



April 28th, 2026

Notice Of Meeting

You are requested to attend the Council meeting to be held on **Tuesday, 28th April 2026** at **6:00 pm** in **Mourne Room, Downshire Civic Centre.**

Agenda

1.0 Apologies

2.0 Declarations of Interest

3.0 South Eastern Health Trust

In attendance:

Roisin Coulter

Veronica Cleland

📎 *Letter to CEO South Eastern Trust - matters raised - 10 April 2026.pdf*

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📎 *Matters raised at Health Working Group (NMDDC).pdf*

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4.0 Southern Health Trust

In attendance:

Brian Beattie, Director of Adult Community Services

Elaine Wilson, Director of Planning, Performance & Informatics

📎 *Southern Trust Letter 25 March 2026 - S Spoerry - Chief Executive.pdf*

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📎 *NMDC Health Working Group 21.04.26.pdf*

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5.0 Northern Ireland Ambulance Service

Due to the launch of their Release to Rescue Plans NIAS personnel are unable to attend - a further meeting will be arranged.

📎 *NIAS Letter 25 March 26 - M Patterson - Chief Executive.pdf*

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Invitees

Cllr Terry Andrews

Cllr Callum Bowsie

Fionnuala Branagh

Cllr Jim Brennan

Cllr Pete Byrne

Cllr Philip Campbell

Mr James Campbell

Cllr William Clarke

Cllr Laura Devlin

Cllr Cadogan Enright

Cllr Killian Feehan

Cllr Doire Finn

Cllr Conor Galbraith

Cllr Mark Gibbons

Cllr Oonagh Hanlon

Cllr Glyn Hanna

Cllr Valerie Harte

Cllr Martin Hearty

Cllr Roisin Howell

Cllr Tierna Howie

Cllr Jonathan Jackson

Cllr Geraldine Kearns

Miss Veronica Keegan

Cllr Aurla King

Cllr Cathal King

Ms Elaine Kirk

Cllr Mickey Larkin

Cllr Niall Lawlor

Cllr David Lee-Surginor

Cllr Alan Lewis

Cllr Oonagh Magennis

Mr Conor Mallon

Cllr Aidan Mathers

Cllr Declan McAteer

Cllr Kate Murphy

Cllr Selina Murphy

Sinead Murphy

Cllr Declan Murphy

Cllr Siobhan O'Hare

Mr Andy Patterson

Cllr Áine Quinn

Cllr Henry Reilly

Cllr Michael Rice
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Cllr Michael Ruane
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Donna Starkey
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Sarah Taggart
.....
Cllr David Taylor
.....
Cllr Jarlath Tinnelly
.....
Ms Sinead Trainor
.....
Cllr Jill Truesdale
.....
Mrs Marie Ward
.....
Cllr Helena Young
.....

Marie Ward
Chief Executive



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Roisin Coulter
Chief Executive
South Eastern Health and Social Care Trust
Trust Headquarters
Ulster Hospital
Upper Newtownards Rd
Dundonald
BT16 1RH

10 April 2026

Dear Roisin,

Health Working Group (Newry, Mourne and Down District Council)

Newry, Mourne and Down District Council held a meeting of the Health Working Group members on 4 March 2026. At this meeting the following matters were raised, and it was agreed that they should be forwarded to yourself for consideration and response.

These issues will be tabled at the Special Council Meeting of Newry, Mourne and Down District Council on 28 April 2026, but to allow those who may not be able to attend this meeting to be fully informed on the matters raised, I would be grateful if you forward your response in writing by 21 April 2026.

1. *Older people have difficulty accessing hospitals using both the telephone and internet.* It would be appreciated if the Trust could explain what measures are currently in place to assist older people and detail any future improvements that are planned?
2. *Older people and those with mobility issues may not want to attend appointments due to the long waiting times at the hospitals.* It would be appreciated if the Trust could explain the support available to older people including those with mobility issues when attending hospital.
3. *Does the Trust have any community transport plans to assist patients making it to their hospital appointments, especially those in rural communities?*
4. *Recruitment and retention of Trust staff remains a key priority.* The Council would welcome an update on current recruitment activity across the Trust, including any areas where targets are not being met. In addition, could the Trust outline the measures being implemented to support the retention of existing staff.



