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# CONTACTS

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VOLUME 3 NUMBER 2 THE JOURNAL OF THE EASTERN HEALTH BOARD MAR/APR 1977



*"In a quiet watered land  
A land of roses"*



so runs the poet's introduction to "St. Ciaran's City Fair". O.K. so its at St. Laurence's City and a traffic-jammed Pearse Street is no quiet land, but the water can be found almost at the doorstep in the Liffey and roses flourish in the Trinity College grounds, which the upper floor rear office overlooks. While the records of "countless generations" of Dubliners from 1864 may slumber there, no such peace is found by the staff in what is possibly the busiest public office of the health board.

Nevertheless, it is true, I think, that to the majority of the health board staff the existence and operation of the office of the Superintendent Registrar of Births, Deaths and Marriages is "terra incognita". To remedy this state of abysmal ignorance may I borrow from Charles Dickens and briefly look at registration past, present and future.

### NATIONAL REGISTRATION

Formal national registration commenced in 1864 when advantage was taken of the existing dispensary district network and the dispensary doctor was given a lien on registration in his district. The Dublin area divided into 45 districts whose annual registration varied from as little as 26 to over 8,000. Each union area had a superintendent registrar. Registration services were, in general, only available during dispensary hours and meant sharing time and waiting space with those attending for medical, pharmacy and assistance services. Registration of births and deaths required attendance of a qual-

ified informant to sign the register. Marriages in Catholic churches were registered on receipt of duly completed certificates signed by the contracting parties, two witnesses and the officiating clergyman. Non-Catholic church marriages were dealt with by separate district

registrars of marriages who also performed civil marriages. At the end of the quarter each registrar returned to the superintendent a copy of every entry made by him during the quarter. This return, when checked by the superintendent, was forwarded to the Central Registry Office in the Custom House where they form the basis of the central register for the whole country. Completed registers and original marriage certificates were, at each quarter check, taken into the custody of and stored by the superintendent registrar.

### A Cheerful Bunch —



**Pearse St. staff**

Back Row l. to r.: Maeve O'Sullivan, Andy Hill, Helena Hulbert, Gerry Delmar, Patricia Daly, Des Kelly, Mr. O'Reilly  
Front Row: Mary Farrell, Amy Brennan, Mary O'Donoghue

### REGISTRATION ACT 1972

This remained the general pattern till the passing of the Registration Act, 1972 when, to coincide with the introduction of the "Choice of Doctor Scheme", the district medical officer lien on registration was revoked. Existing district medical officers were given the option of holding their posts as registrars but future entrants to the "Choice of Doctor Scheme" had no claim to registration. To replace D.M.Os. a centralised registration scheme to be operated by health board clerical staff has been drafted. This results in the reduction of registration districts from 45 to 7. Similar plans will reduce the number of districts in Co. Kildare

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from 18 to 5 and in Co. Wicklow from 17 to 5 working to central offices in Naas and Wicklow town respectively.

### STREAMLINING THE SERVICE

It is realised that communities may have a feeling of neglect at seeing even minor services removed from local centres but as the "dispensary" service phases out, the only replacement feasible is the health boards own staffing. Naturally such staff can only be deployed where justified by the work load. Location of the proposed central offices has been influenced by available office accommodation, work load, transport routes and the provision, so far as possible, of full time Monday to Friday office attendance to replace the generally limited hours and days of the present D.M.O. attendance. While the immediate advantage to the public may be the extended hours of attendance and separation of registration services from medical and assistance officer queues, the opportunity for better training and more effective supervision of a limited number of full time registrars should result in a considerable upgrading of the quality of the service.

First move in the development scheme was the amalgamation of three districts in Dundrum/Stillorgan/Glencullen area, as Rathdown West, served by Pearse Street staff who also attend one afternoon per week at Stillorgan and Dundrum Health Centres. South City No. 5 (Kilmainham) was transferred to Pearse Street on retiral of D.M.O. The first of the outside full time offices has been opened at 49/51 Phibsborough Road with amalgamation pending on three of the eventual six districts to register at this office. The vacancy created by the retiral of the Rathfarnham D.M.O. opens up consideration of amalgamation with Rathmines (No. 2 district), Rathcoole, and Clondalkin where there are at present interim registrars. These districts are scheduled for eventual centralisation in Terenure Health Centre together with Tallaght and Terenure. The other groupings will be based at 191, Pearse Street, Parnell Road Health Centre, both full time, and part time offices at Dun Laoghaire and Swords.

## EHB ESTIMATES 1977

	Gross Expend. £	Income £	Net Expend. £
General Hospitals	10,219,500	836,400	9,383,100
Psychiatric Services	12,561,300	650,750	11,910,550
Community Care	20,752,800	97,200	20,655,600
Engineering Maintenance	1,566,200		1,566,200
Ambulance and Transport	1,103,600		1,103,600
Central Services	4,760,000	1,084,050	3,675,950
	<hr/> 50,963,400	<hr/> 2,668,400	<hr/> 48,295,000

The sum allotted by the Minister for Health for providing health services in Dublin, Kildare and Wicklow during 1977, after all income has been accounted for, is £95.85m.

