

## **1 REVIEW OF HSCC ACTIVITY 2009 – 2010**

This seventh Annual Report of the Health Services Consultative Committee concludes a year more coloured by political and financial changes than any previous year. Nevertheless, members have considered and discussed topics that impinge directly upon the health of Island residents and our responses to developments were, we trust, direct and positive. Our membership has changed. In May 2009, Mr R J S Fayle, a founder member in 2003, retired and his place was taken by Dr P Evans: in September 2009, three lay members retired and in November 2009, we welcomed their replacements. [See Appendix 1]. The commitment of former members has been of immense value to the good name of HSCC and our thanks are here publicly recorded.

The year under review was dominated by the declared intention of the UK Government to end the Reciprocal Health Agreement between the UK and the Isle of Man. This was to have become effective from 1st April 2009 but an extension for one year until April 2010 was obtained. Consequently, the ramifications of this proposed severance were a significant element of the agendas of HSCC meetings. The last meeting was on 11th March 2010 and later that month a sitting of Tynwald took place during which proceedings were halted to hear the Chief Minister announce that a further six months had been granted. HSCC has been kept informed by DH [previously DHSS] political members and executive officers about the approaches made by the Manx Government to the new UK Government. On 9 September, however, as this Annual Report was being prepared for publication, a new and permanent deal was signed simultaneously in Douglas, by DH Minister David Anderson MHK and in London by Anne Milton MP, a junior health minister in the UK Government.

In addition to the uncertainty, now resolved, about the outcome of that situation, the Island has had to adjust to a major restructuring of Government Departments. The Department of Health and Social Security [DHSS] has been divided into the Department of Health [DH] and the Department of Social Care [DSC]. This has benefits for HSCC in that it is now able to focus on Health Services. Following the meeting on 17 September 2009, the HSCC response to the Social Services Bill 2009 recommending a body similarly constituted to HSCC to 'discuss Social Services issues' was possibly our last chance, officially, to comment on the need for more open public involvement in Social Care. What does remain a concern for HSCC is the decision to place Mental Health Services in DSC rather than DH.

Aside from the politics behind health provision, HSCC has, throughout the year, been made aware of recent developments and ongoing improvements to services in the Island. We have regular updates from the Director of Health Strategy and Performance and, in March 2010, from Director of Nursing and Midwifery. Although Nobles Hospital is less than 10 years old, the implementation of new procedures and routines indicates an awareness of changing needs and a positive will to deliver improved hospital services.

This expansion of health provision is reflected also in Primary Care where patients can expect to find growth in services delivered in the community rather than the hospital. And alongside this is the call for Island residents to take responsibility for their own health by adopting a healthy lifestyle. The Island is fortunate to have a Health Promotion Unit so active and supportive in this area.

However, as the year drew to a close, the public was made aware that financial restraints were likely to be severe following the Manx Budget of February 2010. Although this situation did not pertain for most of the year under review, HSCC has always been made aware of budgetary restrictions. The end of the year forecast a more stringent review of cost effectiveness: the year 2010-11 will doubtless be dominated by cost implications. HSCC welcomes approaches from both the Manx public and the DH: it is committed to consultation and review to ensure quality health service provision delivered where it is most needed.

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Chairman

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Date

## **2a FORMATION OF THE HEALTH SERVICES CONSULTATIVE COMMITTEE**

The Health Services Consultative Committee (HSCC) was established by the Department of Health and Social Security (DHSS) in exercise of its powers conferred on it by the National Health Service Act 2001.

## **2b FUNCTIONS OF THE HEALTH SERVICES CONSULTATIVE COMMITTEE**

The functions of HSCC are set out in Section 2 of the Act:

- (1) DHSS shall establish a body with whom it shall consult on -
  - (a) such general matters relating to the services provided under this Act, and
  - (b) such questions relating to those matters, as DHSS may refer to it.
- (2) The body established under subsection (1) may tender to DHSS its views on any general matters relating to the services under this Act.

## **3 MEMBERSHIP OF HSCC**

The membership of HSCC comprises twelve persons; six Department appointees, nominated by the professional bodies representing Hospital Consultants, General Practitioners, Nurses, Dental Practitioners, Pharmacists and Optometrists, and six lay members, appointed by the Council of Ministers.

