## Written Ministerial Statement

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## Health, Social Services and Public Safety

## Craigavon Area Hospital: Clinical Practices

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The Minister of Health, Social Services and Public Safety (Mr McGimpsey): I wish to make a statement to the Assembly following the recent allegations over unsafe clinical practices at Craigavon Area Hospital.

Specifically it has been alleged that X-rays are not being reported by appropriately trained staff and that outpatient reviews are being arranged on the basis of patients names, with appointments assigned to patients in alphabetical order.

I take all legitimate concerns very seriously. It is my priority to ensure that everyone receiving health and social care are provided with safe, high quality services they deserve.

Following extensive negative media coverage last Thursday, I held an urgent meeting with Mairead McAlinden, Chief Executive of the Southern Trust and John Compton, Chief Executive of the Health and Social Care Board.

The purpose of this meeting was to clarify the situation and seek assurances that these allegations were unfounded.

I have been assured that these claims are unsubstantiated and have only served to cause unnecessary public anxiety.

Let me confirm the current position. In the Southern Trust as in other Trusts, X-rays are seen and assessed by the appropriate clinician and are reported on in accordance with national guidance. However I am aware of pressures in radiology that has resulted in some delays in reporting. All Trusts are acting to ensure that they are doing what is possible to minimise delays.

I am taking this matter very seriously and have asked RQIA to conduct a review on the reporting and handling of X-rays. I will receive RQIA's initial report before the end of March and I will take action to address the priority issues that are identified.

On the matter of outpatient appointments, the Southern Trust has advised me that it is simply not the case that people are given appointments on the basis of alphabetical order. Rather, patients have outpatient appointments arranged according to their clinical priority. This is determined by the clinician in charge of their care.

It is the right of any clinical staff to raise concerns publicly. But it is their responsibility to first exhaust all internal mechanisms for raising those concerns.

It is both concerning and disappointing that a very small number of staff within the health service may choose to raise concerns through the media rather than use the systems that are in place in their workplace.

There are robust arrangements within Health and Social Care that ensure any staff that have concerns about patient safety have ways of bringing them to the attention of senior staff.

These systems have been put in place specifically to allow staff to raise issues and be assured that action will be taken.

It is true that there are lengthy waits for some outpatient appointments, particularly for review or follow-up appointments.

This is unacceptable. That is why the Board and Trusts have been set a target to ensure that by March next year, all patients need to be seen within the timescale that has been determined by their clinician. I expect all trusts to achieve this standard.

To help achieve the challenging targets which have been set, I have invested in outpatient services. Last year, I provided  $\pounds7.3$  million with a further  $\pounds6.3$  million this year to improve waiting times for outpatient services.

No-one can have failed to notice that waiting times for a vast range of services have continued to rise over the past year. There are some specialities in which we know demand has been high and there ongoing difficulties meeting targets for both new and review appointments.

We need to act to ensure the capacity of Trusts can meet the real and justifiable level of demand. This is the Board's responsibility and I expect them to work with trusts to provide the capacity needed to improve waiting times for all patients.

I would also appeal to patients to do all they can to attend hospital appointments. Any person who is unable to attend should let the clinic know. By not attending, people are denying others the opportunity to be seen at a hospital clinic.

Increasing waiting times should not come as a surprise to anyone. I have warned time and again that cuts to the health budget could only impact on the delivery of services. The fact is that cuts to my budget can be directly linked to the continued increase in waiting times. With the prospect of further severe cuts, this situation will only get worse.

There is no doubt that the health service is facing significant and increasing pressure. Staff are stretched to their limits as they strive to meet rising demand and continue to provide high quality care to services.

I have met with staff and realise the pressures they are facing. At the same time, they have also had to contend with a constant barrage of negative media coverage which has left many feeling demoralised.

Increased pressures and limited funding had made this a very difficult time for health and social care staff. We are all indebted to the commitment and dedication of staff across health and social care. For them to also have to deal with people calling their professionalism and integrity into question is deplorable.

Instead of using the health and social care service as a political football, I would again appeal to this Assembly and to the public to stand by our health and social care service. It is something which everyone should value, respect and protect.

The founding principles of the NHS are cradle to the grave healthcare, free at the point of delivery – we must all decide whether this is worth fighting for.