The Department of Health will pay £47.555m. out of this sum to voluntary hospitals and homes for mentally handicapped persons in the Eastern Health Board area to cover the cost of services to eligible persons. The remaining £48.295m. will be paid to the Eastern Health Board.

At its meeting held on 3rd February, 1977 the Eastern Health Board approved an Estimate of Expenses for the year 1977 totalling £48.295m.

The largest single item of expense in the board's estimate is £20,655,600, the cost of the Community Care Programme, over £8m. of which is attributable to the General Medical

"Choice of Doctor" Scheme.

But when the cost of maintaining eligible patients in voluntary hospitals and homes (£47.555m.) is added to the cost of the board's own hospitals the total cost of hospital services in the area is £56.938m., almost 60% of the entire bill of £95.85m.

The Minister's allocation does not include provision for the forthcoming national wage agreement or increases for welfare allowances which will be granted in April and October. Money will be required for these later in the year, and also for new units proposed to be opened during 1977 and for a special programme of job creation announced by the Minister for Finance in his budget speech.

Present indications are that, when these factors are taken into account, the final cost for the year will exceed £100m.

### FUTURE PLANS

This year it is expected to commence photo-copying of the registers to replace the handwritten quarterly return, eliminating the error factor in manual copying. An extra copy of deaths registered would provide the medical card section with valuable data to upgrade records by elimination of deceased card holders from their lists. The Custom House records are currently micro-filmed and the extraction of the Dublin records from the master films would not only eliminate damage by constant handling of the original register records in Pearse Street but would make possible visual screen links to the limited number of outside offices envisaged, thereby enabling copies of entries to be given in any office convenient to the applicant instead of having to travel to the central Pearse Street or Custom House offices.

Computerisation is a bad word to many fearing the "big brother is watching" type of control but in the central Registry office it

would have an undoubted advantage in the processing of statistical data. It might even enable a common reference given at birth registration to follow through for many purposes at present calling for production of certificates of birth, etc. on many separate occasions, e.g. children's allowance, social welfare insurance, income tax, pension, etc.

But, why bother with registration at all? To most people it is to provide a source of certificate of birth, marriage or death as required (e.g. school attendance and exams, passport, social welfare claims, life insurance claims, etc.). Registration figures are, however, the basis of much of the population statistics and are a vital source of data in the medico-social research area. The dependance of these areas on complete and accurate registration of births, deaths and marriages is an added argument in favour of the improved training and supervision envisaged in the centralisation scheme.

## New Proposals for Emergency Services

by F. J. Elliott

Not infrequently, public representatives and the Health Board itself hear complaints of inability to obtain the services of a general practitioner at night or over week-ends in an emergency. Members and officers of the Board have been looking at the situation in the Dublin area for some time with the assistance of the medical organisations and of the three deputising services which supply substitutes for doctors who avail of the facilities they afford them when not themselves available.

While conscious that the function of the Board in regard to the provision of the services of a general practitioner is confined to medical card holders and their dependants, the group took a broader view of the matter and recently made an interim report to the Board. Its recommendations were:

1. that the widest publicity be given to the advisability of having a family doctor and of knowing the arrangements he has made for dealing with calls arising within his practice when not available in person;
2. that all general practitioners should maintain a standing arrangement with one or more colleagues, or with a medical deputising service, to provide cover when not available in person;
3. that the Directors of Community Care and Medical Officers of Health should, on their appointment in Dublin, encourage the maintenance or establishment of such arrangements;
4. that the offer of the Dun Laoghaire Local Health Committee to interest itself in the further development of co-operation between general practitioners in its area as a pilot operation, be accepted;
5. that the Board continue investigation of ways and means of setting up a central medical contact service while the measures designed to improve communications at local level are being taken.

### MEDICAL CARD GUIDELINES

The guidelines for assessing eligibility for medical cards have been revised on the basis of the Consumer Price Index figures November 1976. The new guidelines are in operation from January 1977.

	Income
Single person living with relatives	£20.50
Single person living alone	£23.50
Husband and wife	£34.00

These income limits may be increased as follows:

- |  |       |
|--|-------|
| (a) for each child under 16 years                                  | £3.10 |
| (b) for each child over 16 years with no income and living at home | £4.50 |

In addition, the income limits may be increased by any expenses for rent, rates, etc. in excess of £3.10.

## Coming in...



We welcome to our midst our new Transport Officer, Joseph Peake. Joe is from Laois and is married with four children. He was formerly in two other health boards, the Mid-Western and the North-Western. He was ambulance controller in both Boards. We hope Joe will meet with every success in his new job, or at least survive it.

## How Speech Therapists Help

Bernice Marsh, the Board's Senior Speech Therapist has recently obtained her M.Sc. in human communication.

