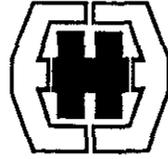


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EASTERN HEALTH BOARD

FINANCIAL AND SERVICES PLAN

1997

FINANCIAL AND SERVICES PLAN 1997

1. INTRODUCTION

The Financial and Services Plan for 1997 has been prepared and framed within the limits of the non capital determination of £399.169m approved by the Minister for Health for our Board.

The plan has also been formulated to enable our Board to continue to develop our services in line with the Health Strategy and in line with the various policy documents adopted by our Board. During 1997, our Board will continue to maintain, develop, re-shape and re-orient our services and the manner in which our services are managed and delivered to meet the objectives and targets contained in the Health Strategy.

Detailed operational Service Plans have also been prepared for each of the four service programmes and for the functional departments which support the work of the service programmes.

This plan and the detailed operational plans have been prepared having regard to our Board's commitment to improve the health and social gain of the 1.3 million people who live in our Board's area. The plans are underpinned by the key principles of equity, quality and accountability.

The preparation of this plan and the operational service plans anticipate the provisions the New Health (Amendment) (No.3) Act 1996.

2. REVISED DETERMINATION FOR 1996

Our Board's revised determination for 1996 is £384.462m. It is estimated that our actual expenditure for 1996 will be £385m. This, in the context of our total determination, is very close to a break-even position. Our Board's original determination for 1996 was £360.364m. The following table (Table 1) includes details of the additional increases approved for our Board during 1996.

Community Ward teams from 17 at the end of 1996 to 23 in 1997. The additional teams will be provided in Community Care areas 1,3,4,8, Kildare and Wicklow

The additional allocation will also enable our Board to immediately commission and open the new 25 bed unit and day hospital in the former Sir Patrick Dun's Hospital, the new 25 bed unit at Peamount Hospital, the 17 additional beds in Leopardstown Park Hospital and 30 additional contract beds in nursing homes.

All of the above new developments were included in our 4 Year Action Programme. Table 3 summarises the above.

Table 3

<i>Description of Development</i>	<i>Cost £m</i>
6 Additional Community Ward Teams	0.630
25 bed Unit for the elderly at the former Sir Patrick Dun's Hospital	0.550
25 bed Unit for the elderly at Peamount Hospital	0.500
17 beds for the elderly at Leopardstown Park Hospital	0.220
30 places in Private Nursing Homes	0.400
Total	£2.300

During 1997 construction of the new 50 bed unit for the elderly and a new day hospital on the South Circular Road will be completed. Construction of a similar unit on the St. Clare's site, Ballymun will be commenced in 1997.

The new Psychiatric Unit at the new Tallaght Regional Hospital is scheduled to open in 1997. This unit includes 6 beds for the elderly mentally ill and will support a psychiatry of old age service for Community Care Areas 4 and 5. An existing consultant psychiatrist post will be converted to a specialist old age psychiatry post. Approval is being sought for a day hospital to support this service.

Construction of the new day care centre for the elderly in Finglas will be completed by mid 1997.

The 1997 determination includes the following additional funding:

- £ 0.178m for the ongoing cost of the provision of services for persons with autism.
- £ 0.100m in respect of the changing client profile in St. Joseph's Service, St. Ita's, Portrane.
- £ 0.050m in respect of the changing client profile in Peamount Hospital.
- £ 0.100m for services provided by the Irish Sisters of Charity, Donnybrook.

Our Board's policy of providing local community residences for the mentally handicapped in our Psychiatric Hospitals and particularly in St. Ita's Hospital, Portrane, will continue to be implemented during 1997.

The Hawthorn Centre (formerly Madonna House) which was purchased during 1996 will be commissioned and opened during 1997.

The transfer of responsibility for funding of Mental Handicap Agencies from the Department of Health to the Health Boards will commence by mid 1997 in the Mid-Western and Southern Health Boards. The Department of Health will be discussing with our Board and the agencies the implications of this process for our Board and the direct funded agencies in our Board's area. Given the large number of major direct funded voluntary agencies in our Board's area, the changes will require significant planning and management during 1997.

