

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

**Minutes of The One hundred and Fifty-third Meeting held in the  
Offices of Craigavon Borough Council on Tuesday 20 February  
2007  
at 10.00 am.**

**153/1 PRESENT:** Mrs Lynne Cairns, Chairman  
Mr Norman Badger  
Mrs Annie Burrell  
Mr William Burns  
Mr Lawrence Donaghey  
Mrs Nazy Harris  
Mr Clive Henning  
Mr Peter Kearns  
Mr Peter Murray  
Mr Wilfred McFadden  
Mrs Florence McMahon  
Mr Kenneth Twyble

**IN ATTENDANCE:** Mrs Stella Cunningham, Chief Officer  
Mrs Nancy Downard, Office Manager  
Mr Barry Conway, Manager,  
Unscheduled Care Managed Clinical  
Network, CAHGT (for part of the  
meeting)

**APOLOGIES:** Mr Kieran Murphy  
Mrs Eileen Wright

**MEMBERS OF THE  
PUBLIC:** Ms Lila Hynds, PALS, Portadown  
Mrs Irene Haughey, C/B Community  
Forum  
Rev John White, St John's, Lurgan

**APOLOGY:** Mrs Joan Baird, Banbridge

On behalf of the Health Council, the Chairman thanked Mr Twyble, the Mayor of Craigavon Borough Council, for the use of the Chamber and for the warm welcome and hospitality provided.

She welcomed everyone to the meeting and especially members of the public. She said that the Standing Orders would be waived and

there would be an opportunity to ask questions at the end of each agenda item.

## **153/2 MINUTES OF THE PREVIOUS MEETING**

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

## **153/3 MATTERS ARISING**

### **1 Banbridge SEC**

Mrs Cunningham informed members that she had written to Mr Francis Rice, Director of Learning Disability, Southern HSC Trust, expressing concerns about the Banbridge SEC and highlighted a number of issues. An invitation was also extended to him to attend a future Council meeting.

In response to Mrs Burrell's question about the position on Ballydown school, Mrs Cunningham said she had covered the matter in her letter to Mr Rice and also explained that there must be equitable services across the whole area. The Council needs to be clear about how the services are being developed.

Mr Kearns sought clarification on the position with the Newry SEC. He said if the Newry Project had commenced then we should be concentrating on the Banbridge SEC. Mr Murray said both SECs were a priority and it is important that we establish what was on the agenda for both projects. Mrs Burrell felt that it was up to the SHSSC to get the situation in Banbridge changed as the current facility was deplorable. The Chairman asked if it would be possible to get an update on the position with Newry SEC.

It was agreed that Mr Rice should be invited to a future meeting to give an update and following this a visit could be arranged to the facility.

### **2 Radio Ulster - Nolan Programme**

Mr McFadden congratulated Mrs Cunningham on her interview with the Radio Ulster – Nolan programme regarding the shortage of intensive care beds in Northern Ireland for seriously ill children and premature babies.



## **153/4 CHAIRMAN'S BUSINESS**

### **1 Invitations**

- Mrs Cairns and Mr Henning agreed to attend the Celebration of Decent Food for all on 13 March in Corick House, Clogher.
- Launch of multi-lingual information booklet for migrant workers on 21 March in Gallery 2 Millennium Court, Portadown would be attended by Mrs Burrell, Mr Murray and Mr Twyble.
- Royal Group of Hospitals Roadshow on Progress on development of the new Women's and Children's Hospital to be held in Ballybot House, Newry on Tuesday 27 March at 1.00 pm, would be attended by Mrs Harris, Mr Kearns, and Mr Murray.
- C/B PALS (Pensioners Actively Lobbying Services) – Launch of their new initiative in the Jethro Centre, Flush Place, Lurgan on 29 March at 2.00 pm. Mrs Cunningham, Mrs Burrell and Mrs Harris would represent the Council at this event.

