
**THESE MINUTES ARE EMBARGOED UNTIL
THURSDAY 8 MAY 2008 AT 9.00PM**

WESTERN HEALTH AND SOCIAL SERVICES COUNCIL

**Minutes of One Hundred and Sixtieth meeting of the
Western Health and Social Services Council
held in the Committee Room, Fermanagh District Council Offices
The Townhall, Enniskillen, Co Fermanagh
on Friday 4 April 2008
at 10.00am**

Present:

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| Mrs V Brown | Councillor B Johnston |
| Councillor M Carten | Mr I Maguire |
| Mr J Campbell | Mr M McIvor |
| Councillor M H Durkan | Councillor J McKeever |
| Mr D Sutherland | |
| Councillor G Foley | Mrs F Robson (Vice-Chair) |
| Councillor M Hamilton | Mr D Sutherland |
| Ms M Trimble | |
| Mrs S Hogg | Ms M Trimble |

Apologies:

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| Councillor R Lynch | Mr R McIntyre |
| Councillor M McColgan | Mrs M McKeague |
| Mr E McGrade | |
| Mr P McGowan (Chairman) | Councillor B Page |
| Mr R McIntyre | |
| Mr E McGrade | |

Ms Maggie Reilly (Chief Officer)

In Attendance:

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| Mrs M Gormley | |
| Mrs K Loughran | Miss S Forbes |

2 members of the Press were in attendance.

Chairman's Business:

Mrs Robson welcomed everyone to the 160th meeting of the WHSS Council. She explained that unfortunately the Chairman, Mr Paddy McGowan, was unable to attend the meeting and advised members that she would be chairing the meeting in his absence.

Mrs Robson also advised members that the Chief Officer, Ms Maggie Reilly was also unable to attend and Mrs Maureen Gormley, Business Support Manager was deputising for her.

The Chair welcomed the members of the Press to the meeting.

Mrs Robson said she wished to extend sincere condolences from the WHSS Council to Mrs Lorna Preston, who retired as Office Manager last year, on the death of her mother.

Mrs Robson said that as the previous Council meeting took place just three weeks ago on the 14th March there was not sufficient time to send the minutes to members in advance; therefore minutes were being tabled at the meeting today. She then asked members to take 10-15 minutes to read the minutes prior to approval.

Minutes of Previous WHSSC Meeting (14/3/08):

The Minutes of the previous WHSSC meeting held on 14 March 2008 were adopted on the proposal of Mr Michael McIvor and seconded by Mr Joe Campbell.

Matters Arising from Previous Meetings:

Members were provided with a written update on Action Points a/03/08 - h/03/08.

Mrs Robson reminded members again that only three weeks had passed since the previous meeting; therefore the Council were still awaiting responses on many of the actions.

Action Point AP: a/03/08 – WHSC Trust to provide WHSS Council with details of the Gwent Healthcare Trust model and keep the Council informed on progress of the Trust’s Strategic Change and Efficiency Programme (SCEP) project:

Awaiting Response.

Action Point AP: b/03/08 – Set up Subgroup of WHSS Council members to meet with WHSC Trust officers re services in the new hospitals and SCEP project:

Mrs Gormley said the Council are in the process of agreeing dates with the WHSC Trust for the meeting with the Subgroup.

She asked those members present at the meeting for an expression of interest in being part of the Council Subgroup.

Mrs Brown, Mr Campbell, Mr Sutherland, Mrs Robson, Mr McIvor and Mrs Hogg expressed an interest in being part of the Subgroup.

Mrs Gormley said she would write to all members when a date is confirmed and give them an opportunity to attend.

Action Point: AP a/04/08

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| WHSSC to write to members with details of meeting of Council Subgroup with WHSC Trust officers. |
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Action Point AP: c/03/08 – WHSC Trust to provide details to WHSS Council of forthcoming workshop on Mental Health:

Awaiting Response.

