



## 165/3 MATTERS ARISING

- Joint Meeting with SHSSB

Mr McCart said that there seemed to be a satisfactory outcome to the Out of Hours service in Kilkeel and therefore it should be removed from future agendas. He said it was unfortunate that the input from the Health Council went unrecognised.

- Dental Services

Mrs Cunningham reported that the Board's Director of Dental Services indicated at the joint Board/Council meeting that dental practices were re-opening their lists for NHS patients and she felt this would take the pressure off. It was agreed to continue to monitor the situation.

- Slieve Roe House

Mr Murray raised concerns about the future of Slieve Roe House and Skeagh House.

Mrs Cunningham informed him that the Council would have to consider its input into the consultation and look at how the services could be improved. She said people's desires and expectations were changing and the Trust would like to develop homes similar to those in Banbridge which members visited – where someone is on site to provide support needs. It was agreed to engage in the consultation process.

- Visit to Stormont

The Chairman reported that the visit to Stormont was a very well organised and successful event. However, she was disappointed at the MLAs input and their lack of knowledge of the Councils' role.

- BIH Housing

In response to Mr Murray regarding the situation on the sheltered housing accommodation in Bessbrook, Mrs Cunningham said she had tried to progress this but the Trust had indicated that it had difficulty in moving staff from St Luke's to staff the unit.

Mrs Cunningham said that while she could write to the Trust, it was a matter for BIH to pursue.

## 165/4 CHAIRMAN'S BUSINESS

- **Update from PCC Project Board**

The Chairman said she was overwhelmed with the amount of work which Workstream A had to do in preparing a paper for the Project Board - it was much more than they had anticipated. Hopefully when it is presented at the next Project Board meeting on 26 November it will be accepted. Other Workstreams will have their input.

She informed members that the Health Reform Bill was passed by the Health Committee last week and was due to go to its final stage of consideration at the Assembly later this month.

She said it was anticipated that there should shortly be an announcement on the appointment of chairs for the new bodies including the PCC. Advertisements for the second tier staffing are due to be advertised within the next two weeks.

Our understanding is that adverts for members of the Patient Client Council are likely to be issued by the DHSSPS Public Appointments Unit either in mid-December or mid-January. She said anyone wishing to express an interest in the positions, should telephone 9052 3250 and request that details are mailed out to them when available.

All indications are currently that the timescale of 1 April 2009 for the establishment of the Patient Client Council will be met.

Following a short discussion, the Chairman encouraged members to apply for the membership of the PCC, regional and local.

Mr McCart said he had every confidence that the Chair and the Chief Officer would ensure a good deal.

- **Final Four Council Forum – February 2009**

Members approved the draft programme.

- **SHSSC Transition to PCC**

Mrs Cunningham explained that the December 08 meeting was likely to be the final business meeting of the Council. It is unlikely that there will be a meeting in January 09. The final 4 Council Forum will be held in Newcastle in February, and there will be a handover to the PCC in March.

In the meantime those members representing the Council on various committees would continue until the end of March. A letter will be sent to the committees informing them that if they wished the representative to continue after 31 March it would be on a personal capacity.

Mrs Cunningham advised members that although there would be work that the Council needs to continue with, once the Chairman and Chief Executive of the PCC are in place we would have to concede to their leadership.

Mrs McMahon suggested that members continue to keep the dates of the January and March meetings in their diaries and if the need arises to call a meeting then it should not be a problem. Members agreed.

## **165/5 CHIEF OFFICER'S REPORT**

### **1. Progress against SHSSC work plan**

Mrs Cunningham referred members to the progress report on the key priorities and outcome for 2008/09. She provided a briefing on the progress to date on each project and said the Council was performing well in meeting its targets.

She informed members that the Chief Officers were attending an accountability meeting with the DHSSPS on 25 November regarding the work of the individual Councils and joint Council objectives.

Mr Murray referred to the SECs and said there was some progress on the Newry SEC but as regards Crossmaglen there seemed to be difficulty in identifying a site. However, he understood the Trust was trying to get temporary measures set up.

As suggested by Mr Kearns, it was agreed to liaise with the Trust and explore the possibility of a visit to the facility/area.

The Chairman said she had visited the Banbridge SEC as part of an audit and she was extremely impressed with the facility and the people who used it seemed very happy in the surroundings. She said she felt that some of the things the Council had been lobbying for had been taken on board.

In relation to the Bugwatch, Mr Henning expressed his disappointment that the Trust was aware of the evening Bugwatch visit to be undertaken by Mrs Burrell and himself. He said a list of wards was provided and they had to choose 2 from the list but there were a number of wards that could have visited. He felt that this was not the purpose of Bugwatch and it did not give a true picture.

Mrs Cunningham explained that the Trust had to take into consideration the security aspect and so a list of wards was agreed but the timing of visits was not.

## **2. Trust Business**

Mrs Cunningham reported that Trust reviews on statutory residential care, domiciliary care, and the development of integrated care teams were progressing and the SHSSC was representing the public interest in the reviews.

She informed members that the Chairman and Chief Officer were meeting with the Chief Executive and Chairman to discuss the Trust's Comprehensive Spending Review (CSR) proposals.

## **3. DHSSPS**

Piloting of new ways of delivering NHS dental services has now been made possible by legislation that has been passed. The HSSBs are going out to tender for 38 additional dentists at various locations to improve access.

#### **4. Other**

At the request of a member, Mrs Cunningham said the issue of ambulance cover in Newry, in relation to a specific incident, was raised. NIAS have responded that they were investigating the circumstances and would report to the SHSSC at the meeting.