She attended a year's course in Guy's Hospital Medical School in London researching a project on stroke patients. She tested the memories of people who had suffered strokes on the left side of the brain, and compared them with people who had strokes on the right side and also with people without brain damage. She found that people with left-sided brain damage had more difficulty in remembering names of items while those with right-sided brain damage apparently had difficulty remembering actual shapes. This is a useful piece of information to speech therapists when trying to help a stroke patient recover his language/speech.

As senior speech therapist, Bernice is responsible for nine therapists. There are clinics throughout the whole of the Board's area, based mainly in health centres, child guidance clinics and hospitals, including non-E.H.B. hospitals. Speech therapists deal chiefly with four major categories of communication disorders - language problems, articulation problems, voice disorders and disorders of speech rhythm (e.g. stuttering). The work requires infinite patience, but is very rewarding when a person with severe impairment begins to show improvement.

## Miss Neary Retires

Miss Kathleen Neary, Children Officer, retired at the end of January last after 37 years service in the child care field.

Following a lengthy period of hospitalisation during 1976 we were all delighted that she recovered fully and was able to resume work prior to her retirement.

It would be difficult to hazard a guess at the numbers of children who benefited and who are still benefitting in their family lives through Miss Neary's endeavours.

At an enjoyable "get-together" in the V.I.P. room her colleagues presented Miss Neary with a wristlet watch as a token of their appreciation of her.

May she continue to enjoy good health for many years to come.

## Going up...



Congratulations to John Brennan, Section Officer, Hospitals Department, who was successful in the recent competition for appointment as O. & M. officer. He previously worked in the R.M.S. Office of the old St. Kevin's Hospital, and moved from there to Receipts Unit and then to Cherry Orchard. With three O. & M. men now watching us we'll have to mind our p's and q's and dot our t's and cross our i's ...

There are two main problems within the service at present - lack of suitable accommodation and shortage of speech therapists for the increasing number of patients being referred for assessment/treatment.

Bernice feels that the Board has shown commendable insight in recognising the need for a speech therapy service in the community. The present annual attendance at clinics is approximately 20,000. This is a remarkable advance for a service introduced as late as September, 1973.

# WATER POLLUTION

We can say that water is polluted when something is added to it which causes a deterioration in its natural qualities. If fermentable organic matter is added, decomposition will take place causing deoxygenation of the water. Fish will be asphyxiated and ultimately, when all dissolved oxygen has disappeared there will be objectionable smells due to hydrogen sulphide, mercaptans and organic amines, etc. Our major interest in water is that it can be used as a vehicle of water borne infections. These are typhoid, paratyphoid, cholera, dysentery (bacillary and amoebic), gastroenteritis and Weils disease, the organism of which is present in rat's urine. To the list we must add infectious hepatitis (jaundice), and poliomyelitis.

## SWIMMING IN POLLUTED WATERS

There is no record of an outbreak of human disease occurring as the result of swimming in sewage contaminated waters in temperate zones. No epidemics, to the best of my knowledge have been traced back to sea bathing even in heavily contaminated sewage waters. There are at least 2 factors which are not conducive to the transmission of disease from sea water to swimmers — one the dilution and two the fact that in order to contract one of the diseases mentioned above a human would have to swallow a very large number of the bugs which produce the illness, certainly more than could exist in the amount of sea water swallowed by the most floundering of swimmers.

## RIVER POLLUTION IN IRELAND

We can broadly describe the causes of river pollution in Ireland as industrial and non-industrial. In the industrial category we can further subdivide into food processing (canneries, abattoirs, creameries, oils and fats rendering, brewing, distilling); agricultural produce (tanneries, wool processing); also non-agriculture (soap, paper, textiles, laundering, cyanide from electroplating plants, oil from garages, engineering works, waste from fertiliser industries, mining effluents) and physical pollution (silt from peat, washing of sand). Non-industrial wastes (discharge of untreated sewage, silage effluent, pig slurries, overloading of town sewers and sewage works

by increasing population or increasing trade waste, rubbish and garbage, oil in the open sea, and leaching from refuse tips).

In 1971 An Foras Forbartha surveyed 121 rivers to a total length of 2,900 kilometres and reported that about 7% of the total length of rivers surveyed were seriously polluted, that about 10% gave cause for concern, and that the remainder surveyed were free from significant pollution. Most of the serious pollution occurs in densely populated areas.

## THE COST OF PURE WATER

In 1973 The Inter-Departmental Working Group on Water Pollution estimated that £35 million would be required for the abatement of pollution from unsatisfactory local authority sewerage systems. It was considered that £2 million would be required for improvements in waste disposal for the dairy industry and £1.5 million for bacon and meat factory effluents in order to make them conform to reasonable purification standards.

The Group concluded that the Acts governing water pollution are basically defective in that they suffer from imprecision of definition and are administratively very complex and contain some unworkable provisions — for example the prohibition on the discharge of any solid or liquid sewage into watercourses since it is impracticable to produce a sewage effluent free from solid or liquid sewage matter.