7. SERVICES FOR THE MENTALLY ILL

Services for the Mentally Ill are provided directly by our Board in Areas 2,4,5,6,8,9 and 10. Services for Area 1 are provided by the Hospitaller Order of St. John of God. Services for Area 3 are provided by St. Patrick's and St. James Hospitals. Services for Area 7 are provided jointly by our Board, St. Vincent's Hospital Fairview, and the Mater Hospital. Services are being developed in line with the Government policy as outlined in the report 'Planning for the Future' and in line with the following reports adopted by our Board.

Child Psychiatric Services in our Board's area are provided as follows:-

- Parts of Community Care Areas 3 and 4 (inner city), Areas 5, 6 and 9 - Eastern Health Board.
- Areas 7 and 8 - The Mater Hospital Child and Family Service (funded by our Board).
- Areas 1, 2, 3, 4 and 10 (except inner city areas) - Hospitaller Order of St. John of God.

All three services are co-ordinated by a planning group chaired by the Programme Manager.

One of our Board's Directors of Child Care and Family Support Services has responsibility for planning and co-ordinating all of our Child Care Services (including Child Psychiatry).

9. SERVICES FOR PERSONS WITH A PHYSICAL AND SENSORY DISABILITY

The 1997 determination includes an additional sum of £0.863m for services for persons with a Physical and Sensory disability. This includes:-

- | | | |
|-------------------------------------|---|----------|
| - Cerebral Palsy Ireland | - Ongoing cost of service provision. | £ 0.375m |
| - Irish Wheelchair Association | - Personal Assistants and Home Care Attendants Scheme | £ 0.200m |
| - Cherry Orchard Young Chronic Sick | - To ensure full capacity | £ 0.093m |
| - Ardeen Cheshire Home | - Ongoing cost of services | £ 0.045m |
| - Blackrock Cheshire Home | - New Cheshire Home. | £ 0.050m |
| - St. Joseph's School for the Blind | - Night cover improvement | £ 0.050m |

- St. Columcilles Hospital

Improvement in
Surgical Services

£ 0.050m

In accordance with the policy set out in the Health Strategy, the Minister is committed to the development of a structured system of review with Health Boards on the use of resources and an assessment of service outcomes. In 1997, the focus will be on the acute hospital services.

During 1997, progress will continue with the phase 2 development of Naas General Hospital. The planning brief has been finalised and the design team has been selected. It is planned to have the design work completed and commence construction by the end of 1997.

The preliminary planning brief for the James Connolly Memorial Hospital, Blanchardstown, has been finalised and the design team for the first phase of the new development has been selected. A protective control plan will be prepared for the total hospital development and the detailed design work for the first phase of the development will be commenced during 1997.

A review group has been established to review and identify the future role and development needs of St. Columcilles' Hospital, Loughlinstown in the context of the provision of acute hospital services to the population of South East Dublin/East Wicklow. This review will be carried out in consultation with the Department of Health and as appropriate with the other hospitals in the area. The upgrading of the electrical services in St. Columcille's Hospital, Loughlinstown will be completed by mid 1997.

The 1997 determination includes a sum of £0.575m to continue implementation of the recommendations of the Review Group on the Ambulance Service. £0.150m is in respect of costs associated with the ambulance training needs of the Dublin Fire Brigade and £0.075m is in respect of a grant to be made by our Board to the Irish Heart Foundation for their community CPR Programme. Detailed proposals for the remainder of the additional funding are contained in the General Hospital Programme detailed operational Service Plan for 1997.

account of unavoidable changes in the timing of expenditure and/or income. Following approval of our Service Plan, the necessary monthly expenditure budget and statement of cash flow requirements will be prepared for submission to the Department of Health.