## **4 MEETINGS AND ATTENDANCE**

### a Members

Table of Meeting and Attendance – Appendix 1  
List of Present members – Appendix 2

### b Observers

HSCC meetings were augmented by Observers from DHSS:

14 May 2009

Mr N. McGregor Edwards, Director of Health Strategy and Performance

16 July 2009

Mrs L. Keenan, Deputy Chief Executive, DHSS

17 September 2009

Mr N. McGregor Edwards, Director of Health Strategy and Performance

19 November 2009

Mr N. McGregor Edwards, Director of Health Strategy and Performance

21 January 2010

Mr N. McGregor Edwards, Director of Health Strategy and Performance

c Invited speakers

HSCC is keen to have up-to-date information about areas of health service provision on the Island. Individuals with special responsibility or interest in certain fields have accepted invitations to attend HSCC meetings to make presentations about their speciality. HSCC wishes to record its thanks to the following people for their willingness to speak to members and to participate in discussion about topics which have proved most interesting and, in some cases, contentious.

17 September 2009

Mrs M. O'Reilly, Director, Drug and Alcohol Strategy Unit

11 March 2010

Mrs B. Critchlow, Director of Nursing and Midwifery

## **5 MATTERS REVIEWED**

a referred by DHSS

14 May 2009

- Hyperbaric chamber
- Swine flu preparation
- A Strategy for the future of Health Services in the Isle of Man

16 July 2009

- Parity between members' expenses
- Reciprocal Health Agreement
- Report on Hospital Activity
- Health & Social Care in the Isle of Man: Your Opportunity to Influence Future Policy
- Patient Transfers

17 September 2009

- 'A Consultation Paper on the Social Services Bill 2009'  
[published August 2009]
- NHS Act 2001
- Finances

19 November 2009

- Clinical and Information Governance Board of the Department of Health and Social Security ("CIGB")
- NHS (Independent Review Body)(Amendment) Regulations
- Hospital Services Activity Data

21 January 2010

- National Health Service (Overseas Visitors) Regulations
- ECG Waiting Lists

b referred by HSCC members

16 July 2009

- Confidentiality in reception areas

17 September 2009

- Standards of Nursing Care

19 November 2009

- Medical Records
- Independent Review Body
- Alternative Medicine
- Changes at the Blood Clinic – Noble's Hospital

21 January 2010

- Abuse of payments by Direct Debit
- Operations in the Island on those people, formerly resident in the Island, but now living abroad

11 March 2010

- In-Patient Satisfaction Survey
- Ear, Nose and Throat Department
- Induction Day
- Staff dismissals
- Trends of complaints

## **6 RECOMMENDATIONS/ACTION REQUESTED BY HSCC**

a) referred by DHSS

### **Hyperbaric chamber**

HSCC was informed that the Department of Health has not withdrawn its funding of £90,000 to the Hyperbaric Chamber.

**ACTION:** No further action.

### **Swine flu preparation**

A meeting was held to discuss swine flu preparations.

**ACTION:** Review as necessary.

### **'A Strategy for the future of Health Services in the Isle of Man'**

HSCC members felt that the document read well but had not changed much from the first draft. Many concerns that were raised in the first draft have not been considered in the second draft. HSCC is disappointed that their previous extended input has not been reflected in the second draft. HSCC felt that it was good to see targets in the document but would like to know who reviews the success of the strategy in 2015.

**ACTION:** HSCC wrote to the Minister with recommendations.

### **Report on Hospital Activity**

HSCC agreed that the report was very useful.

**ACTION:** Review as necessary.

### **'Health & Social Care in the Isle of Man: Your Opportunity to Influence Future Policy'**

Lesley Keenan informed HSCC that, because expectations from patients are higher and people are living longer, the Department has difficult decisions to make.

HSCC felt that the Department needs focus, initially, on Primary Care as 80% of patient care is dealt with in Primary Care.

HSCC discussed the issue of charging patients for health care. It was agreed that individual comments be collated and submitted as a committee response.

**ACTION:** HSCC members submitted their individual recommendations to DHSS.

### **Patient Transfers**

The contract for patient transfers to Chester Airport has expired.

HSCC would like to thank the Patient Transfers Department for all their hard work and praised their efficiency.

**ACTION:** Review as necessary.

### **'A Consultation Paper on the Social Services Bill 2009' [published August 2009]**

Arguably, a Health Services Consultative Committee may find little to comment upon in the Bill which relates to Social Services. HSCC members felt that it would be beneficial for the Isle of Man Government to have a Social Services Consultative Committee to discuss Social Services issues.

**ACTION:** HSCC submitted a response.

### **NHS Act 2001**

Legislation amendments will be considered early next year.

