

towards a healthy lifestyle

by

Cllr. Patk. Hickey P.C.,
Chairman, Eastern Health Board.



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At the meeting in June, 1976, the Board adopted a Resolution I proposed to the effect, very briefly, that much ill-health could and should be avoided and that it was up to the Health Board to take the lead in showing the public the way to better health. I am, quite frankly, very disappointed that, two years later, no apparent progress has been made to give effect to the terms of the Resolution.

I am invited to say again for the readers of "CONTACTS" what I had in mind when I proposed that resolution.

I felt then that there was not enough impact coming fast enough in the health publicity campaigns. I still feel that way, even in the light of the stepped-up campaigns of the present time, worthy as they are within their limitations. I felt that there should be a dramatic and publicity-catching start to the campaign, for example, a National Healthy Living Week, built around a major function or exhibition in Dublin and repeated in other centres, like the many scientific, cultural, careers and other kinds of exhibitions at the R.D.S. to which people, especially children or youth would be encouraged to come from all over the country or region.

I am not claiming that ill-health in every shape or form is preventable by changes in living styles. There are, unfortunately, illnesses like disseminated sclerosis or schizophrenia that for the time being at any rate, seem to be beyond prevention. But the very fact that those unpreventable diseases afflict us is all the more reason why we should try to prevent the preventable ones so as to free our scarce resources to be applied where they are most needed.



Councillor Hickey, P.C.

It is probably true to say that in these islands we committed ourselves to a health service system without realising what we were letting ourselves in for. It is pretty well recognised now in Britain that taxation will probably be unable to fund the health services in future at the rate those services will require funds. It must be recognised that that is even more true here. Even I must admit, perhaps, that politicians have pushed health services at the people and to some extent helped to make them "demand" services. The questions that must be asked are:

(a) are we likely, in the foreseeable future, to be able to fund health services at the increasing rate of recent years;

(b) even if we are, would it not be wise to pause and think carefully whether it is really necessary to do so; there is no case for spending resources except where unavoidably needed. Vast sums are involved – say £300,000,000 upwards.

There are indications that seem worthy of close examination:

- (a) that much hospital stay is not necessary;
- (b) that many of the reasons for ill-health in the middle age groups are social and largely controllable, e.g. road-accidents, smoking, over-eating, drinking, lack of exercise;
- (c) that in U.S.A. ill-health and death from, for example, cardio-vascular diseases is declining in those in 50–70 year age groups, maybe because earlier health education campaigns there were effective.

These factors may point to a health strategy that we should try to sell to our people.

- (a) Why should the modern Irishman or Irishwoman enjoy health less good than the modern U.S.A. business executive.
- (b) Should we not sell and propagate the idea of self-discipline.
- (c) Since lavish spending on self-indulgence is the cause of so much ill-health, should we continue to

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provide heavily subsidised hospital services to cure the effects of such self-indulgence; should we be thinking of compulsory insurance for hospital services for middle-aged groups, with the less well-off assisted to participate and a tax funded service for certain classes, e.g. the old, the very young and perhaps for certain ailments.

The national festival of healthy living would be the lead-in to a powerful and sustained campaign to bring people to the healthier life and to accept the new health service concepts that should go with it. It could very well be self-financing if organised by professional promoters. The interests that I would see taking part would be:

- * those advocating self-control in particular matters – the Pioneer Total Abstinence Association, I.N.C.A., Alcoholics Anonymous, the non-smoking society, healthier food advocates
- * those dealing with accident avoidance – the Automobile Association, The Royal Automobile Club, Department of Environment, Road Safety Committees
- * those promoting sport and exercise – all the sporting bodies, An Oige
- * those specifically interested in health – Irish Medical Association, Irish Medical Union, Department of Health and Health Boards, Health Education Bureau, Irish Nursing Organisation and other nursing groups
- * those having an overall social purpose – The Churches, Trade Unions.

That co-operative presentation would be organised and planned to offer to our Irish people the humane alternative to ill-health and costly health service and to free scarce resources for where they are really needed.

Clinical Evening

A clinical evening for public health and district hospital nurses was held in St. Columcille's Hospital on Friday, May 26th. The meeting was very well attended and was voted by all to be most instructive and enjoyable.

The speakers were Mr. Frank Ward who spoke on the acute abdomen. This was followed by a case presentation of an acute abdominal problem by staff nurse Mary Lynch.

Dr. Miriam Brennan spoke on changing patterns of antenatal care and Dr. John Kerr read a paper on cardiocography or the intensive care of the foetus in labour. Staff nurse Maria Meehan then read a paper on the case history of an elderly primigravida – this paper illustrated many new advances in antenatal care. It is of interest to note that the particular patient described recently had her first baby successfully in St. Columcille's at the age of 46.

The evening concluded with a tour of the hospital and an excellent supper provided by Miss M. Moloney and her staff.

MICHAEL BRADY

R.I.P.

MICHAEL BRADY, Kildare Member of the Eastern Health Board, Chairman of Kildare Local Health Committee and member of Kildare County Council, died last week in the County Hospital, Naas. A native of Co. Cavan, he came to reside in Celbridge over 20 years ago and was soon accepted by the people as one of themselves.

With a life-long interest in the Trade Union and Labour movements, Michael Brady was first elected to Kildare County Council in the mid fifties. A hard working and dedicated Councillor, he was for a period Chairman of the County Council. He also served on its various committees including the Co. Committee of Agriculture, Vocational Education Committee and the former Kildare-Carlow Mental Hospital Board. Shortly after the setting up of the Health Board, he was nominated by Kildare County Council to serve on the Eastern Health Board and first took his seat on that Body in July 1973. He served since then on its various sub-committees, and was at the time of his death Chairman of

the Kildare Local Health Committee.

Recently when he was a patient in Naas Hospital the Chairman of the Eastern Health Board visited him, and made a presentation to him on behalf of the members and officers of the Board, by whom he was held in very high esteem always. Present and former members of the Board were also present on that occasion and paid tribute to his dedication and loyalty for which he was noted.

All his life Michael Brady was concerned for the welfare of the under-privileged of society, irrespective of class or political affiliation, and his funeral to Celbridge last week was a tribute to the dedication of his life. Michael was a member of the Defence Forces during the Emergency. He was also a member of the Maynooth Brass and Reed Band and I believe, lead the parade in Croke Park on many an occasion. Predeceased by his wife in the early seventies, he will be missed by his daughters, colleagues and many friends. May he rest in peace.

Will YOU be a drowning statistic by the end of the summer?