#### **165/6 AMBULANCE SERVICES IN THE SOUTHERN AREA**

The Chairman welcomed the NIAS Chief Executive, Mr Liam McIvor and Mr Kenny McMahon, Divisional Officer, to update the Council on developments.

Mr McIvor outlined the Ambulance Service Mission statement which was to deliver effective and efficient care to people in need and improve the health and wellbeing of the community through the deliver of high quality ambulance services.

Its vision for the future is to have an Ambulance Service contributing to a safer community and a better quality of life through first class out of hospital emergency, non-emergency and disaster services.

He reported that the budget for the NIAS was £47m (£28 per person) - approximately 2% of the health budget. Resources available to the Trust include, 46 locations and 2 control centres, 307 ambulance vehicles, and 1000+ staff. Activity last year increased by 8%.

He outlined some of the highlights in 2007/08 in improving Cardiac Arrest Survival. These included an improvement in response times; the development of technology, and paramedic training; an increase in tactical deployment; thrombolysis extended; and centralisation of pharmacy.

Mr McIvor said that while the Trust had sound financial performance last year there was a difficult climate ahead with efficiency savings at 3% per annum.

The major challenges facing the Ambulance service in 2008 – 2011 is performance improvement, service modernisation and achieving a financial balance.

Performance Improvement – Ambulance specific priorities - from April 2008 70% of category A calls must be reached within 8 minutes and by March 2009 62.5% by individual Board areas. Thrombolysis must be rolled out throughout NI by March 2009. Ambulance related priorities include fractures, discharge targets, dialysis therapy etc.

Service Modernisation – There needs to be a shift in focus from patient transportation to pre-hospital clinical care. Available resources must be matched to demand for emergency and non-emergency services. Demand and offering alternative care pathways must be managed, and investment funds available for modernisation must be maximised.

Finance - In relation to achieving the financial balance, Mr Mclvor said money made available to NIAS has been reduced by the efficiency savings. Investment is distinct from efficiency.

He explained that efficiency was not just about cuts in spend, it is making the current system more efficient in terms of operational efficiency / productivity and / or reshaping and changing the current service provision in directions that are preferred by users, and are of equal or better clinical effectiveness.

Proposals for efficiency savings in 2008-09 will include the reconfiguration of emergency and non-emergency ambulance provision, and increase in in-house servicing of the fleet. To reduce staff absence, training expenditure, and administrative costs, and also reduce voluntary car costs by carrying more patients per car journey.

In order to make efficiency savings this would see a planned reduction in emergency ambulance response hours but there would be investment in additional rapid response vehicles to increase rapid response cover. Doctor Triage in Control would be introduced to offer alternative to emergency ambulance response and transport. This would target remaining emergency ambulance hours to transporting clinically appropriate patients.

Mr Mclvor explained that there were risks associated with the efficiency proposals. It could mean a delay in patient transport and the necessity to reduce demand. It will be necessary to

engage with staff and there is also the need to educate the public in the use of 999 calls.

He said the solution to the challenges facing the service in 2008/09 was to work smarter and harder to match supply with demand.

Mr McCart expressed his gratitude to the paramedics and the ambulance service and said that if it had not been for the rapid response 2 years ago when he had a heart attack, he would not have survived.

Mr McIvor and Mr McMahon responded to questions from members regarding the delay in getting an ambulance to a recent serious accident in Newry; the challenge faced in educating the public; ambulance cover for South Armagh; and the effect on services now that Pharmacies have declined to provide treatment for minor ailments.

The Chairman thanked Mr McIvor and Mr McMahon for their very comprehensive presentation and they left the meeting.

#### **165/7 PRESS RELEASE TOPIC**

It was agreed to issue a press release on Ambulance cover in the Southern Area

#### **165/8 REPORT BACK FROM MEETINGS**

##### 1 Governance

Mrs McMahon reported that a meeting scheduled for 15 October did not happen and therefore she had nothing further to report.

##### 2 Environmental Cleanliness

Mr Murray reported that he was involved in the Environmental Cleanliness audits at Daisy Hill Hospital and he said hospital cleanliness was of a very high standard with the exception of the area outside the front of the hospital where people smoke and leave their cigarette butts lying around.

Audits were also ongoing with regard to the cleanliness and suitability of community facilities.

3 Lay Assessor Visit

Mr McCart reported that he had visited a practice in the New Health Centre in Kilkeel recently and was very impressed. He said the Health Centre was state of the art and should be a blueprint for other health centres.

Mr Murray referred to his visit to a surgery in Newry and it was pointed out that GPs were not kept informed of changes when new consultants are appointed.

He reported that the new clinic in Meigh was moving ahead and he felt the Council had some influence in this development.

The Chairman informed members that in future the Department of Health would be conducting a National survey with GPs and this would take away the local input.

4 Cardiovascular Workshop

Mr Donaghey asked if the results of the Cardiovascular workshop in Cookstown would be used effectively. The Chairman said she believed the results would be taken on board the findings.

**165/9 FOR INFORMATION**

- 1 SHSSB – Minutes of Board Meeting held on 9 September 2008
- 2 SHSCT – Minutes of Board meeting held on 26 June 2008
- 3 SHSSB – Annual Report 2007/08

**165/10 ANY OTHER BUSINESS**

No other business was discussed.

**165/11 DATE OF NEXT MEETING**

Tuesday 16 December 2008 in the Offices of Banbridge District Council

**Mr McCart left the meeting at 12.10 pm**

**Ms Haughey left the meeting at 12.10 pm**

**Mr Twyble left the meeting at 12.35 pm**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_