### **2 District Councils' Health Service Groups**

The Chairman read a letter from Mr Forbes, Banbridge District Council's Director of Environmental Services, in response to the HSS Council's letter of 5 December 2006 regarding Health Council attendance at District Council Health Service Groups. The letter explained that whilst the Council could appreciate the value of the Health Council's presence at the Committee meetings, it felt that with the short lifespan of the HSS Council and the intermittent schedule of meetings it would not be achievable.

Mr Murray said he thought that the Banbridge District Council should have been prepared to listen to the views of the HSS Council members, as there were still some months to go. Newry and Mourne District Council had accepted Council members with open arms.

The letter was noted.

### **3 Schedule of Meetings**

The Chairman referred members to the schedule of meetings which had been tabled and asked that they note in their diaries the dates for the 4 Council forums.

#### **4 Joint SHSSB/SHSSC Meeting**

The Chairman informed members that the joint meeting with the Southern Board would be held on Tuesday 8 May at 11.00 am in Tower Hill, Armagh. Members were asked to consider items for the agenda.

#### **5 Travel Claims**

Members were reminded that travel claims should be made before the end of the month in order to be included in the current year's budget.

### **153/5 CHIEF OFFICER'S REPORT**

- 1 **HPSS Complaints Procedure - Consultation.** A successful four Council workshop has been followed up in the Southern Area by a meeting, which included ex-complainants and Council members/staff. Consultation events with local community groups will also be carried out. A four Council response will be submitted.
- 2 **Trauma & Orthopaedic Services at CAH.** Investment of £15m will be made in a new unit at CAH by autumn 2007. By April 2008, it should be treating approx 1,000 with the aim of treating fractures within 48 hours. A second unit at Antrim will be provided as a second strand of the strategy.

Mr McFadden said the SHSSC had been campaigning for this service for some time and he very much welcomed it. He asked that the SHSSC make this its press release topic.

The Chairman referred to the 48 hour target for treating fractures and said this was the target that already existed. She said she was still very concerned about this and would like to see it brought down. Mr Donaghey agreed and said we should be demanding that the target is changed particularly in light of new investment.

- 3 **GP Out of Hours staffing levels.** The SHSSB has reviewed doctor cover levels at centres and is planning a six month trial for the new arrangements. This may impact on the number of doctors on some shifts. Mrs Cunningham said she had written to the Board for further information.

She explained that under RPA the Out of Hours would move to the Southern HSC Trust's responsibility.

She outlined the details of the response received from Mr Ritson and said that as part of a cost cutting exercise the Board was proposing closing the Out of Hours centre at Craigavon from 8 pm to 10 am.

Members expressed concerns about the future of Out of Hours especially in the Kilkeel area, the impact it would have on A&E, and the difficulty for patients getting a doctor in the dead of night, particularly in isolated areas.

It was agreed to provide members with a copy of the letter.

Mrs Cunningham said Mr Ritson was willing to come to talk to the Council. However, it was agreed to include the topic on the agenda for the joint Board / Council meeting.

- 4 **Bugwatch.** CAH have indicated their interest in holding a follow-up to Bugwatch. The provisional date has been set for 30 March. Daisy Hill Hospital will be contacted to ascertain their interest in being involved.

Members agreed to the arrangements.

- 5 **Lurgan Community Treatment and Care Centre.** An outline business case is being prepared for a new Community Treatment and Care Centre in Lurgan. Feedback has been provided on behalf of the SHSSC.
- 6 **Dental Services.** Health Minister Paul Goggins has announced additional funding of £2million for dental practices. The extra funding will be targeted directly at those practices providing dedicated health service dentistry and will be allocated in the 2007/08 financial year. The Chief Officers are suggesting that Dentistry Services should be the topic for the first Four Council Forum to be held in May.
- 7 **Consultation on RPA.** The four Councils are working in partnership with the DHSSPS to undertake a consultation exercise on the legislation for the HSSA, Local

Commissioning Groups and the PCC. Members are invited to a consultation workshop on 16 March in Cookstown.

