

## **SOUTHERN HEALTH & SOCIAL SERVICES COUNCIL**

Minutes of the One Hundred and Thirty-ninth Meeting held in the Linen Green Centre, Moygashel, Dungannon on Tuesday 21 June 2005 at 6.00 pm

**139/1**

**PRESENT:**

Mrs Lynne Cairns, Chairman  
Mrs Nazy Harris  
Mr Clive Henning  
Mr Peter Kearns  
Mr Peter Murray  
Mr Jim McCart  
Mr Charles Rollston  
Mrs Eileen Wright

**IN ATTENDANCE:**

Mrs Stella Cunningham, Chief Officer  
Mrs Nancy Downard, Office Manager  
Mr Eddie Ritson, Director of Primary Care, SHSSB [for part of the meeting]  
Dr Robert Thompson, Medical Adviser in Primary Care, SHSSB [for part of the meeting]  
Mr Miceal Crilly, Director of Out of Hours Services, SHSSB [for part of the meeting]  
Dr Nizam Damani, Consultant Microbiologist and Infection Control Lead, CAHGT [for part of the meeting]

**APOLOGIES:**

Mrs Annie Burrell  
Mr Sydney Anderson  
Mrs Mary Ferris  
Mr John McArdle  
Mr Wilfred McFadden  
Mr David Simpson

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**WELCOME VISITORS**

No members of the public were in attendance at the meeting.

### 139/3 **MINUTES OF THE PREVIOUS MEETING**

Minutes of the previous meeting, which were circulated, were agreed as a true and accurate record.

### 139/4 **MATTERS ARISING**

#### 1 Trauma & Orthopaedic Services, and Car Parking at CAHGT

The Chairman drew members' attention to Mr John Templeton's response to the Council's letter of 10 May. The letter explained that the proposal for the development of the Trauma and Orthopaedic Services was at a very early stage and it was not envisaged that inpatient services would be on site for at least 5 years. Mr Templeton is to set up a meeting with the Council to consider how they can work together to further the development of the service.

#### (b) Car Parking at CAHGT

Mr Templeton also advised in his letter that a survey of car parking provision which was currently underway, would help to determine short and long term needs. The Trust's business case for the strategic development of the hospital site, due to be submitted at the end of June 2005, will have identified car parking facilities.

#### 2 Joint SHSSB/SHSSC Meeting

The Chairman informed members that arrangements had been confirmed for the joint meeting to be held in Newry & Mourne District Council Chamber on Wednesday 28 September at 10.00 am.

#### 3 GMC Consultation Document

Members were informed that the Council's response to the GMC consultation document had been submitted prior to the deadline, and a response on behalf of the Four HSS Councils prepared by the Chief Officer, had also been submitted.

#### 4 Independent Review of Endoscope Decontamination in NI

The Chairman referred members to Dame Deirdre Hine's response to the Council's letter of 24 May. It indicated that the points made by the Council had been noted with interest but since the Group had been disbanded Dame Deirdre could not

reflect the points to the group. However, she did respond to the issues and the response was noted.

8.20 pm

5 Implementation of Learning Disability Strategy

In order to make a more informed response to the consultation document, arrangements have been made for a group of members to visit Knockeden Housing Centre, Portadown, and Longstone Hospital, Armagh on Thursday 30 June commencing at Knockeden at 11.00 am. Members interested in attending are E Wright, C Rollston, P Kearns.

6 Four Council Working Group

Members were reminded of the meeting on Wednesday 22 June at 10.00 am, to consider a response to the Review of Public Administration. Members who planned to attend included, P Murray, N Harris, L Cairns, J McArdle, P Kearns.

7 Cognitive Behavioural Therapy

The Chairman referred members to the information provided by each Trust in relation the number of trained Cognitive Behavioural Therapists (CBTs). This was provided in response to Mr Curran's enquiry at the April meeting, regarding the availability of CBTs in the Southern Board's area.

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**CHAIRMAN'S BUSINESS**

1 District Council Nominations

The Chairman reported that letters had been received from Craigavon Borough Council, Armagh City & District Council and Banbridge District Council indicating their nominations for representation on the Council. Confirmation of the appointments is expected from the Public Appointments Unit in the near future.

2 Reappointment of Members

Members were informed that confirmation had been received from the Public Appointments Unit on the reappointment of John Coulter, Nazy Harris, Jim McCart, and Adrian McKinney from 1 June for a further 4 year term.