GUS SHEEHAN

This is an appropriate time to ask this question as the summer approaches and the experts have predicted record fine weather which should be ideal for all types of water sport activities. The area of activity is vast. Ireland has almost 4,000 miles of coastline and hundreds of rivers, lakes, canals, etc. Water sport enthusiasts at home and increasingly from abroad appreciate the benefit of our country's abundance of comparatively unpolluted waterways.

Water sports – canoeing, sailing, power-boating, skiing, surfing, angling, scuba diving – all have increased in popularity over the years. All are healthy forms of recreation to be encouraged. All, however, also bring their problems mainly caused by inexperience. The number of drowning accidents has averaged out at 150 per year in the period 1975 to 1977. The following is a breakdown of where drownings occurred during this period.

Beaches:	127
Rivers:	124
Piers:	45
Lakes:	23
Canals:	18
Farmyards, Backgardens:	9
Swimming Pools:	4
Other:	45

The cause of drowning accidents is vitally important in order to consider what preventive action is needed. Analysis of information provided on drownings during this period reveals the main causes of drownings to be:

Self Inflicted:	137
Farmyards, Backgardens, Lack of supervision of children:	84
Swimming, dipping, attempted rescues:	58
Boating and fishermen:	27
Boats and watersports:	27
Drove off quay walls:	15
Intoxication, direct or contributory cause:	36
Other:	52

What can be done and what is being done to prevent recurrence? The Irish Water Safety Association prevents loss of life through drowning accidents by the promotion of a comprehensive programme for the teaching of water safety and life saving in all areas of the country. The main activities of the Association include:

- The running of courses throughout the country for the general public in basic swimming, swimming rescue and resuscitation.
- The certification of suitably qualified persons.
- The testing, training and equipping of lifeguards.
- The analysis of drowning reports with the object of preventing recurrence.
- The issue of documentation advising on all matters concerning water safety.
- The promotion of water safety publicity.
- The examination of outdoor swimming places from the point of view of water safety.
- Co-ordinating other water sport bodies in Ireland.

The Emblem



The two central wavy lines are the international symbol for water. The arm over the head and the head position illustrates that a rescuer must always keep subject in sight. The overall S stands for Sabhail, Snamh, Safety, Swimming.

The Association operates under a Council appointed by the Minister for the Environment, whose members include representatives of the Association of Municipal Authorities of Ireland, the County Councils' General Council, the County and City Managers' Association, the Department of the Environment.

The Council formulates policy and exercises financial control at national level, and is

assisted by the Executive and Technical Committees.

County Committees (which are elected locally) plan and implement local programmes of instruction and maintain contact with local authorities in water safety matters. Some 62 examiners and 346 instructors and swimming teachers operate through their county committees. All personnel give their time and services free to the Association.

HOW NOT TO BE A DROWNING STATISTIC

Don't swim alone.
Know the locality. If you don't ask about its safety.

SEASIDE:
Know what flags used on beaches mean. A red flag means it is DANGEROUS to swim.

Red over yellow flags mean that the area between two such flags is under the supervision of lifeguards.

If no flag is flown there are no lifeguards on duty.

- Swim parallel to the shore.
- Stay within your depth.
- If possible swim or dip where a lifeguard is on duty and stay within the red/yellow flags.
- Ask the advice of the lifeguards and HEED IT.

RIVERS AND LAKES:
Lakes have holes, muddy bottoms and weeds, all of which could be dangerous. Rivers have the additional hazard of currents.

Swim or dip only where it is considered safe.

Always swim with the current.

If you feel weeds, don't panic.

PIERS, JETTIES AND DOCKS:
Do not drive, cycle or play about in these areas. A false move can be tragic. If you must swim in these dangerous places, exercise extreme care at all times.

What the Green Paper says about the Health Services

— J. F. Reynolds

The recently published government Green Paper, **Development for Full Employment**, has come in for a lot of comment in the newspapers, some of it pretty caustic.

Naturally, most of the discussion centered on the proposals to promote economic growth. There has been comparatively little comment on the proposals for the health services.

The cost of health services has soared in recent years. In 1971/72 the total expenditure was about £97 million (£63 million coming from the Exchequer). This year the

estimated cost is a staggering £340 million, all of which must be borne by the Exchequer. The number of personnel employed rose from about 41,500 in 1971/72 to 54,000 at present.

These figures must be viewed in the context of the overall economy. The total work force decreased from 1,069,000 in 1965 to 1,036,000 in 1978, the most dramatic reduction being in agriculture. Yet, during this period personnel employed in public administration increased from 43,000 to 65,000, a rise of over 51%.

The Green Paper does not suggest that health expenditure must be reduced. In fact it appears to display an optimism that may not be warranted by saying that the problems in financing the health services should not be exaggerated. Nevertheless, it is emphatic that rising health costs cannot be allowed to pose excessive problems in the context of general economic and public finance policies.

The basic economic principle — which, after all is only common sense — is — stated in the Green Paper:

“Substantial social improvements cannot take place unless there is the necessary economic progress to support and finance them”.

It is stressed that the first consideration must be given to reducing unemployment in the agricultural and industrial sectors.

“In giving priority to Exchequer expenditure on job creation,” the Green Paper goes on, “it will not be possible to allow the simultaneous rapid development of other services, no matter how desirable these may be when viewed in isolation. Consequently, the growth of expenditure on these services cannot be as rapid as in the past. Inevitably restraint must be exercised in these areas where the bulk of Government spending takes place An overmanned public sector hinders

the development of productive employment in other parts of the economy and ties up scarce resources which could more effectively be used elsewhere. Expansion of public employment must, therefore, be vigorously scrutinised to ensure that it does not simply increase the burden on the productive sectors of the economy and it should not cut across continuing efforts to raise productivity and efficiency and eliminate over-manning in existing areas of the public sector.”

The Green Paper's proposals for the health services should be considered in the light of these principles.

The Government's first priority is stated to be the stepping up of activity in health education and prevention, with the long term aim of reducing the demand for expensive curative health facilities, particularly hospital facilities. These preventive measures, says the Green Paper, will facilitate the containment of health expenditure and will benefit the economy through the availability of a healthier and more productive work force.

