

**Ballymoney Borough Council  
Council Meeting No 972 – 7<sup>th</sup> January 2013**

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- 972.13** Local Government Reform (LGR): Proposed Model Transfer Scheme For Civil Servants Transferring To Local Government *Noted*
- 972.14** Local Government Reform (LGR) – Funding *Support representations from Newry & Mourne District Council*
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**BALLYMONEY BOROUGH COUNCIL**

Minutes of Council Meeting No 972 held in the Council Chamber, Riada House, Ballymoney on Monday 7<sup>th</sup> January 2013 at 7.00 pm.

**IN THE CHAIR:** Alderman Cecil Cousley, MBE, Deputy Mayor **(Item 1)**  
Councillor E Robinson, Mayor **(Items 2-19)**

**PRESENT:**

**Aldermen**  
F Campbell  
H Connolly  
B Kennedy

**Councillors**  
J Atkinson  
W Blair  
A Cavlan  
J Finlay  
R Halliday  
R McAfee  
P McGuigan  
T McKeown  
C McLaughlin  
I Stevenson  
M Storey, MLA

**IN ATTENDANCE:** Chief Executive  
Director of Borough Services  
Director of Central and Leisure Services  
Head of Corporate & Development Services  
Committee Clerk

Press x 2

**972.1 DECLARATIONS OF INTEREST**

There were no Declarations of Interest.

**972.2 MINUTES OF COUNCIL MEETING NO 971 – 3<sup>RD</sup> DECEMBER 2012**

\* **The Mayor, Councillor Atkinson, Councillor Halliday, Councillor Stevenson and Councillor Storey joined the meeting at this stage (7.03 p.m.) and the Mayor assumed the Chair.**

**Declaration of Interest**

The Mayor asked any of the members who had joined the meeting to indicate if they had any declarations of interest to declare. None declared.

It was proposed by Alderman Cousley, seconded by Councillor Atkinson and **AGREED:**

***that the minutes of Meeting No 971 – 3<sup>rd</sup> December 2012, as circulated, be confirmed as a correct record.***

**972.3 NEW YEAR GREETINGS**

The Mayor wished members a happy New Year. She welcomed Alderman Connolly to the meeting after an absence due to ill health and wished him a full and speedy recovery from his recent operation. Alderman Connolly thanked the Mayor for her kind words.

**972.4 CONSULTATION COMMITTEE MEETING NO 80 – 17<sup>TH</sup> DECEMBER 2012**

***the minutes of Consultation Committee Meeting No 80 – 17<sup>th</sup> December 2012, as circulated, were received.***

**972.5 MINUTES OF DEVELOPMENT COMMITTEE MEETING NO 241 – 3<sup>RD</sup> DECEMBER 2012**

Alderman Kennedy presented the report.

It was proposed by Alderman Kennedy, seconded by Councillor Finlay and **AGREED:**

***that the minutes of Development Committee Meeting No 241 – 3<sup>rd</sup> December 2012 be adopted and the recommendations therein approved.***

**972.6 MINUTES OF DEVELOPMENT COMMITTEE MEETING NO 242 – 19<sup>TH</sup> DECEMBER 2012**

Alderman Kennedy presented the report

It was proposed by Alderman Kennedy, seconded by Councillor Stevenson and **AGREED:**

***that the minutes of Development Committee Meeting No 242 – 19<sup>th</sup> December 2012 be adopted and the recommendations therein approved.***

**972.7 MINUTES OF LEISURE & AMENITIES COMMITTEE MEETING NO 401 – 18<sup>TH</sup> DECEMBER 2012**

Alderman Campbell presented the report.

It was proposed by Alderman Campbell, seconded by Councillor Stevenson and **AGREED:**

***that the minutes of Leisure & Amenities Committee Meeting No 401 – 16<sup>th</sup> December 2012 be adopted and the recommendations therein approved.***

**972.8 MINUTES OF HEALTH & ENVIRONMENTAL SERVICES COMMITTEE MEETING NO 387 – 20<sup>TH</sup> DECEMBER 2012**

Alderman Connolly presented the report.

