

Frank Flynn

Social workers review priorities

CONTACTS

THE JOURNAL OF THE EASTERN HEALTH BOARD
VOLUME 4 NUMBER 3
MAY/JUNE 1978

John Quin, Senior Social Worker reports on the development of social work and the increasing involvement of Social Workers in health and social welfare policy.

The Irish Association of Social Workers met in Galway for their annual general meeting on the weekend of 10-12 March. The Association has a membership of 350 social workers, 250 of whom come from the Eastern Region. The Association is a professional organisation in the same way as the I.N.O. is for nurses. Many social workers are also members of the Local Government and Public Services Union.

Augusta McCabe, a social worker with the Board's Child Psychiatric Service at St. James's, took up office as the Association's Chairperson, and presided at the A.G.M. The annual report which detailed the work of the Association at local and national level during the previous year, was adopted.

Important developments have taken place in the past year. Frustration was expressed at last year's A.G.M. in Dublin at the lack of involvement of social workers in policy and planning in areas where we have expertise and which closely affect the lives of our clients. The positive result of this was the appointment of a Public Relations' Officer who has issued statements to the media on behalf of the Association. Policy groups were formed also on a wide variety of issues.

Social Work Standing Committee

Following representations, Mr. Corish, then Minister for Health, nominated three members of the Association to serve on health boards — Noreen Kearney has taken her place on the Eastern Health Board. Legislation is awaited for the election of social workers to health boards in the same way as other professions. Mr. Haughey has now agreed to a Standing Committee which will give the Association a professional input at policy level through regular meetings with the Department of Health. Two members have also been appointed to the Manpower Planning Committee which will look at services and the needs of staff engaged in personal social services — this Committee awaits the new Minister's sanction.

Future of Social Work

The Saturday session of the A.G.M. began with three speakers on the topic of "The Future of Professional Social Work in Ireland". Frank Goodwin, last year's chairman of the Association, spoke of the need to influence policy by using the available channels effectively and consistently. Power to influence decisions would only be earned through hard work, and well formulated policies were required which

would be backed by the members. Mr. Goodwin instanced Loughan House as typifying Governments' resistance to real change and their piecemeal approach to social problems. Adolescent delinquency was not a new crisis but a long-standing situation which was built and nurtured by the imbalances of power and wealth in our society. The Association must challenge such scapegoating of disadvantaged groups and seek real solutions such as reform of children's law and allocation of responsibility for children to one government department. We must call for an end to the lack of consultation with recipients and those delivering the service to such powerless groups.

Social Workers and the Union

Phil Flynn, Assistant Secretary of the Local Government and Public Services Union, saw an increasing role for the Union in representing the interests of its social worker members. The growth in Union membership means that 60% of social workers are now members of the Union. Mr. Flynn saw the growth in membership as being due to two main factors: (1) the lack of social work involvement in decision making, even in areas of their own professional competence and (2) the disimprovement in recent years of pay and employment opportunities. There were now two active vocational groups in Dublin and Cork, and social workers were becoming a force to be reckoned with in Union terms. Two major steps had been taken recently: (1) a substantial pay claim had

been lodged; (2) a campaign had begun to challenge the monopoly of the one promotional opportunity open to social workers, that of Directors of Community Care, at present confined to doctors. However, social workers must not see the Union as a slot machine into which they put money and can expect a return. Active membership is necessary, as well as a recognition that negotiation also implies the use of sanctions, and that the Union's power rests on the capacity to apply such sanctions. Mr. Flynn forecast that collective bargaining through the Union would be the means for social workers to achieve professional aspirations.

Professional Social Work

Mr. Gabriel Kiely, Lecturer in the Department of Social Science, U.C.D., had no apology to make for talking about professional social work. By this he meant social work which practised on the basis of knowledge rather than making decisions based on intuition, or carrying out the decisions of others, whether bureaucrats or other disciplines (such as doctors). Social workers needed to have confidence in themselves, the sort of confidence which was reflected in the policy documents presented to the A.G.M. — written with authority based on knowledge. The short history of social work in Ireland meant there were less obstacles from established traditions to its development in the future. Social work educators must not turn out yesterday's moulds or social work will remain static. Mr. Kiely distinguished two levels of practice. In one the social worker was an intermediary between the client and social resources, and did not require extensive training. The use of trained social workers for such tasks had led to job dissatisfaction, the provision of services inappropriate to the situation, and to resulting criticism of social work. In contrast, the professional social worker is creative, draws on a wide body of knowledge

and has the ability to assess and make decisions based on such assessment. Where courses were in the past divided according to work setting (e.g. medical social work), they were now divided according to method (e.g. community work). There was a need for more integrated courses at C.Q.S.U. level or else the specialisms would start to define what the problems were. The fieldworker must also keep the educator informed of what to include in training.

Child Care

The child care interim policy document on reforms in services for children in care was adopted. The main points in this were:

- (1) The fact that placement decisions are not based on genuine choices embracing a range both of residential and foster care and adoption jeopardises the possibility of a child's needs being met through care.
- (2) Each child in care should be the subject of a twice yearly review.
- (3) Present levels of staffing do not permit satisfactory support to be given to child, parents and caring agency.
- (4) The need for a child care fieldwork advisory panel in each area to act as consultants, to make recommendations re placement decisions to maintain high standards of practice, and to formulate and review child care policy.
- (5) The demands made on residential child care workers should be reflected in the manner of their selection, support and consultation and in new general conditions and pay.
- (6) Field workers in child care should be professional social workers with experience.
- (7) Recognition of the potential of foster care, unrealised because of inadequate levels of personnel and resources.

During discussion, the admission of children to care on the decision of the Director of Community Care was criticised. The distinction was drawn between the professional decision which was made by the social worker, and the

administrative decision relating to sanctioning of payment and eligibility of child for the service. The lack of follow-up of children committed and paid for by the Department of Education was also criticised. A motion calling on the Minister for Justice to introduce legislation to enable legitimate children to be adopted was carried by a large majority.

Adolescents

A draft policy document on adolescents was adopted. This sought financial support for existing counselling services, and recommended that priority be given to primary care, i.e. remedial education, work training centres, job placement for youth. It also noted the absence of a report from the Committee on alternatives to imprisonment set up by the Minister for Justice in May, 1977 — such a review is long overdue as the probation of offenders Act dates from 1907.