During 1997, the process of devolving more authority in relation to budget matters and service development generally to local managers and budget holders will be continued. This will of necessity have to be accompanied by appropriate reporting and accountability arrangements and will facilitate our Board in making more progress on the establishment of performance indicators/targets.

The Finance Department's operational plan for 1997, includes details of that Department's work programme for 1997.

19. ESTATE MANAGEMENT AND TECHNICAL SERVICES

Operational plans for the Estate Management Department and the Technical Services Department for 1997, include details of the work programme for those departments for 1997.

A major focus of the Technical Services Department's work will be the continuation of our Board's successful Energy Management Programme.

APPENDIX 1.

Additional special allocations for service developments in 1996

	<i>£m</i>
Services for Drug Misusers	2.970
Additional Child Care Services	1.096
Services for Mental Handicap	0.993
Accident & Emergency Services	0.600
Services for the Elderly and Young Chronic Disabled	0.500
Acute Hospital Services	0.400
Ambulance Service development	0.225
Dental Treatment Services	0.160
Contracted beds (Nursing Homes)	0.100
High Tech Procedures - James Connolly Memorial Hospital	0.080
G.P. development fund	0.079
Miscellaneous	0.275
<i>Total</i>	<i>£7.478</i>

APPENDIX 3.

Once off Reductions from 1996

	<i>£m</i>
Pay arrears (prior years)	2.505
Once off grants paid through our Board	3.466
Developments funds provided on once off basis in 1996 (Discretionary Annual grants repeated in 1997 and special once off expenditure)	2.759
Miscellaneous Once off Costs	0.084
<i>Total</i>	<i>£8.814</i>

APPENDIX 4.

1997 costs of 1996 new service developments

	<i>£m</i>
Mental Handicap Services	0.078
Child Care Services	1.100
Services for Drug Misusers	0.875
Child Immunisation Scheme	0.660
Dental Services	0.499
Nursing Diploma	0.077
Dementia Information Centre	0.060
<i>Total</i>	<i>£3.349</i>

APPENDIX 7.

Additional funding of Services for Physical and Sensory Disability

<i>Agency</i>	<i>Service</i>	<i>Amount</i> <i>£000</i>
Cerebral Palsy Ireland	Towards ongoing cost for the provision of services	0.375
Irish Wheelchair Association	Personal Assistants and Home Care Attendants scheme	0.200
Cherry Orchard Young Chronic Sick Unit	Towards the cost of ensuring the centre operates at full capacity	0.093
Ardeen Cheshire Home	Towards ongoing cost for the provision of services	0.045
Blackrock Cheshire Home	Towards the costs of providing services at this new Cheshire Home	0.050
St. Joseph's for the Blind, Drumcondra	Towards night cover for the home	0.050
St. Mary's for the deaf, Cabra	Towards night cover for the home	0.050
Total		0.863

APPENDIX 8.

Annual recurring once off development fund

	<i>£m</i>
GP Development fund	0.755
Ambulance Service	0.575
Total	1.330

Appendix 10.

FINANCIAL PLAN 1997

<i>Pay £m</i>	<i>Non-Pay £m</i>	<i>Total £m</i>	<i>SUMMARY</i>	<i>Pay £m</i>	<i>Non-Pay £m</i>	<i>Total £m</i>
29.427	10.758	40.185	Management & Estate Support Service	29.331	10.824	40.155
0.633	0.096	0.729	Department of Public Health	0.680	0.097	0.777
46.872	100.282	147.154	Community Care Programme	49.298	106.302	155.600
2.359	5.931	8.290	Services for Drug Misusers	2.859	6.226	9.085
59.503	45.308	104.811	Special Hospitals Programme	61.476	46.459	107.935
61.540	46.373	107.913	General Hospitals Programme	64.396	45.442	109.838
<i>200.334</i>	<i>208.748</i>	<i>409.082</i>	<i>Total</i>	<i>208.040</i>	<i>215.350</i>	<i>423.390</i>
<8.510>	<15.610>	(24.120)	Less Income	<8.595>	(15.626)	(24.221)
<i>191.824</i>	<i>193.138</i>	<i>384.962</i>	<i>Net Expenditure</i>	<i>199.445</i>	<i>199.724</i>	<i>399.169</i>

