

**MINUTES OF THE EASTERN HEALTH & SOCIAL SERVICES COUNCIL  
MEETING HELD ON THURSDAY 15 MAY 2008 AT 5.30PM IN THE  
LEWIS ROOM, MOUNT CONFERENCE CENTRE, 2 WOODSTOCK LINK,  
BELFAST, BT6 8DD**

**PRESENT:** Mr B Compston  
Mr C Graham  
Mrs E Hamilton  
Mr R Marshall  
Mr J McDowell  
Mrs P McGrogan  
Mrs R McGrotty  
Mr D Meredith  
Mrs M Muldoon  
Cllr P C Mullaghan  
Mr E O'Neill

Mr C Graham was in the Chair

**IN ATTENDANCE:**

Mr Richard Dixon, Chief Officer  
Mrs Angela Campbell, Job-Share Office Manager  
Mr Tom Bennett (for Minute 37/08)

**29/08 APOLOGIES** were received from Cllr D Curran and Miss M Patterson.

**30/08 EHSSB BUSINESS**

It was noted that Dr Kilbane, Chief Executive of the EHSSB had given her apologies for this meeting due to holidays, but that Members had received Board papers.

The Chair informed Members that he was impressed with the new presentation style within the Draft Annual Report 2008 and commended the Board.

**31/08 MINUTES OF PREVIOUS MEETING HELD ON  
THURSDAY 13 MARCH 2008**

The agenda in the Council minute book requires amendment to read "Minutes of previous meeting held on Thursday 13 March 2008", not 17<sup>th</sup> January as stated.

In response to Mr Marshall's enquiry as to whether the Orchardville visit on 21 February 2008 in was in lieu of a February Council meeting, the Chair replied that Standing Orders had been suspended and the Chief Officer confirmed this.

The minutes of the previous meeting held on 13 March 2008 were agreed as an accurate record, signed by the Chair and witnessed and signed by the Chief Officer.

**32/08 MATTERS ARISING FROM MINUTES**

(a) Minute 20/08 (b) - Unscheduled Care Update

The report is still with the Service Delivery Unit awaiting formal response. It is anticipated that the full report will be issued at the meeting on Monday 19<sup>th</sup> May. The purpose of the report is to inform the Clinical

Reference Group, whose purpose is to implement the targets. The Chief Officer is a member of this group.

(b) Minute 21/08 (d) - Election of New Chair

The Chief Officer informed the meeting that Mr Cecil Graham was nominated for Chairman unopposed with effect from 22 April 2008. The election process was then carried out for Vice-Chairperson and Mrs Mary Muldoon was elected Vice-Chair with effect from 14 May 2008.

Mr Graham thanked Members for their confidence in him as a Chair and said that he appreciated the high level of attendance at the meeting.

The Chair congratulated Mrs Muldoon, and thanked the three Members who had agreed to stand for election as Vice-Chair.

Mrs Muldoon thanked the Members and said that she would endeavour to do her best as Vice-Chair in support of Mr Graham. The Chair invited Mrs Muldoon to join both the Chair and the Chief Officer at the top table.

(c) Minute 22/08 – Farewell to Chair and Members

The Chair informed the meeting that Members did have an opportunity to say farewell to Miss Patricia McMillan, former Chair and Cllr Mrs Betty Campbell at a recent dinner. The Chief Officer said that there is a need for the Public Appointments Unit (PAU) to clarify how the 10 year rule should be operated as two members from the NHSSC were granted leave to remain beyond their 10 years, apparently in exceptional circumstances. In addition, two local government Councils in the Western area had been given leave to nominate new members in place of Councillors who had stood down. It was agreed that the Chief Officer would seek clarification from PAU.

(d) Minute 24/08 (d) – Meeting with Sir Reg Empey, 13 March 2008

The Chief Officer asked Members to note that in addition to a meeting with Sir Reg Empey, a meeting had also been requested with Miss Margaret Ritchie, Minister of Social Development. Due to diary pressures the Minister was not available but arranged for Senior Officials to meet a deputation from the Council.