## **153/6 UNSCHEDULED CARE SERVICES AT CAH**

The Chairman welcomed Mr Barry Conway, Manager, Unscheduled Care Services Manager at Craigavon Area Hospital and thanked him for coming, at short notice. She explained that Mr O'Reilly, A&E Consultant had planned to attend to up-date the SHSSC on the Southern Area Managed Clinical Network for Unscheduled Care but had been unable to keep the appointment.

Mr Conway said he would provide a general overview of unscheduled care at the A&E Department at CAH, the targets that have been set regionally and outline some of the plans that are in place to address the targets set for Craigavon Area Hospital.

He explained that Mr O'Reilly, A&E Consultant, CAH, and Dr R Thompson, Medical Advisor, SHSSB, were the clinical leads in the MCN. Unscheduled care services included A&E, minor injuries, GP Out of Hours, other OoH services, and ambulance services. He said unscheduled care was largely unforeseen and demand for it could occur at any time. Therefore services must be available 24 hours a day and it is important that all are linked together.

Mr Conway said Regional Targets for unscheduled care was a very challenging agenda. Its emphasis was on improving access. By April 2007 patients journey time in A&E must not exceed 12 hours; by April 2008, 95% of all patients attending A&E should be admitted or discharged within 4 hours of arrival; by April 2007, all simple discharges from hospital should happen within 12 hours of the patient being declared medically fit for discharge; and by April 2007, 50% of complex discharges should happen within 72 hours of the patient being declared medically fit for discharge, rising to 100% by April 2008.

In relation to A&E activity at Craigavon Area Hospital, he reported that from April to Dec 2006, 50,000 new attendances were recorded, representing a 20% increase on last year. The increase in numbers was similar in Daisy Hill Hospital and the Minor Injuries Unit at STH.

He explained that in 2004/05, 1367 patients had to wait longer than 12 hours to get a bed and this was unacceptable. However, recently this has improved significantly. From September 2005 improvements put in place included; daily focus on bed pressures, progress of each patient in each ward reviewed daily, pressures/delays/discharges reviewed at a 12.30 pm meeting, Operations team working closely with bed managers, ward staff, hospital liaison sisters, SW dept, Allied Health Professions, Radiology and links with medical staff when required. Close links with community staff and a heightened awareness of the emergency care agenda across the Trust.

Some of the underlying problems that need to be addressed in relation to emergency care are the increasing number of drugs and alcohol related admissions (1 in 8 fall into this category), and the increasing number of attendances at A&E. The difficulties with delayed discharges are; availability of carers in rural areas, and patient/family choice issues.

Priority actions, short term, will focus on eliminating 12 hour waits, ensuring all discharges are tracked and that information on delays is accurate, and a framework is establishing for reviewing delays. Other priority actions in the medium term are: more discharges need to happen earlier in the day, the need to increase the number of weekend discharges, an alcohol / psychiatric liaison service that links with the community, and try to deflect some of the demand on A&E departments.

In concluding, Mr Conway said there had been a lot of progress in Craigavon Area Hospital and they were managing the situation reasonably well but still had to address some underlying problems.

Mr Conway responded to a number of questions from members in relation to: delayed discharges, the effect any changes in Out of Hours coverage might have on A&E, fractures, and in relation to the divert of patients from Craigavon Area Hospital to Daisy Hill Hospital.

The Chairman thanked Mr Conway and he left the meeting.

**153/7 RPA BRIEFING**

**SHSSC 07/04**

Mrs Cunningham referred members to her progress report on developments to date in relation to RPA.

She outlined the changes which had taken place to date and said the HPSS had been re-branded as the HSC – Health and Social Care and a new logo was being developed.

