



October 26th, 2017

Notice Of Meeting

You are requested to attend the Council meeting to be held on **Monday, 30th October 2017** at **6:00 pm** in **Downshire Civic Centre**.

Agenda

1.0 Apologies and Chairperson's Remarks

Copy of report dated 17 August 2017, agreed by SPR Committee 17 August 2017 and ratified by Council 4 September 2017, setting out arrangements for format of consultation with health sector is attached

📎 *Consultation arrangements.pdf*

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2.0 Declarations of Interest

3.0 Presentation on Community Planning Priorities for Health & Wellbeing

4.0 Presentation from South Eastern Health and Social Care Trust, to include responses to issues raised at Working Group Meeting held on 6 October 2017

Copy of Chief Executive's letter to Trust attached

📎 *Hugh McCaughey - SEH & SCT 18.10.17.pdf*

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5.0 Presentation from Southern Health and Social Care Trust, to include responses to issues raised at Working Group Meeting held on 6 October 2017

Copy of Chief Executive's letter to Trust attached

📎 *Francis Rice SH&SCT - 18.10.17.pdf*

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6.0 Presentation from NI Ambulance Service, to include responses to issues raised at Working Group Meeting held on 6 October 2017

Copy of Chief Executive's letter to NI Ambulance Service attached

📎 *Shane Devlin NI Ambulance Service - 18.10.17.pdf*

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7.0 Question & Answer Session

Invitees

Cllr Terry Andrews	terry.andrews@nmandd.org
Cllr Naomi Bailie	naomi.bailie@nmandd.org
Cllr Patrick Brown	patrick.brown@nmandd.org
Cllr Robert Burgess	robert.burgess@nmandd.org
Cllr Stephen Burns	stephen.burns@nmandd.org
Lorraine Burns	lorraine.burns@nmandd.org
Cllr Pete Byrne	pete.byrne@nmandd.org
Cllr Michael Carr	michael.carr@nmandd.org
Mrs Dorinnia Carville	dorinnia.carville@nmandd.org
Cllr charlie casey	charlie.casey@nmandd.org
Cllr William Clarke	william.clarke@nmandd.org
Cllr Garth Craig	garth.craig@nmandd.org
Cllr Dermot Curran	dermot.curran@nmandd.org
Ms Alice Curran	alice.curran@nmandd.org
Cllr Laura Devlin	laura.devlin@nmandd.org
Ms Louise Dillon	louise.dillon@nmandd.org
Cllr Sean Doran	sean.doran@nmandd.org
Cllr Cadogan Enright	cadogan.enright@nmandd.org
Cllr Gillian Fitzpatrick	gillian.fitzpatrick@nmandd.org
Cllr Glyn Hanna	glyn.hanna@nmandd.org
Mr Liam Hannaway	liam.hannaway@nmandd.org
Cllr Valerie Harte	valerie.harte@nmandd.org
Cllr Harry Harvey	harry.harvey@nmandd.org
Cllr Terry Hearty	terry.hearty@nmandd.org
Cllr David Hyland	david.hyland@nmandd.org
Miss Veronica Keegan	veronica.keegan@nmandd.org
Mrs Sheila Kieran	sheila.kieran@nmandd.org
Cllr Liz Kimmins	liz.kimmins@nmandd.org
Cllr Mickey Larkin	micky.larkin@nmandd.org
Mr Michael Lipsett	michael.lipsett@nmandd.org
Cllr Kate Loughran	kate.loughran@nmandd.org
Cllr Jill Macauley	jill.macauley@nmandd.org
Mrs Regina Mackin	regina.mackin@nmandd.org
Colette McAteer	colette.mcateer@nmandd.org
Cllr Declan McAteer	declan.mcateer@nmandd.org
Patricia McKeever	patricia.mckeever@nmandd.org
Ms Tracie McLoughlin	tracie.mcloughlin@nmandd.org
Cllr Oksana McMahon	oksana.mcmahon@nmandd.org
Cllr Andrew McMurray	andrew.mcmurray@nmandd.org
Eileen McParland	eileen.mcparland@nmandd.org
Ms Carmel Morgan	carmel.morgan@nmandd.org
Cllr Roisin Mulgrew	roisin.mulgrew@nmandd.org

