Hospital and shared care in urology. Mrs Hulatt said issues to be considered in reducing the waiting list included the scale of the task, the necessity for the Board to have recurring, long term resources, acute pressures, the role of the community and the role of Primary Care.

Mr McKeever and Mrs Hulatt responded to a number of questions from members in relation to up-to-date information on the condition of patients on the waiting list, whether or not patients were given advance notice of being removed from the list and the transfer and treatment of patients to other hospitals.

In reply to a question about operations at the Ulster Clinic, Mr McKeever said consultants from the Southern Board's area would not be permitted to conduct operations on Southern Board residents in the Ulster Clinic. He felt to allow otherwise could be perceived as offering a perverse incentive to consultants to refer more patients to the Ulster Clinic where they would be paid for each operation performed. Mr Cummings and Mrs Campbell were concerned about this development and Mr Smyth commented that hospital consultants should not be using the current waiting list difficulties to make money in this way.

The Council agreed with the Board that the Council was supportive of its approach.

It was agreed the Chief Officer would keep members updated both on waiting lists and progress in tackling winter pressures in the Board's area.

Mr Cavanagh left the meeting at 11.35 am

93/7 SHSSB - CAPITATION FUNDING FORMULA

SHSSC 2000/52

The Chairman asked Mr McKeever to brief members on the Capitation Funding Formula.

Mr McKeever outlined some of the issues surrounding the Capitation Funding Formula. He said the document was very technical and he accepted it was difficult to read and interpret. He said a series of workshops would be held in the Board's area for the benefit of the Local Medical Committee, the District and Borough Councils, the Health and Social Services Council and other organisations and individuals. Further information on the seminars would be made available in the near future.

The Chairman thanked Mr McKeever and Mrs Hulatt and they left the meeting.

93/8 CRAIGAVON AND BANBRIDGE COMMUNITY HSS TRUST - PROPOSALS FOR THE DEVELOPMENT OF A NEW CHILDREN'S HOME IN LURGAN

SHSSC 2000/53

The Chairman invited the Chief Officer to present paper SHSSC 2000/53.

The Chief Officer referred members to the Craigavon and Banbridge Community Trust's consultation document which outlined the proposals for the development of a six place children's home in Lurgan. He said an Equality Impact Assessment had also been provided for consideration. Closing date for comment was 15 January 2001. He invited members to put forward their views on the proposals after which a response would be made to the Trust.

Mrs McNally sought clarification about the age group and the type of resident the home was being planned for. Mrs Gray asked why there was a necessity for the home and if foster parents could not take on such a role.

Mr McCammick said he had concern about the way in which services for children were planned. Regarding the site he said he was unsure if it was appropriate for the facility. He suggested that a sub-group be established within the Council to look at this issue in detail as proposals to spend large amounts of money on such schemes needed to be justified. In respect of the children concerned, Mr McCammick felt that there was an important role for the education authorities as well as health and social services. Mrs Gray said it was important that these children were not stigmatised.

Mr McCammick's proposal to establish a small working group was agreed. Members who agreed to participate in the group comprised, Mrs Campbell, Mr Cavanagh, Mrs Foster, Mrs Gray, Mr McCammick and Mrs McNally. It was agreed to organise a meeting as soon as possible after which a response would be prepared.

**93/9 SHSSB - MENTAL HEALTH - ACUTE TREATMENT SERVICES PROJECT
SHSSC 2000/54**

The Chairman welcomed Mr Bryce McMurray, the Southern Board's Programme Planner to update members on the developments in respect of the Mental Health acute treatment services project.

Mr McMurray informed members that the Southern Board agreed in March 2000 to sponsor a specific project to look at acute treatment services for mental health in the Southern area and he had been asked to take the project forward.

He made reference to the Board's Strategic Development of Mental Health Services for 1997 - 2002 published in 1995 and the mental health specification which was published in 1998. He said some progress had been made but many of the providers and Trusts had identified problems with the different services. He said there was a lack of out of hours services, a lack of community based alternatives to admission to hospital and there was a need to define a model of future service provision.

