

SOUTHERN HEALTH AND SOCIAL SERVICES COUNCIL

Minutes of the Ninety-eighth Meeting held in Quaker Buildings, Lurgan
on Tuesday 15 May 2001 at 7.00 pm

98/1 PRESENT: Mrs Fionnuala Cook, Chairwoman
Mrs June Allister
Mrs Joan Baird
Mr Pat Brannigan
Mrs Margaret Campbell
Mr Robert Cummings
Mrs Roisin Foster
Mr Gordon Frazer
Mrs Angela Gray
Mr Joseph Loughran
Mr Jim McCammick
Mrs Mary McNally

IN ATTENDANCE: Mr Seamus Magee, Chief Officer
Mrs Nancy Downard, Office Manager
Mr William McKee, Chief Executive,
Royal Group of Hospitals HSS Trust
[for part of the meeting]

APOLOGIES: Mrs Sue Cunningham
Mr Isaac Hanna

98/2 MINUTES OF THE PREVIOUS MEETING

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

98/3 MATTERS ARISING

1 97/4.3 Carers' Health Day in Craigavon Civic Centre

Mrs Campbell reported that the Carers' Health day in Craigavon Civic Centre was attended by over 100 carers and was a very successful event.

1 97/12.2 Craigavon and Banbridge Comm HSS Trust

The Chairwoman advised Mr McCammick that a copy of the Craigavon and Banbridge Community HSS Trust's draft Policy on Confidentiality and Data Protection had been requested and would be forwarded to him in due course.

98/4 CHAIRMAN'S BUSINESS

1 Investing for Health Workshop

The Chairwoman reminded members of the Investing for Health workshop scheduled for Thursday 17 May in Ballybot House, Newry from 7.30 pm to 9.30 pm. She encouraged as many members as possible to attend.

2 Membership of Northern Ireland Social Care Council

The Chairwoman referred members to correspondence previously circulated in relation to the establishment of a Northern Ireland Social Care Council from 1 October 2001.

Mrs Foster said the DHSSPS had published membership of the Council widely and its approach was to be welcomed.

3 Legal Indemnity for HSS Council Officers and Members

The Chairwoman drew members attention to a letter from the DHSSPS confirming that, with effect from 2 April 2001, staff of HSS Councils were now in the same position in relation to indemnity as Health and Social Services Board staff. Indemnity provision would continue to be made by the DHSSPS for members of a Council against all claims arising from any acts undertaken by the member in execution of any function of the Council and within the scope of his/her appointment.

4 Developing a Strategic Plan for Elderly Services

The Chairwoman informed members that the Southern Board was developing a strategic plan for elderly services and proposed setting up a stakeholder advisory group. Mrs Cook and Mrs Gray volunteered to participate on the group.

5 Membership of the Council

The Chairwoman informed members that those who were due to end their term of office at the end of May 2001 had been approached by the DHSSPS to allow their names to go forward for a six-month extension to the end of November 2001. It was hoped to have confirmation of the relevant appointments prior to the June meeting.

6 Craigavon Area Hospital Group Trust - Financial Situation

The Chairwoman drew members attention to a letter sent from the Chief Executive of the Southern Board to Mr Gowdy, Permanent Secretary of DHSSPS regarding the projected financial deficit at Craigavon Area Hospital.

The Chief Officer said financial pressures within the Trust had increased considerably and it was facing a deficit of £7.6m for the year 2001/02. The Department of Health, Social Services and Public Safety had requested that a recovery plan be prepared by 31 August 2001. The process included the establishment of a Project Board comprising representatives from the Trust, the Board and the DHSSPS. A Project Team would also be established, reporting to the Project Board through a Project Manager.

The Chairwoman said she was very concerned about the impact such a situation would have on service provision and Mrs Baird questioned how such a situation could have been allowed to develop. Mr Loughran said the picture painted for Craigavon Area Hospital was bleak. Mr Cummings said Craigavon was the main hospital in the Southern Board's area and the choices open to patients were very limited. He said it was imperative that a transparent recovery plan was shared with the public

The Chief Officer said a large proportion of the £7.6 m would have to be found from within the Trust and the only way such savings could be made was by reducing services and not replacing staff. Overall waiting lists were likely to increase further to the detriment of the population served by Craigavon Area Hospital.