5. *Patients presenting at A&E with mental health needs or addiction issues require appropriate and timely care.* Could the Trust outline how individuals with mental health conditions or addiction are assessed, supported, and treated when they attend A&E.

I look forward to your response on these matters.

Yours sincerely

Sinead Murphy
Director of Sustainability and Environment



Chair
Jonathan Patton

Chief Executive
Roisin Coulter

21 April 2026

Sinead Murphy
Director of Sustainability and Environment
Newry, Mourne and Down District Council

Dear Sinead

RE: Health Working Group (Newry, Mourne and Down District Council)

Thank you for your correspondence received 10 April 2026. Please see responses to the queries submitted below:

- 1. Older people have difficulty accessing hospitals using both the telephone and internet. It would be appreciated if the Trust could explain what measures are currently in place to assist older people and detail any future improvements that are planned?**

The Trust recognises that some older people experience difficulties accessing hospital services via telephone and online systems. To mitigate this, alternative arrangements are in place, including face-to-face support, assistance from staff, and engagement through carers or advocates where appropriate. This includes proxy access arrangements for My Care (a secure online patient portal that provides access to specific parts of a patient's health record), allowing a nominated person (usually a trusted family member or carer) to support older people to manage appointments, correspondence and aspects of their care where needed.

Services continue to adopt flexible, community based approaches to reduce reliance on digital access, including domiciliary and locally delivered care, accessible written communications and aphasia friendly information. Future service development will continue to focus on delivering care closer to home and reducing unnecessary hospital attendances for older people.

- 2. Older people and those with mobility issues may not want to attend appointments due to the long waiting times at the hospitals. It would be appreciated if the Trust could explain the support available to older people including those with mobility issues when attending hospital.**

The Trust provides a range of measures to support older people, including those with mobility difficulties, when attending hospital sites.

A limited number of wheelchairs are available at hospital entrances for patient use. In addition, some services can offer home-based assessments or visits where travel to hospital is not feasible, subject to clinical triage and service availability.

Within the Ulster Hospital, a new self-service smart wheelchair solution has been introduced and is currently available at two locations: the Outpatients entrance and the multi-storey car park. A third location at the Critical Care entrance is planned in the coming weeks.

Planned visits to the Downe and Lagan Valley Hospital sites will support further implementation of the self-service smart wheelchair model, providing additional mobility aids at central locations to improve accessibility for patients.

- 3. Does the Trust have any community transport plans to assist patients making it to their hospital appointments, especially those in rural communities?**

Responsibility for the planning and funding of community transport sits with the Department for Infrastructure (DfI) rather than individual Trusts. DfI provides funding to Community Transport Association (CTA) groups, which deliver community transport services that can assist people, including those living in rural areas, to access essential services such as healthcare appointments.

In addition, the Northern Ireland Ambulance Service (NIAS) provides non-emergency patient transport services across Northern Ireland for patients who have a medical need for transport to attend hospital outpatient appointments, investigations, admissions, inter hospital transfers or hospital discharges. Access to this service is based on clinical necessity and eligibility must be confirmed by an appropriate clinician where a patient is unable to travel by other means due to immobility or the nature of their medical condition or treatment.

Trust services continue to support patients by signposting to available community transport schemes or voluntary transport options where appropriate, including for patients attending appointments from rural areas.

- 4. Recruitment and retention of Trust staff remains a key priority. The Council would welcome an update on current recruitment activity across the Trust, including any areas where targets are not being met. In addition, could the Trust outline the measures being implemented to support the retention of existing staff.**

The Trust continues to prioritise recruitment, workforce stabilisation and staff retention. Ongoing recruitment activity is focused on reducing reliance on agency staffing through increased permanent appointments and greater use of bank staff, including the recent expansion of the Corporate Bank to Allied Health Professional and Social Care roles. Stabilisation within Medical Staffing continues to perform strongly, with 81% of posts filled at first recruitment, demonstrating effective workforce planning and delivery.

