



Northern Health
and Social Care Trust

**CSR Reform and Modernisation –
Proposals, Consultation Findings,
Consideration and Decisions.**

26 March 2009

Introduction

The Northern Health & Social Care Trust has completed a wide spread consultation on its 20 Reform and Modernisation proposals, under the Comprehensive Spending Review (CSR), covering all service areas from acute hospitals, services for children, mental health and disability services, services for older people and a number of general efficiency proposals.

All of the proposals have been put forward bearing in mind safe, modern practice and standards, and the need to ensure efficient use of public resources.

In addition to the proposed service delivery changes, the Trust will secure efficiency savings of over £20m from reduced administration and management costs and effective management of overtime, locums and absence. The proposals consulted on, and associated recommendations set out in this document, refer to the service delivery issues only.

Modernising the way we deliver services will achieve savings. However, the new modern replacement services will be able to call on some of these savings to provide the investment necessary to provide the new services.

The Consultation period was undertaken in two periods lasting a total of 16 weeks (from 23 October 2008 to 6 March 2009). During this time there has been significant effort to engage widely, directly and intensely with as many people and organisations as possible. The debate has been powerful, and rightly so, as we discuss the future nature of services that often affect our most vulnerable.

Much good has come from it, not least a high profile and awareness of residential care services for our older people. This has challenged us all to consider how we best provide for our older people into the future. This is a debate that we must have, however difficult. We cannot shy away from issues that challenge us, and by engaging in these difficult debates we can find solutions. This is true of all our services and for all the people whom they serve.

The Trust has listened carefully to the many views expressed and heard throughout this consultation. (A full review of those responses is published on our web site). We have reflected on those views and taken account of them in making our recommendations.

We have also continued to be focussed on providing safe, sustainable, modern services and understand that, in moving ahead with modernising services, we must acknowledge the concerns, and indeed the ambitions, of all those who have a stake in the future of service delivery.

The purpose of the Consultation was to seek views on the proposals from a wide range of stakeholders including service users, staff, public and public representatives, other statutory and independent sector organisations, trade unions, representative groups and professional bodies. A full summary of the views and comments received has been published on the Trusts web site (www.northerntrust.hscni.net). The Trust Board have taken careful consideration of the views and comments expressed in reaching their decisions and putting forward their recommendations to the Minister for consideration and approval.

This document summarises the key comments and views expressed during the consultation against each proposal and the Trust consideration of those views in their decision-making. The Trust would wish to thank everyone for their contributions throughout the Consultation process.

CHILDREN'S SERVICES PROPOSALS

Proposal	Consultation Response Summary	Consideration	Decision
<p>Replace Prince's Gardens Children's Home with salaried foster carers</p>	<ul style="list-style-type: none"> <li data-bbox="667 387 1081 683"> <p>▪ Foster Carers Concern re recruitment, training, skills and capacity of foster parents to manage all the children especially those with challenging behaviour or learning disability</p> <li data-bbox="667 1121 1081 1372"> <p>▪ Effect on Young People Concern re effect on current young people especially disruption to education, friendships and having to make another move.</p> 	<p>The Trust has been successful in recent recruitment campaigns. Salary of £25,000 should make it more attractive.</p> <p>All foster parents subject to rigorous selection, assessment, training and monitoring.</p> <p>Support Team to support foster parents and children intensively to be set up.</p> <p>Respite to be developed to support foster parents especially those caring for children/young people with challenging behaviour or learning disability</p> <p>The Trust will develop an individual care plan with young people and current staff for each child.</p> <p>VOYPIC (Voice Of Young People In Care) supported young people during the consultation and will</p>	<p>Proceed</p>