A lengthy discussion ensued about the need for a named link person to co-ordinate the collaborative work required relating to education, employment and vocational training, respite services and housing. The Chief Officer clarified for Members that it is primarily a health matter and there is a lead person in the DHSS&PS. The Chief Officer stated that there are approximately 30 people currently resident in Muckamore Abbey Hospital who have the capacity for training and rehabilitation. There is an aim on the part of the EHSS Council to continue to look at Learning Disability with the emphasis on respite services. At the meeting with the Minister for Employment and Learning it had been stated that confirmation of European

funding, then imminent, would enable the Department to give a definitive answer on the availability of training places.

The Chief Officer sits on the Resettlement Programme Board. It was noted that the target of 40 people to be resettled by March 2008 was achieved. The next target is to ensure no children are resident in Muckamore Abbey Hospital by March 2009. The ultimate target for 2014 is that no-one will have a learning disability hospital as their permanent residency. However, The Board are concerned about insufficient community support and infrastructure to enable this final target. An extra bid has been made to the Department of Finance and Personnel for social housing.

(e) Minute 25/08 (a) - Work Programme 2008/09

The Chief Officer estimated that there would be a loss of capacity of between 20-30% to fulfil the current work programme. This is due to the recent resignation of Mr Sean Brown, Senior Manager to take up a permanent position within RQIA, following almost four years on temporary contract basis with the EHSSC. His departure date will be either 9 or 29 June.

The Chair noted that this was a good career move for Mr Brown who has given invaluable service to the Council.

The Chair suggested that a summary be prepared for each ongoing workplan activity by December in order for handing over to the PCC. It was hoped that there may be continuity in some Members from EHSSC being appointed to PCC along with some of the elected representatives.

Members were informed that the complaints advocacy service provided by Bryson House has been increased to four days per week following a recent evaluation of this service.

(f) Minute 25/08 (b) – Stroke Strategy Update

A copy of the consultation response has been forwarded. A long-term view needs to be taken into consideration including carers' views. The Department should ensure any strategy takes a balanced approach between prevention, emergency response and the long-term needs of patients and carers living with disability following stroke. No formal feedback has been received from the Department, but this will be shared with Members in due course.

### **33/08 INPUT FROM COUNCIL MEMBERS**

(a) Evaluation of North and West Belfast Residential and Nursing Homes Advocacy project

Mrs McGrotty attended the launch of the above report at Bryson House Charitable Group on 4 April 2008. (Copies will be available from the Council office for Members on request.) This was a partnership pilot project started in

June 2004 involving the Belfast Health and Social Care Trust, Bryson House Charitable Group and the Belfast Regeneration Office who funded the project.

The project piloted, over a three year period, an independent advocacy service for older people living in two statutory and four independent care homes located in areas of disadvantage in North and West Belfast over a three year period.

The Chief Officer informed Members that the report of the joint project sponsored by the four HSS Councils looking at Advocacy for Older People in Residential Care and Nursing Homes was currently with the printing company. A number of recommendations were made and the two reports are complementary.

Mrs McGrotty who was a representative on the EHSSB Strategy Sub-Group for Older People was pleased that individuals' views were being heard by the Office of First Minister and Deputy First Minister (OFMDFM) who plan to appoint a "champion". A view was expressed that resources should be centralised and projects not duplicated.

(b) Northern Ireland Ambulance Service

Mr Meredith reported that Mr Marshall and he had attended the formal opening of the Northern Ireland Ambulance Service's (NIAS) new Regional Emergency Medical Dispatch Centre at its Belfast Headquarters on 14 May 2008. A recent upgrade, following Council's visit in December 2007, included a digital mapping system.

The Chair drew Members' attention to the copy of the tabled letter dated 6 May 2008 from Mr Sean Brown, Senior Manager, regarding NIAS and Category C Calls, which informs Members that the recent pilot in the NHSSB area is to be rolled out regionally from 1 July 2008 to 30 March 2009.

(c) Midwifery-Led Unit in Downpatrick

Mr O'Neill thanked the Chief Officer for the recent circulation of information regarding the midwifery led unit in Downpatrick. The intention is now to incorporate the unit within the new Downe Hospital which has advantages and should be welcomed.