In an unrelated issue Mr McCammick raised concerns about the misuse of the motability car scheme and claimed the scheme

needed to be revised. Mrs Gray and Mrs Baird supported Mr McCammick and said the scheme was being abused and many of those who should be benefiting from it were not. It was agreed to raise the Council's concerns with the relevant department and to continue to monitor the Trust's recovery plan.

7 Inspection Programme of Social Services Inspectorate (SSI)

The Chairwoman informed members that the SSI was soon to commence planning the roll forward of its inspection programme for 2002 - 2005. The Inspectorate sought the views of the Council on potential areas for inspecting across the various programmes of care. A number of proposals were made and It was agreed to forward these to the SSI before the closing date of 8 June 2001.

98/5 BEST PRACTICE - BEST CARE - A consultation paper SHSSC 2001/19

The Chairwoman invited the Chief Officer to present paper SHSSC 2001/19.

The Chief Officer referred members to the consultation document entitled, 'Best Practice - Best Care' issued by the Minister for Health. He said the consultation paper sought views on proposals to set standards for the HPSS, secure accountability at local level for the delivery of services and improve monitoring and regulation of services. He said this would be a major challenge to the HPSS in that Boards and Trusts would, for the first time, have a statutory responsibility for the provision of high quality services in the same way they had a duty to adhere to statutory financial duties. In order to provide the public with assurances that standards were being applied and maintained an independent means of monitoring would be introduced. Two non-departmental public bodies were being proposed to monitor governance and to regulate the current and extended range of social services.

The Chief Officer said this was a very important document and members were asked for their comments on the questions addressed. It was agreed to establish a small working group in order to prepare a response. Mrs Cook, Mrs Campbell and Mrs Foster agreed to work with the Chief Officer in compiling a response.

98/6 ROYAL GROUP OF HOSPITALS HSS TRUST - Update on Developments (presented as first item of agenda at 7.00 pm)

The Chairwoman welcomed Mr William McKee, Chief Executive, Royal Group of Hospitals to update the Council on developments within the Trust.

Mr McKee said he was pleased to visit the Council once again. He briefed members on the up-to-date situation in relation to cardiac surgery, fracture services, organ retention, additional costs required from Boards to fund the new RVH, Trust's deficits, priorities for action, caesarean section rates at RVH, development of a new maternity hospital, nurse recruitment and complaints.

In relation to the cardiac surgery review, he said he was not actually involved but the DHSSPS had a paper prepared by CHKS benchmarking cardiac surgery with 13 other units. The Royal Hospital had a slightly larger unit with costs being the lowest of the other 13 cardiac surgery centres. The Royal Hospital was targeting 1000 operations per year and was conducting 700 but was running the service on a shoe string. Shortest stay patients included by-pass and artery operations. However a smaller number of older people required a period of 10 to 20 days in intensive care and therefore it was not possible to plan other operations.

Fracture services were running at full capacity. He said he would prefer that there was only one waiting list and that every fracture patient was admitted directly to the Royal Hospital. Proposals had been put forward to admit patients within 48 hours to the fracture service at the Royal. Mr McKee said there was a shortage of surgeons and it was difficult to staff the Royal and Altnagelvin Hospitals but through 'Priorities for Action' it may be possible to provide a third fracture service.

In respect of organ retention Mr McKee said the Royal Hospital was the main teaching hospital and therefore it was not surprising that it was in 'the eye of the storm'. He said that in the past the Royal Hospital did not seek informed consent from parents. During the 1960's and 70's teaching hospitals carried out post mortems in order to learn from their mistakes. He indicated that procedures for paediatric post mortems had changed about a year ago and for adult post mortems about 3 months ago.