This incredibly naive proposition would surely raise a tired smile from any senior British health administrator, struggling with the intractable problems of ever-rising expenditure, who remembers the optimistic hopes of the founders of the British National Health Service thirty years ago for a nation of healthy people who would have little need for hospital or curative services. The fact is that emphasis on education and prevention will inevitably increase the demand on the services. Nowadays people are being constantly advised to have medical check-ups. Even healthy people are told to consult their doctor before they undertake exercise. Medical science is becoming more and more sophisticated, and more costly techniques and equipment are being introduced. A cynic has said that the healthy person is one who has been insufficiently researched. The Green Paper's bland assumption

of a future when demand on expensive hospital facilities will be reduced to negligible proportions is just not good enough. The Green Paper goes on to say that until the benefits of the preventive programme are realised the major part of health expenditure must continue to go on the curative services and that hospital services will be maintained and improved. For this purpose, the capital allocation for health will be maintained at an adequate level.

Apart from this, the emphasis will be on community care and welfare services. The possibility is suggested of allocating resources from some of the present programmes to other programmes where greater advantage might be obtained from the use of the same resources.

The general medical service will come under special examination to ensure that it is efficiently and economically operated. Efforts to correct over-visiting and over-prescribing will be strengthened. This is an area where the Green Paper's controversial proposals for work-sharing could be considered.

The inequities and anomalies in determining "limited eligibility" which T. McManus wrote about in our March/April issue are recognised, and the Government will seek to eliminate these on the introduction of the new scheme of pay-related contributions.

The practicability of increasing income for health services from sources of finance other than the Exchequer is also being reviewed. The only alternative source mentioned in the Green Paper is hospital charges, which are at present below actual cost. It is suggested that these charges should reflect the actual cost of the services.

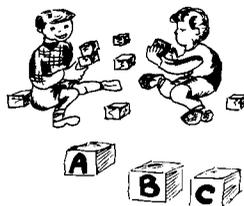
This is about all the Green Paper has to say about the health services. One can't help feeling that very much more hard thinking will have to be done if the problems of providing an adequate health service in the '80s are to be resolved.

knowing your ABC

Con Healy

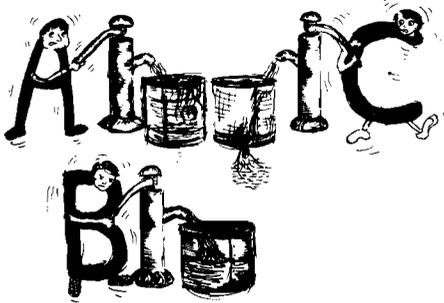
Tom and Pat knew their ABC — 'twas simple really. Long before cutting the apron strings to attend primary school, they were introduced to ABC, unaware perhaps of their long tailed family. They were also taught to keep their shins a safe distance from the open fire for fear of the ABC tattoo.

Tom and Pat were surprised at how smooth the three had become and wondered if they were indeed the same trio at all. 'Wouldn't they make you sick,' Tom remarked as they went their way. 'That's just it,' Pat answered, 'maybe they're in the food poisoning business.' 'If they are,' Tom said, 'it's our job to check them out and isolate them.'



Three days later an outbreak of food poisoning occurred and Tom and Pat searched out the cause. They had it traced to a meat dish at a local restaurant and luckily found some leftovers. Bacteriological examination revealed the causative organism as none other than C. 'Twas bad operational hygiene in the kitchen' Tom said 'that allowed that miserable C to cross contaminate other dishes and do you know what he calls himself now?'. 'Let me guess' Pat replied — 'I'd say C. Welchii!' 'Exactly' said Tom 'and sometimes Clostridium Perfringens'. 'The others are in the same rotten game then' said Pat. 'Indeed they are and I have proof that A is known as Staphylococcus Aureus and talk about people living in your ear, but this fellow lives in peoples' noses and skin lesions ready to spread his poison on to food at the first chance'.

Some years later, Messrs A, B and C were to provide many headaches as they came to life in Maths problems. A dug a ditch in 3 days, B in 4 and C in 5. They also filled bath-tubs and cylinders. A was always the best of the three, B a good second but C could not be blamed for finishing third as his cistern usually leaked.



'I must say you have been doing your homework' said Pat. 'Anything on B?' 'Yes, I have him isolated too'. 'It must be serious (B'Cereus) so for him or is he the Bacillus of Typhoid Fever?'. 'Precisely' said Tom 'he is what we used to call B. Typhosus and he has been round the world. If people would only realise how unwittingly they can assist these characters in breaking down our hygiene procedures'.

When Pat and Tom advanced to third level college, here was A and B again with C a little less conspicuous. In the Society debate, the argument for and against was supported by (a) and (b) now adorned by brackets. (c) did contribute additional support to the more detailed argument.



But Tom and Pat had almost forgotten about ABC until one day as public health officers, they happened to run into them. The three appeared very impressive and yet they had that mean and hungry look about them.

After exchange of greetings, A said: 'We have given up that school-boy stuff you know!'. 'Yeh!' B said 'that was kid stuff'. C, not suffering any complex from his earlier roles, added thoughtfully 'Yeh!, Yeh! We are in the big time now!'.

'Tis hard to credit that these seemingly harmless fellows of long ago could have become the enemy of the people' said Pat. 'Well, it's not that dismal a story' said Tom 'they are not really the same fellows you know; the ones we knew are now Vitamins A, B and C. These are the black sheep of the family'. 'It's worth knowing your ABC all the same' said Pat.

In this age of euphemisms and labels, when a pleasing expression or term is more acceptable than a plainer and often more accurate one, you might well say that Trust is concerned with the "vagrant". Very few years ago the words "dossers", "spunkers", "winos", "skippers", "dippos" and so on might well have been used to describe our clients, but not any more. Today "drop-out", "itinerant", "person without settled way of life", "vagrant" or the "un-attached" are the convenient catch-words or phrases preferred by society. But somehow they don't fit: an alcoholic is different to a drunkard or a wino, a senior citizen is not quite the same as an aged person and a drop-out does not have quite the same connotation as misfit.

What these people have in common is that they are homeless.

Homeless means carrying all your possessions on your person.

When you are homeless you have no friends, you have no say in what society does for you, you have no vote – because you may not be on the Register.

If you are homeless you belong to no definite area. A medical card is an important possession for a poor person, but if you have no fixed address, there may be delays in receiving and returning forms. Without a card you cannot get dental treatment, optical benefits or chiropody. A homeless person walking the streets all day surely needs regular chiropody.

How do the statutory health and social services cater for the homeless? They are entitled to free medical care, but do they always get it? There is a lot of referral work in our services, but a cynic might be excused for calling this simple buck passing. Social workers, administrators, doctors and nurses are all involved. In our comfortable jargon we talk about "role playing", "casework", "inter-disciplinary approaches", etc. but do we really get together as a team of human beings to help other human beings who are part of our community and are crying out for help?