**ACTION:** Review as necessary.

## **Finances**

There is currently £2.8 million 'overspend' on health in the Isle of Man. In addition, recruitment of medical staff to the Island is proving difficult.

**ACTION:** Review as necessary.

## **Clinical and Information Governance Board of the Department of Health and Social Security ("CIGB")**

Linda Cottier has been nominated for membership of this Board.

**ACTION:** No further action.

## **Independent Review Body**

Norman McGregor-Edwards informed HSCC members of the complaints process. Members of the Independent Review Body are currently appointed by the Chief Minister. The amendments to the above regulations will transfer power of appointment to the Appointments Commission.

HSCC membership is currently approved by CoMin but this may eventually be transferred to the Appointments Commission.

**ACTION:** HSCC wrote and accepted this document.

## **Hospital Services Activity Data**

HSCC members were informed that the Isle of Man had the most improved cancer detection rate in the UK following the introduction of the new breast screening service.

**ACTION:** Review as necessary.

## **National Health Service (Overseas Visitors) Regulations**

HSCC asked if the Department of Health and Social Security will provide a dedicated department to help answer questions. Norman McGregor Edwards informed HSCC that the Patient Transfer Department will deal with all enquiries.

The United Kingdom has been advised that any patient with an Isle of Man address must be treated as a foreign visitor.

The UK is not prepared to consider negotiating a new Reciprocal Agreement with the Isle of Man Government. Reciprocal Agreements between the U.K. and other foreign countries may be reviewed.

HSCC felt it was essential that:

- a Isle of Man residents have access to all necessary information
- b an information leaflet be published as soon as possible
- c information be available on the Internet, Tourist Information Centres and tourist departure points.

**ACTION:** HSCC members emailed comments to Norman McGregor Edwards.

## **ECG Waiting Lists**

All referrals are assessed by the relevant Consultant to assess urgency.

HSCC members queried the facility for patients to transfer between private appointments and NHS appointments. This is 'queue jumping' and gives unfair advantage to fee-paying patients.

**ACTION:** Review as necessary.

b referred by HSCC members

### **Standards of Nursing Care**

Bernice Ashworth produced and circulated a 'Standards of Nursing Care' update. The update included: Nursing metrics, "Transforming Care" initiative, World Health Organisation pre-operative check list, Ward based patient safety initiatives, "Making a difference at the Point of Care" programme, "Noble's Early Warning System" (NEWS) and "Releasing Time to Care". The ward based patient safety initiatives include the "red tray" initiative. This is a visible reminder that patients whose meals are served on these red trays are nutritionally vulnerable. The need for a red tray is made as part of the nursing assessment.

HSCC members asked to what extent these initiatives had created additional paperwork. It was agreed that the increased paperwork for nurses should not prevent 'hands on' nursing on the wards.

Members felt that there was sometimes a lack of basic kindness and care on wards. HSCC were informed that all staff are appraised and any issues raised about this would be discussed with them. HSCC members felt that patients and family members are not always happy to complain about nursing care. It was felt that it is essential for people to air concerns which can often be resolved at the time and at the point of contact.

**ACTION:** No further action.

### **Medical Records**

HSCC members raised the following questions:

Q: What happens if a patient does not want his/her data destroyed?

A: Medical Records are the property of the Health Services and do not belong to the patient.

Q: Will records still be destroyed once all information is stored digitally?

A: HSCC to request this information.

HSCC members felt that a tour of the Medical Records Department would be beneficial.

HSCC arranged a presentation by Sue Rafferty, Health Records Manager, for May 2010.

**ACTION:** Review as necessary.

### **Alternative Medicine**

HSCC members asked if alternative medicine regulations were monitored in the Isle of Man. Norman McGregor-Edwards informed members that amendments are being prepared to control alternative medicine but they will have limited effectiveness.

HSCC members asked what happened if a company made a claim that was untrue. It was felt that this should be referred to the Office of Fair Trading to deal with.

**ACTION:** Review as necessary.



### **Blood Clinic, Noble's Hospital: Introduction of appointments system**

The media have published examples of dissatisfaction with the introduction of appointment times for the blood clinic. However, the general feeling from the public is that this has been a positive change.

The Blood Clinic appointments desk is available 24hrs a day. HSCC members have experienced an improvement in waiting times for appointments.

HSCC raised concerns that many patients are directed to attend the Blood Clinic for blood tests instead of attending their GP Surgeries. This was felt to be a poor use of resources. It was also felt that although GP Surgeries are more accessible for patients, some have long waiting times for Phlebotomy sessions.