About 3,000 different enquiries had been received by the Royal Hospital regarding organ retention. Less than 100 of these resulted in the hospital being able to say that an organ had been retained. In circumstances where an organ or a small piece of tissue had been maintained, the Royal Hospital had agreed to meet the costs of burial or cremation. He acknowledged that some records dating from the 1970's were incomplete and therefore it was not possible to provide some families with full information. He apologised for this and said no malice was intended on behalf of consultants or pathologists.

Commenting on the new building at the Royal Hospital, he said the lower three floors, housing a modern fracture clinic and theatre, would be handed over in a week's time and these would be fully occupied by Christmas. He said all four Boards recognised that the facility would need more resources. In Priorities for Action he said there was funding for a new spinal injuries unit. This was much needed as the Royal took on spinal injuries from Musgrave Park and the City Hospital. He said an advert had recently been placed in the Belfast Telegraph for two Spinal Surgeons.

Reporting on the Trust's deficit which was in the region of £10m, Mr McKee said assistance had been sought from the National Audit Office. As a result the Royal Hospital agreed to make savings of £5m and the Department and the Boards agreed to find the other £5m. At the end of the year this had been successfully achieved.

Commenting on caesarean section rates, he said the Director of Midwifery Services had informed him that the maternity unit was participating in a national audit, the results of which would be published later in the year.

In relation to nurse recruitment, the Royal Hospital hoped to recruit 200 nurses between now and next April. To date 35 had been recruited from Australia and 36 from the Philippines. Posts had been advertised in the Belfast Telegraph and on local radio. Mr McKee said an additional 100 nurses would be trained in Northern Ireland next year but the drop out rate was quite high. He said it was difficult to retain nurses.

He said the Royal received about 450 complaints per year. Focus groups had been used and were very successful in obtaining people's views. He acknowledged that training was required to assist staff in communicating with patients and relatives.

Mr McKee answered a number of questions about fracture waiting lists; the impact on services of making savings of £5m; how 'best value' was justified when patients were being sent to Scotland for heart bypass operations; underfunding in the health service; and how the Trust was planning to attract more nursing staff.

In concluding Mr McKee invited the Council to visit the new Royal Hospital building.

The Chairwoman thanked Mr McKee and he left the meeting.

98/7 PROMOTING EQUALITY AND GOOD RELATIONS IN THE HEALTH AND PUBLIC SAFETY SERVICES - Stage 2 Consultation Paper SHSSC 2001/20

The Chairwoman invited the Chief Officer to present paper SHSSC 2001/20.

The Chief Officer referred to the Second Stage consultation document prepared jointly by organisations working within health and social services. Comments on the document were requested by 15 June. Members were asked to comment on the questions outlined in the consultation proforma and either forward these to the DHSSPS or the Council's office. Members were also encouraged to share the document with colleagues and other groups with which they were associated.

98/8 SHSSB - WAITING LIST REPORT 2000/01 SHSSC 2001/21

The Chairwoman invited the Chief Officer to present paper SHSSC 2001/21.

He presented the Southern Board's waiting list report for the year 2000/01 which stated that despite major investments to reduce the long waiting list the numbers waiting for treatment at 31 March had increased to 10,865 - an increase of 767 on the same period last year. The main reasons for the increase included a rise of 200 inpatients and day case patients placed on the waiting list at Craigavon because of the reductions in elective work; an additional 226 Southern Board cardiology inpatients being added to the Royal Hospital's waiting list following a clerical error and the addition of 180 ophthalmology day cases to the South Tyrone waiting list.

He said the report also showed that the number of people waiting for inpatient and day case surgery in excess of 18 months had increased to 1349, an increase of 153 on the March 2000 level. On the basis of this information and the limited resources available for waiting list initiatives, he said it was unlikely the targets set by the Minister in Priorities for Action would be achieved.

The Chairwoman expressed concern at the number of people who refused to be transferred to another hospital for their treatment. Mr Cummings said there appeared to be an apparent lack of communication between GPs and consultants regarding a patient's treatment.

Mrs McNally, Mr Loughran and Mr Brannigan left the meeting at 9.00 pm.

