

HEALTH AND MEDICAL SERVICES COMMITTEE

Open Minutes

Held at 11am on Thursday 20th February 2014
at Gilbert House

These Minutes are draft minutes until confirmed by resolution at the next meeting of this committee

Present:	Honourable Michael Summers	Assembly Member	MS
	Honourable Barry Elsby	Assembly Member	BE
	Ms Hilary Rowland	Director of H & SS	HR
	Dr Angela Rowlands	Chief Medical Officer	AR
	Mrs Melanie Gilding	Lay Member	MG
	Sqn Ldr Claire Brooker	MPC	CB
Apologies:	Mrs Wendy Shelbourne	Lay Member	WS
	Sqn Ldr Mark Patterson	SMO MPC	MP
Minutes:	Mrs Julie Fisher-Smith	PA to DHSS & CMO	JFS

PART 1

ACTION

1.0 Apologies for Absence

- 1.1** Apologies for absence were received from Mrs Wendy Shelbourne and Sqn Ldr Mark Patterson.

2.0 Declarations of interest

- 2.1** There were no declarations of interest.

3.0 Confirmation of the Minutes of the Meeting held on 5th December 2014

- 3.1** The minutes were confirmed as a true and accurate record with no corrections.

4.0 Matters Arising from the Minutes of the Meeting held on 5th December 2014

- 4.1** 4.3 – 7.1 (3rd Para) – “it was agreed that the individual should ascertain beforehand who would be funding their treatment and that it should become the responsibility of the patient’s Government” – BE questioned if this should read that the patient and the employer are responsible. HR to check. **HR**

- 4.2 5.1 – MLA Summers stated that he had had a meeting with Tourist Board members who confirmed that the Tourist Board would pay for the Sterizar hand foamer.
- 4.3 7.2 – JFS to prepare a schedule to bring to the next meeting with dates for members to visit KEMH departments. It was agreed that members would visit the Elderly Care facility on 20th March. **JFS**
- 4.4 7.3 - BE asked if there was currently a system in place where patients are notified of their test results ie. blood tests etc. CMO reported that a new staff member has just been appointed whose job will be contact patients with their results. A new system will shortly be in place where the patient can call a dedicated phone line to receive their results. At the time of testing patients will be given information detailing the process. In urgent cases the patients will be contacted by the doctor straight away.

5.0 Director's Report

- 5.1 HR presented the Director's Report giving a brief overview and update on various activities within the Department:
- 5.2 HR reported that she had received positive comments from members of the public regarding the receptionist, Anya Cofre, adding "this is a real credit to her".
- 5.3 Nurses – the ward is presently 2 nurses short until the end of March when a new nurse will arrive.
- 5.4 A local midwife has been employed, she will shortly be going overseas to refresh her skills as she has not been practicing a while.
- 5.5 Whilst there is a full complement of Drivers/Security Officers, this may have to be reviewed as it does not leave cover for holidays/sickness if the casual drivers are unavailable.
- 5.6 Doctors - The recruitment round last July only attracted applicants looking for short term contracts, not enough doctors are applying for the posts because the salaries being offered are too low and the requirements of the posts are too high. It is proving to be very difficult to appoint a doctor with obstetrics and gynecology experience who is also able to cover on-call. Human Resources have contacted a recruitment agency who will advertise these and other posts with the department. BE asked HR what her vision was for the services, she described the range of primary & secondary services, supported by the visiting specialists and referrals overseas. However, she highlighted that she had not really had sufficient time to address the matter because of undertaking multiple roles. BE suggested that a group should be formed to reassess the recruitment process and to research comparative

salaries of doctors. The CMO commented that the initial meeting should include doctors and nurses as their contributions would be useful. MS stated that there would be a need to make a supplementary submission to the Treasury to ask to reserve money in the budget. This would also need to go through Human Resources and evaluation.

- 5.7 Ninety one people attended the training on the Children's Ordinance. It is anticipated that someone will continue to deliver this training in the future.
- 5.8 Mammography screening will take place next month for women aged between 47 and 74.