Action Point AP: d/03/08 – Chief Officer to contact Ms T Brown WHSC Trust to find out how many women completed their treatment in Altnagelvin, how many had declined further treatment and how many were referred to the Regional Fertility Centre:

Work in progress.

Action Point AP: e/03/08 – Chief Officer to contact people who had been in touch with WHSSC re Fertility Services at Altnagelvin:

Work in progress.

Action Point AP: f/03/08 – WHSS Board to provide details to WHSS Council re new Beltany development and proposed unit at Coolnagard:

Awaiting Response.

Action Point AP: g/03/08 – Details of WHSS Council Workshop on proposals for HSC Reforms to be sent to members:

Members have been provided with details of the Workshop organised for WHSS Council members to discuss the Minister's proposals for HSC Reforms. The Workshop will be held on 14th April 2008 from 2.00pm - 5.00pm in Omagh College.

Action Point AP: h/03/08 – Letter from Mr E Gallagher, WHSS Board, FPSU in relation to the closure of the Ballykelly Branch Surgery to be copied to members:

A copy of Mr Gallagher's letter confirming the closure of the Ballykelly Branch Surgery is included in members' packs.

Mr McIvor said that whilst he accepts that Ballykelly Branch Surgery has closed the Board gave an undertaking that in the general review of services on the Scroggy Road site in Limavady they would look at the possibility of another outlet in Ballykelly. This he said will depend on whether there is an increase in the population in the area following the sale of the army houses in Ballykelly.

Mr McIvor said himself and Mr Michael Carten will be keeping a watching brief on developments.

Mr McIvor asked if there was an update on the issue of monies still being paid to the surgeries during a period of time when they were closed. He said he would like a reassurance from the WHSS Board that the payments have now stopped. He said he would also like to know whether any refunds have been made in relation to the rent that had been paid to the Practices during the time that they were not actually conducting business in Ballykelly.

Action Point: AP b/04/08

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| WHSS Council to contact WHSS Board for an update on the issue of rent paid to the Practices. |
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Bugwatch Survey - Altnagelvin:

Mrs Robson thanked the members who took part in the Bugwatch Survey carried out in Altnagelvin Hospital on 12th March 2008. She said the members who had taken part in the Survey had been provided with a draft copy of the report for their comments and the final report was now included in Members' packs.

Mrs Gormley said members had surveyed the following wards in Altnagelvin Hospital: Wards 20 & 21 (Elderly); Ward 31 (Surgical); Wards 8 & 9 (Orthopaedic) and Ward 15 (Maternity). She gave members an overview of the Report.

Ward 8 & 9 (Orthopaedic)

Hand washing

There were plenty of sanitisers available and staff were using them or washing their hands when working between patients.

Ward environment

Furniture was clean and in a good state of repair;
The ward was visibly clean and free from dust and dirt;
Bath was clean;
Bathroom/showers were clean and clutter-free;
Toilets were clean;
Curtains were visibly clean and in good repair.

Waste disposal

Information on waste disposal policy was clearly on display;
Waste bags were not over-filled;
There were foot operated bins in working order for clinical waste.

Linen

Linen was segregated into colour-coded bags;
Bags were not over-filled.

Members noted that there was a rota completed when changing the curtains around the beds and thought this was good practice.

Sharps

The Sharps box was stored safely in the medication room on both wards.

Staff training

Staff confirmed they:

- had received training on infection control
- were able to identify where the ward's infection control manual was held

One member of staff questioned did not know the name of the infection control nurse but quickly found out by asking another member of staff. Members carrying out the survey were informed that both named nurses

were on night duty.

Staff said that more training on infection control is required for part-time nursing staff and cleaners who are covering periods of absence, particularly for those employed through an outside Agency. They also appreciated having the same cleaners identified for the ward on a regular basis so that they are familiar with the ward area.

Information for visitors and patients

Three patients who were asked said information is available to visitors when visiting 'at risk' patients.