Targeted recruitment campaigns have been delivered in areas of high demand and historically hard-to-fill posts, using a multi-channel approach and more flexible recruitment processes. These have included evening and weekend recruitment and interview sessions to improve accessibility and attract candidates into key roles.

Once appointed, staff are supported through structured induction, mandatory and role specific training, regular supervision, appraisal, best practice HR policies with a strong emphasis on flexible working practices and ongoing professional development. Staff wellbeing remains a core priority, with access to occupational health and psychological support services, debriefing arrangements and a strong emphasis on values and positive behaviours across services.

- 5. Patients presenting at A&E with mental health needs or addiction issues require appropriate and timely care. Could the Trust outline how individuals with mental health conditions or addiction are assessed, supported, and treated when they attend A&E.**

Patients presenting to the Emergency Department with mental health or addiction needs are triaged and risk assessed on arrival and, where required, supported by the Trust's Mental Health Liaison Service to ensure appropriate assessment, treatment and onward care in the most suitable setting.

Yours sincerely



Roisin Coulter
Chief Executive

Marie Ward
Chief Executive



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25 March 2026

Steve Spoerry
Chief Executive
Southern Health and Social Care Trust
Craigavon Area Hospital
68 Lurgan Road
Portadown
BT63 5QQ

Dear Steve,

Health Working Group (Newry, Mourne and Down District Council)

Newry, Mourne and Down District Council held a meeting with the Health Working Group members on 5 March 2026. At this meeting the following matters were raised, and it was agreed that they should be forwarded to yourself for consideration and response.

These issues will be tabled at the Special Council Meeting of Newry, Mourne and Down District Council on 28 April 2026, but to allow those who may not be able to attend this meeting to be fully informed on the matters raised, I would be grateful if you forward your response in writing by 21 April 2026.

1. *The "golden hour" is vital in stroke rehabilitation.* Can the Trust explain given the travel distances to centralised hospitals how treatment can be delivered effectively for the people who live in the Newry, Mourne and Down District Council area.
2. The Council would welcome an update on the development of Newry Health Hub, including whether any alternative sites are currently being considered for this project.
3. *Domiciliary/Home care is very difficult to attain at present.* What plans does the Trust have to improve this necessary service?
4. *GP Out of Hours facility in the Mournes DEA closed during Covid.* An update on the GP out of hours provision in the Mournes area would be appreciated.
5. Does the Trust have any plans within community transport to assist patients including those in rural communities to attend hospital appointments?



6. Can the Trust provide an update on the provision of the dental care service (including free services).

I look forward to your response on these matters.

Yours sincerely

Marie Ward
Chief Executive

**Health Working Group
(Newry, Mourne and Down District Council)
21.04.26**

1. The “golden hour” is vital in stroke rehabilitation. Can the Trust explain given the travel distances to centralised hospitals how treatment can be delivered effectively for the people who live in the Newry, Mourne and Down District Council area.

Anyone in the Southern Trust who is suspected of having a stroke can be assessed urgently for stroke treatment.

Since 2023, due to medical staffing challenges, to maintain patient safety and clinical sustainability, acute stroke care for the Southern Trust area has been provided from Craigavon Area Hospital.

The Trust has an established stroke divert protocol in place with the Northern Ireland ambulance service. All patients with a suspected acute stroke are brought directly by ambulance to Craigavon Hospital. This ensures rapid access to the team of expert staff with the training and resources needed to deliver the best outcomes for patients.

Since this divert has been in place, more patients in the Southern Trust have been able to receive thrombolysis. Whilst prompt assessment is always recommended, in some cases, hyperacute treatments can be delivered up to 24 hours after onset of symptoms.

Staff at both Daisy Hill and Craigavon Area Hospitals are continually trained so they can carry out the first checks quickly and provide treatments that restore blood flow as fast as possible.