A motion calling on the Minister for Justice to review his plans for a closed detention centre at Loughan House, Co. Cavan for 12 — 16 year old juvenile offenders was passed by a large majority following a full and lively discussion. The Minister was severely criticised for his lack of consultation with relevant bodies, including the Child Task Force. The Minister had not informed us what children would go to Loughan House, why, what would happen to them, or what the needs of such children were. The use of inadequately trained staff and the isolation of the unit were further criticised. Such a unit should be associated with proper assessment facilities and open units.

Need to co-ordinate child care service

The need for the Government to assign to the Minister for Health full responsibility for all services related to child and family welfare to avoid the present confusion, lack of co-ordination and fragmentation of

services for children in need was the subject of another motion carried overwhelmingly. While this had been accepted by the last Government in principle it had not been implemented, and the present Government's decision on Loughan House would suggest a reversal of it. The responsibility of Justice for adoption or the punishment of young children through the courts makes no sense; nor does the involvement of the Department of Education with children in care.

New Structure called for

Another motion called on the Minister for Health to create a new and independent structure within the health boards (or otherwise) for the delivery of social services. At present social workers are unable to influence effectively the sort of services they would like provided. The medical domination of Community Care leads to medical definitions of need, and an inability to grasp or understand other definitions. The funding of health boards reflects the low priority of social and community services. The meeting could not envisage the possibility of change or influence within the present system, as the reality of McKinsey was far removed from the principle.

Housing

A policy document on housing was approved. This called for social needs priority to be taken into account as well as medical and other needs. Those seeking refuge from physical violence, for example should be allowed to transfer residency qualification to another local authority – at present women in the Women's Aid Hostel at Harcourt Terrace require two years to get residency qualification. The meeting also called for the employment of part-time social workers on a permanent basis. A document on nullity was approved which called for an end to the hypocrisy, and for the provision of divorce on the basis of the breakdown of the marriage rather than blame and fault finding.

New Systems Analysts



Congratulations to Maura Clarke and Brendan Carr, our new Systems Analysts. Maura was a Clerk/Typist in Lord Edward St. and Secretariat before transferring to the Computer Department in December 1974. She was appointed Senior Programmer in January 1977. An avid skin-diver, she is also interested in playing squash and reading, and writing for Contacts (sometimes).

Brendan is a fairly well-known figure in the Board, having got himself involved in umpteen sporting activities. He has worked in the RMS's office, in the Computer department and, for the past few years as Asst. Section Officer in the Dental Services. In 1972 he was selected for the full-time course in public administration run by the IPA.

We wish them every success in their new jobs.

Supplementary Welfare Allowances

The meeting also called on the Minister for Social Welfare to establish a formal appeals system under the Social Welfare (Supplementary Welfare Allowance) Act, 1975 which would include:

- (a) a specified procedure of appeal,
- (b) an appeals officer who is independent of the body implementing the Act,
- (c) appeals to be heard quickly,
- (d) an appeals form which applicants would be helped to complete,
- (e) notification in writing of decision on appeal
- (f) right of claimant to be accompanied by an advocate if he/she so desires.

This scheme is operated by Community Welfare Officers employed by the health board, known formerly as home assistance officers.

Mentally Handicapped

A document on the mentally handicapped was adopted dealing a points system for administrative residential care.

Evelyn Forde leaves

Miss Evelyn Forde recently retired following a very enjoyable function at which her friends wished her many years of happiness in her retirement. Evelyn came to the Eastern Health Board via Rathdown and Balrothery Boards of Assistance, Dublin Health Authority and finally served in the Personnel Department for many years. In the Eastern Health Board her colleagues found her friendly, helpful and a friend they regretted to see retiring.

May we take this opportunity to wish her many happy years in her retirement and we hope to see her figure prominently in her golfing career.



"Himself was telling me they got more systems analysts in there. Do you think now could they do anything with my system? I get this fierce wind"

**MARY P. HUGHES –
AN APPRECIATION**

We regret to report the death of Miss Mary P. Hughes, Public Health Nurse, which took place on the 25th February, 1978, after a short illness.

From Co. Tyrone, Pat Hughes joined the Public Health Nursing Staff in 1954 and worked in the then developing Finglas area. Community services were rather thin on the ground in those days and she was of that band of pioneering Public Health Nurses who endeavoured to cope with the problems of a developing area with few resources at her disposal.

From Finglas she moved to a city centre area and in 1967 she was appointed Non-Medical Deputy Inspector of Midwives. In addition to these duties she later took on the supervision of Nursing Homes under the "Health (Homes for Incapacitated Persons) Act 1964".

Care and concern for the very young and the very old was her life's work. Working early and late, time meant little to her when her professional services were needed by others. Tributes have been paid to her memory by the many voluntary and statutory agencies she worked with. In her own unique way she established a standard of professional practice which is an example to those who come after her.

Vocation, dedication and integrity are the words which easily come to mind in describing her sterling qualities. A popular member of the staff, it was a privilege to have known and worked with her.

E. H. Mattimoe,
Suptd. Public Health Nurse

**New workshop for
mentally handicapped**

A new day centre and workshop for the north city and county area is being provided in St. Ita's Hospital. They will be managed by a Limited Liability Committee "Fingal Workshops Ltd." which will employ a manager and an assistant.

The first directors of Fingal Workshops Ltd, are:

Fingal Mental Handicap Association:
Mr. Richard Hammond (Director) Smyth & Co. Ltd., Balbriggan;
Mr. Thomas Moore (Farmer) The Five Roads, Lusk, Co. Dublin; Mr. Brendan Logue (Financial Controller) Wavin Pipes Ltd., Balbriggan; Mr. Patrick Wall (Manager) A.I.B. Balbriggan; Mr. Hugh Reilly (Factory Dispatch Clerk) Hampton St., Balbriggan.

Eastern Health Board:
Dr. V. Molony, St. Ita's Hospital, Director of Mental Handicap;
Mr. Francis J. McCullough, Health Board Officer, St. Brendan's Hospital;

**Development of
Mental Health Services**

**A
BLOCKBUSTER
REPORT**

The Report of a special sub-committee in regard to the further development of the Mental Health Services for the Eastern Health Board area which was before the Board on the 30th March may be said to be required reading.

"Required reading" is, no doubt, an unusual phrase in a Health Board setting but an appropriate one in this context and for three main reasons:

1. the report is the product of the combined work of a group of Board members and a number of officers. It may be thought to be an example of real significance of the potential of the working relationship visualised by McKinsey at the time of setting up of Health Boards, but not universally held to be workable.
2. the recommendations in regard to the planned evolution of the Mental Health Services, which were unanimously adopted by the Board and are now with the Minister for Health for policy decisions, are likely to set a pattern of organisation and development for many years.