The Chair said that Council would keep this issue on the agenda as it has a role to play in the oversight of the development of this project. The Chief Officer added that he, assisted by the Information Analyst, would prepare a briefing for Members by June on the issue of various anticipated changes within the South Eastern Trust.

(d) Access to Services within the Newcastle/Castlewellan region

Mr O'Neill expressed concern about the increased volume of traffic arising from holiday traffic in the Newcastle area, which increases the risk for serious

accidents and subsequent difficulties for ambulances to gain access to rural areas. He said it was very significant that the Ambulance service had received criticism about the age of its stock.

In view of the above two items (c) and (d), Members agreed to consider inviting Mr John Compton, Chief Executive of the South Eastern Trust to a future Council meeting, possibly in August or September 2008.

#### **34/08 CHAIR'S REPORT**

(a) School of Sociology, Social Policy & Social Work Queen's University of Belfast

The Chair stated a letter had been received inviting the Council to participate in a survey on patient choice being undertaken by the School of Sociology at QUB in collaboration with other universities in Great Britain. The Chair recommended participation and this was agreed.

(b) Committee Representation

Previously Members were invited to express their preferences in relation to committee representation, but given the recent reconfiguration and prioritising, Members agreed that the Chair, Vice-Chair, and Chief Officer would decide on the allocation of Members to the various committees.

#### **35/08 CHIEF OFFICER'S REPORT**

(a) Joint EHSSBoard/EHSSCouncil Meeting

It was previously suggested that a joint meeting would be held on 19 June 2008 in lieu of the EHSSC meeting. However, the Board cannot make this date and have sought dates from the Council.

In response to Mr Marshall's enquiry if there were to be four meetings with Board per year as a statutory requirement, the Chief Officer clarified it is a requirement of EHSSC Standing Orders to meet at least once per year and the secretariat function would be provided by the Board.

The Chair stated that he was seeking a good attendance at this meeting, which is likely to be the last formal meeting between Board and Council.

(b) Final response to Health and Social Care Reforms

Following the Joint Council Event at Belfast Castle on Thursday 1 May 2008, the four Chief Officers prepared a response to the Health and Social Care Reforms and this was issued to Members on 12 May 2008. It was noted that this was a good consensus and a coherent report.

The Chair welcomed questions/comments from Members.

Mrs Hamilton extended congratulations to the Chief Officers, stating that the response covered everything and expressed her thanks for the organisation of a successful day.

In reply to Mr Marshall's enquiry as to whether the omission of a response to Questions 15 onwards was deliberate, the Chief Officer explained that they had to prioritise the issues but that the issues of Equality and Human Rights did form part of the response submitted.

In reply to Mr Marshall's further question as to what had happened to the proposed Community Commissioning Associations, the Chief Officer explained that they are now defunct and that the substructure of the Local Commissioning Groups (LCGs) may be decided by the LCGs in the future.

Mr Marshall stated that the LCGs compose mainly of professionals and he was concerned about the lack of representation of local people. The Chief Officer clarified that the LCGs included four elected representatives and one layperson, and it is made clear that their responsibilities include robust engagement with the community whom they serve.

The Chair explained he understood that Minister McGimpsey thought the structures were too complicated and required thinning down. The Chair also stated that the PCC would have more powers to engage with other health service family organisations.

Mr Marshall expressed concern at the absence of legislation by May 2008. The Chief Officer explained that there is a very tight timescale whereby consultation closed Monday 12 May 2008 and the legislation is due to go before the Assembly on 10 June 2008 for establishment of the new structure by 1 April 2009.

The timetable for the legislative process is outlined below:

23 June 2008	First Reading
1 July 2008	Second Stage
1 September 2008	Health Committee then Royal Assent

Mr Marshall asked if the Public Appointments Unit have to wait until October 2008 before advertising for Chairs and Chief Executives. The Chief Officer replied that if the First Reading and Second Stage proceed to time, then there would be sufficient comfort to begin the process of recruitment for the Chair and Chief Executive of both the Regional Health and Social Care Board and the Patient Client Council.