Should a patient arrive at Daisy Hill Hospital Emergency Department (ED) with suspected stroke symptoms, there are services in place to quickly assess, stabilise, treat and transfer to Craigavon Area Hospital or the Royal Victoria Hospital as clinically required. Following their acute inpatient care, patients who need ongoing rehabilitation may be transferred to one of the Trust's stroke/rehabilitation wards in Daisy Hill Hospital or Lurgan Hospital or the community team for ongoing support. Both the public and primary care colleagues are reminded that suspected stroke is a medical emergency and that 999 should be contacted in the first instance. The Trust keeps these arrangements under review and recruitment efforts are ongoing to improve medical staffing.

With regards to medium to long term stroke provision, the Department of Health is taking forward hyperacute stroke hospital reconfiguration, which includes Daisy Hill and Craigavon hospitals, as part of the Reshaping Stroke Care, Stroke Action Plan. This work is currently focusing on the sustainability of the existing eight regional acute sites, after which a decision on whether reconfiguration is required, will be taken. The Department will refer to established guidance regarding the necessity for public consultation as and if service reconfiguration is indicated at the appropriate time.

2. The Council would welcome an update on the development of Newry Health Hub, including whether any alternative sites are currently being considered for this project.

The Trust continues to await the outcome of the Department of Health Capital Budget Exercise 2026-27 to 2029-30, which will indicate potential capital funding over the next 3 years and projects, which will proceed. Once the outcome of this exercise is known the Business Cases for those, which will proceed within this timeframe will be updated and resubmitted to the DOH for approval. At this time, no other alternative sites are being explored for Newry Community Treatment and Care Centre.

3. Domiciliary/Home care is very difficult to attain at present. What plans does the Trust have to improve this necessary service?

The Southern Trust, like other Trusts, is facing enormous and rapidly increasing challenges in meeting the significant and rising demand for services. Despite the pressures, our hard-working Home Care staff across both the Trust and Independent Sector partners continue to work tirelessly supporting approximately 5,000 people in their own homes, every day.

With ongoing pressures right across health and social care, staff are working very hard in difficult circumstances to protect the safety and dignity of service users.

Social Care like many other professions is experiencing workforce pressures, particularly in rural areas where it is more difficult to recruit and retain staff. We are continuously working to improve our range of community services and actively recruit staff.

We acknowledge that waiting on home care support can be challenging for service users and families and ask for understanding as we work through these challenges. All care packages are kept under review and key workers are available to offer advice and support to families with any issues or concerns.

We also appeal for families, where they can, to support with caring for their loved ones or potentially to accept alternative care while waiting for a longer-term option.

The Trust has also introduced a new digital system for Trust Home Care teams to help modernise the service. By moving to a digital record, service user families have a peace of mind about their loved one's care as they are able to have access to information and recorded notes of visits. Staff access to real-time information allows for more informed decision making, schedules and rotas and digitising the administration tasks, allows them to save valuable time that can be redirected to the care of service users.

The Trust can also advise that we are currently carrying out a comprehensive review of all aspects of how we manage the processes around assessing for, commissioning, reviewing and providing home care. Our continued aim is to provide the most efficient and responsive service possible, to ensure that our service users get access to the services they require when they need them. When service users improve, becoming more independent and can manage without any or less home care support, any home care time freed-up will be reallocated to another service use in need.

4. GP Out of Hours facility in the Mournes DEA closed during Covid. An update on the GP out of hours provision in the Mournes area would be appreciated.

It is important to advise at the outset, that the vast majority of our population who make contact with the Southern Urgent Care GP Out of Hours service (GPOOHs), have their concerns resolved through their access to GPOOHs via telephone. In a very small percentage of cases, individuals require to attend a GPOOHs base to be assessed face to face and in an even smaller percentage of cases, individuals require support from a GPOOHs Doctor visiting them in their home.

Due to persistent difficulties in staffing recruitment impacting on our ability to cover rotas and to safely maintain the service for the whole area, the Urgent Care (GP) Out of Hours Service consolidated base appointments to the Daisy Hill and Craigavon Area Hospital sites from late July 2021.

This allowed the Trust to make the most efficient use possible of the staff that were available and to respond to all aspects of the service - telephone support, base appointments and home visits - for patients from across the entire Southern Trust area.

Given the current financial and ongoing workforce pressures, maintaining a safe and effective Urgent Care Out of Hours service to all patients residing in the Southern Trust remains our priority.