General comments

- Ward 8 & 9 have been refurbished; the wards are clean and tidy and in an excellent state of repair;
- Four patients spoken to were full of praise for the ward;
- The physiotherapy room (ward 9) in particular was noted to be in an excellent state of cleanliness;
- Painting was ongoing in the utility room during the survey;
- Staff said they place a strong emphasis on teamwork and the importance of including cleaners as part of the ward team;
- It was felt that at least one infection control nurse should be on duty for each day or night-time shift.

WARD 20 & 21 (Elderly)

Hand washing

Sanitisers were available and staff were using them or washing their hands when working between patients.

Mixer taps were not available at all sinks.

Elbow control taps were not available at all sinks.

Waste disposal

Information on waste disposal policy was on display;

Waste bags were not over-filled;

There were foot operated bins in working order for clinical waste.

Linen

Linen was segregated into colour-coded bags;

Bags were not over-filled and were not stored in public areas.

Ward environment

Bathrooms in both wards were cluttered. There was no access to the sink.

There was no bath in either ward.

A cleaning schedule in the bathroom of ward 20 was last dated and signed on 21/10/07.

Toilet was not flushed.

Sink was dirty.

In the male toilet there were paper towels on the floor and the bin was full to overflowing.

The treatment room in ward 21 was extremely cluttered – full to the door with various items of equipment. Members were informed that the treatment room is not used - all treatments are carried out at the bedside.

It was noted that there was no ventilation in the male toilet in ward 21 and therefore there was a strong odour. There was a container on the floor with urine in it.

The sluice room looked dirty and was in a poor state of repair.

The shower in ward 21 was very cluttered – used as a store. There was a portable toilet seat with a disposal sign dated 8/1/08.

In ward 21 members were informed that patients with infections were being nursed in side wards but there was no notice for visitors and no aprons/gloves available outside the rooms.

Sharps

Sharps boxes were stored safely when not in use.

Staff training

Some nursing staff in ward 20 said they have not received training on infection control.

Information for visitors and patients

Members were informed that many patients are confused – therefore information is given to relatives;

There are signs on the entrance to the wards regarding infection control – washing hands;

Additional information (leaflet) is available on request (ward 20);

In ward 21 the leaflet is on display in a leaflet rack.

General comments

- Staff informed members that most of the patients in wards 20 & 21 are over 75 years and confined to bed;
- Members felt that the ward environment itself was satisfactory but other areas such as bathrooms, toilets, sluice room, treatment room were not;
- There is very little room for storage;
- Nurses are having to work under appalling conditions in these wards and members felt they should be commended;
- Members were informed that the wards will be moving to a new building before the end of 2008;
- A relative who spoke to members was full of praise for the staff and the care they are providing to patients.

WARD 31 (Surgical)

Hand washing

Sanitisers were available and staff were using them or washing their hands between patients.

Not everyone entering the ward used the sanitisers.

Patient told members that a nurse blew her nose on a green paper towel but did not wash her hands afterwards.

A nurse was observed wearing jewellery.

Waste disposal

Information on waste disposal policy was on display.

Waste bags were not over-filled.

There were foot operated bins in working order for clinical waste.

Linen

Linen was segregated into colour-coded bags.

Bags were not over-filled and were not stored in public areas.

Ward environment

In general the ward appeared to be clean and tidy.

Members were informed that a patient with MRSA was being nursed in a side room just inside the entrance to the main ward. The door to this side room was wide open during the time of the survey. There was a notice on the door telling visitors not to enter unless wearing a disposable apron and gloves. However these were only available from inside the room. There was a sign to ask visitors to report to the nurse in charge but it was quite small and could easily be missed. There was no sanitiser available outside the room.

Clean linen was stored on what appears to be permanent shelving in an open area opposite the side rooms where patients with infections were being nursed. Members were unsure why the linen was stored in this area as there appeared to be adequate storage space in the linen store.