Cllr Mark Murnin	mark.murnin@nmandd.org
Cllr Barra O Muiri	barra.omuiiri@nmandd.org
Cllr Pol O'Gribin	pol.ogribin@nmandd.org
Ms Patricia Oakes	patricia.oakes@nmandd.org
Cllr Brian Quinn	brian.quinn@nmandd.org
Cllr Henry Reilly	henry.reilly@nmandd.org
Cllr Michael Ruane	michael.ruane@nmandd.org
Cllr Michael Savage	michael.savage@nmandd.org
Cllr Gareth Sharvin	gareth.sharvin@nmandd.org
Cllr Gary Stokes	gary.stokes@nmandd.org
Sarah Taggart	sarah-louise.taggart@nmandd.org
Cllr David Taylor	david.taylor@nmandd.org
Caroline Taylor	Caroline.Taylor@downdc.gov.uk
Cllr Jarlath Tinnelly	jarlath.tinnelly@nmandd.org
Cllr John Trainor	john.trainor@nmandd.org
Central Support Unit	central.support@nmandd.org
Cllr William Walker	william.walker@nmandd.org
Mrs Marie Ward	marie.ward@nmandd.org
Mr Adam Wilkinson	adam.wilkinson@nmandd.org

Report to:	Strategy, Policy and Resources Committee
Date of Meeting:	Thursday 17 August 2017
Subject:	Consultation arrangements with Health and Social Care Trusts
Reporting Officer (Including Job Title):	Liam Hannaway, Chief Executive
Contact Officer (Including Job Title):	Aisling Rennick, Investing for Health Officer

Decisions required:	
To decide the format of consultation arrangements with Southern and South Eastern Health and Social Care Trusts	
1.0	Purpose and Background:
1.1	<p>The Council has approved the following Notice of Motion</p> <p>"That this Council recognises the continuous threats to Health Service provision in Newry, Mourne and Down District and in wishing to address these issues will establish a Health Committee inviting the Health Trusts to Council to discuss health related issues. This Council will also involve local health campaigners to explore health provision issues and concerns."</p>
2.0	
2.1	<p>Following consideration by the Party Representatives Forum the following is proposed in respect of the consultation arrangements with Southern and South Eastern Health and Social Care Trusts. Northern Ireland Ambulance Service will also be invited to attend.</p> <p>The Council hold a Council meeting with the Southern and South Eastern Trusts to discuss issues relating to Health Service provision in the Newry, Mourne and Down District twice yearly.</p> <p>Should a relevant issue arise which requires addressing on an urgent basis, additional meetings may be arranged on an ad hoc basis. The Trust may use these Fora as a means of consultation.</p> <p>Six weeks prior to the quarterly meeting the Southern and South Eastern Health Working Groups will meet to identify issues and concerns. These will be Chaired by the Chair of Council.</p> <p><u>Southern and South Eastern Health Working Group Terms of Reference</u></p> <p>Scope</p> <ol style="list-style-type: none"> 1 To meet six weeks before the Council's Health Consultation meeting to identify issues and concerns regarding Health Services and to formulate relevant questions to be provided to the Trusts three weeks in advance of the Council meeting.

- 2 To communicate the community's views to the Health sector and ensuring this does not conflict with community planning objectives and priorities.
- 3 To provide an environment for a facilitated conversation between the Community and Council in relation to key identified health issues and enable the Trust to consult local health interest groups.
- 4 To assist with the identification and prioritisation of health and wellbeing issues at a district and DEA level to ensure these are fed through to the appropriate community planning structure to enable their inclusion in the area and thematic multiagency action plans.
- 5 To act as an ongoing means of engagement between the Trusts and The Council/community.

Membership

Each Working Group will contain members from all political parties on the basis below:

Sinn Fein	3
SDLP	3
DUP	1
UUP	1
Alliance	1
Independent	1

Plus the Chair of Council who will chair the meetings

Also invited to the Working Group meetings

Downe Community Health Committee
Daisy Hill Hospital Action Group
Representatives of the Trades Union in Daisy Hill and Downe Hospitals

Nominations will also be sought for membership from constituted community organisations with an interest in Health Service matters across the District.

The Working Group may also invite other representatives, on an ad hoc basis, where it believes they may have knowledge which may be of value in formulating questions.

These meetings will be supported by officers from Active and Healthy Communities and Community Planning Departments.