The Fisheries (Consolidation) Act 1959 as amended by the Fisheries (Amendment) Act 1962 contains 2 provisions dealing with the control of water

pollution and many successful prosecutions have been brought by the various Boards of Fishery Conservators using them. The licensing provisions of the Fisheries Acts fail however to give any guidance in determining whether the toxicity of a particular effluent falls within tolerable limits — this in itself may be a constraint of the effectiveness of the control.

## WATER POLLUTION BILL 1976

The Working Group concluded that the law as it stands is too blunt an instrument to deal effectively with the great variety of conditions encountered in water pollution cases and accordingly we now have going through the Senate the Local Government (Water Pollution) Bill 1976.

The Bill proposes to — control by means of a flexible licensing system to be operated by county and borough councils, the discharge of trade and certain sewage effluents from land or premises to waters, including inland water, tidal waters and the sea;

- prohibit the entry to such waters of other poisonous, noxious or polluting matter;
- control, by means of a licensing system to be operated by sanitary authorities, the discharge to sewers of trade effluent or matter other than domestic sewage and storm water;
- provide for appeal to the minister against decisions of county and county borough councils and of sanitary authorities on applications for licences.

Let me straight away allay your anxiety. It is intended to consider an appropriate amendment to this Bill at a suitable stage to enable such appeals to be determined by An Bord Pleanala. For this relief much thanks.  
**E.E.C. BLACK AND GREY LISTS**

Before concluding I should mention the E.E.C. Black and Grey lists. On December 8th 1975 the Council of Environment Ministers of the European Community agreed on proposals for dealing with pollution of the Community's rivers and seas. The Community shall set both uniform emission standards and quality objective standards for each black list substance

## Are health administrators too touchy?

Mr. Brendan Corish, Tanaiste and Minister for Health and Social Welfare, had some good advice to offer health administrators when he addressed the Council of the Institute of Hospital Administrators at their annual dinner last December:

No group of people in the community have been subjected to as much 'stick' as those who are engaged in public administration. Indeed, for some reason this criticism has been directed in a special way against those working in the health services.

One might be tempted to think that the people concerned represented the worst of all kinds of evil, namely, an unnecessary evil. Perhaps I exaggerate. But make no mistake, the feeling is there; it is real and, I think, that in many instances it has a genuine emotional, if not a rational, basis.

### DON'T OVER-REACT

You know and I know that much of what is said is not true, that a lot of it is exaggerated. But how does one cope with it? The first thing, I would suggest, is not to over-react by wasting time and effort in useless counter-recriminations but to admit that there is room for improvement. Just as there is room for improvement in the medical, nursing, paramedical and other areas.

### HOW TO COPE WITH CRITICS

The next step then would be to do something about any shortcomings. In dealing with any criticism, one must first understand the nature of the criticism and in particular, the feelings and motivation of those who give voice to it. As I see it, the criticism of health administrators comes from two main areas, namely from outside the services and from within the services.

(organochlorines, organophosphorous compounds, organotin compounds, carcinogens, mercury compounds, cadmium compounds, mineral oils, etc.). Member states will be able to choose which of these two methods they wish to adopt. If they wish to work through quality objectives they will have to demonstrate to the Commission through agreed monitoring arrangements that they are meeting the quality objectives laid down.

No provision was made for uniform emission standards to apply to the "grey list" (zinc, copper, nickel, chromium, lead, selenium, arsenic, antimony,

## £25 for your Suggestions

In our last issue we raised the question of cost reduction and urged that efforts should be made to achieve the best value for money spent.

The Chief Executive Officer has decided to award a monetary prize to any member of the staff who comes up with a worthwhile and workable idea to improve efficiency and reduce costs.

The competition is open to all grades of staff, and it is hoped that nobody will be deterred from entering because of the relative unimportance of his or her post. Often people working down the line can see more clearly than "the powers that be" where improvements can be made and waste avoided.

Entries, which should outline the proposals in sufficient detail and indicate the annual savings expected, should be sent to the Editor. Contacts, 1 James's Street.

The Chief Executive Officer has set up an adjudicating panel to appraise the entries and submit recommendation to him. The panel comprises:

Mr. F. J. Elliott,  
Dr. B. O'Donnell,  
Miss T.C. Taaffe,  
Mr. Martin Ruane.

Planning & Evaluation Officer  
Dublin Medical Officer  
Matron, Cherry Orchard Hospital  
Tutor, St. Brendan's Hospital and  
Board Member.

A prize of £25 will be awarded for each original idea which is adopted and implemented.

You must never forget that criticism from outside in many cases will come from those who are sick or worried or related to those who are sick or worried. For this reason they may well be justifiably short in patience and may lack what you might consider is reasonable understanding of your problems. I would ask you always to be especially patient and courteous. You may never know the full extent of the stress and worry the person you are dealing with may have to cope with.

Criticism of administrators from colleagues in other health professions is, I am told, not unknown. And it is all the harder to bear for that. But, here is an area where you can take

positive action to stifle such criticism. There is one way of silencing the critics among your other professional colleagues. And it is by your diligence and application to your job; by your tact and patience, and by the high level of your expertise. In this way you will make your services indispensable to your critical colleagues. By this you will demonstrate that you, too, have a real role to play as a member – a playing member – of the team.