	<ul style="list-style-type: none"> ▪ Staffing issues Concern re job losses 	<p>continue to support. Five of the eight young people currently in Prince's Gardens will be 18 years and move to Leaving and After Care Services within the CSR period and will have appropriate care plans. Remaining three children's care plans will address issues re maintaining important family and friendship links and maintenance of education especially for young people approaching important exams, eg GCSEs</p> <p>The Trust has confirmed no staff will lose jobs. Individual discussions with staff will be conducted to develop an individual future employment plan, which may involve redeployment, retraining, voluntary early retirement and voluntary redundancy.</p>	
<p>Provide alternative salaried foster carers to replace Cherry Lodge Respite Unit</p>	<ul style="list-style-type: none"> ▪ Concerns about ability to recruit and train suitable foster carers to meet complex needs 	<p>The Trust is confident about recruitment. There is a successful scheme in Causeway locality using non salaried carers – with salaried carers who would be trained and supported by a small support team, including</p>	<p>Not to Proceed</p>

	<ul style="list-style-type: none"> ▪ Concerns re vetting of people going into foster carers homes ▪ Concerns re ability to respond to crisis by foster carers ▪ Issues of costs and adaptations to foster carers homes ▪ Issues of loss of choice over respite provision for parents ▪ Lack of Trust in capacity of foster carers to replace qualified trained staff ▪ Issues re loss of friendships among young people ▪ Challenge re possible contravention of human rights of children by closure of Cherry Lodge 	<p>health care assistants, the Trust are confident the scheme is sustainable. Can respond to crisis and provide a high quality service.</p> <p>The Trust understand the vulnerability of the young people who use Cherry Lodge and the difficulty of parents having confidence and trust is a service that has still to be developed..</p> <p>The Trust has concluded in light of consultation responses and the depth of feeling and concern expressed not to close Cherry Lodge.</p> <p>The Trust will use children's services development monies to develop a salaried foster carers respite service to offer flexible respite services and seek to build trust and confidence in this model of care for the future.</p>	
<p>Renegotiate Linden Services Contract with Extern</p>	<p>Impact on Services Concern re loss of service for young people</p>	<p>The Trust will retain the residential services for young people currently provided by Linden. The Trust will negotiate to reduce the requirement for the</p>	<p>Proceed</p>

	<p>Impact on Community/Voluntary Sector Concern about funding of voluntary sector</p>	<p>multi systemic therapy and family support services in light of the development by the trust of a number of community support services for children and young people living with their parents.</p> <p>The Trust has a very significant contract with extern and the proposed renegotiation will still retain a significant level of service and funding with Extern.</p> <p>Notice of intention to review this contract has been discussed with Extern for some time to allow for any internal adjustment within their services, which may result from a decision to proceed.</p>	
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DISABILITY SERVICES PROPOSALS

Proposal	Consultation response summary	Consideration	Decision
<p>Implement the “Widening Choice and Opportunitites” programme for adults with learning disability, developing alternative day opportunities (Broadway Adult Workshops, Newtownabbey).</p>	<ul style="list-style-type: none"> ▪ Concerns raised by families, carers, clients and some community representatives about proposed closure of Broadway. ▪ Concern about the provision of alternative day support in the local area, given the needs of current Broadway service users. ▪ Recognition of the deficits of Broadway building but value location. ▪ Many users keen to engage with new opportunities. ▪ Users enjoy social aspects of Broadway. ▪ Parents and carers want clients to have 	<p>The Trust has considered the views and comments expressed as part of the Consultation. The Trust are mindful too that the Bamford Review of Services for People with a learning disability, “Equal Lives” (2005), indicates the need for the wider use of a range of community based opportunities and options for people with a learning disability and a reduced reliance on traditional adult centre services.</p> <p>During the past year the Northern Board and Northern Trust have invested over £300k in Day Opportunity and Day Care Services and it is anticipated that this investment and extension of day opportunity services will continue during the CSR period in line with Bamford.</p> <p>The Trust acknowledges the concerns raised during consultation and has established</p>	<p>Proceed with the provision of day opportunity services for clients at Broadway Workshop within the CSR period.</p>