TRUST is a private charitable trust, comprising members of voluntary and statutory bodies. A doctor, nurse, social worker and some volunteers provide a medical and social service for the homeless in Dublin City. They make contact with the homeless, who come from all over the country and all walks of life throughout the hostel network.

TRUST operates from Health Centre Annexe, Lord Edward Street, Dublin 2, but most of the work takes place in the hostels and day centres.

TRUST would welcome your support in money or kind. Men's clothes – especially socks, underwear and shirts – are urgently needed.

Contact Alice Leahy, Health Centre Annexe, Lord Edward Street, Dublin 2, telephone 758372 – office hours.

Helping the Homeless

*by
Alice
Leahy
and
Des
Kelleher*

The Eastern Health Board accepted that something should be done when one of us (Alice Leahy) was appointed to work with these people. The service started in March 1975 in a small way. It received a great boost when it came to the attention of Mrs. Anne Rushe of Shankill, Co. Dublin.

Anne Rushe has been involved for some years in the Simon Community's "soup-run" and was familiar with the needs of the hostel dwellers. Despite suffering from a terminal illness she felt the service should be further developed by establishing it on a formal basis with some full-time professional personnel – especially a doctor. She decided to make money available for this purpose and she arranged for a small group of experienced and committed people to come together and take the necessary action.

As a result TRUST was formally established in November, 1975. Anne Rushe was one of the original trustees and up to the time of her death in March, 1976 she gave every possible support and encouragement. She is remembered with love.

Even the name of our group was not lightly chosen. The dictionary defines "Trust" as "faith, belief in good men, a reliance on leaning upon something in the confidence that it

can be depended upon". Come to think of it, how apt. However, that's all very well and high sounding, but what about the practical aspects of Trust, what can it hope to accomplish in dealing with these types of persons, what are its aims and how does it go about achieving them.

Well, perhaps our most important function and indeed what in our innocence, we thought was the only need we would have to meet is the provision of a bridge or link between, shall we say the vagrant and the settled community. Though we are quite concerned with helping the lame dog over the stile we are even more concerned about his lameness. Because of the great gap that exists between our people and, for example, the statutory health services, a great amount of time and effort goes into giving and securing adequate medical care for our clients. Formerly, the main source of that care was the O.P.D.'s of the general hospitals, where the staffs, however willing to help, were faced with cases and problems with which their service just could not cope. A moment's thought on the difficulties confronting a person of no fixed abode in obtaining services will help to highlight the barriers and obstacles that beset the path of such a man seeking



Alice Leahy – no doubt wondering “what next?”

even primary medical care. Some of the consequences of this unmet need were that on top of all his other woes the unfortunate man was host to a great variety of untreated ailments and conditions. This state of affairs has been remedied, and we can now offer instant and adequate medical care to even the most unfavourable or unprepossessing caller. While a major proportion of our cases are casuals, we have built up a very large register of regulars. This has meant the building up of an extensive and comprehensive system of medical records, coupled with a fruitful liaison with the medical and para-medical staffs of the hospitals. A bonus from this operation is that for the first time a follow-up service has developed, and continuing contact and supervision provided. The results are most heartening.

This service is provided, not only at our centre in Lord Edward Street, but by visiting the hostels, shelters and day centres in the city. Close contact is maintained with the staffs and voluntary workers of these agencies and also with the Gardai and helpers of the Simon community. It must be said that since the majority of our clients are psychiatric cases, much time and endeavour goes into providing not only the requisite

medical aid, but also in counselling and comforting these tragic victims.

In our short existence news of our work has spread surprisingly and we now find that instead of Trust being a referral agency, it is to us that the most difficult and unsavoury cases are referred. Many and varied and at times quite astonishing are the sources of these referrals. Indeed it would appear, with apologies to Sidney Smith, that benevolence is a natural instinct of the human mind; when A sees B in distress, his conscience always urges him to entreat Trust to help him. Also we have been pushed willy-nilly into other operations, which were not part of our original plan. For instance our care of the aged residents of hostels and shelters would require a separate article devoted entirely to this aspect of our work.

We very quickly found out the futility of trying to clean up a verminous man if all he had was the infected clothing in which he stood. To meet this obvious need we developed our clothing service. Appeals were made to the public through the radio and press for used clothing and the generous response has enabled us to transform many a filthy and objectionable man into a quite presentable human being. The next logical step was our barbering service. Hairwashing and cutting plus shaving soon became a regular part of our activities. Some of the transformations resulting from these combined services surprised even us. Nevertheless, as each new need appeared and was met yet another was uncovered and this is still the pattern, stretching our ingenuity and resources to the very limit.

Not all our battles are victorious, our lame dogs may become more mobile, cleaner, healthier, even happier, but they stay lame and sadly and inevitably the end comes. Even in this a need came to light, a need both sad and distressing. For too often the only service available was the public service funeral, a plain coffin, an unmarked grave.

Thanks to the wonderful co-operation we received, all this has changed and the dread of the pauper’s funeral has been lifted from the minds of our friends. The results are totally unexpected and at times touchingly dramatic. After the first funeral, the word of what had been done spread rapidly through our little world. Unwittingly, it appeared that in dignifying the dead we had uplifted the living. It had never been expected that because a man could now say to himself “well they won’t get rid of me like a dog when I die” that he would now stand that bit taller in his own estimation and so feel that he belonged. But it has happened and it’s no small thing.

ST. ITA’S NEWS

GAA – The play-off against St. Loman’s in the hospital league took place. Sixteen teams are entered and St. Ita’s are the form team.

Paddy (The Master) Doyle retires. This long threat has come at last. Paddy, a nurse, was renowned for his mercurial wit and humane approach to his patients and colleagues. We would have held on to him a little longer but he sprained his ankle racing home to see “Wanderly Wagon” one Saturday afternoon, and then began telling Kerryman jokes to the patients. At a reception in the Corballis Club Centre last May he was presented with a wallet of notes, a time piece, a few Woodbines Bon voyage, Paddy.

Trip to Killarney. About twenty of our patients went on a week’s holidays to Killarney recently. With the group went our Matron, Miss McEntee and the Hostel Supervisor, Mrs. Riordan. This was a new venture and proved a great success.

WICKLOW NEWS

Nurse Catherine Morgan has joined the Wicklow staff as Superintendent Public Health Nurse. As she is very interested in cycling and mountaineering Wicklow should be an ideal base for her.