Allocation £399.169m

FINANCIAL PLAN 1997

<i>Revised Determination 1996</i>			<i>Eastern Health Board</i>	<i>Determination 1997</i>		
<i>Pay £m</i>	<i>Non-Pay £m</i>	<i>Total £m</i>	<i>GENERAL HOSPITAL PROGRAMME</i>	<i>Pay £m</i>	<i>Non-Pay £m</i>	<i>Total £m</i>
0.384	0.555	0.939	Programme Support Services	0.390	0.414	0.804
	0.080	0.080	Lottery			
16.876	6.122	22.998	James Connolly Memorial Hospital	17.854	5.901	23.755
6.948	2.848	9.796	St. Columcille's Hospital	7.204	2.849	10.053
5.443	1.857	7.300	Naas Hospital	5.603	1.860	7.463
5.616	1.513	7.129	Cherry Orchard Hospital	5.878	1.514	7.392
6.354	1.455	7.809	St. Mary's Hospital	6.547	1.457	8.004
3.180	0.560	3.740	St. Vincent's Hospital	3.276	0.559	3.835
2.119	0.322	2.441	St. Colman's Hospital	2.183	0.321	2.504
0.551	0.116	0.667	Wicklow Hospital	0.568	0.115	0.683
1.111	0.190	1.301	Baltinglass Hospital	1.144	0.189	1.333
2.589	0.411	3.000	Bru Chaoimhin	2.667	0.410	3.077
1.160	0.190	1.350	St. Clare's Home	1.195	0.189	1.384
1.709	0.156	1.865	Clonskeagh Hospital	1.762	0.156	1.918
2.161	0.332	2.493	St. Brigid's Home	2.227	0.331	2.558
0.535	0.163	0.698	Navan Road Elderly Service	0.551	0.163	0.714
			Sir Patrick Dun's	0.400	0.150	0.550
0.196	10.602	10.798	Nursing Homes	0.200	10.502	10.702
4.510	5.048	9.558	Ambulance/Transport	4.646	4.991	9.637
0.098	13.853	13.951	External Agencies	0.101	13.371	13.472
61.540	46.373	107.913	Total	64.396	45.442	109.838

APPENDIX 11

EASTERN HEALTH BOARD

24 DEC 1996

RECEIVED
SECRETARIAT

23 December 1996

Mr. P.J. Fitzpatrick
A/Chief Executive Officer
Eastern Health Board
Dr. Stevens' Hospital
Dublin 8



DEPARTMENT
OF HEALTH
AN ROINN
SLÁINTE

Shaping a
Healthier Future

Determination of Health Expenditure and Service Priorities for 1997

Dear Mr. Fitzpatrick,

1. **Introduction**

I am writing to advise you of the Minister's determination of the net non-capital health expenditure (i.e. gross expenditure less minor income) for your Board for 1997 and your Board's revised determination for 1996. I am also setting out the arrangements for the preparation of a Services Plan, in line with the approved level of net expenditure. The detailed financial elements are contained in the Appendix.

2. **Implementing the Government Programme for Renewal**

It will be possible, having regard to the resources made available by the Government to the Minister, to make further progress during 1997 in the implementation of the Programme. In addition to maintaining services at the agreed 1996 levels, the funding available will enable the completion of services initiatives taken in 1995 and 1996, particularly in relation to child care, acute hospitals, development of nursing education, etc. The arrangements for planning, accountability and evaluation anticipate the provisions of the Accountability Legislation which was recently passed by the Oireachtas.