**Matters Arising**

**8.1 NWRWMG Waste Infrastructure Project Workshops**

The Director of Borough Services provided details of two workshop opportunities taking place in respect of the NWRWMG infrastructure project. He advised that the workshops will be held on Thursday 10<sup>th</sup> January 2013 at 2.00 pm at Derry City Council and at 7.30 pm at Coleraine Borough Council. The workshops are being made available to members of seven Councils and will provide an opportunity for members to receive updated information on the group's current position with regard to the infrastructure project. The Chief Executive urged attendance at the workshop to inform members on this major project looking at waste over the next 25 years. Any Member wishing to attend should contact the Office of the Chief Executive.

The Director also advised that information had been received about the project and it was necessary that each constituent Council considers the recommendation of the Joint Committee.

It was proposed by Councillor Finlay, seconded by Councillor Stevenson and **AGREED:**

***that the information be considered at the next meeting of the Health & Environmental Services Committee.***

## 8.2 Building Control Fees for Loft Insulation (387.10)

The Mayor concurred with Councillor Finlay's view, as expressed in minute 387.10, that if a fee is charged, it may discourage the most needy, from doing loft insulation. She said she could not support the committee's recommendation.

It was proposed by Councillor Finlay:

***that the matter be referred back to the next meeting of Committee.***

This was seconded by Councillor Robinson and on being put to the meeting the Mayor declared the motion carried, 11 members voting for and no member voting against.

## 8.3 Adoption of Minutes

It was proposed by Alderman Connolly, seconded by Councillor Kennedy and **AGREED:**

***that the minutes of Health & Environmental Services Committee Meeting No 387 – 20<sup>th</sup> December 2012 be adopted and the recommendations therein approved, with the exception of min. 387.10.***

## 972.9 MINUTES OF CORPORATE AND CENTRAL SERVICES COMMITTEE MEETING NO 410 – 19<sup>TH</sup> DECEMBER 2012

Councillor Stevenson presented the report.

It was proposed by Councillor Stevenson, seconded by Alderman Connolly and **AGREED:**

***that the minutes of Corporate & Central Services Committee Meeting No 410 – 19<sup>th</sup> December 2012 be adopted and the recommendations therein approved***

## 972.10 MAYOR'S BUSINESS

### 10.1 Christmas and New Year

The Mayor advised that during the Christmas and New Year period she had visited the nursing and residential homes in the Borough and met with residents including one lady who was celebrating her 100<sup>th</sup> birthday on New Year's Day.

## 10.2 Flying of the Union Flag

The Mayor referred to the concern being expressed across Northern Ireland about the decision by Belfast City Council on the flying of the Union flag. She advised that the issue had been considered by the DUP party grouping at a meeting earlier in the evening. She invited Councillor Storey to speak on the matter. Councillor Storey gave notice to Council of the DUP Party's intent to place on the Corporate & Central Services agenda, the issue of the flying of the Union flag. Describing the flag issue as challenging and the recent number of days as difficult, he said Council must not lose sight of the issue which has been brought into existence as a result of the decision taken by Belfast City Council to reduce its flying of the Union flag at the City Hall to designated days only in each year.

It was proposed by Councillor Robinson:

***that until the Corporate & Central Services Committee meets and discusses the matter thoroughly, the flag as it has been doing, flies until such a time as an agreed decision is reached.***

This was seconded by Councillor Atkinson.

Councillor McGuigan expressed the view that the motion was out of order as Council has a policy which would require notice to consider any proposed change. The Mayor asked the Chief Executive to advise on the policy. The Chief Executive confirmed that Council's policy on flying the Union flag on designated days was longstanding. The matter had last been considered in 2001 following the introduction of the Flags Order, which had reduced the schedule of designated days advised to Council's each year by the DoE. Council had reviewed and confirmed its policy, which was to fly the Union flag on designated days, which is the designated days set out in the Flags order plus an additional four days (Christmas Day, New Years Day, Easter Sunday and 12<sup>th</sup> July). That remains the position as the matter has not been revisited since 2001. Due to weddings and deaths in the Royal Family some designated days had been removed while others had been added. He confirmed notice would require to be given to review/change the policy and notice had been given earlier in the meeting by Councillor Storey that the issue be placed on the agenda for the Corporate & Central Services Committee.