	<p>opportunities to reach full potential.</p>	<p>positive engagement with clients and their families in two ways:</p> <ul style="list-style-type: none"> ▪ Firstly the Trust has held individual meetings with each client and their carers/relatives to discuss with them what they would want and the types of opportunities which would meet their needs. ▪ Secondly the Trust has established a local planning group on which client and their carers/relatives are represented alongside Trust staff. This Group has an overall aim to enable people who attend Broadway Workshop to have a range of opportunities offered to them through the Trust's Day Opportunities Programme and to explore alternative buildings based services, for those identified, that will ensure individual need is met. This would include the possible re use of the Broadway facility as part of the day opportunities options. It is intended that as 	
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		<p>the work of this group develops other stakeholders could also become involved.</p> <p>The Trust will continue to work closely with users, their families and carers through these processes.</p>	
	<ul style="list-style-type: none"> ▪ Staff protection/job losses/concern about future employment 	<p>The Trust has confirmed no staff will lose jobs. Individual discussions with staff will be conducted to develop an individual future employment plan, which may involve redeployment, retraining, voluntary early retirement and voluntary redundancy.</p>	
<p>Extend the provision of respite services expanding on community/family respite provision with less dependence on bed based respite.</p>	<ul style="list-style-type: none"> ▪ Concerns were raised in responses re perceived potential difficulty recruiting Host Carers. ▪ Some respondents indicated additional funding should be allocated to learning disability services for further development of respite services. 	<p>In considering response the Trust are mindful too that the Bamford Review 'Equal Lives Report' (2005) and the Northern Health and Social Services Board Strategy 'New Directions; New Opportunities' indicate that respite services need to be developed in a manner that provides a range of flexible person centred services which would include bed based services but also extend the</p>	<p>Proceed with the redesign of respite services for people with a learning disability by implementing a number of flexible alternatives to bed based respite within the CSR period.</p>

	<ul style="list-style-type: none"> ▪ Concerns regarding the provision of alternative options to bed based respite. 	<p>range of host carer services, home based support and community based activity.</p> <p>Over the 3 year CSR period it is envisaged, on the basis of current investments plans, that a total of £1.2m will be invested in a range of respite services.</p> <p>This is an extension of a successful host carer scheme running for many years in the Causeway locality. The Trust acknowledges that recruiting host carers is challenging however we have a good track record of success in this area and will invest in the recruitment processes and in ensuring that the essential support systems are put in place. .</p>	
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MENTAL HEALTH PROPOSALS

Proposal	Consultation response summary	Consideration	Decision
<p>Provide a local service for people with personality disorder, avoiding reliance on people travelling to Great Britain for services.</p>	<ul style="list-style-type: none"> ▪ Positive responses received regarding the development and establishment of local services for people with a personality disorder. 	<p>In December 2008 the DHSSPS launched for public consultation a Personality Disorder Strategy for N Ireland. This strategy drew upon the Bamford Review's recommendations and further envisaged a 6 tier model for service delivery to people with a personality disorder. This aims through providing improved local services to better meet client and carer needs and reduce the number and durations of out of N Ireland placements for people with a personality disorder. The DHSSPS also indicated that up to £3million will be invested over the next two years to establish personality disorder services across Northern Ireland and the Trust will wish, in line with the draft strategy, to bid against this funding.</p> <p>The provision of a locally based personality disorder services will give people the option for care,</p>	<p>Proceed to plan, prepare and put in place, a local community based personality disorder service within the CSR period.</p>