As part of the plan to be submitted for 1997, your Board should develop a monthly expenditure budget and statement of cash flow requirement, reconciled to expenditure in line with the Service Plan. These must be updated continuously, to reflect any approved changes which may be made by the Department to the determination now being notified and to take account of unavoidable changes in the timing of expenditure and/or income. The budget should be updated on a consistent basis for Pay and Non-Pay to reflect accurately the Board's performance against actual expenditure. It is requested that a monthly pay budget projecting staff numbers, WTE and pay costs, be included as an integral part of the Service Plan. It will form the basis for monitoring payroll management, in terms of numbers employed, during the year.

In order to assist your Board to complete the process quickly, senior officers of the Department will be available for detailed consultations as soon as you have prepared an initial draft of the Service and Financial Plan. In the meantime, any matters requiring clarification should, in the first instance, be referred to Dermot Magan of the Finance Unit, (Exts 2809, 2802 or 2832) who will co-ordinate the Department's response to all Health Boards.

5. Acute Hospital Service Plans in 1997

In preparing budgets and Service Plans for the acute hospitals in 1997, Health Boards are requested to draw on both HIPE and in-patient casemix data to which all hospitals participating in casemix budgets have access under the Shared Information System.

Health agencies have responded well to the casemix initiative since its introduction to the allocation process in 1993. With four years experience of costed casemix budgeting and the wealth of support data now available to hospitals, there is now considerable potential for clinicians and management to evaluate utilisation and peer performance with a view to identifying opportunities for service improvement. The Department wishes to make further progress in this area in 1997 and to extend this method of service management across health agencies.

It must be stressed again that a monthly commentary by the CEO, interpreting performance to date and advising the strategy for the remaining period, is required as an integral part of the IMR. The commentary provides an essential explanation of the boards performance under the various programmes, both in terms of service delivery and financial stability. The normal electronic data capture arrangements remain in place for the full suite of IMR forms including financial data.

Any adjustment in your Board's financial plan which would increase the expenditure in 1997 (or in a future year) beyond the agreed determination cannot be made without the Minister's prior approval, no matter how pressing the service case for such adjustment. Adjustments which do not affect the overall expenditure and do not give rise to additional commitments in future years can, of course, be made as an integral part of your management function.

If your Board has, on the basis of the information now available to you, incurred any excess expenditure in 1996 your Board's Services Plan must include provision for the elimination of any excess expenditure carried forward from 1996, but within the determination now approved for 1997.

Your Board should detail, as part of its Service Plan, how it proposes to recover the excess expenditure and bring current expenditure back into line, without reducing the level of services approved in respect of 1996. Any significant excess being brought to account at this stage will, inter alia, raise questions regarding the reliability of your Board's regulatory and reporting systems.

Your Board should immediately review all of its overseas referral cases under EC Regulations and ensure that systems, practices and procedures are in place to review these cases on an on-going basis and to control expenditure under this heading. Expenditure properly incurred should be met without undue delay and should, of course, form part of your Board's Service Plan.

8. Greater Devolution to Health Boards

Three initiatives, relating to personnel, information technology and capital expenditure, which continued in 1996 in the process of greater devolution to Health Boards, are being continued into 1997.

8.1 Personnel Policy

We would wish to continue in 1997 the greater autonomy delegated to your Board in 1996 concerning the filling of non-consultant replacement posts without recourse to the Department. I am concerned that **employment levels are strictly maintained within the notified approved ceiling. The filling of both new and replacement consultant posts and the creation of any additional non-consultant posts continues to require the prior approval of the Department.**

The continuation of autonomy with regard to non-consultant replacement posts is on the understanding that control of numbers is a central element of strict budgetary control of expenditure within the determination. It will continue to be a requirement that detailed job specifications in respect of all senior management posts in the nursing, administrative and paramedical areas are submitted to the Department in advance of the commencement of the recruitment procedure.

It should be noted that the deadline for return of the Personnel Census data is 18 February 1997. A separate letter has issued on this matter giving full details of the requirements, but I would emphasise the necessity of adhering to the deadline. In addition your Agency should ensure that the classification of all staff returns into grades and categories, in both census and IMR returns, is examined to ensure the utmost accuracy. These returns are used as the source for pay cost estimation and as an important factor in judging your Agency's performance against Service Plans.