However, no matter where criticism of administrators emanates from it may be no harm, from time to time, to reflect on the definition of administration as the art of the impossible.

molybdenum, titanium, tin, barium, beryllium, boron, uranium, vanadium, cobalt, thallium, tellurium, silver, cyanides, fluorides, etc.).

### POLYCYCLIC AROMATIC HYDROCARBONS – CAUSES OF CANCER

Polycyclic aromatic hydrocarbons (PAH) such as 3–4 benzpyrene are carcinogenic to animals and probably to man. The significance of traces of PAH in drinking water to human health is not yet known. Other sources of PAH are smoked and roasted foods. PAH can be carried into surface water by domestic sewage containing industrial effluent from the

processing of coal and petroleum and storm water run-off from roads. The combustion of fuels by cars and boats also produces PAH. Carbon black used in the manufacture of tyres contains PAH and consequently the wear of tyres on the road can be a source of PAH as is asphalt.

The Directive is bringing into prominence potentially hazardous materials which might occur in surface water either naturally or as a result of pollution especially from industrial wastes. Our results to date on the samples, taken at 11 intake points, indicate that these extra parameters are of little significance in an Irish context.

## THE LAW ON

# INFECTIOUS DISEASES

by T. Canavan

The diagnosis, prevention of spread and treatment of infectious diseases are dealt with under the Health Act 1947 and principally by the Infectious Diseases Regulations 1948 made under this Act.

These regulations provide that:

- (a) A health authority shall make arrangements for diagnosis and treatment of infectious diseases in persons in their district.
- (b) No charge shall be made for any services (including institutional services) provided by a health authority in performance of the duties under the Regulations.
- (c) Medical Practitioners shall notify cases or suspected cases of infectious diseases. A fee is payable per notification.

The diseases specified to be infectious diseases are set out in the 2nd Schedule to the Regulations. A list of these is hereunder.

### POWERS OF C.M.O.

A C.M.O. is obliged to make such enquiries and take such steps as are necessary or desirable for investigating the nature and source of the infection, for preventing the spread of the infection and for removing conditions favourable to infection.

He may do this himself or through an agency or subordinate officer.

He may, having regard to the circumstances of the case and nature of the disease, require a person to stay in his house and if he cannot be effectively isolated in his house order his detention and isolation. He may require a person to discontinue certain occupations. He may require cleansing, disinfection or disinfestation of persons, buildings, structures, vehicles, vessels, aircraft or articles. Measures for the destruction of animals or insects may be imposed by him. In the course of his investigations he may arrange for the compulsory medical examination of any person (where possible after due notice to him and to suit his convenience). He may require the destruction or suitable disposal of articles or substances which are infected, infested or dirty or which, being likely to harbour infection, have been imported from a country where there has been a serious outbreak of an infectious disease.

These regulations deal, in the main, with the spread of infectious diseases "at home". Precautions from abroad are also dealt with under:

The Infectious Diseases (Shipping) Regulations 1948.

## KILDARE NEWS

Good luck and happy retirement to the sisters Mai and Angela McGrath, Matron and Staff Nurse respectively in Naas Fever Hospital, later Naas Sanatorium (and now the headquarters of the County Council staff), who retired from service with the Eastern Health Board in January last.

Originally from County Carlow, the McGrath sisters, during their years in County Kildare, endeared themselves to staff and public alike while they served the people with their kindness and courtesy at all times.

Their period of service saw history in the making as far as the hospital service in Kildare was concerned, both as officers of Kildare County Council, when St. Mary's was the new fever hospital, and later when it was run as a sanatorium during the big drive against T.B. in the early fifties.

## The Cover Story

If your yearly means are in excess of £3,000 you may not be covered for hospital treatment by the Health Acts. If your yearly means are less than £3,000 you will be covered by the Health Acts for public ward treatment only. The Voluntary Health Insurance Scheme can give you and your family the cover you require (private or semi-private). By joining the Eastern Health Board Group Scheme you get a 10% reduction (approx.).

Remember, a short stay in hospital could cost as much as a continental holiday. Should you require further information, an application form or an explanatory brochure, contact me at the Engineers Office, Clonskeagh Hospital.

Take care take cover.

Martin Bugler, Group Secretary.

The Infectious Diseases (Air-craft) Regulations 1948.  
The Infectious Diseases (Certificate of Vaccination against Smallpox Regulations) 1966.  
The International Sanitary Regulations 1951 to 1966.