3. the implementation of the main recommendations in respect of mental health services to be provided outside of the psychiatric hospitals will be dependent for their success on the closest liaison with the Community Care programme and on the co-operation of voluntary organisations and individuals. The future role of the G.P. will be all important.

A feature of the preparation of the Report, whose recommendations run to thirteen pages, was the wide canvassing of the experience and views of the staffs providing the services. The readiness of their response was particularly gratifying to the sub-committee. But many shoulders will have to be put to the wheel if the imaginative but practical proposals in the Report are to be put into effect. Which brings us back to the phrase "required reading" as to participate in any meaningful way necessitates both knowledge and understanding. We hope to deal extensively with the mental health services and their proposed developments in a future issue.

JOURNAL FOR PSYCHIATRIC NURSES

The Irish Journal of Psychiatric Nursing was launched in a blaze of glory last March. Edited by Patrick O'Sullivan of the School of Nursing it promises from its first issue to be a provocative, though responsible organ of Irish Psychiatric Nursing opinion.

Anybody who knows anything about psychiatric nurses in this country knows that they are a dedicated bunch, genuinely concerned about the patients in their care. Unfortunately we seldom hear their voice on the issues that concern them – total patient care, community care, health education, the need for a new Mental Treatment Act, manpower planning, nursing education, alcoholism, drugs, care of the dying etc. They now have a voice: it's up to them to make it heard. We wish Patrick O'Sullivan every success.

Mr. L. Sweeney, Health Board Officer, St. Ita's Hospital; Miss M. F. McEntee, Health Board Officer, St. Ita's Hospital.

St. Michael's House:
Dr. B. Stokes, St. Michael's House, Goatstown, Medical Director;
Mr. P. H. Molony, St. Michael's House, Goatstown, Executive Director.

A retired Bank Official, resident in Balbriggan, has offered his services as Secretary to the company on a voluntary basis.

Up to 100 day patients will be catered for. The workshop will be sited near the hospital's mental handicap facilities which now has the services of a psychologist and montessori, art and home economics teachers.

ST. COLUMCILLE'S

Sgt. Frank O'Sullivan and his committee continue to be active. They have organised a flag collection for the end of April. They propose to re-furnish two day rooms from the funds. At a recent meeting of the Hospital Visiting Committee the Board members asked that their appreciation be conveyed to all concerned for their continuing efforts on behalf of the Hospital.

Mary Wall off to Thailand
We wish the very best of luck to Mary Wall, Public Health Nurse, who has gone on two years leave of absence to work with the Dr. Tom Dooley Fund in Thailand.

New Supervising Pharmacist

We welcome Teresa Landers who recently took up duty in James's Street as Supervising Pharmacist. She comes to us from the Western Health Board. She is a member of the Council of the Pharmaceutical Society of Ireland since 1970.

Her job entails responsibility for administering the pharmacy services for the Board's hospitals, homes, health centres, psychiatric clinics, J.C.M. Hospital, St. James's Hospital as well as Cheshire Homes.

The Central Pharmacy, where she is based, is located in a very old building and Teresa is not happy about its suitability or, indeed, the facilities provided for the waiting patients. "I understand, however, that plans are in hand to improve the place," she says, with impressive optimism.

She is interested in golf and "other intellectual pursuits, like more golf" and would somebody please do something to get her into a club?

Astra Notes

Thanks to the patronage of our members and friends the season was a great success — our membership has increased and will we hope continue to do so. A special thanks is due to Miss Tess McDonagh, Catering Supt., and her staff who have always helped us in every way and form a hard core of our membership.

But while the curtain fell on our performance in March the work of Astra, like Tennyson's Brook goes on. We are currently in the process of arranging outings for hospital patients, the first of which will take place next month, and a new venture — Bingo sessions for the patients in St. James's Hospital — will soon get off the ground. If you would like to take in these activities please contact our Secretary, Miss Caroline Cullen, Computer Department for, after all many hands make light work.

Membership of Astra is really excellent value at 75p sub. for the year — if you are already a member please renew your membership, if you are not please avail of this bargain offer and join now.

W. J. Tisdall,
Chairman.

ST. BRIGID'S HOME, CROOKSLING

They certainly have plenty of entertainment up in St. Brigid's. Concerts have been given by the Junior Legion of Mary, Jomac Productions, John McEntee and his friends, Father Perrin, and Arthur Kennedy, and the Mothers' Union from Clondalkin visit the patients regularly. Miss Moran, Matron, told members of the Board recently of the pleasure given to the patients by these voluntary workers. Long may they continue.



Mrs. Nuala Ramsay and her Dental Surgery Assistant, Maria Devlin at the prize-giving of a dental poster competition which they organised for the children attending their clinic at Howth. The prizes were presented by Dr. Teeth of the Muppets, and since there were prizes for all who submitted posters, it was a very enjoyable function for parents and children.



Rosemary Kenny, Phil Connolly and Carmel Hanley, Dental Surgery assistants at Cornmarket, Marino, and Howth Clinics, who were recently awarded the National Certificate of the Examining Board for Dental Surgery Assistants.

National Indoor Games

The National Indoor Games were held at St. Ita's Hospital, Portrane, on Saturday, 15th April 1978. The Games were officially opened by Ms. Mary Treacy who represented Ireland in the last Olympic Games. Last year the official opening was performed by Mr. Declan Costello, the then Attorney General. He was so impressed that he donated the Costello Perpetual Challenge Trophy for the Junior section of the games.

The idea behind the games was to provide a national competition for mentally handicapped persons of all ages to test their skill and co-ordination. Over 300 people took part in the competitions. Seven Health Boards had representative teams and two teams came from Northern Ireland.

SEMINAR ON TRAINING IN COMMUNITY PSYCHIATRY

A one-day seminar was held recently on Research and Training in Community Psychiatry: an Inter-disciplinary Approach.

The seminar was the end result of an experimental training course undertaken during the past year in the Dublin North Central catchment area (headquarters at 140 St. Laurence's Road). The course was conducted by Maureen Gaffney, Senior Psychologist and the trainees were nine psychiatric nurses, a psychiatric social worker and an occupational therapist.