Miss Ann O’Mahony, Senior Social Worker, has taken up duty in Wicklow and has since been joined by Mrs. Maura Maguire, Social Worker.

Miss Mary O’Brien, Clerk Typist has left the Wicklow staff to take up duty with the South Eastern Health Board in their Kilkenny office – thus bringing her nearer home. Wicklow’s loss is Kilkenny’s gain.

Updating Developments in Community Care Areas

Since our November/December 1977 issue two more Directors of Community Care have been appointed, Dr. Laura Murphy and Dr. Liam O Se. Dr. Murphy has been assigned to Area 5 (Dublin West) and Dr. O Se to Area 7 (Dublin North Central. Dr. O Se's assignment to Area 7 means that Dr. Patrick Quinn has now moved to Area 1 (Dun Laoghaire.)

The table herein shows for each area, the director and administrative support officer, the senior social worker and the superintendent public health nurse and where they may be contacted.

COMMUNITY CARE AREA	DIRECTOR OF COMMUNITY CARE & MEDICAL OFFICER OF HEALTH	SENIOR SOCIAL WORKER	SUPERINTENDENT PUBLIC HEALTH NURSE
1.	Dr. P. Quinn, (Temp. address) Our Lady's Clinic, Patrick St., Dun Laoire, Co. Dublin. Tel: 808403 Adm: Miss Mgt. Mulryan, Assistant Section Officer	Miss P. Morrissey, Community Care Services Sussex Street, Dun Laoire, Co. Dublin. Tel: 808166	Miss A. Hanley, Our Lady's Clinic, Patrick Street, Dun Laoire, Co. Dublin. Tel: 808403
2.	Dr. V. Barry, (Area H.Q.) Community Care Offices, 11/13 Clonskeagh Rd., Dublin 6. Tel: 961666 Adm: Mr. J. Keppel, Assistant Section Officer	Mr. John Quin, (Area H.Q.) Community Care Offices, 11/13 Clonskeagh Road, Dublin 6. Tel: 961666	Miss R. Murray, (Area H.Q.) Community Care Offices, 11/13 Clonskeagh Road, Dublin 6. Tel: 961666
3.	Adm: Mr. Ray Kavanagh, Assistant Section Officer	Sr. M. Finnan, Terenure Health Centre, 68 Terenure Road North, Dublin 6. Tel: 904647	Mrs. M. Horgan, Carnegie Centre, Lord Edward Street, Dublin 2. Tel: 776811 Ext. 287
4.	Dr. J. Walker Health Centre (Area H.Q.) Old County Road, Dublin 12. Tel: 753231/752921 Adm: Mr. T. Cahill, Section Officer	Mrs. L. Lunny, Health Centre, Old County Road, Dublin 12. Tel: 753231/752921	Mrs. M. Breslin, Health Centre, Old County Road, Dublin 12. Tel: 753231/752921
5.	Dr. L. Murphy, Community Care Offices, Cherry Orchard Hospital, Ballyfermot, Dublin 10. Tel: 364702 Adm: Miss M. O'Donnell, Assistant Section Officer	Miss C. McAndrews, 11 Claddagh Green, Ballyfermot, Dublin 10. Tel: 366255	Miss K. Cahill, Carnegie Centre, Lord Edward Street, Dublin 2. Tel: 776811 Ext. 287
6.	Dr. K. Quinn, (Area H.Q.) Upr. Grangegorman, Dublin 7. Tel: 309390 Adm: Mr. N. Doyle, Assistant Section Officer	Miss R. Duffy, St. Helena's, Finglas, Dublin 11. Tel: 344319	Miss E. Duffy, Raven House, Finglas, Dublin 11. Tel: 343644 Ext. 45
7.	Dr. L. O Se', (Area H.Q.) Nth. Clarence St. Health Centre, Dublin 1. Tel: 743715/743716 Adm: Mr. John Leech, Assistant Section Officer	Miss N. O'Daly, Acting, Social Work Department, Killarney Street, Dublin 1. Tel: 749519/722553	Miss E. Horgan, North Clarence Street Health Centre, Dublin 1. Tel: 743715/743716
8.	Dr. P. K. Murphy, (Temp. address) 39 Tara St., Dublin 2. Tel: 777031 Adm: Mr. Joe Collins, Assistant Section Officer	Mr. P. Wynne, Kilbarrack Health Centre, Dublin 5. Tel: 322616	Miss M. O'Donnell, North Strand Health Centre, Dublin 3. Tel: 742466/742467
9.	Dr. A. Eustace (Acting), (Area H.Q.) Basin Street, Naas, Co. Kildare. Tel: 045-66001 Adm: Mr. T. Barry, Section Officer	Mrs. M. Cummins, Basin Street, Naas, Co. Kildare. Tel: 045-66001	Miss E. Fulham, Basin Street, Naas, Co. Kildare. Tel: 045-66001
10.	Dr. C. Warde, (Area H.Q.) Kilmantin Hill, Wicklow. Tel: 0404-2324 Adm: Mr. J. A. Duggan, Section Officer	Miss Ann O'Mahony, Kilmantin Hill, Wicklow. Tel: 0404-2324	Miss C. Morgan, Kilmantin Hill, Wicklow. Tel: 0404/2324
CHILDREN SERVICES:		Miss B. Rutledge (Acting), 1 James's St., Dublin 8. Tel: 757951	

UNDERGROUND WATER POLLUTION

by John O'Reilly,
Health Inspector

The European Commission has just sent the Council of Ministers a draft directive dealing with the proper means of reducing or eliminating the pollution of underground waters by dangerous wastes. The directive is based on the principles of the Community's Environmental Action Programme.

Underground waters harbour biological life, and are an important part of the Community's reserve of drinking water. Unfortunately they are being increasingly contaminated by hydrocarbons, nitrates and other toxic substances.

The presence of dead fish in rivers is an immediate warning that the waters have been polluted. But when an ingenious polluter dumps toxic waters directly underground the contamination will only become evident the day we have to rely on our underground resources to supply our drinking water. Then it will be too late.

On average, 70% of the Community's drinking water reserves are from underground sources. The figures for individual countries are as follows:

Italy	93%
Germany	71%
Belgium	71%
Luxembourg	70%
Netherlands	64%
France	50%
U.K.	31%
Ireland	14%

These underground reserves are also a useful balancing factor in times of drought. In addition, the filtering properties of the soil give a certain amount of protection against certain other types of pollution, and make the water even purer.

On the other hand, the underground waters are less able to change and break down other substances which enter them. The purification of water from underground sources can be consequently much more expensive.