### 3 SHSSB – Reform and Modernisation

The Chairman read out a letter of 24 May from the Chief Executive of the Southern Board which responded to the Council's views on Reform and Modernisation plans. Mr Donaghy indicated that he wanted to ensure the Council's concerns were addressed in implementing change and said he would be keen for the Council to be involved in the local processes. He asked for a representative to join the Local Economy RME Group. The Chief Officer agreed to represent the Council on the RME Emergency Care and Clinical Networks Groups.

### 4 Newry Social Education Centre

The Chairman said a letter had been received from Mr Eric Bowyer, Chief Executive of Newry and Mourne HSS Trust, advising that the DHSSPS had approved the Trust's plans for two replacement day centres in Newry and Crossmaglen, and had approved funding of £6.2m. He thanked the Council for supporting the Business Case.

Members were delighted with the development and agreed that the Council should issue a press release.

Mr Murray said that whilst this was good news for the Newry & Mourne HSS Trust, the Council must continue to lobby for Craigavon & Banbridge Community Trust for a new SEC centre in Banbridge.

Mr Murray said a lot of good and positive things were happening that the DHSSPS, the Board and the Council did not focus on. Mrs Harris said the Southern Board was doing a very good job.

### 5 SHSSB – Autism Strategy

The Chairman informed members that Allison Harrison, Parent & Working Group Member, had e-mailed the Council's office to express her thanks to all who attended the Public consultations held across the Board area. She said their presence and support was greatly appreciated

### 6 MS – Disease Modifying Therapies Crisis Meeting

Mrs Eileen Wright, who represented the Council at a meeting of the MS Society on 3 June, provided members with a detailed report of the event. Mrs Wright said it was a very positive

meeting. She felt that there was an equality issue in relation to the availability of drugs and said that if drugs are available then there should be funding for those who need of them - the cost is immaterial when set against the impact on quality of life. She proposed that the Council add its voice to the pressure on the DHSSPS to examine the rationale which allows a waiting list in this area.

### **Mr Kearns left the meeting at 8.40 pm**

#### **7 Invitations**

- It was agreed that the Chief Officer would attend the A/D HSS Trust's open day at Orchard House, Loughgall on 28 June.
- No members were available to attend the C/B HSS Trust's launch of 'Strengthening Services: Benefits and Outcomes of Self Evaluation within Health and Social Care Provision' on 29 June.
- Members who agreed to attend the HPA – Consultation Workshop on Suicide Prevention on 29 June in Armagh City Hotel from 6.30 pm to 9.00 pm were L Cairns, E Wright, C Rollston.
- No one was available to attend the A/D HAZ launch of Community Food Co-op on Friday 1 July.
- Mrs Burrell would be the Council's representative on the Nursing and Midwifery Council's focus group, 'Fitness for Practice at point of Registration', at the Beeches Management Centre, Portadown on 29 June.
- Mr Murray agreed to attend the 'Spirit of Summer" at Prospects Newry Day Opportunities - National Learning Disability Week event on 23 June.
- Diabetes UK Campaign – Action Today, Health Tomorrow. It was agreed that the Council would write in support of the campaign.

### **139/6 CHIEF OFFICER'S REPORT**

The Chief Officer referred members to the new Standards for Health and Social Care which were out for consultation. She said a leaflet summarising the new Standards was available on request. She said the four Councils would make a joint response to the consultation document.

She reported that the launch of the report, 'Strengthening Links with the Community and Voluntary Sector' took place at the Community Development and Health Network workshop on 17 June. A copy of the report had been tabled.

Members were informed that Karen McCoy, Research Officer, currently on secondment to the C/B LHSCG, had tendered her resignation. Karen is taking up post in the Planning Department of Craigavon and Banbridge Community Trust. Staff and Members wish her well in her new post.

The Southern Board is circulating its Elderly Strategy for consultation and the Council will be making a response.

In relation to Infection control, the Chief Officer said she felt that the Council's involvement in the new Regional Strategy, the workshop which the four Councils held a few weeks ago, and the presentation today by Dr Damani should be highlighted in the press. Under the Council's visiting programme, it will also undertake a 'Bugwatch' around infection control.

Members agreed that a press release should be issued.

#### **139/7 MEDIA SUB COMMITTEE**

The Chief Officer made reference to the minutes of the media sub group meeting held on 26 May and asked if members wished to raise any points in relation to them.