Professor Browne, in his recent report, emphasised the need to train staff to work with psychiatric patients in the community rather than in a hospital. In practice, the staff would be dealing with patients ranging from the vulnerable teenager who may develop problems, to the suicidal young housewife or the chronically disturbed elderly. They would be in contact with general practitioners, schools, police, voluntary agencies, neighbours and clergy, they would run day centres and hostels, undertake domiciliary visits, rehabilitation work, and public education lectures. They would have to lead group therapy sessions and constantly research the effectiveness of their efforts.

The course was the first attempt at training staff for this new role. The trainees read papers at the seminar on their experiences during the course. Many interesting topics were raised, including the question of group therapy sessions in community-based clinics. Altogether it was a stimulating day for the large attendance who came from all over the country.

The games themselves are run on the lines of the Olympic Games.

There was a parade of the stars, with the lighting of the torch and the official opening.

National records have been set in the various competitions. Joe Keane of Clarinbridge, Co. Galway holds the record for Bean-Bag throwing. This game involves throwing of ½-lb bean bags from a distance of 12 feet into a box which is 2 cu. feet. Other records are held by Joe Lynch, St. Joseph's, Portrane for Penalty Kicking. James Kinsella, Drumcar, Co. Louth holds the Long-Push record, and Phelim McCausland, Muckamore Abbey, Co. Antrim for Ball Throwing.

The games themselves were the idea of Dr. V. Molony, Director of Mental Handicap, Eastern Health Board, and were devised mainly by Mr. G. McCann of St. Ita's Hospital.

In general the comments from those who took part was that the whole effort was very enjoyable, extremely worthwhile and a tribute to the National Indoor Games Council.

BANKING STORAGE

The Eastern Health Board uses an ICL 2903 computer which is based in James's St. The storage capacity of its Central processor is 28,672 words of information (1 word = 4 characters), which large though it seems, could not contain all the information required to service the Board's operations. It is necessary therefore to augment the central store of the computer with BACKING STORE. This backing store holds data and programs in the same format as the central processor i.e. in binary code and is comprised of magnetic tapes and magnetic discs. Information is transferred onto these backing stores by the central processor for use later if required, at which stage it can be read back into the store. Thus, backing storage media serve as methods of input and output which is a major advantage over other forms of input and output such as cards or printed stationery.

MAGNETIC TAPE

Manufactured in the same way as recording tape, magnetic tape is made from a plastic base coated with iron oxide. Typical reels of tape contain 1200 ft. or 2400 ft. and have 7 or 9 tracks making them much wider than most recording tape. Data is recorded across the tracks one character at a time with each four characters making one word of information and a number of words building up to a complete record containing various aspects of related data e.g. personal number, name, basic pay, etc.

The reel of tape is placed on a TAPE DRIVE and passed underneath READ/WRITE beads just as one would place a tape on a recorder. The computer program assembles the data in the store and when complete it issues an instruction to write the data to the tape, which overwrites any information previously on the tape. The data is represented on the tape in binary form. Each tape is identified by a BEADED LABEL at the beginning of the tape

The January/February issue outlined briefly the basic elements of the computer. The INPUT devices are concerned with loading the data and programs into the computer; the CENTRAL PROCESSOR processes the data in accordance with the program instructions and the OUTPUT devices receive the results of the processing and prints them in a form useful to the Board's staff.

In this article the make-up and workings of the basic elements are expanded on.



containing the name of the tape, the date it was written and the length of time which must elapse before the data can be overwritten by new data. This label is written in binary under the control of the central processor. At the end of the tape a trailer label is written to signify the end of the data and containing a count of the number of records on the tape.

MAGNETIC DISCS

A magnetic disc is like an L.P. record in appearance but does not have a grooved surface. A disc store is made up of a number of these discs mounted on a central spindle with the discs approximately 1/2 inch apart. The surface of each disc is magnetisable and is divided into a number of concentric bands rather than the spiral arrangement of the L.P. record. Data is recorded along these bands by means of READ/WRITE beads which move in unison between the discs over the bands. These beads float over the surface of the discs rather than touch them so as to reduce friction. A typical disc storage unit — also called a cartridge — would have 20 recording surfaces divided into 406 concentric bands, and have a capacity of over 61 million characters.

When using magnetic tapes, processing is done serially, i.e. each record must be examined until the correct one has been located. This method slows down processing especially if the required record is towards the end of the tape. Discs, however, allow a record to be retrieved directly by making direct access processing possible. Under the method of processing, the address of the block of data containing the required record is calculated by a formula or from an index and the READ/WRITE beads move over the required band immediately thus by-passing all the records up to that point.

INPUT

Before information can be processed it must be communicated to the central processor. However, the variety of the daily business information of the Board in terms of document sizes, shapes and formats requires that it be standardized first so as to be acceptable and usable by the input devices. For almost 100 years now punched cards have been used in data processing and today along with paper tape are still very common as methods of data input. More modern systems of input include DIRECT DATA ENTRY (DDE) which was

*Continuing
Pat O'Brien's
Article—*

ABOUT COMPUTERS

adopted by the Health Board in 1974 to speed up the preparation of data.

PUNCHED CARDS AND CARD-READERS

Rectangular in shape, cards are of uniform size and thickness, and are made of high-quality paper to avoid warping. Cards are divided into 80 columns and 12 rows. Each column can contain one character. Numeric digits are represented by a single hole in the appropriate row; letters are made from a combination of two holes in one column and special punctuation symbols require either 1, 2 or 3 holes punched in the same column.

When information has been punched into a pack of cards the pack is verified by a second operator so as to eliminate mis-punches. This operation takes the form of 'punching' the same information into the already punched cards; if there is a mis-punch the verifying machine stops and the offending card can be corrected. When verified the pack of cards are placed on a CARD-READER which senses the pattern of holes photoelectrically and transmits the information to the central processor. This operation takes place at a rate of 300 cards per minute.

The PAPERTAPE method of input makes use of a continuous reel of paper on which holes are punched across 8 tracks. The same preparation method and photoelectric method of recognising hole patterns are used for papertape.

DIRECT DATA ENTRY

Cards and papertape are first punched and verified. They are then put through readers, transmitted to the central processor and then written to magnetic disc or tape. To rationalize and speed up this process the DIRECT DATA ENTRY system was invented which allows the information to be punched from the source document and placed directly onto magnetic discs. In addition many more checks can be performed on the data as it is being keyed-in and this saves processor times at a later stage when the main program is being run.