We would like to reassure patients that the current temporary closure of the Kilkeel base has not resulted in any change for the majority of patients who receive telephone triage and advice and for those who require a home visit.

Whilst we keep the staffing situation for the Urgent Care Out of Hours Service under review, we are continuing to experience increasing demand and significant pressures across health and social care.

5. Does the Trust have any plans within community transport to assist patients including those in rural communities to attend hospital appointments?

The Southern Trust is not commissioned to provide or support any home to hospital transport services for patients living in rural areas.

6. Can the Trust provide an update on the provision of the dental care service (including free services).

General Dental Practitioners are independent contractors, managed by the Department of Health, Strategic Planning and Performance Group (SPPG).

The Community Dental Service (CDS), provided by the Southern Health and Social Care Trust provides dental care for those who require extra help due to their additional needs. This service is free of charge for all patients. The experienced CDS Team helps children

and adults who have physical, emotional or medical needs and who cannot manage treatment with a family dentist.

They also provide some treatments in the community for those unable to leave their home and treatment in the hospital setting under general anaesthetic for children and adults who require this.

There are challenges in some areas across the region in accessing NHS dental care. There have been a few schemes to alleviate pressures in particular areas of demand. There is the Pilot for Unregistered Patients and Asylum Seekers (PUPAS) scheme, which has a one-off fee to see these patients, if they are in pain. There has also been additional money for dental practices that register children age 1-10, again to encourage registration. There is the weekend out of hours emergency dental service at weekends for trauma/severe pain/infection/bleeding, although hosted by the Trust this is a chargeable service.

Children under 18 are entitled to free dental care along with other groups dependent on benefits. however it is not always possible to find a dentist to register these patients. There are ongoing negotiations to uplift fees for dental treatment.

Within the Trust, the Community Dental Service does not collect fees from patients. We have two main groups of patients, those referred in for one off treatments e.g. extractions under general anaesthetic and who get discharged back to the referring dentist. The other group are patients with more complex needs that mean dental care is not possible in General Practice and the CDS is their dentist.

The Community Dental Service is referral only based on clinical priority. We do not accept referrals for financial reasons or due to difficulty in accessing an NHS high street dentist. The waiting list for dental extractions under general anaesthetic is under control and as a service we are content that we are able to respond to patients with an urgent clinical need within a reasonable timescale, for truly urgent patients this would be under a week.

There is a lot of work being carried out to improve oral health and the 'in school' toothbrushing schemes are being expanded. We also screen special schools and care homes to identify unmet need. The service is a growing one as patients are living longer with complex needs and maintaining teeth for their whole lifespan.

Marie Ward
Chief Executive



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25 March 2026

Maxine Patterson
Chief Executive
Northern Ireland Ambulance Service (NIAS)
Site 30, Knockbracken Healthcare Park
Saintfield Road
BELFAST
BT8 8SG

Dear Maxine,

Health Working Groups (Newry, Mourne and Down District Council)

Newry, Mourne and Down District Council held Special Health Meetings with the Health Working Group members on 5 March 2026 (Southern) and 4 March 2026 (South Eastern). At this meeting the following matters were raised, and it was agreed that they should be forwarded to yourself for consideration and response.

These matters will be tabled at the Special Council Meeting on 28 April 2026, but to allow those who may not be able to attend this meeting to be fully informed on the matters raised, I would be grateful if you forward your response in writing by 21 April 2026.

1. Provide a comprehensive update on the current position of the Northern Ireland Ambulance Service (NIAS) across this Council area including an update on recruitment and retention of staff, particularly the Paramedic resource. Detailed information on the how NIAS are dealing with current time pressures within Newry, Mourne and Down District Council area would be appreciated.
2. Having an effective ambulance service is key in the provision of health care. Have NIAS carried out a recent review of its service, including how it provides a service to hospitals in Northern Ireland? If this has been completed, Newry, Mourne and Down District Council would appreciate an update especially in relation to this Council area.

I look forward to your response on these matters.

Yours sincerely

Marie Ward
Chief Executive