### INFECTIOUS DISEASES REGULATIONS, 1948 ARTICLE 7 - Diseases specified to be Infectious Diseases

Acute Anterior Poliomyelitis, Acute Lymphocytic Meningitis, Anthrax, Brucellosis (undulant fever), Cerebro-spinal Fever, Cholera, Diphtheria, Dysentery, Encephalitis Lethargica, Epidemic Diarrhoea and Enteritis (under 2 years), Erysipelas, Gonorrhoea, Haemorrhagic Jaundice (Weil's Disease), Infective Hepatitis, Infective Mononucleosis, Influenzal Pneumonia, Lassa Fever, Malaria, Measles, Ophthalmia Neonatorum, Paratyphoid A, Paratyphoid B, Pemphigus Neonatorum, Plague, Psittacosis, Puerperal Sepsis, Rabies, Rubella, Salmonella, Scabies, Scarlet Fever, Smallpox, Soft Chancre, Syphilis, Tinea Capitis, Tuberculosis, Trachema, Typhoid, Typhus, Whooping Cough, Yellow Fever.

They moved then to Naas Hospital where Angela was well-known for her work in the ambulance service.

The sisters were recipients of many glowing tributes to their work and service at a farewell party organised by the Matron and staff at Naas Hospital. The attendance included representatives of the medical and nursing professions, para-medical, ambulance and domestic staff of the Kildare hospital services, and also representatives from Kildare County Council and health board staffs who were all associated with the presentation to the McGrath sisters.

They have now gone to reside in Bray, and we wish them many happy years in their new haven by the sea.

### LATE BISHOP WILLIS

We regret to report the death of Bishop Frederick R. Willis. Bishop Willis spent over 30 years on the Missions and was consecrated Lord Bishop of Delhi in 1951. Since his retirement and return to Ireland in 1966 he had been attached to All Saints' Church, Grangegorman, and was Chaplain to St. Brendan's Hospital. In addition to attending to the spiritual needs of the patients and staff, Bishop Willis, a very good singer, frequently entertained the patients with his rendering of Percy French songs. He will be greatly missed by all.

# ASTRA

Organised chaos is the only word to describe how things are with us at the moment, but no doubt everything will sort itself out in time. Our Christmas break was very welcome but short-lived, because by the beginning of January we were headlong into rehearsals again – this time for Astra's 25th production "Home is the Hero" a play by Walter Macken. You will be able to judge the result of our labours at the beginning of March. See our advertisement in this issue for the dates. We hope to be able to put up the "House Full" sign, so don't let us down. As well as doing our usual quota of hospital shows we have also entered the play in several festivals. Competition is the spice of life and competing in these festivals can broaden our experience and raise our standards. We might even achieve some measure of success as well.

On Sunday, 13th February, we brought a party of children from St. Ita's Hospital to the Pioneer Musical Society's production of the pantomime "Robinson Crusoe" in St. Francis Xavier's Hall. It was very entertaining and a very enjoyable day was had by all. Thanks are due to the helpers who gave of their free time and the staff in St. Ita's especially Dr. McGuinness and Miss Plunkett without whose co-operation this venture would not have been possible.

2nd May – 7th May, 1977 (inclusive). Take a special note of these dates in your diary! What's so important about them? This is the week that Astra has set aside to celebrate its 10th anniversary. Yes, believe it or not the "new" Astra is in existence since 1967. Well anyway during the first week in May it will be all happening! We intend having

- (a) A Talent Contest
- (b) An Interdepartmental Quiz

- (c) Three one act plays produced by three different producers – all of whom have produced plays for Astra during the past ten years.

We will also have, with the co-operation of the St. James's Social and Sports Club, a sporting fixture which we hope will have a novelty value.

Well you'll all agree that we have enough in the pipeline to be going on with, but do remember that the ultimate success of all this depends on you. If you can't get actively involved you can support us by your attendance at these events. Watch the notice board in the Staff Restaurant for details of the closing dates for entries for the Talent Contest and the Quiz. Those interested in taking part in either of these can contact me or any committee member.

Margaret Power  
Chairman

Phone 757951 Ext. 288

## Red Sales in the Sunset

Mick Hennessy the Younger of Salaries Section is just back from a trip to Russia. Or to be precise – Moscow, as they take your passport from you to ensure you keep within acceptable limits. He went with a group of engineering students. A highlight of the tour was their visit to the Economic Achievement Institute where they saw a rocket launcher complete with rocket. They also inspected the Soyuz laboratory that had been docked in space – it was as big as a double-decker bus.

Of course, they went to the fabulous Bolshoi ballet and were among the audience of 5,000. The onlookers express their appreciation by total silence. At least 4,999 did while one little Roscommon man so far forgot himself as to cheer. Ah well!

They had a very lucrative meeting one evening. A few of them were in the hotel lift when an English-speaking Muscovite asked if he could buy their clothes. Following a session of hard bargaining in their hotel room, the equivalent of about £400 in Russian roubles changed hands. Mick sold his Wrangler jeans for £32, a denim shirt for £60 and then got £8 for 200 Rothmans which he had bought duty-free for £2.46! They had to spend the money in Moscow as there is difficulty in taking more money out

of Russia than you bring in, and also the rate of exchange for roubles is unprofitable.

They lived it up by taking taxis everywhere and eating expensive meals. The food was not very impressive but they found the hotels quite luxurious. It was freezing all the time they were there and they were eventually forced to buy fur hats at £10 each to keep warm.