OUTPUT

A payslip presented to an employee with a series of i's and o's would not be acceptable so various devices must be used to translate the information held in binary into everyday business formats. The commonest device is the LINE-PRINTER but other output devices include GRAPH-PLOTTERS, VISUAL DISPLAY UNITS, and MICRO-FILM.

LINE-PRINTER

The output device used in the Eastern Health Board's computer installation is the LINE-PRINTER, which contains a revolving cylindrical drum with 132 printing positions along its length. Around the circumference of the cylinder at each of the print positions are embossed 64 numeric, alphabetic and special characters. Corresponding to each print position is a magnetically controlled hammer and the paper is fed between these hammers and the cylinder. As the character to be printed is selected the hammer processes the paper against the cylinder at the appropriate time and the character is

printed on the paper. This operation continues until all the characters of a line of print have been transferred to the paper at which stage the paper is advanced one line and the next line of print is begun.

A variety of stationery is used from blank sheets to pre-printed forms like cheques and pay-slips. Paper can also be multi-part with sheets of carbon interleaved in the set. In general the paper is known as "continuous stationery" so that when one page or form is completed the next sheet is presented to the printer automatically. The printer has a speed of 600 lines per minute although this speed depends on the number of characters per line.

CONCLUSION

To describe a computer as a "glorified adding machine" is an over simplification which ignores the other attributes of the machine. On the other hand, to attribute it with the power of the human brain is to misunderstand its make-up and down grade the human being. However, in the field of information handling it has many advantages over manual methods. Its internal speed is measured in terms of micro seconds (millionths of a second) and even nano-seconds (thousand-millionths). Its storage capacity is superior to any manual filing system. Its accuracy is beyond question. Without exception computing errors are due to human weaknesses, be they in the input data, programs or the overall system. Computing is subject to the GIGO principle (garbage in—garbage out) so that if the input is nonsense the output will be nonsensical. Computers are versatile in that they can perform any task which can be broken down into a series of logical steps. Diligence is yet another of their attributes. Being a machine it does not suffer the human traits of tiredness and loss of concentration. If 1 million calculations are to be performed it does the 1 millionth with exactly the same experience and speed as the first.

I.P.A. Report asks— Where do we go from here?

The I.P.A. have published an important report* presenting the findings of a research project, sponsored by the Department of the Public Service, to evaluate formal training courses provided for the Irish public service by the Institute of Public Administration and the Civil Service Training Centre. The author, Laraine Joyce, is a Research Officer on the staff of the I.P.A. A social science graduate of U.C.D., she holds a master's degree in sociology from the University of Austin, Texas.

The report is based on a sample of over 1,000 participants nominated to attend 121 courses in 1975/76 and includes case studies of five typical training courses.

It is not just an examination of how well the trainers in the I.P.A. and C.S.T.C. do their jobs, but a critique of management in the civil service, local authorities and health boards. As such, it should be required reading for all who are concerned about the quality of management and administration in the public service.

The results of the survey show pretty conclusively that the system of formal training for the Irish public service is not operating at maximum efficiency. Successful training depends on close co-operation between the three parties involved in the system — the senior officers who nominate persons to participate in courses, the participants and the trainers. The degree of communication and trust between client organisation and the training organisations was found to be far from ideal. Trainers alleged that there was a lack of commitment to training in the public service, more so in the civil service than in local

authorities and health boards, and the findings of the survey tended to support these allegations.

Client organisations were criticised for not providing sufficient support for training. It was felt that they should carry out their own follow-up on the effectiveness of training and thus be more critical and demanding about what they wanted from training. Such follow-up might also make them more realistic in what they looked for from training and more alert to its true purpose.

Training needs did not appear to be deeply thought out; superior officers did not appear to devote much time to briefing their subordinates before they attended courses or, on their return, to discussing the courses with them and examining how their learning could be applied. The intrusion into the work of their section was said to be resented by some superior officers. Many participants felt that they would not get adequate encouragement to develop themselves on their return to work. Course participants, too, were often uncertain as to why they had been nominated. This situation, in turn, led to low motivation on the part of the participants.

The training provided was also criticised. The common criticism was that it was irrelevant, theoretical and lacked contact with reality. Comments were made such as "too airy fairy", "a surfeit of jargon", "childish games". The predominant teaching strategy used was that of the lecture. Miss Joyce points out that learning theory indicates that this is not the optimal teaching strategy. The findings of the survey tended to confirm this view.

The effectiveness of the lecture course system was not helped by the fact that the performance of external lecturers was not uniformly good.

These findings may not come as a great surprise to many, and if that was all there was to the report we could dismiss it as another solid academic study and safely confine it to the library shelves. But there is a great deal more to it than that. Chapter two is soberly entitled "Theoretical considerations including literature review". But don't be put off — this is an excellent and very readable short account of the development of management thought. Many issues affecting management — organisational change and innovation, training, development, etc. — are discussed.

These issues are taken up throughout the report in comments on the findings, and marshalled again in the concluding sections, where signposts to future action are indicated.

"Formal training can only be really effective," Miss Joyce maintains, "when it is used as part of an integrated programme of career development." She goes on to say that there are signs that such programmes are underway, pointing to the introduction of staff appraisal in the civil service and the surveys of training needs being undertaken by health boards and local authorities. These initiatives she considers, should stimulate a commitment to training.

In the Eastern Health Board, as John Byrne wrote in our last issue, a pilot scheme on staff appraisal has just been completed in the Finance Department. A report on the scheme is now being prepared for the Chief Executive Officer. Our experience of the scheme confirms Miss Joyce's view.

Miss Joyce makes an important point that training should not be a separate function within an organisation, but that it should be integrated into all the activities of the organisation:

* *Evaluation of Training — A study in the Irish Public Service* by Laraine Joyce — Institute of Public Administration £3.00 (Paperback 209 pages, with appendices).

“There is a danger that when an organisation, section or individual is designated as being responsible for training, that its role might be defined as that of a provider of courses, irrespective of their contribution to the overall objective of staff development. People seen as trainers might tend to be evaluated in terms of the number and quality of courses they provide. There might be a tendency, therefore, to see all staff problems as training problems for which attendance and a training course was the solution.”

Training officers, she suggests, should be regarded as staff development facilitators rather than course organisers, and other means of staff development apart

from courses, such as on-the-job training, coaching, job rotation and project-based or action learning, be considered.