Mrs Harris said that although she was unable to be present at the meeting, she still wanted to remain on the group.

Mrs Wright asked that a 'press release' item be included on the agenda for the Council meeting each month and then an item for press coverage could be identified from each meeting.

#### **139/8 SHSSB – UPDATE ON GMS CONTRACT AND GP OUT OF HOURS SERVICES (Presented at 6.15 pm)**

The Chairman welcomed the Board's Director of Primary Care, Mr Eddie Ritson, Dr Robert Thompson, Medical Advisor, and Mr Miceal Crilly, Director of Out of Hours Services to update the Council on the GMS contract and the GP Out of Hours Services.

Mr Ritson explained that although the GMS contract was negotiated nationally in the year 2003/04, 2004/05 was the first year of the contract. He outlined the main aspects of the new contract and said there was a legislative duty on the Board to provide Primary Medical Services. A new contract had to be agreed with each practice in the Board's area which specified services to be provided – essential, additional and enhanced services. He said the new contract included incentives to improve quality of care provided (QOF).

Dr Thompson said the Quality and Outcomes Framework (QOF) was a new and revolutionary part of the contract, giving GP Practices the opportunity to provide high quality services by rewarding performance points against QOF.

The QOF sets out a series of clinical and non-clinical standards across a range of activities. Examples were given in relation to coronary heart disease and the control of hypertension. He reported that out of the 1,050 points achievable by GPs in any one year, the average points gained by practices were 983. The information gathered by the Board would be presented to the Practices to help them improve services in the future.

Mr Crilly explained that from 1 January 2005 GPs no longer provided 24 hour cover to patients but it became the responsibility of the Southern Board. He outlined the implications and challenges of this change in relation to the Southern Area Urgent Care Services (SAUCS). They include GP retention and recruitment, staff transfer, governance arrangements and the consultation outcome. He explained the process for answering calls, and the current position regarding the location of the 3 sites – the new centre on Craigavon Area Hospital grounds, Newry and Mourne centre and the Moy centre. Information on the volume of calls, time of calls, drop in patients, response times – first contact, and response times – final contact was also provided to members.

Mr Crilly reported that the main issues facing the SAUCS was medical manpower planning, staff training and development, completion of a systems review, service relocation, the Mourne population, updating of ICT infrastructure, and establishing linkages with other urgent care services.

Referring to future developments, Mr Crilly said the SAUCS would continue to develop relationships with practices, review monitoring arrangements, develop governance arrangements and use QOF information for future service planning.

In concluding he said the new GMS contract had brought with it significant change for the Board and practices. However, it was hoped that it would lead to better management and prevention of disease within primary care. Contract revisions are due in April 2006.

The group responded to a number of questions by members. The Chairman thanked the Board representatives for their presentations and they left the meeting.

#### **139/9      INFECTION CONTROL (Presented at 7.15)**

The Chairman welcomed Dr Nizam Damani, Consultant Microbiologist and Infection Control Lead, Craigavon Area Hospital, to update members on developments in relation to Infection Control.

Dr Damani thanked the Council for the invitation and said he would commence by setting the scene in relation to infection control, then provide an overview of current issues, and thirdly, outline the initiatives being taken by Craigavon Area Hospital Group Trust.

He explained that in every day life people are surrounded by Microbes, through scales shed from the skin, humid soil, stream water, dusty air and tap water. A sneeze, for example, could shed 10,000 droplets carrying bacteria and a cough 100 droplets. Infections can be spread by auto infection or cross infection.

In relation to healthcare associated infections, Dr Damani said 10% of patients acquired infection in hospital and 10% were admitted to hospital with infection. He reported on findings from the National Audit Commission report for 2001 which showed 100,000 patients per year were infected, and 5,000 deaths occurred per year. The length of stay in hospital was 2.5 days per patient at an annual cost of £1 billion. He said people have

to understand that only 15 - 30% of infections are preventable. However, every effort is made to prevent patients from getting infections. Whilst MRSA is the more common superbug, there are fears that a new superbug has been identified - C difficile (CD).

With regard to current issues in infection control, he said there were a number of susceptible patients such as cancer patients, transplant patients, and intensive care patients. People are living longer and there are more elderly patients with a higher susceptibility to infection. Also emerging were new infections such as Avian flue, SARS, C.difficile, E coli 0157, and CJD.