Decision Making and Voting

The Working Group should seek to make decisions by agreement and consensus and therefore no voting will take place or be recorded. The Working Group does not have decision making powers. Its purpose is to raise issues and formulate questions to be submitted to the Trusts for Council to raise at its Special Council Meetings with the Trusts.

	<p>Press</p> <p>Invitations to the press shall not be extended to working group meetings but press will be present at the Council Meetings.</p>
3.0	Recommendations:
3.1	Recommend: The Council approve the proposed arrangements for consultation with Southern and South Eastern Health and Social Care Trusts as set out in 2.0 above.
4.0	Resource implications
4.1	Cost to the Council of quarterly meetings
5.0	Equality and good relations implications:
5.1	None if statutory guidance is followed.
6.0	Appendices
	None

Liam Hannaway
Chief Executive



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**an Iúir, Mhúrn
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**Newry, Mourne
and Down**
District Council

G/13/19

18th October 2017

Mr Hugh McCaughey
Chief Executive
South Eastern Health and Social Care Trust
Trust Headquarters
Ulster Hospital
Upper Newtownards Road
DUNDONALD
BT16 1RH

Dear Hugh

Re: Health Service Consultation Arrangements

Further to our previous discussions regarding the above I would like to invite you to attend the Special Council Meeting in Downshire Civic Centre on 30 October 2017 at 6pm.

Refreshments will be available from 5.30 pm and you are very welcome to join us at this time.

I attach a report which itemises the issues and questions that have been revised by our elected members and the community.

I would be grateful if the answers provided at the meeting are in sufficient detail to allow an accurate minute to be available to any members who may be unable to attend.

The attached report will be issued to the elected members along with their invite to the meeting.

Thank you for your cooperation in this matter.

Yours sincerely

Liam Hannaway
Chief Executive

ED/

Enc

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Newry Office**
O'Hagan House
Monaghan Row
Newry BT35 8DJ

**Oifig Dhún Pádraig
Downpatrick Office**
Downshire Civic Centre
Downshire Estate, Ardglass Road
Downpatrick BT30 6GQ

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Health Service Consultation Arrangements-Newry, Mourne and Down District Council

South Eastern Health and Social Care Trust

1. The Council expressed concern regarding delays in the implementation of Enhanced Care at Home in the Down part of the Trust area. The programme enables older people to be treated at home thus both minimising disruption and stress to patients and families and indeed significant cost savings for the health service.

The Council would like to receive clarity regarding the reasons behind the delay in implementation and confirmation of the estimated date of implementation. If the delays have been due to difficulties due to the HR recruitment function, what plans have the Trust to address this?

2. We would like to have information on any proposals the Trust has for utilising new technology to increase and improve care in the home?
3. The Council would be interested to receive an update regarding the proposal to provide an MRI scanner at the Downe.
4. Concern has been expressed regarding domiciliary care in our District. In particular, delays in commencing packages have led to patients being unnecessarily retained in hospital with consequent additional stress for patients and families, along with additional costs to the health sector. The Council is concerned regarding the Trust's reliance on Private Sector providers for care packages. In particular, the low wages and lack of travel expenses, paid by many private providers leads to difficulties in recruitment and retention of staff. We would also be concerned that this may be leading to inequities of provision between urban and rural patients.

We would seek clarification regarding the following issues:

- What is the Trust doing to recruit in house domiciliary care staff?
 - What steps does the Trust take to monitor private sector domiciliary care contracts on speed of implementation, quality of care, equality of accessibility for patients and on the terms and conditions of staff?
 - How is the Trust ensuring that the allocation and implementation of domiciliary care packages are being rural proofed?
 - Is there the capacity to make domiciliary care packages flexible to meet the needs of family carers? For example it may suit both the patient and family needs better to have one 1 hour visit daily rather than four of 15 minute.
 - What resources does the Trust have available to train, facilitate and support family cares.
5. We would be interested to have clarification regarding provision for and access to emergency Mental Health Services, in particular, for those with suicidal ideation. In addition, we would like information regarding the Trust's efforts to address what appears to be a recent spike in suicide in our area. The Council feels there needs to be a dedicated 24/7 Safe Place to which the police can bring those in danger of suicide. We would suggest that the 2 acute psychiatric wards in the Downe would be suitable for such a purpose.

Now that it has been determined that the Ulster Hospital cannot accommodate Critical Mental Health Services, the Council would strongly urge that these services are brought back to the Downe.