The Mayor indicated that, with regret, she would abide by the policy and withdraw her proposal in the light of the advice given by the Chief Executive as to the Council's current policy position and the steps which would be necessary if Council wishes to review this.

- \* **The Director of Borough Services and the Director of Central & Leisure Services left the meeting at 7.15 pm.**

### 10.3 Local Government Reform (971.15)

The Mayor advised that she has now spoken to a senior DoE officer who has accepted her invitation to address members on the current position of the DOE and the cluster with regard to Local Government Reform. She would agree a date for the presentation to be made at Council or Consultation Committee.

#### 972.11 FRIENDS OF THE RODDENS – FUTURE OF THE RODDENS

The Friends of the Roddens, Ballymoney, have forwarded copy of letter to Mr Sean Donaghy, Chief Executive of Northern Health & Social Care Trust and the Health Minister, Mr Edwin Poots, MLA, expressing alarm at sections of the Ministers Health Policy statement on 9<sup>th</sup> October, in particular that the Roddens, state-run residential home, a long established facility and an invaluable element of the very fabric of society, will be axed under the Minister's proposed overhaul of the Health Service.

The Friends of the Roddens strongly oppose all proposals and endeavours to redefine the status of the Roddens Residential Home and have sought assurances from the Chief Executive of the Trust and the Minister that their fears and suspicions are unfounded and they will as a matter of urgency, allay those fears at the earliest possible opportunity by communicating, clearly, their intentions for the future of the Roddens to remain in its present and dedicated role, as a residential home primarily for the benefit of the long-term care of the elderly citizens of the town and borough of Ballymoney. The full text of the letter to the Trust Chief Executive and Minister is attached.

It was proposed by Councillor Finlay, seconded by Councillor Kennedy and **AGREED**

***that an invitation be extended to Mr Sean Donaghy, Chief Executive of Northern Health & Social Care Trust to give a presentation to Council on the future proposals for the Roddens Residential Home.***

#### 972.12 FUTURE OF PAEDIATRIC CARDIAC SERVICES IN NI

Down District Council is seeking the support of Councils in Northern Ireland and South of Ireland for representations to the Minister of Health regarding the review into the children's congenital heart service in Northern Ireland. The Council is concerned that if the service is relocated to the mainland it would place an unacceptable pressure and hardship on sick children and their families who were already undergoing a traumatic experience without the added pressure of having to travel for treatment.



Council's support is sought for the request to the Health Minister to ensure paediatric cardiac services are retained in Northern Ireland or, if they are to be relocated, that in the first instance the establishment of an all-Ireland paediatric cardiac service is considered as such a service within Ireland would help to ease the travel burden on both sick children and their families.

It was proposed by Councillor Cavlan, seconded by Alderman Connolly and **AGREED:**

***that Council support Down District Council in its representations to the Minister of Health regarding the review into the children's congenital heart service in Northern Ireland and write accordingly to the Minister.***

#### **972.13 LOCAL GOVERNMENT REFORM (LGR):**

##### **PROPOSED MODEL TRANSFER SCHEME FOR CIVIL SERVANTS TRANSFERRING TO LOCAL GOVERNMENT**

The DoE Minister has written regarding the proposed transfer of staff to the 11 new councils from a number of different civil service departments in connection with transferring functions. Council's views are sought on the proposed model transfer scheme to assist with the smooth transfer and settlement of these staff into councils. It is proposed that the starting point for the civil service transfer scheme is the model used by DHSSPS during the reform of the Health sector. This model is now also being used as the basis for civil service transfers in the education sector and is consistent with the Public Service Commission's Guiding Principles, adopted by the Executive for application across the whole reform of public administration process.

A schedule of the RPA Guiding Principles and the two tiers negotiated through DFP with civil service unions, contained in the DHSSPS model and endorsed by the Executive. The tiers allow staff to either permanently transfer from the civil service to importing organizations under TUPE-type arrangements or, to go to importing organizations on temporary transfer with a 3-year right of return to the Civil Service, subject to a post being available.