		treatment and support within Northern Ireland.	
Develop home treatment services for people with mental health problems, reducing the need for hospital admission (Ward 8, Whiteabbey Hospital).	<ul style="list-style-type: none"> ▪ Acknowledged impact of hospitalisation on patients and families. ▪ Support for care and treatment outside of hospital. ▪ Beds should only be reduced once the new Home Treatment Service is up and running. ▪ Some responses related to higher rates of psychiatric morbidity in Northern Ireland and expressed concern regarding psychiatric bed closures. ▪ Patients admitted to the current Whiteabbey service expressed concern regarding having to travel to Antrim for inpatient care. <p>Staff concerned about</p>	<p>Home Treatment Services are an element of a modern mental health service with the Bamford Review (2005) recommending that home treatment services be made available on a 24-hour basis across N Ireland. The Trust has agreed in principle a bid with the Northern Board for an investment of £1.0m in the phased development of a Home Treatment Service building upon the current Crisis Response Service.</p> <p>The development of a home treatment service, which will offer care, treatment and support outside of a hospital setting, will avoid the need for hospital admission for some people, and the impact of hospitalisation has been acknowledged by those responding to the Consultation.</p> <p>The availability of the Home Treatment service will reduce the need for psychiatric in-patient beds. The home treatment</p>	Proceed within CSR period to invest in a Trust Wide home treatment service and reduce inpatient bed provision as this service develops

	<p>future employment and the loss of a locally based service.</p>	<p>service would commence from spring 2009 and beds would be reduced in a phased and managed way at Ward 8 Whiteabbey as the home treatment service is established, again acknowledging a point raised in Consultation.</p> <p>Psychiatric in-patient provision will continue to be provided for appropriate patients as necessary in Holywell and Causeway Hospitals. Taking on board the issue about travel raised in the Consultation, the Trust will work to influence improved transport links from Whiteabbey to Holywell Hospital to improve access for patients and families from that area.</p> <p>In relation to staff concerns raised, the Trust has confirmed that the skills staff have are essential to the future delivery of services and that no staff will lose jobs. Meetings have been held with staff and unions. Individual discussions with staff will be conducted as the proposal proceeds to develop an individual</p>	
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		future employment plan, which may involve redeployment, retraining, retirement and voluntary redundancy.	
Provide community based rehabilitation services reducing the need for the in-patient rehabilitation ward at Holywell hospital, developing a new community based rehabilitation unit.	<ul style="list-style-type: none"> ▪ Proposal is in keeping with strategic service direction. ▪ Support for care outside hospital where appropriate for individuals. ▪ Some responses indicated that developments should not involve private sector. ▪ Some respondents felt more information was required on proposed model of new community services. 	<p>The Bamford review (2005) indicates that people who are returning to independent living as part of their rehabilitation require specialist community accommodation with support and this was acknowledged in the Consultation responses (strategic service direction).</p> <p>The Trust's current inpatient rehabilitation service based in Holywell Hospital does not lend itself to the need for a focus on social inclusion, use of community resources and family support.</p> <p>The provision of community based rehabilitation accommodation and services means that people can much more appropriately access rehabilitation outside a hospital setting.</p>	Proceed to redesign rehabilitation services and provide services in the community within CSR period.

		<p>The intention is that the community based rehabilitation service will be directly provided by the Trust and not the private sector. This will be as an extension to the current community rehabilitation and recovery service. It is envisaged that the Independent Sector will however provide the accommodation.</p>	
<p>Replace Inver Ward at Holywell Hospital for people with dementia with community alternatives, working with independent sector</p>	<ul style="list-style-type: none"> ▪ Unison response concerned with involving independent sector providers. ▪ Community voluntary sector providers have a track record in providing community alternatives to inpatient care. ▪ Some carers anxious about ability of independent sector to develop a high quality alternative to hospital care but welcome more local services. 	<p>The Bamford review of Mental Health Services for Older People (2007) indicates that there should be no long-term care provided within a hospital setting. The proposal in respect of Inver 4 is an explicit recommendation in the Trust's strategy for mental health services or older people (2007). The development of this strategy involved significant relative and carer engagement.</p> <p>The Trust will put in place community based accommodation and services to support people with dementia outside of a hospital setting, where appropriate to their needs.</p> <p>The Trust acknowledge the views</p>	<p>The Trust will proceed to redesign dementia services and provide more local non-institutional facilities and services within the CSR period.</p>