6. We believe each Trust has implemented its own separate digital patient management system and the South Eastern Trust has almost completed the rollout of its system. We would see clarification with regard to if this system can interface with the platforms adopted by all the other trusts, if not, why is this the case and are there plans to rectify this deficit?

7. We understand that there was a significant drop in the number of outpatient hospital appointments during July 2017 and would like information regarding the reasons for this fall in service.
8. We would seek information regarding success rates of Smoking Cessation Services in the area and would suggest the Trust come together with other providers to discuss means of improving services.
9. The vital Good Morning Down service has had no clarification regarding funding for the upcoming six months and we would ask that the Trust confirm funding as a matter of extreme urgency.
10. The Council would be most interested to learn what additional services the Trust are considering bringing to the Downe hospital in the medium to long term.
11. Major concerns have been expressed regarding ambulance response times in the District. Particular reference was made to the delays caused by slow handover at Emergency Departments and the consequent periods of time where there is no ambulance cover. The Council would like to know what the Trust are doing to improve handover times and assist NIAS to get ambulances back into service as soon as possible.

Liam Hannaway
Chief Executive



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District Council

8

G/13/19

18th October 2017

Mr Francis Rice
Chief Executive
Southern Health & Social Care Trust
Trust Headquarters
68 Lurgan Road
Portadown
BT63 5QQ

Dear Francis

Re: Health Service Consultation Arrangements

Further to our previous discussions regarding the above I would like to invite you to attend the Special Council Meeting in Downshire Civic Centre on 30 October 2017 at 6pm.

Refreshments will be available from 5.30 pm and you are very welcome to join us at this time.

I attach a report which itemises the issues and questions that have been revised by our elected members and the community.

I would be grateful if the answers provided at the meeting are in sufficient detail to allow an accurate minute to be available to any members who may be unable to attend.

The attached report will be issued to the elected members along with their invite to the meeting.

Thank you for your cooperation in this matter.

Yours sincerely

Liam Hannaway
Chief Executive

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Health Service Consultation Arrangements-Newry, Mourne and Down District Council

Southern Health and Social Care Trust

1. The Council would wish to know the numbers of Agency nursing staff employed in the hospitals in the Southern Area.
2. We would also like information regarding the numbers of nursing staff members who have been relocated from Daisy Hill to Craigavon in the last 5 years? Has this led to a shortage of permanent staff at Daisy Hill?
3. We would seek clarification with regard to progress on the Trust's proposed Critical Care at Home Scheme and would like to have an overview of plans and timescale for the project.
4. Could you let us have information on any proposals the Trust has for utilising new technology to increase and improve care in the home?
5. Significant concern has been expressed regarding delays in provision of care packages both for older people and in particular, for mental health patients. We understand there are a number of patients in the Bluestone unit who are clinically able to be discharged but who are delayed pending implementation of a care package. We recognise the challenge that patient flow provides for the Trust and we believe one of the largest barriers to efficient flow is the lack of appropriate care packages. In addition, we are aware that the supply of appropriate supported housing is insufficient for the needs of this group and would ask what steps the Trust is taking to address these issues.
6. With the level of dementia increasing we believe there is currently insufficient nursing expertise available to meet the needs in the community. Nursing homes

generally don't have the required level of expertise within their staff. There is a need to rethink the pathways of care for these patients and we would seek clarification with regard to what plans the Trust has to improve care at a strategic level.

7. We would seek clarification regarding the levels of support the Trust provides for family carers, particularly those who support patients with mental health illnesses. Experience shows that many carers in this field are under so much pressure they become ill themselves.
8. The Council is concerned regarding the Trust's reliance on Private Sector providers for care packages. In particular, the low wages and lack of travel expenses, paid by many private providers leads to difficulties in recruitment and retention of staff. We would also be concerned that this may be leading to inequities of provision between urban and rural patients.

The Council would seek clarification regarding the following issues:

- What is the Trust doing to recruit in house domiciliary care staff?
- What steps does the Trust take to monitor private sector domiciliary care contracts on speed of implementation, quality of care, equality of accessibility for patients and on the terms and conditions of staff?
- How is the Trust ensuring that the allocation and implementation of domiciliary care packages are being rural proofed?
- Is there the capacity to make domiciliary care packages flexible to meet the needs of family carers? For example it may suit both the patient and family needs better to have one 1 hour visit daily rather than four of 15 minute.
- What resources does the Trust have available to train, facilitate and support family cares.