6.0 Optical/Dental & Audiology Charges & Exemptions

- 6.1 HR presented a paper detailing charges and exemptions for Optical, Dental and Audiology. In 2012/2013 ExCo agreed to an overhaul of those charges. Currently Audiology do not charge for hearing tests and hearing aids. It was agreed that charges in line with Dental and Optical should be introduced for audiology. HR to draft a paper of charges and exemptions. **HR**

7.0 MTO Policy – Minor Amendment

- 7.1 Page 6, Paragraph 10.6, 3rd bullet point currently reads: **HR**
“a critically ill child with an immediately life-threatening condition – in this case KEMH will potentially pay for both parents”. It was suggested to change this to read “a critically ill child or adult with severe disabilities”. BE asked for clarity of “severe disabilities”. This will be redrafted to reflect the discussion.
- 7.2 It was also asked what would happen if there were other children in the family, who would look after them if both parents had to accompany a critically ill child or a child with severe disabilities overseas. It was agreed that additional children would not be funded by the Government.

8.0 Hep B Vaccinations

- 8.1 The current policy is that all new born babies are vaccinated, this policy was introduced in 2008. Any babies born before that date remain unvaccinated. The CMO reported that it would cost approx. £35,000 to vaccinate individuals up to the age 30 (of the current population). It was agreed to check the paper that went to ExCo (approx. 3 years ago) and re-submit. **JFS**
- 8.2 It was also suggested that the MMR vaccine should be updated for under 30's, most under 30's have already had 2 vaccinations so the numbers would be low. CMO to follow up as necessary.

9.0 Immigration Medicals

- 9.1 The CMO stated that the current Immigration Medical Form is not fit for purpose, adding there are many important questions missing from the form. The form should include photographic evidence that the applicant is the person undertaking the medical examination and there should be space provided for the examining medical practitioners stamp. The occupation of the applicant should be taken into account by the evaluating doctor, in some cases this section has not even been completed by the applicant. The CMO suggested we should have dedicated panel doctors in different parts of the world that could conduct immigration medicals, or if we do not have panel doctors we should make sure that the doctors are bonafide.
- 9.2 When current work permits are renewed applicants would have to undertake another medical examination using the new form.
- 9.3 MLA Summers stated that the CMO would need to make these changes and submit a paper to ExCo for approval. If approved the Customs & Immigration Department would be instructed to carry forward these changes.

10.0 Emergency Passports for MTO Patients

- 10.1 Since January 2012 there have been 43 emergency passports issued to individuals who were sent overseas for medical treatment and 11 emergency passports for persons accompanying medical patients. This item was brought to the Committee for information only.

11.0 Date of Next Meeting – Thursday 27th March, 11am in the Liberation Room of the Secretariat.

12.0 Exclusion of Press and Public

The Chairman to move as follows:

“I move that the press and public be now excluded on the ground that the next items of business to be considered are likely to disclose exempt information under paragraph(s) 7 Information about individuals and Paragraph 9 Information about others financial and business affairs of Schedule 3 of the Committees (Public Access) Ordinance 2012.”

PART 2

13.0 Confirmation of the Exempt minutes of the Meeting held on 5th December 2013

- 13.1 The minutes were confirmed as a true and accurate record with no corrections.

14.0 Matters Arising from the Exempt Minutes of the Meeting held on 5th December 2013

14.1 There were no matters arising.

15.0 Complaints

15.1 The Committee discussed the complaints and the CMO explained the justifications behind the system.

(Not for publication by virtue of Paragraph 7 of Schedule 3 of the Committees (Public Assess) Ordinance 2012, relating to information about individuals.)

16.0 Patient Request

16.1 This matter was discussed and the Committee agreed to the request. This decision will be reflected in the MTO Policy.

(Not for publication by virtue of Paragraph 7 of Schedule 3 of the Committees (Public Assess) Ordinance 2012, relating to information about individuals.)

Minutes confirmed this day of 2013