**ACTION:** No further action.

### **Abuse of payments by Direct Debit**

HSCC asked about the monitoring of Social Security payments. Norman McGregor Edwards informed HSCC that Isle of Man residents who are caught falsely claiming sick payments will be penalised and may face prosecution.

**ACTION:** No further action.

### **Operations in the Island on those people, formerly resident in the Island, but now living abroad**

HSCC asked how the Isle of Man Government monitors patients who live abroad but return to the Isle of Man for surgical procedures. It is hoped that this issue will now be covered by the National Health Service (Overseas Visitors) Regulations.

**ACTION:** No further action.

### **In-Patient Satisfaction Survey**

Noble's Hospital is currently running an In-Patient Satisfaction Survey. Nurses are responsible for distributing the surveys to patients on discharge. However, there has been a slow uptake and only 300 surveys have been returned. It was agreed that this may be because patients are either not given the survey or are failing to complete and return them despite the inclusion of an SAE.

**ACTION:** HSCC requested a copy of the In-Patient Satisfaction Survey audit once completed.

### **Ear, Nose and Throat Department**

HSCC raised concerns that the waiting list for certain surgical procedures in the ENT Department has increased to two years.

**ACTION:** Review as necessary.

## **Induction Day**

HSCC lay members attended a Department of Health and Social Security Induction Day at Keyll Darree. HSCC lay members felt it may also be beneficial to attend a Noble's Hospital Induction Day.

**ACTION:** Review as necessary.

## **7 MATTERS STILL UNDER REVIEW**

### **Parity between members' expenses**

HSCC members were informed that parity between members' expenses was a Tynwald issue. It was agreed that it was not equitable that HSCC members' expenses differed as the level of contribution to the committee was equal.

**ACTION:** On going.

### **Reciprocal Health Agreement with the UK**

This issue was debated in Tynwald in October 2009. The motion recommending individuals to be responsible for their own costs and insurance was carried. The Isle of Man Government has negotiated a year's extension OF the Agreement with the U.K.

The Health Services Department is gathering information from Scotland, Wales, Channel Islands, and other sources. Norman McGregor Edwards will compile a report.

The following circumstances would not require an IOM resident to pay for medical attention:

- 1 Attendance at a UK GP surgery
- 2 Admission and treatment in a UK A&E unit

However, without adequate insurance, admission to a hospital ward would incur payment.

HSCC members felt that it was important for the Isle of Man Government to ensure adequate publicity about the imminent changes so that the public is well informed. The Isle of Man Government will increase publicity relating to this issue. Publicity will be placed at departure points from the Island, tourist information offices in the UK and on the Department of Health website. The Isle of Man Government will also produce another "mail drop" with updates. HSCC have requested advance copies of this "mail drop". It is also hoped that the media will carry out market research and recommend insurance companies.

The Health Services Department has been in touch with numerous insurance companies. It is inevitable that there will be some residents who are unable to find insurance with any company. It is also advised that residents seek insurance only for what they need, therefore reducing premiums.

Concerns were raised that Isle of Man residents may be under the impression that because they have insurance they are entitled to elective NHS treatment in the UK. The public needs to be made aware that there would be additional costs for elective treatment, including private transfer costs. It was also agreed that most residents would opt for travel insurance and not medical insurance.

Some Isle of Man residents would not require private travel insurance as they had past residency qualifications in the UK. HSCC members felt that it was essential, however, that this information was made very clear.

The Isle of Man Government is in the process of drafting legislation to claim from motor insurance companies for traffic injuries.

**ACTION:** Await update from DHSS.

### **Confidentiality in reception areas**

HSCC considered the matter of confidentiality in reception areas of hospitals, clinics and surgeries.

In the Primary Care sector, and in the context of the proposed new GP surgery, HSCC is of the opinion that confidentiality in reception areas be made a priority at the planning stage of new or redesigned units. HSCC was informed that privacy is discussed at the planning stage of new GP surgeries.

HSCC felt that some patients feel exposed when having to give information to GP surgery receptionists. Members also felt that it is inappropriate for receptionists to ask a patient why s/he wishes to consult a GP.

HSCC was informed that GP Surgeries have practice meetings on a regular basis at which this topic is discussed. Because receptionists have to take personal information from patients, it is almost inevitable that other patients will overhear the exchange. Although some GP Surgeries have private areas available this is not always advertised to patients. Concerns were also raised about repeat prescription forms being visible to other patients. It was agreed that there should be a 'post box' type facility so that other patients cannot see prescriptions.