98/9 COMPLAINTS SUMMARY FOR THE PERIOD 1 JANUARY TO 31 MARCH 2001 SHSSC 2001/22

The Chief Officer referred to the Council's complaints summary for the quarter ending 31 March 2001. During the period 33 complainants were assisted. Professions most complained about were medical, GP and general management and most complaints concerned treatment and quality of care. The organisations mostly complained about were Craigavon Area Hospital and General Practitioners. Four complaints were about organisations outside the Southern Board's area.

During the quarter in excess of 60 enquiries were dealt with by the complaints officer. These related to the complaints procedure, changing GP, community care and access to medical records.

Mr Cummings asked if it was possible to give a breakdown of the GP complaints in the next report. This was agreed.

Mrs Gray raised the issue of confidentiality, particularly regarding appointments and test results which were sent from Daisy Hill Hospital to patients in window envelopes. It was agreed to write to the Trust about the matter of confidentiality and also provide a breakdown of GP complaints in the next report.

98/10 SHSSC - RESPONSE TO 'BUILDING THE WAY FORWARD IN PRIMARY CARE' SHSSC 2001/23

The Chairwoman made reference to the Council's response to 'Building the Way Forward in Primary Care' and said this was a very informative paper which identified many gaps in the proposals for primary care. Mr Cummings congratulated the Chief Officer on the contents of the paper.

98/11 TRUSTS' BUSINESS SHSSC 2001/24

1 Armagh and Dungannon HSS Trust

Minutes of Trust Board meeting held on 7 February and Agenda for meeting on 4 April 2001

2 Craigavon Area Hospital Group Trust

Minutes of Trust Board meeting held on 20 February and Agenda for 20 March 2001

3 Newry and Mourne HSS Trust

Minutes of Trust board meeting held on 20 February and Agenda for 24 April 2001

98/12 FOR INFORMATION

- 1 SHSSB Minutes of Board Meetings held on 13 March and 10 April 2001
- 2 SHSSB - R & I Advisory Committee - Minutes of meeting held on 14 March 2001
- 3 SHSSB - R & I Unit - Appointments to Advisory Committee
- 4 South Tyrone Hospital Community Forum - Minutes of meeting held on 12 April 2001
- 5 CAWT Annual Report (tabled)
- 6 SHSSB Director of Public Health - Annual Report 2000 (tabled)
- 7 Armagh and Dungannon HSS Trust - 'All Told' - Newsletter
- 8 HSS Councils' response to Inquiry into Public Private Partnership

Minutes of EHSSC, NHSSC and WHSSC available on request.

98/13 ANY OTHER BUSINESS

1 Suspension of Senior Officer at Craigavon and Banbridge Community HSS Trust

Mr McCammick raised concerns about a press report regarding the suspension of the Director of Child and Family Care Services at Craigavon and Banbridge Community HSS Trust. The Chairwoman said the Council had not received official notification of the suspension. The Chief Officer indicated that the local press had contacted him asking for a statement on the issue. Mr McCammick expressed the view that the Council should have been informed in advance about the suspension of the Director and should not have had to read about it in the local press.

Mrs Foster sought assurances about the management of child and family services in the absence of the Director. The Chairwoman said the Council needed to know that the systems in place were providing good quality child and family services.

The Chairwoman said she understood that the Director had been suspended in connection with an ongoing investigation into the adoption and death of one Romanian child and injury to the other.

In response to a question the Chief Officer said he understood the body of the child had been exhumed for examination but he had no further information on the findings.

Mr McCammick said he knew the family concerned and they were very distressed. He said the situation was obviously serious and the Trust needed to issue a public statement clarifying the position.

Following further discussion it was agreed to write to the Craigavon and Banbridge Community HSS Trust asking for reassurance that systems were in place to continue to provide child and family services in a satisfactory and effective way. It was also agreed to write to the DHSSPS raising concerns about the case and asking for all matters to be thoroughly investigated.

2 Banbridge Carers' Group Meetings

Mrs Campbell said she wished to pass on congratulations to Miss Hart, the Council's Complaints Officer for her presentations at Banbridge Carers' Support Group meetings.

98/14 DATE OF NEXT MEETING

Tuesday 19 June in Quaker Buildings at 6.30 pm

Signed: _____

Date: _____