It was proposed by Councillor Finlay, seconded by Alderman Kennedy and **AGREED:**

***that Council note the proposals and await the recommendation of the Transition Committee.***

#### **972.14 LOCAL GOVERNMENT REFORM (LGR) – FUNDING**

Newry & Mourne District Council is seeking the support of Councils and Transition Committees for its representations to the Minister for adequate funding for full

costs of LGR to be met by the NI Executive. Council is concerned about the adequacy of the bid, the current delays in the Executive's final determination and what an unsuccessful application may mean for local ratepayers. In its representations to the Minister the Council has also put forward a number of additional measures including a delegation to the Minister for Finance and Personnel following the December monitoring rounds and lobbying the NI Assembly for the inclusion of funding in the main budget 2012/13.

The Council hold the view that in the continued absence of meaningful financial support it will be impossible to deliver the change. In this regard they have noted the extent of the funding that has been secured by other public sector reform programmes, most notably the Transforming Your Care agenda in Health & Social Care and the on-going reform of the NI Prison Service.

It was proposed by Councillor McGuigan, seconded by Councillor Stevenson and **AGREED:**

***that Council support Newry & Mourne District Council in its representations to the Minister for adequate funding for full costs of LGR to be met by the NI Executive.***

## **972.15 TRANSFORMING YOUR CARE**

In connection with the consultation on the "Vision to Action" document on Transforming your Care, four public meetings have been held in Coleraine, Newtownabbey, Magherafelt and Ballycastle.

Earlier in 2012 representatives from the Health & Social Care Board presented to Council on the proposals for transforming care and are keen to meet with Council again, collectively, to share some of the feedback from the public meetings and to give an indication of the next steps. The Chief Executive and one nominated councillor are invited to attend a meeting on 8<sup>th</sup> January for this purpose. Mayor and Chief Executive are attending.

The Chief Executive drew members' attention to addendum circulated, 3/1/2013, with a copy of a response prepared by NILGA. He advised that in 2012 representatives from the Health & Social Care Board presented to Council on the proposals for transforming care.

NILGA has forwarded its draft response to the "Transforming Your Care" consultation which closed on 15<sup>th</sup> January and Council is invited to consider adopting the NILGA response.

At its meeting on 19<sup>th</sup> November 2012 Council received an invitation from the Chief Executive of the HSCB to participate in the public consultation process for *Transforming Your Care*, launched by the Minister Edwin Poots, MLA

The HSCB had been asked by the Minister to develop a consultation document and lead the public consultation on the draft plans for service changes over the next 3 to 5 years, in response to the *Review of Health and Social Care in Northern Ireland: Transforming Your Care* which was published in December 2011. *Transforming Your Care* highlighted that we have a growing and ageing population. It was pointed out that while we have much to be proud of in our Health and Social Care system we are likely to face rising demand for our services, and this presents challenges for the future. *Transforming Your Care* is about making changes to ensure we have safe, high quality and sustainable services for our patients, service users and staff. In making these changes, there are choices to be made about how we organise our services to provide the best possible care to everyone in Northern Ireland.

It was proposed by Alderman Kennedy, seconded by Councillor Atkinson and **AGREED:**

***that Council endorse NILGA's response to the consultation document on Transforming your Care, attached as appendix A to these minutes.***

The Mayor referred to Council's involvement in environmental health and health & wellbeing and said Council should be careful as to responsibilities placed on Council and what it would then have to pay for.

\* **Alderman Connolly left the meeting at 7.45 pm.**

#### **972.16 COSTS IN CRIMINAL CASES IN MAGISTRATES COURTS**

Following a consultation exercise in October 2011 the Department of Justice has advised that on 3<sup>rd</sup> December 2012 the Magistrates' Courts Rules Committee made the Magistrates' Courts (Costs in Criminal Cases) (Amendment) Rules (NI) 2012. These Rules amended the Magistrates' Courts (Costs in Criminal Cases) Rules (NO) 1988 so as to:

- Abolish the statutory maximum amount of costs that may be awarded in criminal cases in magistrates' courts; and
- Update the schedule of witness expenses.

The new Rules will come into operation on 1<sup>st</sup> January 2013. As of this date, therefore, the amount of costs that may be awarded in criminal cases in magistrates' courts will no longer be subject to a maximum and costs will be awarded at the discretion of the court.