	<ul style="list-style-type: none"> ▪ Great sensitivity of care needed when considering potential move for long stay patients from hospital new community settings. ▪ Staff sought reassurance about the level of training and skills for staff at proposed new unit. Staff concerned re security. 	<p>raised about working with private sector providers. However in the normal course of events many of the patients in Inver 4 are eventually discharged to independent sector Elderly Mentally Infirm services. This proposal is aimed at reducing the amount of time they have to spend in hospital and reducing the number of moves they have to make which can be detrimental to their health. Key to the success of this proposal is the development of sound joint working between the Trust and independent sector providers to both reduce the likelihood of admissions from community to hospital and support direct discharge from inpatient dementia assessment services for those people with ongoing high level needs. In line with this the Trust launched last year its behavioural support service for people with dementia at a cost of £136k. In taking forward the development of community based services, the Trust will work in partnership with independent sector providers and</p>	
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		<p>we would plan to secure accommodation which improves local service availability and access. We will work closely with current clients and their families in planning and preparing for the new services, sensitive to the needs of each individual.</p> <p>In relation to staff issues, the Trust has confirmed no staff will lose jobs. Individual discussions with staff will be conducted to develop an individual future employment plan, which may involve redeployment, retraining, voluntary early retirement and voluntary redundancy.</p>	
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OLDER PEOPLE'S PROPOSALS

Proposal	Consultation response summary	Consideration	Decision
<p>The Reprovision (Replacement) of 5 Statutory Residential Homes for Older People with Supported Living accommodation and support</p>	<p>Communication/Information</p> <p>Opposed to perceived closure of homes</p> <p>Poor communication and information at outset did not properly present the proposal</p> <p>Home 'closures' would put more pressure on families to provide care</p> <p>Put pressure on other services (eg community or hospital services)</p>	<p>Published documents at outset did refer to 'closure' albeit followed by plans for replacements. Action taken to address this included:</p> <ul style="list-style-type: none"> ❑ Further letter from Chairman and Chief Executive to each resident/service user of the 5 homes, their family/carer and staff clarifying the proposal is one of replacement ❑ Meetings held at each home with residents, staff and families for clarification and discussion ❑ Four public meetings and a substantial number of meeting with public representatives, service user groups, correspondence (see full list in Consultation Feedback Report) taking 	<p>Proceed with the replacement of 2 statutory residential homes within the CSR period</p>

		<p>opportunity to clarify re replacement schemes</p> <p>The proposal sets out to replace existing services currently provided from the Homes with new alternative provision at least matching the needs for the number of residents/clients and also taking account of future needs. This should not therefore mean increased demands placed on families/carers or other services for existing or future service users.</p>	
	<p>Quality and Well Being Concern for existing residents in transition to new accommodation</p> <p>Excellent care provided in existing homes</p>	<p>Trust Board have given a commitment that the needs and well being of existing residents will be treated with the utmost care, attention and sensitivity throughout the planning process for new accommodation and services and in the transition to new accommodation. This will be a key element of the planning for replacement which will closely involve residents, families, staff and a range of other stakeholders to ensure residents needs are taken account of and the highly valued quality of care provided in existing homes</p>	

		<p>continues to be the standard of care to be provided in new accommodation and services. RQIA will continue to provide standards for residential and homecare based services and undertake a quality assurance programme, and reports, across services.</p>	
	<p>Profile of Future Services Supported living not suitable for all older people</p> <p>Alternative provision must include an element of residential care (24/7) care and support</p> <p>Meals on wheels, respite, daycare, intermediate care and other services are also provided from existing homes and need to be taken account of in future services</p> <p>New accommodation and services must be in place before any home is closed.</p>	<p>The Trust recognise that the initial proposals have emphasised the replacement of residential care with supported living and supported accommodation and services, and acknowledge that there may be a requirement to provide residential care places necessary to meet the identified needs in each of the localities. The Trust commit to providing residential care with 24/7 care/support within the replacement schemes alongside supported living options, appropriate to the needs of the community served.</p> <p>The Trust acknowledges that many of the homes provide a wider range of services alongside permanent residential care. In the planning and development</p>	