In the ward members observed that after beds were cleaned they were labelled as such – this was noted as good practice.

Bathrooms/showers and toilets were clean.

Curtains were visibly clean and in good repair but some had curtain hooks missing and were hanging off the rails.

Sharps

Sharps boxes were stored at waist level in the treatment room with the aperture open. The treatment room door was open.

Staff training

An auxiliary nurse had received training on the ward as the course they were due to attend had been cancelled.

Some staff who were new to the ward had not yet received training on infection control.

Members were told that annual infection control training is compulsory for staff; however some training sessions are cancelled, possibly due to poor uptake.

General comments

In general patients gave positive feedback about cleanliness in the ward.

Ward 15 (Maternity)

Hand washing

Sanitisers were available and staff were using them or washing their hands between patients.

Posters designed by children were on display regarding hand washing.

The sanitiser at the entry to the ward was stuck by a clip to the top of a blackboard – no notice was displayed to invite visitors to use the sanitiser. Elbow control taps were not available at all sinks.

Ward environment

The furniture in the ward is old but generally clean.

The dado rail in corridors and paper towel dispenser in 1 bathroom were dusty.

There were 3 chairs in 1 bathroom which were old and grubby looking.

The tiles in bathrooms/showers were chipped and broken and dirty looking. One bath appeared rusty, old, stained looking.

There are 4 bathrooms in total. 3 out of 4 did not look clean with stains on

the floor.

There were cigarette burns on a bath, on several paper towel dispensers and on the tops of toilet bowl cisterns. There was an assumption that these were old cigarette burns.

Toilets looked fairly clean but members witnessed what looked like blood stains on toilet floor.

There is no cleaning schedule or cleaning equipment in 2 of the bathrooms.

Some curtains looked old and shabby and were hanging off hooks in places.

There were stains on radiator in one of the double bed bays.

In the single rooms there were cracks along the floor and staining in sink.

The sink was not cleaned in blue bathroom – hair & toothpaste – no cleaning materials or cloths in bathroom or shower.

Staff training

Not all staff questioned had received training on infection control.

Members were told there is an infection control midwife but no-one who was asked could identify who she was.

Waste Disposal

Information on waste disposal policy was on display.

Waste bags were not over-filled.

Members observed 2 bins which were very full.

There were foot operated bins in working order for clinical waste

Linen

Linen was segregated into colour-coded bags

Bags were not over-filled and were not stored in public areas

Sharps

Sharps boxes were stored in sluice room. They were not at floor level but easily accessible and the aperture was open. The door to the room was propped open by a clinical waste bin.

Sharps boxes also in clinical room. This room was very ordered and everything was labelled but the aperture was open on the Sharps box. The door to the room was open but not propped open. There was a single tablet sitting on the counter.

In the sluice room itself – bed pan washing machine could do with a proper clean and sink and counter tops.

General comments:

- Several patients who were asked if they had any comments on cleaning or infection control said they had no complaints.
- posters made by children were laminated and on display in most of the 4 bed bays encouraging hand washing.

Members' Discussion:

Mr McIvor, who was involved in carrying out the survey in Wards 8 & 9, said he wished to add that these two wards were exceptional and they could find no fault in either.

He said having had a discussion with a ward sister, it was his view that it was all about team work and leadership. He said the ward sister emphasised the importance of including cleaning staff as part of the team.

Mr McIvor said the ward sister had raised an issue about the use of cleaners from a banking system when the permanent cleaner assigned to the ward is off. She said it is important to ensure that all the cleaners have undergone appropriate training including those who are providing temporary cover.

Mrs Gormley said she had spoken to Mr Alan Corry Finn, Director of Primary Care and Older People's Services with the WHSC Trust who has responsibility for Infection Control. She said a draft copy of the report had been shared with Mr Finn for his response prior to today's meeting.

Mr Corry Finn confirmed that the Elderly Wards in Altnagelvin would be moving to new premises before the end of this year.