In relation to the project's stages and timescales, he said the project would be conducted in 3 stages. Stage 1 would define what type of acute services were required for people in an acute crisis situation and this would include consultation with all key stakeholders including Trusts, service users and carer groups, the Council, GPs and District and Borough Councils. The desired outcome would be to agree what type of core components should be provided within an acute treatment service and indicative levels of service required. Stage 2 to be completed by the end of March 2001 would explore the most effective way of providing the services. This would involve external assistance for full option appraisal. At Stage 3 the Board would take into account the views of patients, consider the response to public consultation and work towards implementation of the preferred option depending on available resources.

With regard to the current position, Mr McMurray said meetings had been conducted with service users across the Board's area. Views expressed included the need for out of hours services ranging from a helpline to home treatment services and community based crisis / respite beds; improved information, more involvement of users and carers in care and discharge planning and hospital admission as a last resort.

Views expressed by service providers concerned the under funding of mental health in the area, the requirement for better bed management, the provision of a range of community based alternatives to hospital admission and no further reduction in bed numbers until proven alternatives in preventing admission were in place.

Mrs McNally and Mr Loughran left the meeting at 12.20 pm

Mr McMurray responded to members questions in relation to the cost of the project, the cost of moving patients into the community, short term admissions, the situation regarding beds temporarily removed from Craigavon Area Hospital, the utilisation of research into drug addictions and the process for appointing external consultants.

The Chairman thanked Mr McMurray for his presentation and he left the meeting.

93/10 SHSSC - NINTH ANNUAL REPORT

The Chairman invited the Chief Officer to present the report.

The Chief Officer made reference to the Council's Ninth Annual Report for the year ending 31 March 2000 which had been printed and published. He said the report would be circulated widely to all interested parties.

Mr McCammick congratulated the Council staff on a very comprehensive document. However, he felt the Council needed to be more than a consultative and advisory group. The Chief Officer suggested such views could be directed to the Assembly and local MLAs in any future review of health and social services structures. The report was approved.

93/11 TRUSTS' BUSINESS

SHSSC 2000/55

1 Craigavon Area Hospital Group Trust

Minutes of Trust Board meeting held on 19 September and agenda for meeting on 17 October 2000

93/12 VISITS

1 Daisy Hill Hospital - 24 October 2000

Mr Cummings reported that the visiting team had a very worthwhile visit to Daisy Hill Hospital and were very impressed. He said the dialysis unit was working extremely well and they were also very impressed with the A & E Department.

2 South Tyrone Hospital - 7 November 2000

Mr Cummings said there was striking contrast in the levels of activity between South Tyrone and Daisy Hill Hospitals. He said the team visited the Paediatric ward which had 6 beds for day procedures, a very good facility covered by GPs while the rehabilitation unit was working well. With regard to the Minor Injuries Unit the team was perturbed by the fact that the doctor was retiring at the end of March with no arrangements yet in place for a replacement.

3 Lurgan Hospital - 16 November 2000

Mrs Campbell reported that the team was very impressed with the number of day clinics and child development clinics in place. However, Ward 9 was of concern as the roof and windows were leaking.

Written reports would be made available at a later date on all visits.

93/13 FOR INFORMATION

1 EHSSC - Minutes of meeting held on 18 May 2000

- 2 NHSSC - Minutes of meeting held on 4 October 2000
- 3 WHSSC - Minutes of meeting held on 5 October 2000
- 4 SHSSB - Minutes of meeting held on 10 October 2000
- 5 A & D HSS Trust Newsletter - 'All Told' - October 2000
- 6 SHSSB - Submission to Acute Hospital Review Group

93/14 ANY OTHER BUSINESS

1 GP Fundholders

Mrs Campbell asked what the position was in relation to GP Fundholders. The Chief Officer advised her that he was awaiting a document on the future of primary care from the DHSSPS which are likely to be issued in the near future. It was agreed to keep members updated on developments.

93/15 DATE OF NEXT MEETING

Thursday 14 December 2000 in Quaker Buildings followed by Christmas Lunch. Venue to be arranged.

Signed: **Date:**