Responsibility for training and development, she contends, should be squarely placed on line management:

“It is argued that the sine qua non of effective training and development programmes is that the people involved should take the responsibility for their own development. Unless they do so, unless they feel some sense of ownership of the training objectives, training is not likely to have much impact on them. This means that the responsibility for training and development should be delegated down the line. Individual managers at the

various levels from top management down should see continuous self-development both for themselves and their subordinates as being an integral part of their duties. In organisations today few, if any, jobs remain static. For organisations to cope with change it is important that individual members are proactive rather than reactive and that they create and recreate their role in the organisation rather than passively accept it.”

All concerned with the publication of this report are to be congratulated for producing a candid appraisal of training for the public service in the middle 70's and a stimulating discussion on the problems now facing management.



Cúram is a real home

very fortunate in finding a local lady, Mrs. Kelly, who knows everyone on christian name terms. The original four residents of the Hostel were chosen as the most likely to fit into the community, and, although there were naturally some teething problems in adjusting to outside living, they settled in remarkably quickly and were support for new residents as the remainder of the nine beds were filled. They were given all the help and encouragement necessary in the early weeks, even to some members of the nursing staff sleeping in the house for the first few nights of their residence. Gradually our visits tapered off and it was a real morale booster to watch the growing independence of the group. The mixed group of male and female live as any ordinary family; two attend the Bray Day Centre, one works at the Hospital, two in Enniskerry village, a couple of ladies do part-time domestic work locally, while one remains at home to help with the housekeeping. In addition, a local lady provides work at packing zip fasteners which is done at home in the evenings or in any spare time.

On 22nd May, 1976, four female patients were discharged from Newcastle Hospital to the former dispensary residence in Enniskerry village. It was a step into the unknown, as, apart from a Male Group Home and a Female Hostel in the Hospital grounds, this was our first venture into living away from the protective wings of the Hospital.

In the previous December, some members of the Hospital staff had talks with the Enniskerry I.C.A. Guild to explain the venture and to allay any fears that might arise locally. We had expected resistance in a snug close-knit village where one rubs shoulders with the rich and famous, but, on the contrary, received whole-hearted support and co-operation. It was obvious that the choice of Hostel Supervisor would make or mar the project, and, therefore, we were

Each member of the household contributes to the running costs; the ladies doing the shopping became adept at finding good value and even managed to save for a tea-set which is reserved for visitors. In the true Irish tradition the kettle is always on the boil for visitors who are graciously welcomed.

An important member of the household is mongrel “Kerry” who caused panic on one occasion when only a few months old by swallowing a Melleril tablet accidentally dropped on the floor and had a Parkinsonian reaction. He slept it off and lived to dig in the flower beds again.

Selecting a suitable name for the Hostel was a problem, so a priest friend who is a Gaelic scholar was asked for suggestions. He and no less a personage than (the then) Monsignor Tomas O Fiach put their heads together and came up with “Curam” and so it was called.

We are indebted to the kindly neighbours in Enniskerry who call with gifts of garden produce and provide employment and also to the gentleman who presented the beautiful radio. Their kindness, understanding and generosity ensured the success of the Hostel and its establishment as part of the village community.

J. Hempenstall

COMINGS AND GOINGS 1977

at Newcastle

Mr. Paddy Kelly, one of the longest serving members of the Maintenance Staff of Newcastle Hospital retired in June 1977. Mr. Kelly, a former member of the Merchant Navy, joined the Hospital when it opened as a Psychiatric Hospital in 1966. He was a conscientious worker and was popular with all members of the Hospital staff. In appreciation, the staff of the Hospital, presented him with a wallet and notes on his departure. We wish him many happy years of retirement.

Mr. Brendan Rogers, Assistant Chief Nursing Officer, resigned to take up duty as Chief Nursing Officer in St. Patrick's Hospital, Castlereagh, Co. Roscommon. Mr. Rogers had

been with the Hospital since 1972. The staff presented him with a silver tray and goblets. We wish Mr. Rogers every success in his new post.

Other members of the staff who resigned during 1977 were Marie Wynne, Staff Nurse, who resigned due to her forthcoming marriage, Miss Gillian McCullagh, Occupational Therapist, who resigned to take up duty at the Cerebral Palsy Clinic in Sandymount and Dr. Crean, who took up another post in the Health Board Area. Presentations were made by the staff on their departure and we wish them every success for the future.

The following staff were welcomed to Newcastle Hospital during the year: Miss Nora Myers, Miss Alice Malone, Mr. Kieran Foley, Mr. John McGroary (Student Nurses); Miss Ann Hinchin, Miss Mary O'Donnell (Post-Graduate Nurses).

INTER-HOSPITALS SOCIAL, SPORTS & CULTURAL CLUB

This club was founded in January, 1978 under the chairmanship of Mr. Jimmy Doyle, Lab., Our Lady's Hospital for Sick Children, Crumlin. The club's secretary is Ms. Mai Clifford, St. Luke's Hospital, Rathgar and its committee is made up of representatives from hospitals in Dublin and the country.

This new club evolved from an existing Inter Hospitals Travel Club which has arranged many successful cheap weekend trips to various European Capitals over the past few years, for hospital personnel in Dublin and the country. As many people were coming together for these trips abroad it was decided to establish the new club.

Initially this new club is visualised as a linking or co-ordination of all hospital social clubs in Dublin and throughout the country. Eventually it is hoped that the new club will have contacts with hospital social clubs throughout all European capitals.

On the sports scene this club organises various Inter-hospital competitions such as basketball, hockey, men's soccer, mixed soccer, table tennis, hardcourt tennis, squash and bowling. On the social scene the club organises cabarets, variety concerts, outings and cheap travel to European capitals. While on these trips abroad the club intends to meet their foreign counterparts with a view to arranging social evenings and variety concerts — using our own talent. The club also intends to arrange matches such as football, hockey, basketball and tennis, against its foreign counterparts. These trips also afford the opportunity of sight-seeing and shopping in various European capitals. For any further information on the club's activities please contact its aforementioned secretary.

GOLF OUTING Friday 7th April

Golfing members of the staff and their friends were favoured with summer weather conditions for the second outing of the newly formed E.H.B. Golfing Society.

Forty-seven players competed for the excellent display of prizes provided by the Committee. The ladies were particularly fortunate in having a sponsor who provided beautiful silver prizes.