With reference to staff training he said the WHSC Trust is working towards the new target which is 95%. He said it is always a challenge to get nursing staff off the wards for training and this is the same in all hospitals. However he said the number trained has increased significantly.

He said some training sessions were cancelled because of outbreaks of infection which the infection control nurses had to deal with and they were

therefore unable to attend the session. However training sessions are ongoing every week.

With regard to Ward 31 (Surgical) and the issue of gloves/aprons only being available inside the room, Mr Corry Finn said the single rooms are designed to allow for space inside the door for gloves/aprons rather than having them outside in the corridor.

Mr Corry Finn said with regard to the linen stored in the corridor staff have been told not to store linen on the ward and this message will be reiterated.

He said it was acceptable for Sharps boxes to have the aperture open as long as they are stored safely until the box is being sent off.

Mr Corry Finn said the WHSC Trust fully accepts the findings in the report. He said the Trust would be developing an Action Plan immediately to deal with the issues raised in the survey and an Assistant Director will be appointed to oversee its implementation.

Mrs Gormley said the Chief Officer has arranged to meet with Mr Corry Finn on 8 April 2008 to discuss the Bugwatch Survey findings in more detail.

Mrs Hogg asked if there were any plans for a follow up survey?

Mrs Gormley said she would be discussing that with the Chief Officer on her return from leave but it would be likely a repeat survey will be carried out as was the case in the Erne Hospital.

Mr Michael Carten and Mr Bert Johnston said they wished to congratulate the members who had carried out the survey on behalf of the WHSS Council and said it was a job well done.

Mr Campbell said it was a pity it took a survey by lay people to identify faults in hygiene and it should not have to happen.

Mrs Brown said she wished to endorse Mr Campbell's comments. She said she would expect the Trust to carry out their own monitoring arrangements.

Mr McIvor referred to the minute of the previous meeting in relation to the repeat Bugwatch survey carried out at the Erne Hospital. He said that Dr McConnell had asked that the WHSS Council "make as positive noises as possible to try to undo a lot of the negativity reported in the previous survey".

Mr McIvor said this statement reflects an attitude where Dr McConnell is critical of the Council reporting negative findings. He said the Council cannot

be expected to report positively if the findings are negative.

Mrs Brown said Dr McConnell's whole attitude on anything that was said at that meeting gave her the impression that the Council was just a nuisance to him.

Mr McIvor reiterated the remarks made by Ms Reilly, Chief Officer, at the previous meeting. He said credit was due to Mrs Elaine Way, Chief Executive, WHSCT and her team for their swift action following the first survey in the Erne Hospital. He said when the members went back to the Erne to carry out the repeat survey they were delighted at the transformation but questioned why it could not be like this all the time.

Mrs Robson asked that the Bugwatch report which had been tabled was formally approved.

The Report was approved on the proposal of Mr Johnston and seconded by Mr Durkan.

Mrs Hogg asked if the WHSS Council had heard of any new incidents of C Difficile in the Western Board area?

Mrs Gormley said the Council had not been made aware of any new incidents in the Western Board area.

Members' Issues:

New Hospitals - road conditions:

Mr Johnston asked that the WHSS Council write to Mr Pat Doherty, Divisional Roads Manager, regarding the condition of the road from Omagh to Enniskillen. He said with the new hospital in Enniskillen being built to serve the people of the Southwest the roads clearly need to be upgraded.

Mrs Hogg said she agreed with Mr Johnston and said it would allay a lot of the concerns about the hospitals if they were easily accessible.

Mr Campbell said he also agreed with writing to Mr Doherty but felt it would make no difference.

Action Point: AP c/04/08

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| WHSS Council to write to Mr Pat Doherty Divisional Roads Manager raising concerns regarding the condition of the road from Omagh to Enniskillen. |
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Carer's Allowance:

Mrs Hogg said she wished to raise a concern about Carer's Allowance. She said when carers reach pension age it is her understanding that they lose their carer's allowance. Mrs Hogg said there is a Bill about this issue being put to the Assembly and asked if the WHSS Council could add their support to the carers' voice. She said carers save the Government millions of pounds and it is grossly unfair that they are disadvantaged in this way.