Current legislation in force in member states of the Community is somewhat limited and varies widely between countries. Community measures are consequently required. Certain measures have already been taken to prevent the pollution of the general aquatic environment (May '76). But the Council of Ministers postponed the more delicate problem of underground waters and requested the Commission to draw up a specific proposal on the subject. The Commission's draft has two classifications of pollutants likely to be dumped in our underground waters. The first list contains substances which are highly toxic, bioaccumulable and persistent, e.g. hydrocarbons, mercury, carcinogenic substances – biocides, cyanides, fluorides, and some twenty metals.

A second distinction has been made between direct and indirect wastes. Direct wastes enter undiluted through channels or pools and their polluting force remains intact. Indirect wastes filter through soil and rock before entering the underground waters and their toxicity is slightly reduced.

St. Colman's Hospital, Rathdrum has lost a good friend on the departure of Rev. J. Callan, P.P. who has been appointed to Naul. Fr. Callan's interest in the welfare of the local community was very evident by his concern at all times for the welfare of the aged and handicapped. The patients at St. Colman's will miss him and we wish him well in his new appointment.

District Hospital, Wicklow
Councillor P. Hickey, Chairman of the Board attended with members of the Visiting Committee and the public representatives at Wicklow District Hospital on Thursday 22nd June to formally convey the Board's thanks to the East Wicklow regional Youth Council for their generous contribution towards the welfare of the patients. A Pram Derby organized by the Council at Wicklow on 21st May raised almost £1,500 and on the suggestion of Fr. McCarthy a Patients' comforts Committee is being set up on which the Matron and some members of the hospital staff will be represented. Councillor Hickey paid a special tribute to the young members of the community who played a big part in sponsoring this venture. He had a special word of thanks for the leadership shown by Fr. McCarthy Chaplain to the local vocational school and to Father O'Byrne, C.C., Avoca.

Under the proposed directive, all direct wastes from list one are completely banned. Indirect wastes from list one and direct wastes from list two may be dumped subject to authorisation, but the requirements are less detailed. In all cases, authorisations will not be given until the hydrogeological state of the receiving zone has been analysed, to eliminate any risks.

The proposal will now be examined by the European Parliament and by the Economic and Social Committee. The Council of Ministers will have the final responsibility of deciding for or against.

The Local Government (Water Pollution) Act, 1977 which came into operation here on the 1st May last, is an enabling Act whereby Regulations can be made to cover various aspects of pollution control and administration. When the proposed directive is adopted there should not be any difficulty in applying its provisions to underground waters in this country.



An enthusiastic and representative group attended the first AGM of the Society. The following were elected: Liam Dockrell, St. Brendan's – Captain, Aine Flanagan, James's St. – Treasurer, Kay Dolan, James's St. – Secretary, and the Committee are: Teresa Landers and Pat Sheehan, James's St., Bob Fogarty and Ita Hanley, St. James's, Rosario Browne, Kildare, Rose O'Neill, Wicklow, John Moorehouse, Nth. Strand Health Centre, Paddy Reilly, 56 Dame Street, Cyril McElree, Emmet House, Eddie Dunphy, Newcastle.

Membership: Full membership of the Society is open to serving and retired members of the staff of the EHB and St. James's who hold official golf club handicaps. Staff without club handicaps may become associate members of the Society by attending three outings as visitors and returning a card each time. Membership fee for both categories is £3 and will be payable to members of the committee at the next outing.

Next Outing: This has been arranged for Edmonstown Golf Club, Rathfarnham, on 14th July 1978, tee reserved 2.30 pm to 4.45 pm.

Colette Duggan, Clerk Typist in the North Western Health Board is seeking a transfer to the Eastern Health Board. She is working in the Community Care office in Carrick-on-Shannon, tel. Carrick-on-Shannon 308. Anyone interested in transferring?

Kevin Quinn retires

Kevin Quinn, Senior Executive Officer, Secretariat and Secretary to the Board since its inception has retired. At a reception held at the Staff Restaurant, St. James's Hospital he was seen off by his many friends, Board members and officers, including some old friends from the Dublin Corporation. The C.E.O., Mr. E. O Caoimh, presented him with a silver salver.

Kevin, who has retired early, has served just forty years in Dublin Corporation, Dublin Health Authority and the Eastern Health Board. Before that, rumour has it, he used to be a bookie. True or not, he was a dab hand at calculating the odds. Immediately before the Dublin Health Authority he was a one-man budgetary control section in the Public Health Department, and on the establishment of the D.H.A. he became the Accountant's budgetary controller officer. With his inborn appreciation of figures, the preparation of estimates was child's play to him. When the Eastern Health Board was formed he was promoted to S.E.O., Secretariat and Board Secretary. The estimating work was given to the computer.

Kevin will be remembered by his friends for his unflinching good humour, his inexhaustible fund of stories about the far off days in the Dublin Corporation where everything was always done right, and his willingness to become involved in staff activities. He was a prominent member of the Union for years, and a keen supporter of Astra and the Social Club. Even still he is on the Social Club's finance committee who are exploring ways and means of getting funds for a new staff sports complex. An expert bridge player, he used write a bridge column in CONTACTS.

WE'LL MISS HIM.

Fostering Campaign

The Foster Resource Group (Mrs. Deirdre McTeigue, Sr. Maeve O'Sullivan and Mr. Charlie Delap) are very pleased with the results of their publicity campaign to enlist more foster parents. The initial 278 enquiries have produced 67 formal applications. They are particularly impressed with the quality of these applicants as they made their applications while aware of the problems inherent in fostering. These applications are then processed by the local community care team. The Group were surprised to find that about half of the prospective

foster parents were interested also in short-term fostering. Many of those seeking children for long-term fostering were also anxious to adopt.

The publicity campaign has eased up to allow the staff to clear the existing applications. However, further meetings and publicity are planned.

The Group are very grateful to all the staff who are displaying the car stickers. It was heartening to get such co-operation from one's colleagues, they said, and the stickers serve to remind the public of the need for foster parents. More stickers are available from the Group in James's Street (Tel. 757951/Ext. 364).

ST. LOMAN'S HOSPITAL

Hospital Shop: Patients and staff at St. Loman's Hospital extend a warm welcome to Mrs. Phil Sweeney who has taken over the running of the shop from the Canteen Committee. Mrs. Sweeney is operating the shop as a commercial proposition and has already extended the range of products and the opening hours. We wish her continued success in her venture.

Congratulations to Dr. Catherine Gillespie on passing the first part of her examinations for membership of the Royal College of Psychiatrists.