(c) Unscheduled Care Advertising Campaign Belfast

The purpose of this campaign is to raise awareness of the targets by issuing postcards to Accident and Emergency Departments, Minor Injury Units, MLAs' and MPs' offices and via posters on bus shelters in Belfast and the

North Down and Ards area. The posters and postcards will be removed and collected at the end of the two week campaign. Feedback will be given to Members at a later date.

(d) North and West Belfast Information Leaflets

These information leaflets have been developed in consultation with Falls and Shankill Womens' Groups, PIPS and RAYS in a bid to provide more accessible information. Members were provided with a copy of the leaflet.

The target for people to receive an appointment within 48 hours within General Practice will also be repeated later in the year in the North and West Belfast area. Members were asked to note that the removable card attached to the leaflet was carried out by Orchardville's Business Centre.

### **36/08 CORRESPONDENCE**

Paper EC/06/08 was taken as read, with no additional items being discussed. The Chief Officer advised Members, if interested in requesting any of the documents itemised, to telephone the office as soon as possible.

### **37/08 MEMBERS OF THE PUBLIC**

The Chair stated that Council welcomed the presence of the Members of the Public who were interested in Council business. He particularly welcomed Mr Tom Bennett, who had requested speaking rights at the Council Meeting.

Mr Bennett was concerned about the new complaints procedure to be introduced by the Department. An External Reference Group was set up but Mr Bennett said that he failed to see how they could substantiate the term "external" as the group consists of Board, Trust and Department representatives. He said that he had discussed his concern at length with Ms Maggie Reilly, Chief Officer of the WHSSC who sits as representative of the four Health and Social Services Councils on this group. Mr Bennett stated that no representation was sought from complainants. He felt that the general consultation was hollow and there was a need to consult in a representative fashion. He said he has been in communication with Trusts and Board over the last seven years through the HPSS complaints procedure.

Mr Bennett asked that the EHSSC should withdraw from the Complaints Implementation Group External Reference Group until there was adequate input from the public and proper public representation was heard, otherwise he felt the new system would be no better than the current system. He stated that there is no adequate advocacy in the current system and therefore complainants have no chance. He added that there was no recourse by complainants unless to litigation which is unsatisfactory.

Mr Bennett asked Council to seek a Judicial Review if necessary.

The Chair acknowledged Mr Bennett's commitment, sincerity and his legal background explained that Council will need to consult on this request before responding to him, given that they just had sight of his letter.

Mr Marshall, thanked Mr Bennett for his letter. He explained that the Trust Board Complaints Committee had legal representation and a record of well documented complaints which were taken forward and dealt with in the proper representational manner. He therefore asked Mr Bennett to further clarify his concerns over the process.

Mr Bennett explained that he had been involved in the complaints process for several years with the Board and with three Trusts, and that the manner in which the process had been managed had given him grave cause for concern.

The Chair explained to Mr Bennett that Council would have to look at the facts generically, not specific cases.

Mr Bennett said that he had referred the matter to the Minister and the Health Committee at the Department of Health, Social Services and Public Safety. He reiterated his concern about the External Reference Group.

The Chair stated that Members were not in a position to say yes or no to Mr Bennett's request at this stage. Council, as a whole, can only look at general points not specific cases. The Chief Officer and Members agreed.

Mr Bennett said that his fear was that the Department would impose the new procedure in a 'fait accompli' fashion and there was an urgency about his request. The Chair replied that Council appreciated his concerns and noted the circulation list to whom Mr Bennett had previously addressed his letter, namely, the Minister, the Chair of the Health Committee at the NI Assembly, the Chairs and Chief Officers of all four HSS Councils, RQIA and the Commissioner for Complaints. The Chair thanked Mr Bennett for his attendance and confirmed that the EHSS Council would consider the issues raised and seek to provide a response as soon as possible.

### **38/08 ANY OTHER BUSINESS**

- (a) Downe Hospital  
Cllr Dermot Curran, having raised this matter, had sent written apologies as he was unable to attend the meeting. The issue of the Downe Hospital, it was noted, had arisen earlier, nevertheless.
  