Mr Carten said he supported Mrs Hogg on this issue and suggested that members of District Councils also lobby on this.

Mrs Brown said she was not sure that this is the case as she is aware of a man in his 70s who still gets carer's allowance.

Mrs Gormley undertook to provide members with further information to clarify this issue.

Action Point: AP d/04/08

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| WHSS Council to find out further information on this issue and to write a letter to support the Private Members Bill. |
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Lack of Psychiatric ICU in Gransha:

Mr Durkan said he had worked with a family recently whose relative was admitted to Gransha Hospital. He said that the patient required to be nursed in a specialist intensive care environment but that there were no Intensive Care facilities available in Gransha. Mr Durkan said he was concerned at the lack of psychiatric ICU beds in Gransha.

Mr McIvor said he was part of a group that was looking at new plans to replace Ballycann. He said Ballycann 1 and 2 were both being replaced by a new building. He said it was very early days but they were talking about having ICU facilities in the new building.

Action Point: AP e/04/08

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| Chief Officer to ask the Trust for an update on psychiatric ICU facilities for patients in Gransha. |
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Any Other Business:

Minister's Letter:

Mrs Robson reminded members that the Chairman had written to the Minister in January 2008 expressing members' concerns about the lack of responses to questions raised by the Council with the WHSS Board. She said the Council had received a response from the Minister on 18th March 2008 and a copy of the letter was included in members' packs.

Mrs Gormley read the letter to the members.

Mrs Brown asked that the WHSS Council continue to monitor these issues.

Mr Campbell asked in relation to fertility services if the Minister was saying the same as the Board?

Mrs Gormley referred to the action points from the previous meeting and said that herself and the Chief Officer are following up on this issue.

Workshop re HSC Reforms - 14/4/08:

Mrs Gormley reminded members that the Workshop for WHSS Council members to discuss the Minister's proposals on HSC Reforms was arranged for Monday 14th April 2008 at 1.30pm in the Southwest College, Omagh Campus.

Safetalk Training Workshop - 25/4/08:

Mrs Gormley reminded members that the Safetalk Suicide Awareness Training Workshop for WHSS Council members was arranged for Friday 25th April 2008 at 10.00am in the Conference Room, Ground Floor, Main Building, Tyrone and Fermanagh Hospital, Omagh.

Feedback from Joint Council Event - 27/2/08:

Mrs Gormley advised members that a summary of the feedback from the Joint Council event held on 27th February 2008 was included in members pack. This will form part of the discussions at the WHSS Council workshop on 14th April 2008 to discuss the Minister's proposals on HSC Reforms.

Joint Council Event - 1/5/08:

Mrs Gormley informed members that the next Joint Council Event will be held on 1st May 2008 in Belfast Castle from 10.00am to 3.30pm and asked members to hold that date in their diaries. A programme for the event will be forwarded to members shortly.

O'Neill Inquiry Report:

Mrs Gormley said a copy of the full Report and Executive Summary of the Independent Inquiry Panel to the Western and Eastern Health and Social Services Boards – May 2007 on the deaths of Madeline and Lauren O'Neill was included in their packs.

Mr McIvor asked that this item be included on the agenda for a future WHSS Council meeting after members have had an opportunity to study the report.

Action Point: AP f/04/08

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| O'Neill Inquiry report to be included on agenda for future WHSS Council meeting. |
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Date, Time and Venue for Next Council Meeting:

The next meeting of the Council will be held in the Vale Centre, Greysteel, Limavady on Friday 2 May 2008 at 6.00pm. Dr Bronagh Byrne from Disability Action will make a presentation to members at this meeting.

The meeting ended at 12.00pm