#### **972.17 SWITCHOVER HELP SCHEME**

BBC has provided an update on the Switchover Help Scheme in Northern Ireland advising that the digital TV switchover was completed on 24<sup>th</sup> October and the

switchover went smoothly. People with digital TV equipment supplied through the Switchover Help Scheme can continue to get help and advice from the aftercare service for up to a year after they get their equipment. In addition BBC are working with local charities and other local organizations to help provide continuous support to people who may need it.

#### **972.18 REPORTS**

The Chief Executive referred to the schedule of reports and NILGA reports, circulated, which are available from the Office of the Chief Executive.

#### **972.19 CLARE TOURISM CONFERENCE, CO CLARE – 17-19<sup>TH</sup> JANUARY 2013**

The Mayor thanked members for her authorisation to attend the above conference, which, due to personal circumstances, may now be difficult for her to attend.

It was proposed by Alderman Kennedy, seconded by Councillor Atkinson and **AGREED:**

***that in the event of the Mayor being unable to attend the conference, she may nominate another member in her place.***

**This being all the business the meeting closed at 7.50 pm.**

Appendices attached:

Appendix A - NILGA Response to Transforming your Care Consultation Document.



## **NILGA response to the Consultation on the Review of Health and Social care in Northern Ireland, “Transforming Your Care”.**

This consultation response was drafted further to work conducted in October 2012 in relation to “Fit and Well”, the draft Public Health Strategy for Northern Ireland.

It is intended that this draft response will assist councils in formulating their responses for submission by the deadline of 15<sup>th</sup> January 2013. It is clear from the proposals within the document that there will be variance in how councils will wish to individually respond, for example in relation to hospital provision, so this response focuses on a number of high level views are given, which impact on local government regionally.

The final document will be submitted to the Department of Health to assist in developing the ongoing work on this issue. Should councils wish to add to or suggest amendments to this draft, it would be helpful if we could receive these by Friday 11<sup>th</sup> January, when the NILGA Executive will consider the key issues.

**For further information or to discuss any of the issues highlighted, please contact Karen Smyth at the NILGA Offices:**

**Email: [k.smyth@nilga.org](mailto:k.smyth@nilga.org) Tel: 028 9079 8972**

**Derek McCallan**

**2<sup>nd</sup> January 2012**

### **1.0 PREAMBLE**

NILGA, the Northern Ireland Local Government Association, is the representative body for district councils in Northern Ireland. NILGA represents and promotes the interests of the 26 Northern Ireland district councils, and is supported by all the main political parties. The Association welcomes the opportunity to comment on the draft Department of Health, Social Services and Public Safety Strategy Document entitled, ‘Transforming your care’ and we trust that the views outlined below will be taken into account when the strategy document is being finalised.

### **2.0 INTRODUCTORY COMMENTS**

NILGA values the opportunity to engage with the Department of Health, Social Services and Public Safety in the consultation process on the ‘Transforming Your Care’ Review. NILGA strongly agrees with the Review team in its assertion that it is not supportive of any move away from core NHS principles, but would also agree that the demographics of our population is changing, necessitating a plan for change. NILGA would support the assertion that to fail to plan for this change would be detrimental to the health and well-being of the population.

The above comments notwithstanding, there are a number of key, strategic concerns that NILGA must highlight in our response.

### 3.0 LOCAL GOVERNMENT ROLE

District councils are, and have always been, materially and actively involved in the promotion and protection of public health; and strongly believe that they should play a key role in the integrated, cross-governmental effort to support healthy people, healthy families and healthy communities.

It is therefore extremely disappointing to note that **NO** role for local government has been acknowledged anywhere in the 'Transforming Your Care' document. It is difficult to fathom why, when councils work so closely with central government and its agencies on public health, health promotion and delivery of services with preventative healthcare aims, there is no acknowledgement of this role.

This is contrary to the 'Fit and Well' Strategy, the Obesity Strategy and many other pieces of integrated working including 'Smokefree' regulation, where there has been an identification at high level of local government as a key partner in shaping services across many of the physical, environmental, economic and social conditions which affect people's lives.