- (b) Fall in MRSA rates within Winchester and Eastleigh Healthcare NHS Trust  
Mrs McGrotty drew Members' attention to an article she had read in "The Times" dated 9 May 2008. The article, by Nigel Hawkes, was entitled "New rules cut hospital MRSA cases" and outlined how the Winchester and Eastleigh Healthcare NHS Trust had introduced new rules in two of its hospitals requiring tougher rules for the use of intravenous fluid tubes including authorisation by a specialist and flushing with saline solution. The new rules resulted in a fall in MRSA statistics within the Trust and no new cases have been reported since November 2007. Mrs McGrotty asked if the

EHSS Council would consider if the same procedures could be adopted in Trusts throughout Northern Ireland.

The Chair said that recent HSS Council Bugwatch surveys had revealed that there remained issues of concern with regard to hospital cleanliness. However, Mrs Hamilton stated that this was a very narrow study regarding MRSA bloodstream infections related to cannulae whereas MRSA was a much wider issue. The Chief Officer stated that the four HSS Councils had prioritised their workplan activities, but the WHSSC had repeated the Bugwatch activity twice.

The Chair said that Council would note the article at this stage.

(c) Funding for Cross Departmental collaborative working

Cllr Mullaghan asked if three Departments were involved in collaborative working who would co-ordinate and ringfence funds and what Department does the funding come from. He stated that he had attended a meeting regarding Autism which has a good lobby group whereas others may struggle.

The Chief Officer stated that the reorganisation of Health and Social Services into five Trusts and the imminent creation of a new single Regional Health and Social Care Board should create the expectation of improved inter-departmental working on matters relevant to health and well-being. He stated also that the proposed new Regional Public Health Agency would have a substantial and strategic remit to push forward cross-cutting agendas that impact on health - such as housing and community safety. The presence of local elected representatives on Local Commissioning Groups, on the Patient Client Council and on the Regional Public Health Agency strongly suggests strategic linkages with both local and central government. Taken together, all of these proposals should create a high expectation of increased intersectoral working."

(d) EHSSC Complaints Sub-Committee

Mr Compston raised a matter which was discussed at a recent EHSSC Complaints Sub Committee. Mr Compston was seeking an update on any action taken as a result of this case to ensure it would not happen again. The Chief Officer replied that he would speak with Mr Newman, Senior Manager dealing with complaints and provide a briefing to a full Council meeting.

The Chair stated that Council should consider trends and principles, not specific individual cases.

(e) Review Of Services For Acquired Brain Injury

The Chief Officer was recently appointed by the Department as the Chair to take the lead in the above Review.

The Chief Officer explained that the review involved a review of services provided for those who suffered acquired brain injury as a result of a trauma. The Review began 17 April 2008. The Chief Officer said that initially he anticipated he would require one day per month for this review until the end of September. The EHSS Council office will also provide the secretarial support. The Terms of Reference include the equity of distribution of services and how different parts of the service interrelate, then make recommendations to the Minister. Certain complex disabilities and needs are regionally managed. The Chief Officer will engage with service leads for six to eight weeks including the voluntary sector.

(f) Departure of Mr Sean Brown, Senior Manager, from EHSSC

The Chair informed Members that Mr Sean Brown may have left the Council by the time of the next Council meeting, but hoped that a coffee morning would be arranged for Members to say farewell to Mr Brown. The Chief Officer said that he hoped he spoke for all the Members and staff when he said that Mr Brown was held in high regard and personally wished him well.

**39/08 DATE, TIME AND VENUE OF FUTURE MEETINGS**

The next Council Meeting will be held on Thursday 19 June 2008 at 1.30pm. It was subsequently agreed that this meeting be cancelled to ensure good representation at the joint Board/Council meeting on 25 June 2008.

Joint EHSSB/EHSSC meeting confirmed for Wednesday 25 June 2008 at 2.30 pm in Champion House.

Thursday 21 August 2008 – time and venue to be confirmed.

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

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Chief Officer