Many people see Russians as somewhat poverty-stricken. But in fact, says Mick, there is no sign of poverty there at all. People are well dressed although their clothes lack style and colour. Shops are scarce but very large and well stocked.

The people all live in blocks of flats and these are tailored to the size of the family. However, he found that small families predominate as 80% of first pregnancies are terminated. The Government are so worried about declining births – even in a city of 8 million – that they give an award to couples who produce five children! (Irish Times letter writers please note!)

Although there are no pubs (use off-licences) or toilet rolls (use table napkins) in Moscow, Mick found this somewhat sinister city a place of endless fascination and certainly worth another visit.

## ASTRA THEATRE GROUP

Presents  
(By Arrangement With A.G.I.L.)

### Home is the Hero

a play  
by Walter Macken  
Producer Walter Harrington

Assembly Hall, St. James's Hospital, 1, James's Street, Dublin.

Wednesday, 2nd March, Thursday 3rd March

Wednesday, 9th March, Thursday 10th March & Friday 11th March

8.00 p.m.

SUB.: 60p for non-members

Please Note – only two performances are arranged for the first week.

## CONCERT WITH A DIFFERENCE

Shortly before Christmas a concert was performed in St. Joseph's Mental Handicap complex.

Nothing extraordinary about this, you might say, until you realized that every one of the acts were performed by the mentally handicapped patients themselves.

The whole idea was Dr. Vincent Molony's and he received enthusiastic support from the nursing, maintenance and catering staff.

The settings, stagecraft and sequences were magnificent. This wasn't just a good concert – it was great.

The serious point of the evening was that it was an exercise in creative activity. The most handicapped patient taking part – either solo or as part of a group – appreciated one great thing – the feeling of being accepted.

To thank everyone who made the concert a success was the difficult task facing Cllr. Sam Carroll, chairman of the E.H.B. With engaging honesty, he said there was nothing to say, except that the concert involving the patients spoke for itself.

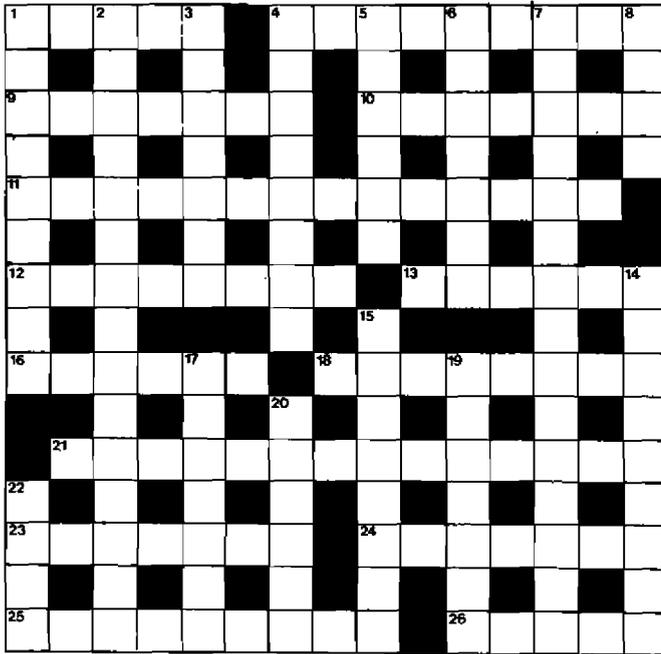
Dr. Molony – who sang one or two of the background items while the patients went through their paces on the stage – thanked everyone involved.

Dr. McGuinness, in complimenting Dr. Molony and the staff, pointed out that while staff were rehearsing patients, their colleagues coped with extra chores in the wards without grumble. He said: "we should, all of us, realize that we are not working for the E.H.B. – we are working for the patients – that's what we are paid for."

In the course of his speech Dr. McGuinness remarked: "The level of civilisation and culture of a man, or indeed of a society can be most accurately gauged by the respect shown and the care given to the least member of society."

On this criterion, they are highly civilised and cultured in St. Ita's.

# Crossword No. 7



Name \_\_\_\_\_

Address \_\_\_\_\_

## ACROSS

1. My colloquial and ungrammatical help backs newspapers, etc. (5)
4. Sorrowful one, the good man is one who likes to torture. (6)
9. Despising opposition, took food back - Scotsman to a T (7)
10. Watcher Lou took badly. (4-3)
11. Reduce to nothing about a flower. (6)
12. I'm fit and energetic. That lie upset a hundred. (8)
14. Finished the fish in a happy place. (4, 3, 7)
16. Game to reduce the connection (8, 6)
20. Eye-deceiver is against the adjudicator (8)
21. Speak falsely about donkey, girlie. (6)
23. Plays the drunken rat at one point. (7)
24. Ten men and I in mixed gathering are outstanding. (7)
25. This nut sounds like an army boss. (6)
26. Doyle messed up the mountain song. (5)