Competition results were:

LADIES:

- 1st — B. Fegan, St. Brocs
- 2nd — T. Landers, Central Pharmacy
- 1st 9 — Aine Flanagan, Personnel
- 2nd 9 — Rose O'Neill, Wicklow

GENTS:

- 1st — T. Rothwell, Health Inspector
- 2nd — P.J. Hehir, St. Ita's
- 1st 9 — Ivor Brett, St. Brendan's
- 2nd 9 — M. Mulligan, St. Ita's

VISITING:

- 1st — Fr. Henry, Swords
- 2nd — Ken Smith, Swords

At the presentation of prizes Aine Flanagan thanked the sponsor and all who helped and participated. All present expressed appreciation of the work the Committee put into the event. It is hoped to have our next outing in about six weeks. Meantime there will be a circular to all golfing staff with information about the society and inviting anyone willing to help to contact members of the organising committee.

The E.H.B. Golfing Society is now recruiting members. At present membership is confined to staff who are already members of golf clubs. The fee is £3.00. Application forms available from Kay Dolan, Registry, 1 James's Street.

ST. VINCENT'S, ATHY

It was a beautiful spring day at St. Vincent's on the occasion of the inauguration and blessing of the new public address system which had been installed by the Athy Lions Club. Bishop James Kavanagh was the guest of honour and after the blessing he celebrated Mass in the hospital chapel. A pleasant function followed which was attended by Clr. P. Hickey, P.C., Chairman, members of the Visiting Committee and the Kildare Local Health Committee, and representatives of the various voluntary organisations who are involved in St. Vincent's and, indeed, in the care of the handicapped and elderly throughout the county.

Viva la Shannon!

There was once a big man who worked in a big organisation, like a health board. He was fed up. It wasn't so much the work as the feeling he had lately of being hounded, got at, blamed.

He wanted to get away from it all. Away to golden sands and blue seas and skies and waving palms and things.

"I'll off with me to Spain," he cried. With his bags full of the floral creations of yesteryear he arrived at the airport with his excited wife and child in tow.

Sadly, they were on strike. His flight was cancelled and his money refunded.

But where now the golden sands and blue seas, etc.?

Depressed, daunted and a bit bowed he considered his position. It was the middle of March. He could, he thought, if he worked on it, forget about the golden sands and blue seas and settle for grey ones with plenty of bracing fresh air. The unpolluted stuff. He could take deep breaths and long walks. He almost felt the bite of the wind as in the clammy airport he made his decision to head westward to the flat, unexciting lands of the Shannon.

"Not Spain, but sure it's home," he said consolingly to the wife.

The scene changes to a country pub. In its pungent depths we can barely distinguish our hero. Like a mushroom on its stalk he is seated on a stool staring out the tiny window behind the bar. By now, the rain has almost obscured the landscape from view. His pint is flat. His gloom thickens. The pub is empty but for two locals seated in a corner.

"Begod," says one of them, "that Germany must be a terrible place to live in."

"Why is that?" his companion asks courteously.

"That German fella, Gunther, livin' below in the plastic house at the harbour, isn't he havin' a great time here? The poor man. He does be up here every night drinkin' Bushmills and the other day he caught an oul pike. Begod his day was made. He told me he never enjoyed himself so much anywhere."

He stands and looks meditatively out the window, watching the rain slanting across the dreary sodden fields.

"Dortmund," he says. "Did ye ever hear tell of a place called Dortmund? That's where he comes from."

He sits down and sadly regards his pint. "Begod it must be a terrible place altogether."

The big man was back at his desk the following day.

JOSEPH DURNING

In March last we were all saddened to hear of the sudden death of Joseph Durning who represented Dun Laoghaire on the Eastern Health Board. A kind, decent man Joe epitomised all that is best in Irish public life. His one concern was to serve the interests of the people of Dun Laoghaire, particularly the poor and the elderly. He was a humble man, but proud of his Borough, proud that he had been born in Dun Laoghaire Fire Station over seventy years ago, proud that during his 35 years' service as caretaker in Our Lady's Clinic, Patrick Street, he had only two weeks sick leave, and above all proud of the staff in Our Lady's - his children, as he used to call them. We shall all miss him, but none more than the staff of Our Lady's Clinic. It is fitting that our obituary should be penned by one of that staff - Mr. J. B. O'Connell, Dental Surgeon.

Joseph Durning has gone to his eternal resting place. We, who have been associated with him, as caretaker of Our Lady's Clinic, were infected by his enthusiasm for his job. How proud he was of the clinic, and how he defended the work of all the departments therein.

He was appointed as caretaker in 1939/40 when the clinic was first opened as a T.B. centre, and he remained a good and faithful servant until his retirement over thirty years later. His energy was phenomenal and he never tired of keeping the clinic clean both inside and out.

He always had a sympathetic ear for those poorer people who wanted the odd job done to their homes - a door mended, a broken window replaced, arrangements made for hospitalisation, a visit by a nurse, how to go about getting whatever benefits to which they were

entitled. Those less fortunate people will miss Joe very much.

Joe remained as caretaker for about 2 years after retirement age and there was no deterioration in enthusiasm or work done.

After leaving the clinic Joe threw himself into Labour Party political life and Mr. Barry Desmond will remember Joe when canvassing for the Parliamentary elections. Later Joe was appointed to the local Health Board and, as Councillor on Dun Laoghaire Corporation, became Chairman of the Dun Laoghaire Health Committee.

His funeral was indicative of the man - it would have done justice to a Minister of State.

To his family and friends we offer sincere sympathy.

MAY HE REST IN PEACE

**EASTERN HEALTH BOARD
STAFF SAVINGS SCHEME**

Are you aware that there is a Savings Scheme with the Dublin Savings Bank? Amounts deducted are credited to a personal account with the Bank.

Full banking facilities e.g. Loans, Current Accounts are available to members. All offices remain open until 7.00 p.m. every Friday.

If you wish to join this Scheme complete the attached form below and return to Salaries Section.

Further information may be obtained from:



Administration Department,
Dublin Savings Bank,
Lower Abbey Street,
Dublin 1.

Phone 786266.