Dr Damani outlined the facts about MRSA – What it was, where it was found, how patients contracted it, and how it can be prevented or treated.

Other issues which contribute to infection control are the drop in hospital beds, a greater throughput of patients, pressure on waiting lists and inadequate isolation facilities. Some hospitals are of old design and have insufficient hand washing facilities, and inadequate storage. There was a lack of single isolation rooms, single rooms without ensuite toilets, and an inadequate number of Negative pressure ventilation rooms. There is a shortage of nursing staff to cope with a greater throughput of patients. This has increased the workload and resulted in a break in infection control practice.

Pressure for 100% bed occupancy makes us more susceptible to healthcare acquired infection than countries such as Holland which have a much lower bed occupancy rate and no MRSA.

With regard to environmental cleaning, he said standards were declining and there was little evidence base for infection control. He said it was public perception that cleaning of the hospital environment contributed to the prevention of hospital infection.

Initiatives undertaken in Craigavon Area Hospital included the establishment of an Infection Control Link person in each ward/department; intensive training was carried out in June and July 2005 followed up by monthly meetings with the Infection Control team to identify issues and monitor progress. An infection control manual was launched on 10 June 2004.

In relation to antibiotic usage a drug and therapeutic committee was formed, a revised antibiotic policy was issued in May 2005, audits were performed annually in medical and surgical wards and further audits are planned in Craigavon and Lurgan hospitals. An audit of hand hygiene was conducted in March 2005, a new hand rub was introduced and training given in June 2005.

In 2004 an audit of decontamination of medical equipment was carried out, and as a result Health Estates established a Management Equipment and Medical Devices Group, and Mr John Mone was appointed Decontamination Lead and Chairman of the Infection Risk Group. A training programme was conducted for Allied Health Professionals, the medical directorate and the surgical directorate during September and October 2004.

In order to minimise the spread of infection in the hospital, Dr Damani reported that the hospital had issued guidelines for visitors.

In concluding he said that the DHSSPS was currently reviewing guidelines for environmental cleaning, and the Trust business case was with the Department for approval.

Dr Damani responded to a number of questions from members. The Chairman thanked him for his very interesting and informative presentation and said that the Council would work with the Trust in trying to combat the spread of infection.

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**SHSSC – WORK PROGRAMME QUARTERLY UPDATE**

**APRIL – JUNE 2005**

**SHSSC 05/17**

The Work Programme update for the period April to June 2005 was noted.

## **139/11 TRUSTS' BUSINESS**

### **1 Craigavon Area Hospital Group Trust**

Minutes of Trust Board Meeting held on 19 April and agenda for meeting on 31 May 2005

### **2 Craigavon & Banbridge Comm HSS Trust**

Agenda for Trust Board meeting held on 6 June 2005

### **3 Newry & Mourne HSS Trust**

Minutes of Trust Board Meeting held on 19 April 2005

## **139/12 VISITS**

### **1 Meigh Surgery**

A copy of a visit report prepared by Mr Murray was tabled for members' consideration. Mr Murray said there were a number of issues to be addressed in relation to the practice, particularly the number of patients on the register and the inadequacy of the facility to cater for the needs of a modern day practice. It was agreed to write to Mr Ritson, Director of Primary Care, SHSSB and await the response.

## **139/13 FOR INFORMATION**

- 1 SHSSB – Minutes of Board meeting held on 10 May 2005
- 2 SHSSC Response to GMC Consultation document
- 3 Wraparound Update – May 2005
- 4 Children's Services Planning – News – June 2005
- 5 Armagh & Dungannon HSCG – News – May 2005
- 6 SHSSB – Monthly Update on Care Management Pressures – March 2005
- 7 CAHGT – Bed Management Information – 14 May – 11 June 05
- 8 SHSSC – Press Coverage

## **139/14 ANY OTHER BUSINESS**

### **1 CAHGT Dental Clinic**

The Chairman reported that while attending the opening of the new Children's outpatient department at the hospital, Mrs Jane Sutcliffe, Dentist, approached her and the Chief Officer and said

that further to the report of the Council's visit, the Director of Nursing had spoken to her about the major piece of equipment which was unsuitable for the clinic and asked her to prepare a business plan. She asked that her appreciation of the Council's support be conveyed to all members.

**139/15      DATE OF NEXT MEETING**

Tuesday 20 September at 6.00 pm in Quaker Buildings

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_