



Consultation on Our Proposals for the Future of Urology Services in Western and Northern Trusts

Comments Form

The aim of this consultation is to obtain views from stakeholders and the Trusts would be most grateful if you would respond by completing this comments form. Please answer each question by writing your comments in the space provided. The closing date for this consultation is 29 January 2016 and we need to receive your completed comments form on or before that date. You can respond to the consultation document by e-mail, letter or fax as follows:

**Equality Unit
Route Complex
8e Coleraine Road
Ballymoney, BT53 6BP
Tel: 028 2766 1377**

Fax: 028 2766 1209

Textphone: 028 2766 1377

E-mail: equality.unit@northerntrust.hscni.net

Do you agree with the approach taken by western and northern trusts in implementing the urology service for the northwest?

Yes x No

Fermanagh and Omagh District Council (Council) welcomes the opportunity to respond to the consultation on 'Our Proposals for the Future of Urology Services in Western and Northern Trusts'.

In the 2009 review, under Performance Measures – Urology Cancer Performance, it is stated that 'it is accepted that those patients who transfer from one Trust to another for treatment are more likely to breach the target' (the target being the number of patients urgently referred/diagnosed with cancer between referral/decision to treat and treatment). The Council welcomes the consultation statement that 'All urology patients under the care of Team northwest will have an equal status in relation to the delivery of care. Patients will be seen on the basis of clinical need and all waiting lists will be managed equally, regardless of where the patient lives.' The Council feels strongly that equity and equality across Northern Ireland must apply to healthcare provision. As the Fermanagh and Omagh District Council area is largely rural, it is important that an integrated system of transport and appointments scheduling is developed for rural communities 'elective treatment needs'. All service users should receive treatment in order of need and are treated equally, no matter where they are from or which Trust they fall under.

In the review, in line with priority for action targets, waiting times had already been reduced but in September 2008:

- 10.6% of outpatient appointments/diagnostics were outside the 9 week target, and
- 16.7% of inpatient appointments/day case treatments were outside of the 13 week target.

The new proposals aim to reduce waiting times in line with the priority for actions, i.e. no patient should wait longer than 9 weeks for first outpatient appointment and/or diagnostics, and no patient should wait longer than 13 weeks for inpatient or day case treatments. At a difficult time when service users will already be under immense stress, the Council welcomes any action that would help to alleviate waiting lists.

including the systematic and routine collection and publication of performance data in relation to targets. The key task is to implement a model of care in which clinicians work together more closely to meet the needs of patients and to co-ordinate services.

The Council is supportive of systems being in place to support staff through the changes such as the availability of training opportunities and eligibility for excess travel allowance payments. Also, that the Trust will work in partnership with trade unions to assess the impact on staff and to put robust mitigating measures in place. It is important that staff are kept informed and that the Trusts are open and transparent with staff.

On page two of the screening document, there is mention of the possibility of cross border opportunities. The Council is supportive of a proposal that promotes cross border working which will benefit not only the service users but also staff, in terms of training and learning opportunities. Such an initiative will create opportunities for alternative, added value approaches to health and social care service delivery by facilitating people from both jurisdictions to collaborate, share ideas and develop practical solutions to common health challenges.

The Trusts have screened this proposal to identify any impact on the 9 Section 75 equality categories. A copy of the screening is available on the Trust website (www.northerntrust.hscni.net or www.westerntrust.hscni.net) alongside the consultation document. Please detail below other potential impacts you feel have not been considered in this assessment.

The table indicating the percentage of clients affected contains information relating only to gender and age. The s75 groupings more likely to be affected are dependent status and disability but the relevant data for these groups has not been collected.

Assessing Needs/Issues/Adverse Impacts

Gender – staff – the Council believes it should be noted that staff (not just women) may have dependency and caring responsibilities, men are increasingly taking on these responsibilities.

Age – users – it is noted that people needing urology services are older and this is expected to increase. Council believes it should be noted that people may have to travel further which could be cause for concern for some older people.

Marital status/Dependents – users – the Council believes it should be noted that people may have to stay overnight further from home, from family and support networks.

Marital status/Dependents - staff – the Council believes it should be noted that staff (not just women) may have dependency and caring responsibilities, men are increasingly taking on these responsibilities.

Other issues – rurality – users – rurality is a big issue particularly in the West of Northern Ireland. Whilst there is mention of rural areas/transport difficulties, there is no mention of how the Trusts will address this, will there be measures put in place for users who do not have direct access to transport?

The Council is content that staff and users with a disability have been considered and the provision of alternative arrangements will be considered where necessary.

The Council agrees that the planning and implementation of the revised model of care must be subject to ongoing screening to ensure service users and staff are not being affected negatively by the implementation of the proposals.

So that we can acknowledge receipt of your comments please fill in your name and address or that of your organisation. You may withhold this information if you wish but we will not then be able to acknowledge receipt of your comments.

Name:	
Position:	
Organisation:	Fermanagh and Omagh District Council
Address:	Townhall, 2 Townhall Street, Enniskillen, Co Fermanagh, BT74 7BA

I am responding: as an individual
(please tick)
on behalf of an organisation

Before you submit your response, please read this section on Freedom of Information Act 2000 and the confidentiality of responses to public consultation exercises.

Trust Response and Freedom of Information Act (2000)

The Northern Health and Social Care Trust will publish an anonymised summary of the responses received to our consultation process. However, under the Freedom of Information Act (FOIA) 2000, particular responses may be disclosed on request, unless an exemption(s) under the legislation applies. Under the FOIA anyone has right to request access to information held by public authorities; the Northern Trust is such a public body. Trust decisions in relation to the release of information that the Trust holds are governed by various pieces of legislation, and as such the Trust cannot automatically consider responses received as part of any consultation process as exempt. However, confidentiality issues will be carefully considered before any disclosures are made.

Thank you for taking the time to complete this comments form.