Tear off

APPLICATION FORM

TO
NEW MEMBER

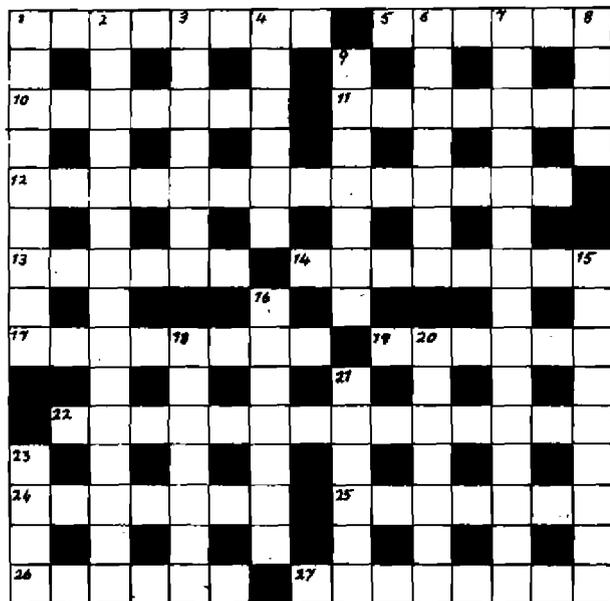
I hereby authorise you to deduct from my pay each week/fortnight/month until further notice the sum of £.....
to be transferred to my account with the Dublin Savings Bank at | Branch

SIGNATURE

ADDRESS

DATE DEPT./GRADE

CROSSWORD 14



Name

Address

Entries to: **CROSSWORD CONTACTS**, 1 James's Street
 £3 to first correct solution opened 31st May 1978.
 (Prize sponsored by **ASTRA** and **St. James's Social Club**)

SOLUTION TO CROSSWORD No. 13:

ACROSS: 1. Sachets 5. Potable 9. Rumba
 10. Laid Waste 11. Pile on the agony
 13. Extort 14. Amnesia 16. Placebo
 18. Gauche 21. Make a bolt for it
 23. Made to fit 24. Belie 25. General
 26. Dresses

DOWN 1. Scrap heaps 2. Complete
 abandon 3. Enamour 4. Salute
 5. Primeval 6. To Wigan 7. Business
 Circles 8. Ewer 12. Latest News
 15. Doubtful 17. Elector 19. Affable
 20. Fluted 22. Smog.

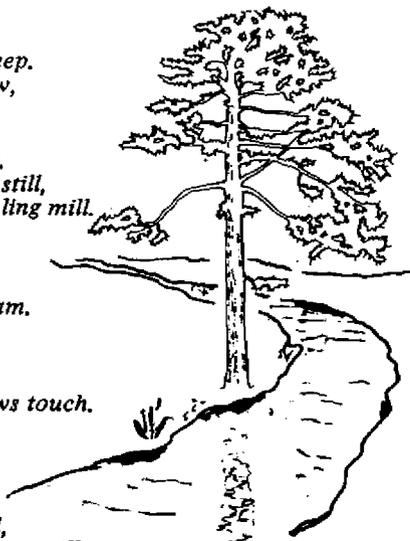
Winner: John Quin, Community Care
 Office, Clonskeagh Road.

A STREAM

*I know the place where a stream runs deep,
 Where minnows play and brown trout sleep.
 And on each bank where the King cups grow,
 Is meadow sweet like the driven snow.
 Hiding there is the water hen,
 Far away from the haunts of men.
 And there at eve when it's quiet and still,
 She leads her brood by the crumbling mill.
 Stretched out behind in a staggered row.
 The little black chicks weave to and fro.
 Over and down that winding stream,
 From dawn's first light, till eve's last gleam.
 Feeding, fussing and never done,
 Hunger and care mingled as one.
 Timid mother that cares so much,
 The reeds embrace, and the willows touch.
 Night has come, the mother leads
 Her little brood into the reeds,
 Alert and ready come what might,
 Keeping watch all through the night.
 The chicks are silent. Cold and chill,
 The stream hurries past that bygone mill,
 Down to the sea so far away,
 Bearing the dreams of another day.*

Increase in health contributions

From 1 April 1978 health contributions payable under the Health Contributions Acts are increased from £18 to £21 for the current contribution year. Insured persons with limited eligibility must now pay 50p per week, and farmers and self-employed persons must pay an extra £3. On 1 October 1978 the revised annual rate of £24 becomes effective.



by Our Gardener
 The Potting shed.

ACROSS:

1. Care of hands is the doctor's boast (8).
5. Escape at the beginning of first light (6).
10. One among the parties shows up (7).
11. Get away in cabs condemned as unroadworthy (7).
12. Bad turn had to break a tough one (4,3,2,5).
13. Obscurely record need to be upset about company (6).
14. Spring brought up and refined (4-4).
17. Liberal Ian got away with it (4-4).
19. Cunning used in bronze-cast utensil (6).
22. Describes substitute for eating and drinking enough (2,4,2,1,5).
24. Champion has a stick about the good man (7).
25. Misplace I.O.U. - Can't care (7).
26. Last seen in stolen Durer painting (6).
27. Average in act, debased (8).

DOWN:

1. Gaiety on the French ship is not really funny (9).
2. Always equable, because never had a problem like this (5,1,5,4).
3. Had nice mixture bound and mailed (7).
4. Move to a new spot and be seated again at beginning of evening (6).
6. All rust agitated every five years (7).
7. What every healthy editor has (4,11).
8. Put it up by day without a groom (4).
9. Cove with ring net is a stabber (7).
15. Sounded low, cunning and slightly tinted (4-5).
16. Issue plot for plant raising (4,3).
18. Cork vagrant? (7).
20. Pour over nearly half sufficient to put to some purpose (7).
21. Soul of gypsy cheer (6).
23. Rant, begin to rage, then hail (4).

ST. JAMES'S SOCIAL AND SPORTS CLUB

SOCIAL:

Like to make a date? Then why not support our cabaret night out in the I.T.G.W.U. Social Club Hall, Clogher Road, Dublin 12, on Thursday, 11th May 1978. Resident group, guest artists and cheap pints! Tickets on sale now - a mere 60p. See you there!

SPORT:

Internal gents 5-a-side soccer competition now in progress.
 Internal open table tennis competition starting soon.
 Ladies soccer - Civil Service League now in progress.
 Gents soccer - Civil Service League starting early June.
 Please direct any enquiries as follows:
 Basketball - A. M. Nelligan,
 757951, Ext. 375
 Chess - B. Carr, Computer Section,
 E.H.B.
 Golf, Pitch & Putt, Table Tennis -
 J. Ryan, 778132
 Hockey, Rugby, Lawn Tennis -
 S. Smyth, 682011
 Swimming - M. Dunne, I.S.A., E.H.B.
 Gents Soccer - E. Matthews,
 757951, Ext. 344
 Ladies Soccer - P. Murphy, 682011
 Socials and Memberships - J. Bruton,
 682011
ONLY paid-up members are eligible to participate in any competition.
 Membership - 50p.