Many pharmacies have discreet areas for management of drugs and these facilities are well advertised to customers.

HSCC wrote to Tony Jones, Primary Care Manager, with concerns about patient confidentiality in reception areas and asked him to write to all GP Surgeries with this information.

In the Secondary Care sector, particular reference was made to the A&E departments of both Island hospitals.

Confidentiality may be an issue during hospital appointments and admissions.

Two examples are:

- patients' names visible in numerous locations on hospital wards
- on occasion, only a curtain separating one patient from another

The Radiology Department at Noble's Hospital is considering plans to update their reception area within the next year.

HSCC wrote to Barbara Scott, Hospital Manager, and was subsequently informed that Noble's Hospital is looking at alternative arrangements to increase patient confidentiality in the Accident and Emergency Department.

The Hospital Privacy and Dignity Committee is already looking at improving confidentiality in Reception areas.

**ACTION:** On going.

**Staff dismissals**

HSCC was informed that all members of staff undergo an annual appraisal.

HSCC members asked for:

1 - a copy of the procedure for the dismissal of incompetent staff

2 - the average number of staff removed per year

3 - the average length of time it takes to complete the procedure.

**ACTION:** HSCC wrote to Lesley Keenan, Head of Human Resources, for a copy of the Policy.

**Trends of complaints**

HSCC members asked if a Complaints Report highlighting trends and problem areas was available.

**ACTION:** HSCC wrote asking if a report is available.

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Linda M. Cottier (Dr)  
Chairman

Appendix 1

**HEALTH SERVICES CONSULTATIVE COMMITTEE - ATTENDANCE**

		14/05/09	16/07/09	17/09/09	19/11/09	21/01/10	11/03/10	<b>TOTAL</b>
Dr L. M. Cottier	Chairman	P	P	P	P	P	P	<b>6</b>
Mr G. Cain	Lay member	P	P	X	NA	NA	NA	<b>2</b>
Mrs B. Craine	Lay member	NA	NA	NA	P	P	P	<b>3</b>
Mrs P. Grahame	Lay member	P	P	P	NA	NA	NA	<b>3</b>
Mr D. Legg	Lay member	P	P	P	P	P	P	<b>6</b>
Mrs J. O'Rourke	Lay member	NA	NA	NA	P	P	P	<b>3</b>
Mr J. Skinner	Lay member	P	A	P	NA	NA	NA	<b>2</b>
Dr J.A.G. Taylor	Lay member	P	P	A	P	A	P	<b>4</b>
Mr J. Whitehouse	Lay member	NA	NA	NA	P	P	P	<b>3</b>
Dr P. Evans	Isle of Man Medical Society	NA	P	X	P	P	X	<b>3</b>
Mr R. J. S. Fayle	Isle of Man Medical Society	P	NA	NA	NA	NA	NA	<b>1</b>
Dr S. Swainson	Isle of Man Medical Society	X	X	X	P	P	X	<b>2</b>
Mr N. Armstrong	Isle of Man Dental Association	P	P	A	P	P	P	<b>5</b>
Mrs B. Ashworth	Royal College of Nursing	X	X	P	P	X	P	<b>3</b>
Mr P. Curphey	IOM Pharmacy Contractors Association	P	P	A	A	P	X	<b>3</b>
Mr. I. Hodgson	Isle of Man Association of Opticians	P	P	P	P	A	P	<b>5</b>
<b>Attendances for year</b>		<b>10</b>	<b>9</b>	<b>6</b>	<b>11</b>	<b>9</b>	<b>9</b>	

P = present; A = apologies; X = did not attend; NA = not appointed

## **Appendix 2**

### **Membership of the Health Services Consultative Committee**

The membership of the Health Services Consultative Committee at March 2009 is as follows –

<b>Name</b>	<b>Position</b>
Dr L. M. Cottier	Chairman
Mrs B. Craine	Lay member
Mr D. Legg	Lay member
Mrs J. O'Rourke	Lay member
Dr J.A.G. Taylor	Lay member
Mr J. Whitehouse	Lay member
Mr I. Hodgson	Nominee Isle of Man Association of Optometrists and Registered Opticians
Mr N. Armstrong	Nominee Isle of Man Dental Association
Dr P. Evans	Nominee Isle of Man Medical Society
Dr S. Swainson	Nominee Isle of Man Medical Society
Mr P. Curphey	Nominee Isle of Man Pharmacy Contractors Association
Mrs B. Ashworth	Nominee Royal College of Nursing
Secretary	Mrs N. Lane
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