In our response to the 'Fit and Well' Strategy, NILGA highlighted that there is insufficient recognition of the work councils already do, and of the potential future role of councils. There is some confidence in the sector that the Public Health Agency intends to work closely with councils to deliver the necessary policy aims, and we must see greater evidence of such partnership.

Local Government, and its potential to work as a partner in government, must be considered more closely by the Transforming Your Care team, to reflect on its current roles and legal responsibilities to examine how councils can add value within the planned future arrangements, and assist the NI Executive to meet its PfG aims in relation to health and well-being.

The role of Local Commissioning Groups in relation to delivery and implementation of the programme is acknowledged, as is the valuable work of the large number of elected members who participate on these groups, but this cannot act as a substitute for strategic engagement with local government.

Councils are ready to engage - to aid strategic direction as well as operational delivery - and NILGA is keen to ensure that the Department and its agencies work closely with council officers to develop this framework in a way that best serves the citizen.

Through their environmental health, community development and leisure and cultural services, councils have been engaged in many activities which align to the aims of 'Transforming Your Care', particularly in relation to the section on 'Population Health and Well-being'. Through a combination of service provision, health promotion and regulatory responsibility, councils seek to improve the health and wellbeing of all those in our communities, create the conditions for development of healthy lifestyles and prevent ill-health.

Local government has been actively involved through the 7 'health pilot' cluster groups, in partnership with the Public Health Agency to improve health and well being through Action Plans. With the growing acknowledgement "*of the impact of public policies on each other and the need therefore for inter-connectedness, reinforcement and cross government collaboration*"<sup>1</sup> it is vital that all partners appreciate the positive effect that they can have through effective collaboration.

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<sup>1</sup> Fit & Well Changing Lives 2012-2022 Strategy, Page 53.

In terms of a cross-government strategic focus and operational delivery, attention should be paid by all government departments to their statutory remit to contribute and pool resources collectively to ease the burden and ensure success at local level.

The prospect of a statutory council-led community planning process is critically important in this context, and NILGA is working diligently toward ensuring the requirement for departments and agencies to participate is legislated adequately. The ability (and willingness) to pool resources at local council level will be critical to the success of the Public Health Strategy, and, should have a beneficial impact on a number of the proposals outlined in 'Transforming Your Care'.

### **3.1 Community Planning**

'Transforming Your Care' highlights the importance of working in partnership. The new responsibilities for councils to be developed through local government reform (including a council-led community planning process) will enhance the sector's position as a partner in government, operating locally. Clarity of the definition and practice of Community Planning will assist enormously; enabling councils to identify in more detail, how they add value to and integrate with others into the Strategy.

Local government is pursuing - through the DoE managed reform structures - the development and refinement of working arrangements for the integration of community planning, area planning, regeneration and other transferring functions with existing council functions across the 11 Council clusters. Work is in progress to clearly define 'Community Planning' and to develop a foundation programme, so that all partners can appreciate the role of the local authority in the community. NILGA strongly believes that there must be a statutory link between community and area plans, as we move towards an ethos of spatial planning in Northern Ireland.

'Transforming Your Care' does not adequately reflect local government input as a means to securing the desired outcomes. Local government is willing to work with DHSSPSNI to bring forward ideas in relation to areas in which it can contribute. Councils perform a valuable role in prevention e.g. provision of facilities for play and leisure, healthy eating and exercise initiatives. Local government must be included as a key partner, in the implementation of these proposals.

## **4.0 COMMENTS ON 'TRANSFORMING YOUR CARE' PROPOSALS**

### **4.1 The Case for Change and the Principles for Change**

NILGA notes the factors driving change, in particular the ageing population, and the reasons given as to why change is needed, particularly the need to reduce health inequalities and to make best use of resources.

It is again noted that, if one of the reasons behind the case for change is to maximise use of resources, then integrated partnership working with local government will assist in delivering the strategic aims of 'Transforming Your Care'. There are already examples, such as the Grove Centre in North Belfast, where partnership working with the council has ensured better use of estates and provision of integrated services.

Councils in Northern Ireland work closely with DSD and other departments at local level to tackle inequalities, including social and health inequalities, and are key partners in the OFMDFM Strategic Investment Fund initiative.

