NEWRY, MOURNE & DOWN DISTRICT COUNCIL

NMC/SC

| Minutes of Special Council Meeting held on 28 October 2019 at 6.00pm in the Mourne Room, Downshire Civic Centre, Downpatrick | | |
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| In the Chair: | Councillor C Casey | |
| In attendance: | (Councillors) Councillor T Andrews Councillor D Curran Councillor V Harte Councillor M Larkin Councillor O Magennis Councillor H McKee Councillor A McMurray Councillor B Ó'Muirí Councillor M Savage Councillor J Tinnelly | Councillor R Burgess Councillor O Hanlon Councillor L Kimmins Councillor A Lewis Councillor D McAteer Councillor K McKevitt Councillor K Owen Councillor M Ruane Councillor D Taylor Councillor B Walker |
| | (Officials) Mrs M Ward, Chief Executive Mr M Lipsett, Director of Active and Healthy Communities Miss S Taggart, Democratic Services Manager Ms L O'Hare, Democratic Services Officer | |
| Also in attendance: | South Eastern Health and Social Care Trust Ms N Dunbar, Assistant Director, Strategic & Capital Development Mr D Bradley, Interim Director, Adult Services Southern Health and Social Care Trust Mr G Rocks, Assistant Director of Health & Wellbeing | |

SC/18/2019 APOLOGIES AND CHAIRPERSON'S REMARKS

Apologies were received from Councillors Brown, Byrne, Clarke, Devlin, Gallagher, Hanna, Mason, Mulgrew, Sharvin, Stokes and Trainor.

SC/19/2019 DECLARATIONS OF INTEREST

Councillor Owen declared an interest as she is currently completing a PHD through the Southern Trust.

SC/20/2019 <u>RESPONSE FROM SOUTH EASTERN & SOCIAL</u> CARE TRUST

The Chairman welcomed the delegation to the meeting and Councillors and officers introduced themselves.

A short video clip was shown to members, Ms Dunbar and Mr Bradley provided an overview of the aim of the Multi-Disciplinary Team programme that was currently being rolled out throughout the District. Two early implementer sites were identified in the North West and in Downpatrick. The Down area had 13 GP practices involved in the programme across the District.

Members asked the following questions:

- Would there be continuous funding provided to ensure the service was sustainable long-term.
- Were there any guidelines the Trust could put in place for doctors and constituents to encourage a healthy lifestyle using Council facilities, especially for people with health conditions that prohibit them from exercising without a doctors letter giving permission.
- Had there been a decrease in admission and referrals to hospitals as a result of the programme.
- Was there an update on the Regional Trauma Unit recruitment process and the local forum that worked between the victim and survivors service.
- What measure had the Trust implemented to progress the lack of external care packages to bring people home from hospital and residential care homes.
- What was being done to address immediate intervention and assistance for those with mental health issues.

The delegation responded to the queries as follows:

- Funding was provided by the 'Confidence and Supply' monies through a transformation fund for Health and Social care in Northern Ireland and the fact that two pilots had commenced and there were plans to extend to other areas was indicative that it was expected to continue.
- There were a number of schemes available to encourage people to be more physically active i.e.
 - 1. Physical Activity Referral Scheme which was a GP referral scheme funded by the Public Health Agency. There were a number of specific criteria people were required to meet in order to be referred by their GP to the programme.
 - 2. Both South Eastern and Southern Trust were working together with Council and had provided funding to try to expand the range of opportunities available to improve people's physical activity and to create a pathway through Council that isn't necessarily dependent on a referral from their GP.
 - 3. Going forward it was anticipated that the mental health manager would make referrals directly from the multi-disciplinary team to the physical

activity co-ordinator.

- Patients were being shown how to self manage and in many cases treatment was carried out on the same day, therefore reducing the number of onward referrals and repeat GP visits. It was hoped the number of mental health referrals would be reduced as a result of early intervention services.
- The trauma team had been extended and it was expected to continue to grow assuming there was additional investment as previously agreed. The regional forum did include victim representatives and the original proposal was rolling out with additional staff having been recruited.
- There had been tremendous growth in the request for domiciliary care, more and more people choosing to remain at home therefore the demand in residential care had decreased. 70 additional staff had been appointed specifically to deliver on domiciliary care. The enhanced care at home service had been very successful in the Down area.
- People in mental health distress would have a more rapid assessment by the multi-disciplinary team's experienced mental health professional and be seen at the practice.

Councillor Owen joined the meeting during the above discussion – 6.20pm

Councillor Andrews asked Mr Rocks if some more information could be sent to be distributed to constituents regarding the physical activity non-referral scheme.

SC/21/2019 RESPONSE FROM SOUTHERN HEALTH AND SOCIAL CARE TRUST

- How would the multi-disciplinary team programme be rolled out in the Southern Trust.
- Had the Trust carried out any exit interviews to see why staff were leaving.
- Would the multi-disciplinary team rollout have any impact on the community health hub in Newry.
- Was there any update on the plans for social prescribing within the Southern Trust.
- Was there an update on the contract for voluntary dementia services.
- Was there a potential timeline available for dealing with vulnerable children with complex long term needs at a different location other than Carrickore so that it could be freed up for families very much needing respite care.
- Issue raised on an ongoing spiral of cases going through the appeals service for people with disabilities with medical conditions being asked to provide copy of medical records from GP sometimes at a cost of up to £50 and as a result of GDPR being asked to go through their records and redact third party information. Adding further burden to already vulnerable people and GP practises.

• Issue was raised about Trust policy on powered wheelchairs and their maintenance.

The delegation responded to the queries as follows:

- Newry area is part of the second phase and would be a similar set up to the previous phase, with 14 practices, however it was a bit further behind due to funding being released in a phased approach. It was still early days in reference to recruitment as some practices would need to expand premises to accommodate the additional staff. Temporary arrangements might be entered into where the Trust supports the GP surgeries in the interim.
- Mr Rocks advised he would respond to Council with more information on exit interviews.
- Trust was very keen to progress with the health hub and were highly supportive of its implementation.
- The Southern Trust was currently working with a number of social prescribing initiatives.
- Mr Rocks advised he would respond to Council with more information on voluntary dementia services to be provided.
- Mr Rocks advised he would respond to Council with more information to be provided with regards a specific timeline for Carrickore.
- Acknowledge the burden placed on GP surgeries and individuals but as a Trust were not involved. GP's were independent practitioners therefore the Trust cannot comment on the impact to them.
- Mr Rocks advised he would respond to Council with more information on change in Trust policy on powered wheelchairs and their maintenance to be provided.

Mr Bradley concluded by confirming that both the Southern and South Eastern Trust were now part of the Community Support Partnership and that the Multi-Agency Triage team had now been extended into the Down District, available on Saturday and Sunday to give on the spot advice working jointly with the police and ambulance service.

SC/22/2019 CORRESPONDENCE RECEIVED FROM NIAS RE: CLINICAL RESPONSE MODEL (CRM) CODE SET

The correspondence from NIAS was noted and it was agreed that Members with any queries should forward them through to officers to send to the Northern Ireland Ambulance Service for comment.

There being no further business, the meeting concluded at 7.09pm.

For adoption at Meeting of Newry, Mourne and Down District Council to be held on Monday 2nd December 2019.

Signed:

Chairperson

Chief Executive