

9th February, 2009

Alison Annett
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Dear Ms Annett,

Magherafelt District Council recently considered your consultation document on 'Modernising Health and Social Care Services in Northern Health and Social Care Trust' and recommended that the following points be raised in response to your proposals.

The Council acknowledges that public services are being challenged to deliver quality needs based services whilst being required to make significant efficiency savings. Council was encouraged to receive commitment from the Trust that none of the changes would be implemented without the proposed alternatives being in place. However Council has significant concerns about the rationale for the proposals being made and the adverse impact these will have on the quality of service provided to residents in the district. In relation to each of the reviews proposed Council would make the following comments -

- **Reconfiguration of Acute Hospital Services**

- Council recognises that the Trust must have due regard to clinical risk assessments relating to service delivery within smaller acute hospitals. However the Trust area comprises a number of larger and smaller acute hospitals. It would seem possible to be able to rotate staff around these hospitals so that they could get the training and experience they require. This would overcome the problem of staff recruitment and experience needs.
- The highest percentage users of A&E in Mid Ulster are people over 55 and 15-24 year olds. Accessibility is a huge issue in rural communities especially for the elderly and young people. Council is of the opinion that the proposals being made by the Trust will only make it more difficult for users to access services in Antrim or Coleraine, especially if they do not have access to a car.
- There is no indication given if there will be additional staff at A&E in Antrim and Coleraine to cope with increased usage. Both locations are struggling to cope with the current demand and the proposals will only make the situation worse.
- Travel times quoted to Antrim and Belfast hospitals are 26mins and 46 mins respectively which are lower than the recommended 'Golden Hour'. These seem low especially if you had to travel to Belfast at a peak time when it may take well over an hour. It also does not reflect the geographic spread of the council district which is a rural community with a large hinterland. It will take longer than the 'golden hour' to travel from some of the more remote parts of the district.

- The proposals do not give an indication of how community based services would be developed or what resources would be dedicated to this. Council would be concerned that these would not be developed or resourced in line with the demand that will result from the changes in acute provision and so the rural community would have to bear the cost.
- The proposals include the extension of Antrim hospital by an extra 48 acute beds. There are currently 29 beds at Mid Ulster and 60 at Whiteabbey. This reduces the number of acute beds available in the trust area. Council would be concerned that the extension requires approval of capital expenditure for the extension of Antrim and the construction of the new health and care centres. This has yet to be secured and may take some time. Council would suggest that it is particularly important for the Trust to make sure that any changes in acute services are only made when the necessary infrastructure is in place.
- There is no evidence in the documentation that the Belfast hospitals and ambulance service will be able to accommodate the increased demand that will result from the changes. This is particularly relevant as the ambulance service is proposing changes to service delivery and it is unclear if the NIAS and the NHSCT have jointly considered the consequences of their proposals. The dual impact of these could be significant on the rural community within the district.

- **Traffic Management at Northern Health and Social Care Trust**

- Council recognises that improvements must be made to the parking arrangements at the Trust's hospitals. However transport by car is currently the only option for people living in rural areas. The charges will put an additional cost on rural communities as there are no public transport alternatives. If charging is to be used Council would suggest that these are kept to a minimum to reduce the financial burden on people living in rural communities.

- **Reprovision of the Trust's residential homes**

- The Trust has indicated that the proposals will lose 188 beds in residential homes for older people which is 58% of current capacity. The Trust gives no indication of the availability or quality of the supported living alternatives or whether these will be suitable for the existing residents that will be displaced. Council would be concerned that the current residents would not be able to live outside of residential care and would find it difficult to move to a new environment.
- Some indication is given that the supported living options will come from DSD funding that will allow housing associations to provide social housing or private landlords who would modify their properties. There is no indication of the funding required to provide the alternatives or if this has been secured to meet the needs of the displaced residents. Council can see no clear strategy of how the alternative living options will be provided or the cost savings that this will deliver over refurbishment of existing buildings.

- Council experience of working with local communities would indicate that there are currently difficulties in organising domiciliary care for older people leaving hospitals. The proposals will only make this worse and it is unclear how it would be coordinated or meet the needs of the older people moving into the supported living accommodation.

- **Reconfiguration of domiciliary care services**

- Domiciliary care is an important service to the community within the district. Council are keen that the quality of this service is maintained and would be concerned that use of an external contractor will result in the standard of service falling. No indication is given of how the trust will make sure that an external contractor will recruit and retain quality staff or that the service will be maintained at a high standard. Council would like to be reassured that quality of service provision will not suffer as a result of these proposals.

- **Reform and modernisations of mental health services**

- The council welcomes the development of a local service to meet the needs of personality disorders. This will support the return of at least 6 people from units in England and create additional staff posts in this area. However the rationale given for the loss of acute mental health beds at Whiteabbey Trust is based on a study carried out in London which showed a significant reduction in admissions to hospital when the home treatment service was introduced. London is very different to the Magherafelt District Council area which is rural with a large hinterland. Council would be concerned that the model applied in London could not be fully replicated in the district due to its nature and characteristics and that it should be piloted in the province to make sure the same results are delivered before the acute beds and lost.
- The Trust intends to commission 2 or 3 community based facilities for people with dementia from the independent sector. These will be more locally based and therefore more accessible. Council would like to emphasise the importance of patients receiving the same quality of treatment and that providers are adequately regulated or managed to ensure this.
- Council supports the development of a new community rehabilitation service in a community setting. Council would however also like to see more supported living accommodation provided for people with mental health problems.

- **Reform and modernisation of learning disability services**

- It is unclear from the documents that the Trust has undertaken a risk assessment for the 'Share the Care Scheme' being proposed. Council would be concerned that the recruitment of host carers in specific localities may be difficult which will result in a reduction of respite care.

For the families who care for adults with a learning disability, respite care is a life line that makes sure they can continue to provide the care that is required. Council would not support any reduction in the level of respite care available.

- There is no evidence of the Share the Care scheme having been evaluated for its effectiveness. Council feels strongly that the most vulnerable in our communities must be protected. There is no indication given of how the host carers will be vetted or how the environment of the carers home will be controlled so that it is safe. Council would welcome feedback from the Trust as to how this will be done.
- Council notes that no details are given on the extent to which day provision for respite will be extended. Council would be keen that the availability of community packages adequately meets the demand that exists now and in the future.
- Council notes that the proposals given for reconfiguring day care services for adults with learning disabilities gives more options but this is quite high level. There is no analysis of demand versus availability and if the options suit the needs of the users. Again council would be keen that the provision of day care services adequately meets the demand now and in the future.

Overall Magherafelt Council recognises that the Trust is under pressure to make efficiency savings. However this must not be at the expense of service delivery. The council area is largely rural and does not have access to services that are traditionally provided in larger urban centres. The council feels that there is no overall strategy for the changes being proposed and that a full analysis of savings has not been undertaken. There are costs associated with community based provision both financial and personal and the implications of these must be fully identified and examined so that the best option in terms of a quality service is implemented.

I trust that you find these comments helpful.

Yours faithfully

J A McLaughlin
Chief Executive