	<p>Future services must be flexible to meet changing needs</p> <p>Support for planning for future services for older people involving older people themselves and other stakeholders and at a pace that can ensure meaningful inputs</p> <p>Query re criteria used to select the five homes Future services must be local</p>	<p>of new replacement schemes those service provision will be taken account of and also be reprovided (replaced), where appropriate.</p> <p>New accommodation and services will be in place before any home would be closed and all homes will continue to be maintained and supported throughout the planning process and development of new schemes.</p> <p>Future services can bring together a range of options for supported living alongside residential care where appropriate within the same scheme in order that the changing needs of clients can be 'stepped – up' over time.</p> <p>Local planning groups will be established and representatives of residents, families, staff, local communities and other stakeholders will be closely involved in the planning process.</p>	
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		<p>In identifying the 5 homes for replacement, the Trust adopted the use of a weighted scoring/criteria matrix comparing each of the 9 homes in the Trust area on the basis of accessibility, quality of physical environment, impact on other services, flexibility for future development, restrictions on privacy, and costs. On the basis of the scores achieved for each home (awarded by the Residential Homes Management Team) , and giving consideration to the sector that the home was located in (4 sectors being identified), the Trust identified 2 homes scoring least from that process.</p> <p>In giving further consideration to the CSR timeframe, and ensuring that adequate time, focus and Trust management support can be given to the planning for each replacement scheme to ensure meaningful inputs from and engagement with stakeholders, the Trust identified the 2 homes that scored least from the list of 5 identified.</p>	
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	<p>Staff and Resources</p> <p>Staff protection/job losses/concern about future employment</p> <p>This is a finance/cost cutting exercise</p>	<p>The Trust has confirmed no staff will lose jobs. Individual discussions with staff will be conducted to develop an individual future employment plan, which may involve redeployment, retraining, voluntary early retirement and voluntary redundancy.</p> <p>The Trust has acknowledged that the replacement of residential homes forms part of the Trust response to the Comprehensive Spending Review. However savings realised through the replacement of the Homes with a range of services including supported living, will be modest and be available to the DHSSPS for reinvestment in front line services.</p> <p>These proposals are as much about modernising services for older people and ensuring fit for purpose accommodation and service is available in the future as it is about savings.</p>	
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	<p>General lack of Trust in the Proposals</p>	<p>The Trust acknowledges the need to build trust with current residents, staff, communities and other stakeholders and demonstrate that the new model of care is safe, can meet the totality of needs of older people and can maintain the quality of care provided in current residential homes. It is therefore recommended that we proceed within the CSR period on a phased basis with plans to replace 2 homes out of the 5 proposed. The 2 homes selected had the lowest scores using the criteria identified by the Trust and were in 2 separate localities of the 4 localities identified.</p> <p>The Trust hopes that the successful replacement of 2 homes will build trust and confidence for future service modernisation.</p>	
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DOMICILIARY CARE PROPOSAL

Proposal	Consultation response summary	Consideration	Decision
<p>Provide a greater proportion of our domiciliary care services through independent sector providers.</p>	<ul style="list-style-type: none"> ▪ Some concerns raised regarding standards, reliability and quality of services provided by the Independent sector. ▪ Concerns raised about any impact on current Trust homecare workers and the need for effective communication. 	<p>In considering the issues raised about standards and service quality, both the Trust and the Independent Sector providers must be registered with the Regulation and Quality Improvement Authority (RQIA) and both will be subject to inspection by that body. The Trust will maintain strong links with RQIA in respect of its regulatory role for Independent Providers.</p> <p>The Trust will also develop a quality assurance framework that will provide assurance in relation to commissioned services in including quality standards and ensuring that any concerns raised are addressed promptly, appropriately and in a co-ordinated manner.</p> <p>In relation to staff issues, the Trust has informed current domiciliary care staff that they</p>	<p>The Trust will proceed to provide a greater proportion of domiciliary care services through independent sector providers within the CSR period.</p>