Flic-en-Flac is a gorgeous little place on the west coast of Mauritius. The Indian Ocean washes ashore over a rugged reef making it a haven for swimmers. The lazy ones can spread themselves on the fine sand and, with the help of temperatures constantly in the seventies, concentrate on working up their tans.

Eileen Crookes of Community Care both swam and sunned herself. She also took off in a glass bottomed boat beyond the reef to view, and be viewed by, the local marine inhabitants.



Mauritius, which is a coral island, is about five hundred miles off the east coast of Africa. It is quite tourist conscious with a good selection of hotels, ranging from the family-type to the highly exotic variety.

INTER HOSPITALS SOCIAL & CULTURAL CLUB

TRAVEL:

Trip to Paris — Oct. '78
Depart Fri. 27th
— Return Mon. 30th late
£63.00 incl. B/B and all taxes

Details and booking
please phone: 502142
Mr. Jim Raphbone,
Dublin District Milk Board,
Bluebell,
Dublin 8.

The island's economy is based on tourism, and tea and sugar plantations. The islanders are a mixed race of Chinese, Indian, European and Mulattoes and they speak mostly French.

Down the centuries the place has been in the hands of both British and French. Eileen found that the colonial architecture in the towns gave the houses quite an air. She was also intrigued by the activity in the markets which were brisk, bright, busy places.

Night life is a bit quiet and is centred in the hotels. Many's the good night she had wining and dining and watching the natives singing and dancing and generally doing their thing. The hotels also show films but "Charlie's Angels" turned her off completely. The Angels speaking American can be bad enough but when they developed divers' tongues and launched forth in French, she just gave up.

Although Eileen and her friends hired a car to see as much as possible they found that time flew and their two weeks was too short. She regards Mauritius as a dream place for a holiday and would love to return.

How much? Well, the most basic cost is around £387 flying from London and includes guest house accommodation (no meals provided) for two weeks.

Book Reviews

Planning in the E.S.B. by John Roche.
Institute of Public Administration.
£6.71

State sponsored bodies play an important part in the Irish economy. In 1977 they employed 60,000 people, 6 per cent of total employment and over 20 per cent of public sector employment. Their combined investment in that year was £350 million, which was over half the public capital programme.

Yet little is known about how these bodies organise and plan their activities to achieve the broad objectives established for them by legislation or about how these objectives are interpreted as a basis for action in the changing environment. To remedy this defect the Institute of Public Administration propose to publish a series of reports describing the planning systems in operation in state-sponsored bodies and the factors that have influenced the systems adopted. This book is the first report of the series.

The planning system of the E.S.B. is described in detail, the emphasis being on what is actually being done rather than a theoretical discussion of planning. The study does not attempt to evaluate or compare planning systems.

The roles of the Board and the Chief Executive are described, as well as the overall impact of government action and policy.

The fundamental task of the E.S.B. is of course the supply of electricity, and the planning policies and procedures are considered under the three components of the supply system — generation, transmission and resources. There follows a detailed account of the manpower and resources planning, i.e. financial planning.

The organisation of the personnel department is interesting. Under the Director of Personnel are two managers, manpower and industrial relations. The manpower manager with the assistance of a senior specialist has five units, viz. manpower planning, development, recruitment, training and medical services. The industrial relations manager has two industrial relations and personnel services.

The basic purpose of the study was to describe the planning system in existence, how it evolved and how major planning decisions are made within the system. Mr. Roche has succeeded admirably in fulfilling this purpose. My only criticism is that he does not indicate the numbers of administrative staff engaged on this work. It would be helpful to know the number and status of staff available to the directors of the E.S.B. for their planning and administrative functions.

This book should be of great value to students of administration and all those concerned with the administration of the large organisations in the state, including health boards.

Years of Experience; a booklet for the elderly. *National Social Service Council.* 40p post free

The British Government have just published a Green Paper on the elderly and intend publishing a White Paper next year. Our own government have not yet formalised their proposals, but there is hardly any doubt that they must do so if we are not to lag too far behind our cross-Channel neighbours.

The National Social Service has produced an admirable basis for proposals for the Irish scene in this little booklet for the elderly. It gives excellent advice to those approaching retirement, those already retired and all who are concerned about the problem of caring for the elderly.

It describes in detail the extent of the housing, health and welfare services at present available for older people and, what's more, tells people in simple terms how they can find out what services are available to them.

Perhaps the most useful chapters for retired people and those about to retire are those dealing with safety and comfort in the home, diet and nutrition, finance, and work and leisure.

This inexpensive booklet should be widely read. It is attractively produced, packed with good advice and good humour. (There are some very funny cartoons).

Its theme is stated on the first page: "Apart from exceptional cases of ill-health, elderly people should be able to enjoy life to the full, but in order to do this, it is essential to plan ahead".

New A/CNOs



Cherry Damery

Cherry Damery who has been running group homes for ex-psychiatric patients since 1974, has recently been appointed Assistant Chief Nursing Officer, Child Psychiatric Services. All her friends in North Circular Road will miss her cheerful, bustling presence, but thanks to Cherry they will manage to get on without her. One thing above all they learned from her was how to be independent.

Christopher Slevin has also been appointed Assistant Chief Nursing Officer, Child Psychiatric Services. He was acting in that capacity for the past year.

Chris was formerly manager of St. Dymphna's Training Centre for Autistic Children at 197c North Circular Road. He is also Secretary/Director of Gheel Training Group. This is a voluntary enterprise catering for the needs of adult autistics.

He received his training in St. John of God's Hospital, Stillorgan. He has been attached to the Child Psychiatric Services since 1970. Recently he was awarded the Diploma in Hospital Administration.

We wish Cherry and Chris every success in their new appointments.

FEET FIRST at CROOKSLING

The day was wet and miserable, but despite the weather doing its worst, some 150 people turned up to bring a ray of sunshine to the patients here at Crooksling. The occasion, our first ever Sponsored Walk, held on the last Sunday of April. It was a resounding success thanks to the many people including the E.H.B. staff, the locals and our own staff who braved the weather. We hope nobody suffered ill effects as a result.

Mr. Mark Clinton, T.D. sent us on our way with an encouraging talk. He was joined also by Mr. P. Swords. With the money collected (which has exceeded our expectations) we will purchase a colour television for the patients in Unit B. In fact the patients are very excited and really looking forward to viewing it. If any money should be left over, you can be sure the patients will benefit. Words cannot really express our thanks, but to all who gave up their Sunday to take part and to all who contributed so generously, a very BIG THANK YOU.