NILGA notes the principles for change, i.e.:

1. **Placing the individual at the centre of any model by promoting a better outcome for the user, carer and their family.**
2. **Using outcomes and quality evidence to shape services.**
3. **Providing the right care in the right place at the right time.**
4. **Population-based planning of services.**
5. **A focus on prevention and tackling inequalities.**
6. **Integrated care – working together.**
7. **Promoting independence and personalisation of care.**
8. **Safeguarding the most vulnerable.**
9. **Ensuring sustainability of service provision.**
10. **Realising value for money.**
11. **Maximising the use of technology.**
12. **Incentivising innovation at a local level.**

It is the NILGA view that councils are extremely well-placed both geographically, and in terms of policy and practice, to add value to the delivery of the 'Transforming Your Care' proposals, on the basis of these principles and we would welcome discussion with the Department in light of this.

The *Vision for Strong Local Government*, as articulated by Arlene Foster, the then Environment Minister in 2008, states that the council will be "A dynamic, responsive and accountable leader in shaping, maintaining and promoting inclusive communities that are healthy, prosperous, safe, vibrant, sustainable and people-centred."

NILGA would strongly suggest that the Local Government Information Unit paper, "**A Dose of Localism – the Role of Councils in Public Health**" (Thraves L., December 2012 [www.lgiu.org.uk](http://www.lgiu.org.uk)) would be helpful in beginning to re-imagine the role of local councils in the context of public health delivery and preventative healthcare. Although this paper is written from the standpoint of English local authorities and the wider complement of services within their remit, it would nonetheless be useful as a starting point for discussions between councils and DHSSPSNI in Northern Ireland.

#### **4.2 A Future Model for Integrated Health and Social Care**

NILGA notes the proposed model for integrated health and social care, and is strongly supportive of the need to better integrate local services, which should include integration with local government. Locally elected representatives have a critically important civic leadership role in their communities, and are well-placed to assist in communicating what is a substantial cultural change, to local communities and individuals. Councils are also well-placed to assist in signposting of new service provision.

There is some concern however, that the focus on the individual, and the move to greater levels of care in the home, will lead

- to greater inconsistency of service provision,
- to less transparency, and
- to the passing of government cuts on to the most vulnerable.

There is a lack of clarity as to how the new arrangements, particularly for carers and for the disabled, will integrate with the welfare reforms underway, and NILGA is extremely concerned that there will be a double impact on those most reliant on the state for support.

There are a number of associated impacts of moving to a greater focus on care in the home, at individual level and for service providers outside the health care system. For



example, there will be cost implications, not only to ensure that the home is appropriately furnished for home care e.g. hand rail provision, but that it is fit for habitation generally. People, particularly elderly people, may live in houses that are not up to modern standards, and may not wish to move. Discussions will need to take place with the NI Housing Executive and with councils in circumstances such as these, to develop an agreed care plan for the individuals concerned.

It is also evident that increased levels of care at home will indirectly increase costs for councils, for example through costs associated with collection and disposal of clinical waste. Local discussions must take place with councils to ensure that appropriate facilities and resources are provided to enable the Department's policy to be implemented. DHSSPSNI is reminded that Northern Ireland is moving towards a complete ban on landfill in 2025.

#### **4.3 Population Health and Well-being**

It is clear, for reasons already outlined, that councils have a major role to play in relation to this aspect of the reform. Councils already work closely with government on smoking cessation, obesity prevention, nutrition and food labelling, sports and leisure provision, alcohol and the night time economy, and improving social well-being including e.g. pensioners' clubs.

Community planning, the power of wellbeing and/or the general power of competence will only widen the council role in health protection and preventative healthcare, and give a greater ability to pool resources, so NILGA would encourage the Department to meet with local government sooner rather than later to ensure that we can work together to maximise the opportunities presented by these structural reforms,

#### **4.4 Older People**

NILGA notes the proposals for care of older people, to support the home as the hub of care, and to promote healthy ageing.

Councils have a valuable role to play in community safety, building social cohesion, promoting healthy living and providing information.

NILGA is aware that carers have a sense that they are 'taken for granted' by the state and is concerned that this 'being taken for granted' may be exacerbated by these proposals. It must be ensured that carers are appropriately and fully supported in their role, with financial support and respite packages provided. It is most unwelcome that Welfare Reforms are likely to seriously and negatively affect the income of carers, and it is vital that there is better integration of government policy on this issue, to ensure that current ideology does not drive vulnerable people into poverty.