## DOWN

1. Doctor missing company - a rise for a go-between (8)
2. Advocate gets protection and advice. (7, 7)
3. Unyielding worker supports another worker. (7)
4. Place rest at end of table. (4)
5. Diana and Lett before the art lover. (10)
6. Well, son is sloppy and distended. (7)
7. See, it's water! (6)
8. Don't deceive, go down and be unbending. (4, 10)
13. Tom gave one wild command to hasten. (3, 1, 4, 2)
15. Support foot-lever around East Street. (8)
17. Good convict manages others' affairs (7)
18. Genuine place like Dublin without a leader is not an imaginary thing. (7)
19. Mean drink? (7)
22. Ring for beauty without end. (4)

ENTRIES TO: EDITOR, CONTACTS, 1 JAMES'S STREET  
£3 to first correct solution opened by 31 March 1977  
(Prize sponsored by Astra and St. James's Social Club.)

## Solution to Crossword No. 6

ACROSS: 1. Flame 4. Episcopal  
9. Leisure 10. Cutlery 11. Free of Interest  
12. Canister 13. Shores 16. Dakota  
18. Madrigal 21. Academic degree  
23. Spinoza 24. Deepest 25. Regretted  
26. Sissy

DOWN: 1. Full-faced 2. Alive and kicking  
3. Emulous 4. Elegises 5. Incite 6. Catarrh  
7. Pleasure Gardens 8. Lays 14. Saliently  
15. Cascaded 17. Tadpole 19. Reefers  
20. Impart 22. User

WINNER: Jim Hurley, G.M.S. Section,  
Thomas St.

## CENTRAL MENTAL HOSPITAL

### Escapism at Dundrum

A very successful concert was held recently in the Central Mental Hospital, Dundrum. Among the large audience who thoroughly enjoyed themselves were members of the League of Friends of the Hospital (who raise funds for comforts for the patients).

The concert was given by such well-known names as Shay O'Donoghue and his band, Syl Fox, Kelly's Heroes, David Parkes, Free-wheelers Ballad Group, Joe Cahill, David Beggs, Dickie Rock and Helen Black. The show was excellently compered by Sean Connors.

### Retirements

Barney Reynolds and John Byrne, attendants in Dundrum, have retired after many years of dedicated service. A presentation was made to each of them by their colleagues who wished them every happiness in their future lives.

## BRIDGE HAND

- Kevin Quinn

GAME: NIL ALL

SAKXX  
HQJXX  
DX  
CKQXX

S10XXX  
H10XXX  
DKQX  
CJX

SQXXX  
HAXX  
DJXXXX  
CX

SX  
HKX  
DAXXX  
CA9XXXX

One of our most popular colleagues and providers, Miss Tess McDonagh is no slouch when it comes to another table, the bridge table. She was setting South on the above deal and being opener, felt that a miracle was required to get something moving. East passed and North, a good man at the "eats" table, bid one heart. West passed and Tess bid 2C. When her partner said 4C she felt that something might be on with that singleton spade and because her partner's bid of 4C showed a good hand, so she bid 4D to show the control mainly. It was her partner's turn to get the calculating machine into top gear. So he bid 4NT, asking for aces, knowing of his club honours and spade control. Tess gave 5H and partner said 6C and ending the bidding and giving Tess a minor coronary. There was nothing to the play, except after a club lead, won in dummy. Tess led the HQ, East decided not to cover with his ace, Tess overtook with her HK and made the lot departing her 2nd heart on the spade K. Good for 26 high card points, but showing the diamond control, alerted N to the possibility of no diamond loser. Should E have taken his HA and returned a Diamond? If Tess led small - most certainly, but HQ lead foxed the expert.

## St. James's Social & Sports Club

The Annual General Meeting of the Social Club was held recently. The newly-elected committee is as follows: John Broe (Salaries), Eddie Matthews (Salaries), Tim Lyne (F.D.V.H.), Eileen Sweeney (Ward Sister), Ann Marie Nelligan (Student Nurse), Paul McCloone (Accounts), Phil O'Rourke (Purchasing), Brendan Carr (Dental).

**CHESS:** The club championships are in progress in the chess club. There are a total of twenty-one entrants. In the Business Houses League we have been strengthened by the addition of Des de Loughrey and John Murray, who is a current international and rated number five in Ireland. The game was adjourned after three hours and at the time of going to press we have no result of the outcome.

The **BASKETBALL** section have two teams playing league matches. Training is on Tuesdays and Thursdays and is open to girls only. Enquiries to Ann Marie Nelligan, Student Nurse, St. James's Hospital.

**LADIES FOOTBALL, SOCCER and MIXED HOCKEY** commences in late March - enquiries to the committee.

**PITCH and PUTT** is progressing nicely and competitions are held regularly - enquiries to Fran O'Brien, St. Mary's Hospital.

**TENNIS** - if you are interested in coaching or playing tennis you might contact Rosemary Kenny at Cornmarket Dental Clinic 777671.

**VETERAN'S FOOTBALL** - This league is to be revived and will be held early in May. More details to follow. Tickets will be on sale shortly.