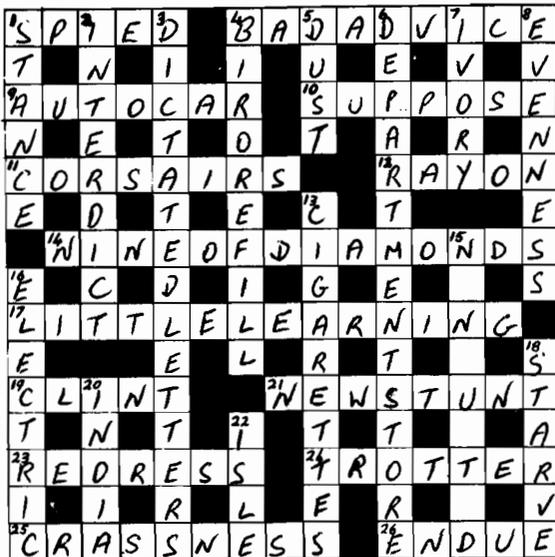
"THE GREAT TRAIN ROBBERY" — in Naas!

One could be forgiven on a Monday morning for thinking one was still in the land of sweet dreams after a hot weekend stretched in the June sunshine. When Eastern Health Board staff reported for duty on Monday last they found Basin Street in Naas and the parking space at the rear of the E.H.B. offices were agog with men and women in Edwardian costume, with a smattering of legal-looking gentlemen of a past century. Before long, the mystery was solved. Taking part in scenes from "The Great Train Robbery" in England in the last

century (not the famous one of more recent memory) was a retinue of stars, including Sean Connery and Donald Sutherland, as well as many extras of all ages and sizes. The "set" was in the main court room of the Courthouse in Naas, chosen, I believe, because of its resemblance to the Old Baily in London. Other scenes for the film are being shot in Dublin's Heuston Station and Phoenix Park, and in Co. Westmeath.

And then they went and left us with the long flat hours of Tuesday, Wednesday

CROSSWORD 15



Name

Address

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

ACROSS:

- Spotted P. dies in agony. (5)
- Notice evil after evil – that's not good counsel. (3,6)
- A topless fur coat in disarray will get you places. (7)
- Pretend to stand after drink. (7)
- Pirate cars. (8)
- A fish on artificial material. (5)
- Don and Maid of Ennis conjure up the curse of Scotland. (4,2,8)
- Small pound gaining is a dangerous thing. (6,8)
- C. Cotton – Eastwood's first name. (5)
- Addition to magician's repertoire – nuts – went wrong. (3,5)
- Set right or about to set in order. (7)
- Summer is about right for a brisk walker. (7)
- Coarseness of thick cape. (9)
- Supply seen in stores when due for stocktaking. (5)

DOWN:

- Position of broken secant. (6)
- Bury latin words without a prohibition. (9)
- Ordered literary culture for the typist? (8,7)
- Broken bier or top-up to keep pen going. (4,6)
- Fine particles of broken stud. (4)
- Go men to rest drunkenly in big shop! (10,5)
- You'll find it in teeth or in creeper. (5)
- Almost never rising above loch shows uniformity. (8)
- Setter with headless hag in charge coming up.
They might be the death of you. (10)
- Legal action withdrawn because of mixed-up cards? (9)
- Eel slippery about endless artifice is shocking. (8)
- Rave madly after saint and deny oneself nourishment. (6)
- Foreign land recorded in Bedouin diary. (5)
- Is the French land surrounded by water? (4)

St. James's Social and Sports Club

SPORT

Basketball: The Inter Hospitals ladies basketball competition is due to begin very soon. After finishing runners-up in 1977, this year our team is short some players. Therefore, I appeal to all potential players who are willing to participate to contact B. Chaney 757951 ext. 293 or S. McCann 719222, Welfare Section, immediately.

Gents' Soccer: The Civil Service League is well under way. Our two representatives are keeping the E.H.B. – St. James's colours flying high. However, our one big headache is the problem of obtaining a pitch, or even a patch of grass for our home matches. Any offers????? Everything considered – even for the '79 season.

Squash: The Beecham Research Inter Hospitals mixed squash tournament was run off recently. Our club entered a team for the first time in this competition under the captaincy of Fr. T. Pelan, Chaplain to St. James's Hospital. The competition was very keenly fought, and it was only after a tremendous "nail biting" final that St. James's emerged as winners by the narrowest margin over a gallant Coombe team. After our win – a "rare ould nite" was had by team and supporters in – in – in – I still can't remember!!! Anyway! congratulations to Fr. Pelan and his team on their success.

Ladies' Soccer: Our team are leading the second division of the Civil Service League by a wide margin with only a few matches remaining.

Mixed Soccer: Inter Hospitals competition now in progress our two representatives are having a most enjoyable run – both on and off the field.

That's all for now folks – but do enjoy your sport with us.

Solution to Crossword No. 14

ACROSS:

- Manicure. 5. Flight. 10. Reveals.
- Abscond. 12. Hard nut to crack.
- Encode. 14. Well-bred. 17. Scot-free.
- Astute. 22. As good as a feast.
- Apostle. 25. Caution. 26. Endure.
- Demeaned.

DOWN:

- Mirthless. 2. Never a cross word.
- Chained. 4. Resite. 6. Lustral. 7. Good circulation. 8. Tidy. 9. Bayonet. 15. Deep-toned. 16. Seed bed. 18. Floater.
- Suffuse. 21. Psyche. 23. Rave.

WINNER:

Terry Bollard, Budgetary Control Section.

*The grass we take for granted is nature's close wove skin,
 A haven for the insects and all that dwell therein.
 It should be treated kindly and given all it's due,
 For very soon, alas, my Friend, it's roots will cover you.*

*And then too late you'll treasure it, and on it meditate,
 Admiring it's soft texture, whilst you bemoan cruel fate
 That when in life you had the chance to alter things somehow,
 But were content to go your way – you didn't want a row.*

*You plainly saw what happened when pre-fabs started in,
 With J.C.B.'s and lorries, deep cuttings gouged its skin.
 You didn't think it worth your while to agitate or fuss
 At such vile desecration – you left it up to us.*

*But we, the silent army, that has been mute too long,
 Will in defence of birthright, fight now with verse and song;
 Will tell the faceless planners, just let our green sward be,
 To keep their concrete boxes, or build them deep at sea.*

*And if we are not heeded it will surely come to pass
 A robot will replace the man to mow the plastic grass.*

– Our Gardener,
 The potting shed.