#### **4.5 Long Term Conditions**

The increasing focus on preventative healthcare is strongly welcomed, and again NILGA would promote the potential integration with local government to maximise effectiveness.

#### **4.6 People with a Physical Disability**

NILGA notes that the 'Transforming Your care' document outlines key roles for other departments (pp78-9) in the provision of support and promotion of independence for people with a disability, and would suggest that councils be included in this list, particularly given their role in culture, arts and leisure provision, and forthcoming responsibilities in relation to area and community planning. .

#### **4.7 Maternity and Child Health**

NILGA notes the proposals, and would again highlight the local government role in promoting a healthy lifestyle for children, and the provision of services to further this aim.

There is concern in relation to reduction in services available in Northern Ireland for specialist child health care, and it must be ensured that families are not subjected to the additional stress of travelling huge distances, whilst caring for a sick child.

*It is particularly noted that at present the only children in the UK that are subject to 'Safe & Sustainable' recommendations are those living in Northern Ireland, necessitating 140 families a year to travel to England if children's heart surgery facilities are closed in Northern Ireland.*

#### **4.8 Family and Child Care**

NILGA notes with concern, the acknowledgement that there is significant under-investment in children's services in Northern Ireland, and would support improvement of this situation. This should also be linked to improvement of pre-school nursery and childcare provision which requires investment to enable a greater number of parents to return to work, and contribute to the economy.

#### **4.9 People using Mental Health Services**

Local government has been materially involved in developing the Suicide Prevention Strategy. NILGA notes with concern that the Department is working with Health and Well-being Statistics that are over a decade old, and would encourage the commissioning of more contemporary research into the rates of mental health issues in Northern Ireland. This is particularly highlighted due to the huge increase in the suicide rate in the intervening period.

It must be ensured that adequate facilities are available for mental health care, and in particular, for short term crisis care.

#### **4.10 People with a Learning Disability**

NILGA notes the proposals in relation to people with a learning disability.

#### **4.11 Acute Care**

There is serious concern that a refining of the provisions for acute care will further exacerbate the current failure to deliver satisfactory A&E waiting times, will cause further problems for organisational resilience, and that proximity to early intervention provision may not be adequate. The geography of Northern Ireland is perceived to cause particular difficulties in relation to travel times. NILGA has no further comment to make in relation to acute care service provision.

#### **4.12 Palliative and End of Life Care**

NILGA notes the proposals in relation to Palliative and End of Life Care.

#### **4.13 Implications for the Service**

NILGA notes the implications for infrastructure, facilities and staff, and would again highlight that a move towards increased care in the home will cause ancillary issues such as housing quality and waste disposal requirements, that will need to be addressed.

There will be an important place within the council-led local community and area (development plans) for community based services and healthcare planning that needs to

be further considered to ensure that integration of healthcare services at local level is successful.

It must be ensured that the lives of patients are of paramount importance, and that no one is put at risk due to geographic location, inconsistency in service or limits to service delivery. The potential for cross-border working is noted in this context, and is to be encouraged.

It is noted that the role of the NI Ambulance Service is of central importance to the ability to deliver the new model of care.

The changes to the model of care and to delivery of services, whilst designed to deliver value for money, must not be used as a method of shifting the burden of responsibility for healthcare on to those who are least able to cope with that burden. NILGA strongly supports that it meet the needs of everyone

- that it be free at the point of delivery
- that it be based on clinical need, not ability to pay

#### **4.14 Roadmap for the Future and Conclusion**

The role of Local Commissioning Groups in relation to delivery and implementation of the programme is acknowledged, as is the valuable work of the large number of elected members who participate on these groups.

A strategic and early conversation is needed with local government in relation to the programme and the proposed changes, as highlighted throughout this response paper; and the involvement of elected members in the Local Commissioning Groups should not be regarded as an appropriate substitute for this conversation.

With this in mind, NILGA looks forward to material involvement in the outcomes of this consultation and to strategic discussions with the Department as to how local government can be engaged and resourced in any future joint working.

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