9. On how many occasions in the last 12 months has Kilkeel Out of Hours GP facility been closed? In addition, have there been occasions during this period on which both both the Kilkeel and Newry facilities been unavailable?
10. With regard to the Health Centre in Crossmaglen, what action is the Trust taking to ensure equal access to the Treatment Room for patients from each of the 2 local GP practices?
11. We understand there has traditionally been an arrangement between the Southern and South Eastern Trusts for patients, from the Kilkeel area, with mental ill health issues to receive treatment in the Downe. However, we believe, the new digital system to manage risk across the Southern trust does not allow for discharge handover between the Trusts and therefore there will be increased demand for services in the Southern area. What challenges do the Trust foresee this will create and how does it propose to meet these?
12. We believe each Trust has implemented its own separate digital patient management system and the Southern Trust has almost completed the rollout of its PARIS system. We would see clarification with regard to if this system can interface with the platforms adopted by all the other trusts, if not, why is this the case and are there plans to rectify this deficit?
13. The Council would like an update on waiting times for consultant diagnosis in the areas of Dementia and Autism and an explanation of the reasons for these times.
14. We understand a recently retired GP in the Rostrevor area has identified a gap in provision regarding end of live care at home and has set up a social programme to address this gap. We would be interested to learn if the Trust has had any involvement with this or similar schemes and if there are plans to assist in the future?
15. In conclusion, you will be aware of the ongoing concern in the area regarding the future of Daisy Hill. We welcome, the work of the pathfinder group led by Dr

Telford. We would ask that Dr Telford and the trust provide us with updates from the group on a regular basis.

Liam Hannaway
Chief Executive



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G/13/19

18th October 2017

Mr Shane Devlin
Chief Executive
NI Ambulance Service
Knockbracken Health Care Park
Saintfield Road
Belfast
BT8 8SG

Dear Mr Devlin

Re: Health Service Consultation Arrangements

Further to our previous discussions regarding the above I would like to invite you to attend the Special Council Meeting in Downshire Civic Centre on 30 October 2017 at 6pm.

Refreshments will be available from 5.30 pm and you are very welcome to join us at this time.

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Thank you for your cooperation in this matter.

Yours sincerely

Liam Hannaway
Chief Executive

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Health Service Consultation Arrangements-Newry, Mourne and Down District Council

Northern Ireland Ambulance Service

1. There are significant concerns regarding ambulance response times in both the South Eastern and Southern parts of the district. In particular, concerns have been raised regarding transfer delays at the Ulster Hospital, Dundonald; resulting in knock on problems for the service in our area.

The Council would ask what NIAS is doing to work with the Trusts to minimise hand over delays and consequently get ambulances back in service as soon as possible? For example a recent incident occurred where a casualty lay in the street in Downpatrick for 45 minutes before the ambulance arrived. We understand the first responding vehicle may have had to come from Carrickfergus.

2. The Council would seek a breakdown of ambulance response times on a postcode basis. Whilst the Council understands that this cannot be broken down to a level where individuals might be identified, we feel it should be possible break down to a town/village level eg Kilkeel is BT34 4**. There is major local concern that due to staffing levels, Kilkeel is often left without ambulance cover, even though vehicles are available at the Kilkeel base.

We would be interested to learn what NIAS is doing to shorten response times to rural areas, particularly, taking account of the Rural Needs Act.

3. The Council would ask for clarification that recent Treasury funding provided to the NI Air Ambulance did not impact on funding for NIAS. Whilst, the air ambulance can provide a valuable back up service to NIAS, it cannot be used to offset the necessity for a fully funded road fleet service.
4. The Council would seek clarification from NIAS regarding the possible impact of proposed centralisation of services eg proposed reconfiguration of stroke services is

expected to have on ambulance response times and if it is planned to provide additional resources to NIAS to address any such issues?

5. We would also seek clarification regarding the protocol for call out of the air ambulance and how this ties in with NIAS protocols.
6. Concern has been expressed regarding the use of private ambulance services and we would seek the relevant information on how often NIAS has used private ambulances in the past 3 months and the cost of same.
7. The Council understands a significant portion of the fleet is due for 5 year renewal, we would ask if NIAS has sufficient budget to ensure the capital spend does not impact on the operation of the service?