		<p>will not transfer to independent sector providers under this arrangement. Staff turnover will provide opportunities to move towards more input from independent providers (which include voluntary, community and private sector providers).</p> <p>The Trust will ensure that Trust-based services (provided through directly employed staff) continue to provide a vital part of the wider provision of modern, responsive homecare services.</p> <p>Existing domiciliary care hours for clients will continue to be provided. There will be no reduction in hours.</p>	
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ACUTE PROPOSAL

Proposal	Responses	Consideration	Decision
<p>Reconfiguration of Acute Hospital Services</p>	<p>Capacity in Antrim/Causeway/Belfast Services in Antrim, Causeway and Belfast already can not cope and reconfiguration will put them under additional pressure.</p> <p>Accessibility of Services Concern re accessibility of Antrim to people travelling from Whiteabbey and rural areas around Magherafelt.</p>	<p>The Trust understand the perception of additional pressure at larger Hospitals.</p> <p>To address concerns re physical space in Antrim the Trust have plans to create additional space in A&E. This will be by a combination of a proposed modular extension to the existing A&E and the possible conversion of space beside A&E to provide additional capacity. The Trust also have plans to create additional bed capacity by the temporary use of a modular 24 bed ward and by the conversion of some current non ward based areas into bed space. Plans for all these proposals to create additional space are well advanced.</p> <p>The Trust recognises that some residents of Newtownabbey who currently access services in Whiteabbey will choose to access services in Belfast</p>	<p>Proceed with amendments</p>

		<p>Hospitals. The Trust has been in discussion with Belfast Trust for some time over the plans which they require to put in place to ensure they have the capacity to meet the potential additional demand.</p> <p>The Trust recognise that the full reconfiguration of acute services and A&E at Mid Ulster Hospital, Magherafelt and Whiteabbey at the same time is not possible within the CSR Period and will require additional capacity in Antrim and Causeway which is dependant on a new build ward block at Antrim. Therefore the Trust will make significant effort to retain and support acute inpatient in A&E Services at Mid Ulster Hospital subject to clinical risk and patient safety issues which may emerge.</p> <p>The Trust acknowledge that public transport links between Whiteabbey and Magherafelt and Antrim pose challenges for both patients and visitors. Discussions are ongoing with Translink to try to find ways to</p>	
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	<p>Concern re capacity of NIAS to respond re rural areas.</p> <p>Staffing Issues Concern was expressed re the potential for job losses.</p> <p>Concerns were expressed about the loss of domestic and portering staff in Mid Ulster Hospital.</p>	<p>address this issue.</p> <p>The Trust acknowledges the critical importance of a responsive ambulance service in support of the proposed reconfiguration. Discussions have been ongoing for some time with NIAS to ensure they will be in a position to respond to the need to transfer patients to Antrim and Belfast from Whiteabbey in the first instance and in time form the Magherafelt area. The Minister’s announced investment of £100 million in ambulance services over the 10 year CSR Period will help to support this requirement.</p> <p>Re Staffing: The proposed changes in Acute and A&E Services provided in Whiteabbey will allow staff to transfer to Antrim to bolster both A&E and ward staffing. The medical staff who transfer will help the Trust have more Senior Staff immediately available in both A&E and on wards to treat patients. It will also help the</p>	
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	<p>The need for ongoing communication with staff is essential</p>	<p>Trust to meet the European Working Time Directive for Medical Staff. There will also be Nursing and other Clinical Staff who will transfer and allow the Trust to improve the quality and responsiveness of services in Antrim.</p> <p>The Trust has confirmed that no staff will loose jobs as a result of this proposal. Individual discussions with staff will be conducted to develop an individual future employment plan.</p> <p>There will be the opportunity for staff to transfer to Antrim and have the opportunity to retrain and develop their skills so they can extend their work experience and expertise in the larger hospital setting. Given the range of services – outpatients, rehabilitation, Diagnostics, Day Surgery – which will remain on both sites significant numbers of staff will remain on both Whiteabbey and in time the Mid Ulster sites in support of the local services they will provide.</p>	
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	<p>Concern re ability of people to access acute services within the “Golden Hour”.</p>	<p>The Trust are committed to ongoing communication with staff via normal line management and by ongoing relationships with Staff side Representatives and other Union Representatives. All affected staff will also be able to consider voluntary early retirement and voluntary redundancy if appropriate.</p> <p>The Trust acknowledge there are general concerns for people who may be at the limit of the “golden hour” travel time to an acute hospital. Clinical advise is that with good paramedic assessment and stabilisation it is safer for patients to transfer to a hospital with the full range of specialist staff, diagnostics and other Clinical Services than go to the nearest hospital which does not have these services.</p>	
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TRAFFIC MANAGEMENT PROPOSAL