Further changes in the next few weeks would include the move of the Southern Health and Social Care Trust to temporary HQ at Craigavon Area Hospital; the closure of existing Trusts; transfer of Trust staff; Non-Executive Members of Trusts to be announced; Business cases on the options for the PCC will be completed; the DHSSPS will meet with the HSSCs' Executive to provide an update on the PCC Business case; and the DHSSPS will attend the Four Council Forum in May to update members on the progress towards the PCC and will indicate the timescale for recruitment of staff, and members etc

In response to Mrs Burrell's query regarding Council representation on the new Trust, Mrs Cunningham said that this request had not been made but it was hoped to invite the Chief Executive of the new Trust to the Council meetings every 6 months. In the meantime she would request that the Council is provided with a copy of the Trust Board minutes and these could be circulated to members.

The Southern Health and Social Care Trust – Update Newsletter was noted.

**153/8 THE FUTURE OF PATHOLOGY SERVICES IN NI**

**SHSSC 07/05**

Mrs Cunningham presented the SHSSC Draft response which had been prepared and asked for further comment or suggested amendments to the document.

The Chairman expressed concern that the service would be moved to Belfast. In theory it seems good but the workings of it would be different – everything would end up far away from where the service was needed.

Mr Murray said the centralisation of the service inhibits the local areas. He referred to the Hayes report which established 9 acute hospitals and Daisy Hill was one but now we find that by default all is being centralised.

Mr Kearns said the 3 staff in Daisy Hill Hospital were doing a very important job and were trying to hold on to the service and his concern was that if the Laboratory closed it would also be doing away with the Trauma unit. If an accident occurred they would have to bypass Daisy Hill. Mrs McMahon said she would have concerns that if a member of staff left their post at this stage, they may not be replaced.

After some discussion on each point within the response, members supported the development of a network but preferred that it should not be based in Belfast. The structure must ensure the needs of all communities across Northern Ireland. The principles of patient safety and equitable access are very important.

It was agreed that members comments would be taken on board and the response amended accordingly prior to submission.

### **Mr Badger left the meeting at 12.25 pm**

#### **153/9 PCC UPDATE**

**SHSSC 07/06**

Mrs Cunningham referred members to the Draft Order for HSSA / PCC and said the 4 Councils were satisfied that the Order had reflected some of the arguments put forward by them for the PCC. Her concern would be in how it would be rolled out in practice.

In relation to the transfer of staff to the PCC, the 4 Councils questioned what would happen to staff who were currently employees of the Boards. She explained that she had taken legal advice on the matter under TUPE and because the function of the Councils, staff would be transferred into the PCC and they would not have the option of staying as staff of the Boards. She said this would disadvantage staff, most of whom are employed locally, and particularly as there is no indication of the structure or where the PCC would be located.

**153/10 PRESS RELEASE TOPIC**

Trauma and orthopaedic Unit at Craigavon Area Hospital

**153/11 REPORT BACK FROM MEETINGS**

N/M District Council Health Committee

Mr Kearns reported that Mr Murray and he represented the Council at the meeting and were made most welcome. He found the meeting to be very interesting.

N/M HSS Trust

Mr Murray reported that he attended the meeting on behalf of Mrs Ferris. He said that under the RPA there was a lot of concern with staff about the uncertainty of the situation.

Mrs Cunningham said there would be an opportunity to respond at the 4 Councils workshop on 16 March in Cookstown.

**153/12 TRUSTS' BUSINESS**

**1 Craigavon & Banbridge Comm HSS Trust**

Minutes of Trust Board meeting held on 4 December 2006

**2 Craigavon Area Hospital Group Trust**

Minutes of Trust Board meeting held on 19 December 2006 and agenda for meeting on 16 January 2007

**153/13 FOR INFORMATION**

- 1 SHSSB – Minutes of Meeting held on 9 January 2007
- 2 Children's Services Planning – NEWS – January 2007
- 3 SHSSC – List of Invitations

**153/14 ANY OTHER BUSINESS**

**1 Ongoing Matters**

At the request of Mrs Harris, the Chief Officer agreed to prepare a paper identifying the key issues which are ongoing in the Council with some indication of what stage these are at.

**153/15 DATE OF NEXT MEETING**

Tuesday 20 March 2007 in Quaker Buildings, Lurgan.

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

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