Proposal	Consultation response summary	Consideration	Decision
<p>Introduce a Trust managed car parking policy, including car park charges at acute hospitals (with exemptions)</p>	<ul style="list-style-type: none"> ▪ Opposition to charges for car parking. ▪ Responses advised there is insufficient car parking space at Antrim Area Hospital. ▪ Suggestion that car-parking charges have been abolished in Scotland and Wales so why introduce them in The Northern Health and Social Care Trust. ▪ Consideration of further concessions requested particularly for people attending the hospital on a regular basis. ▪ Concern re poor public transport service to Antrim Area Hospital. ▪ Indication that charges 	<p>As has been acknowledged in the consultation responses, there is a need for additional car parking at the acute hospitals. Additional car parking spaces will be created at Antrim Area Hospital and Causeway Hospital, both for visitors and staff (237 extra spaces in total at Antrim Area Hospital and 100 extra spaces at Causeway Hospital – in each case 100 of the spaces are staff parking spaces, freeing up most convenient spaces for patients and visitors parking).</p> <p>Concessions will be put in place for specific service user groups in line with the regional exemption policy.</p> <p>The Trust will manage and implement the proposed traffic management scheme with any revenue funding generated in excess of the cost of its provision, directed back into front</p>	<p>The Trust plans to move ahead on the introduction of a managed car parking system at Antrim Area and Causeway Hospitals within the CSR period.</p>

	<p>will have impact on people from rural areas.</p> <ul style="list-style-type: none"> ▪ Overall supportive of improved traffic management at hospitals and support for it being a Trust run service. 	<p>line services.</p> <p>In response to the issues raised about public transport, The Trust will pursue discussions with Translink and providers within the Rural Transport System, seeking to improve public transport links and services to Antrim Area Hospital for patients and visitors.</p>	
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CONTRACTS WITH INDEPENDENT PROVIDERS

Proposal	Consultation response summary	Consideration	Decision
<p>Renegotiate existing contracts with independent providers to seek better value.</p>	<ul style="list-style-type: none"> ▪ Concerns re potential impact on community/voluntary sector. ▪ Concern that proposal may result in cuts in services. ▪ Suggestion that opportunities for efficiency diminish if the value of the contract is very small. ▪ A blanket 3% requirement would not be equitable given the size of the different organisations involved. 	<p>Concerns raised about a 'blanket' approach to seeking efficiencies with independent providers is acknowledged and accepted that opportunities for efficiency may be influenced by the size and nature of the contract.</p> <p>On this basis, opportunities to gain efficiencies will be negotiated with individual contracted organisations seeking to secure efficiencies commensurate with the value and nature of the contract.</p> <p>Impact from any such changes will be assessed by the appropriate professional staff within the Trust.</p> <p>This process will be taken forward across all programmes of care where services are commissioned from Independent Providers as part of our annual and regular contract review procedures and processes.</p>	<p>The Trust plans to proceed to review all contracts held with the Independent Sector, with a view to reducing costs over the CSR period.</p>