The Minister also announced that the process of transferring responsibility for funding of these services would begin with the Mid Western and Southern Health Board regions in 1997. The Working Group has now completed its report, "Enhancing the Partnership" which will shortly be presented to the Minister.

It is proposed that detailed discussions will take place between the Department, the Mid Western and Southern Health Boards and the direct funded voluntary mental handicap agencies early in 1997 with a view to implementing the transfer of funding by 1st June 1997 at the latest. The Department will be in touch with your Board shortly concerning the implications of this process for your Board and the direct funded voluntary mental handicap agencies in your region. The direct funded voluntary mental handicap agencies have been informed in their Letters of Determination of the arrangements for the transfer of funding.

9. Review Process

In accordance with the policy set out in the Health Strategy, the Minister is committed to the development of a structured system of review with health boards on the use of resources and the assessment of the service outcomes as a major component of the accountability arrangements which must apply to all public services funded by the Exchequer. In 1997, the focus will continue to be on acute hospital services, with emphasis on further development of the proposals generated during the 1996 review. Arrangements will be made early in 1997, in consultation with the CEO's to prepare the ground for this review. The emphasis will be on effectiveness, quality of service, and linkages with other services and voluntary agencies.

10. Strategic Management Initiative

The focus of Strategic Management Initiative is delivering better quality public services to the people of Ireland. I would like your Board, in an effort to make health services more responsive to the needs of the local population, to adopt and implement a Quality Service Improvement Programme. This might include an examination of consumer satisfaction of the range of services provided.

APPENDIX

Eastern Health Board

Revised 1996 Determination

The revised non-capital determination approved for your board for 1996 is £384.462m. Details of the make up of this determination are at Schedule One attached.

1997 Non-Capital Determination

The non-capital determination approved for your Board for 1997 is £ 399.089. Details of the make up of the determination are at Schedule two attached. Reductions in respect of certain once off items in 1996 amount to £ 8.814m.

Casemix Adjustments

Casemix analysis of costs and activity in the participating hospitals in your board's area has resulted in a reduction of £ 0.067m for 1997. The adjustment comprises three elements:

- an adjustment in respect of in-patient costs and activity in 1995;
- a workload adjustment for activity to the year ending 30 June, 1996; and
- an adjustment in respect of day cases.

The blend rate for the in-patient adjustment is 15 per cent, which includes a workload adjustment of 2 per cent. The day case adjustment, introduced for the first time last year, is under continuing development and has been set at a blend rate of 5 per cent. Full details of the three elements of the adjustments, including refinements to the in-patient model and the new classification system used in the day case model, will be issued shortly. This will be followed by a suite of reports on activity and costs connected with the adjustments, for discussion in the context of your overall 1997 budget and service plan.

Health boards and hospitals receiving a positive casemix adjustment will be asked to submit proposals for use of the additional money before it is spent.

- Positive casemix adjustments must be applied to the hospital to which they relate;
- Proposals to spend casemix gains must be closely identified within the Acute Hospitals Service Plan referred to in paragraph four of your board's Letter of Determination.

Continuing Nurse Education

Additional funding of £ 0.106m is being made available to your Board in 1997 to provide for developments in continuing education for all registered nurses in your employment and in your health board area. You are asked to develop proposals for the application of this funding, which should not be expended on programmes leading to registration on a division of the Bord Altranais Register. **Payment of this funding will be dependent on detailed proposals being submitted to the Personnel Management and Development Unit not later than 28 February 1997.**

Nursing Diploma

A sum of £ 0.077m is being made available to your Board to meet the costs arising in 1997 from the implementation of the Registration/Diploma programme in general nursing education and training. This includes provision for service replacement costs for the Autumn 1997 student nurse intake, payments for the input to the programme of the partner college of higher education and other costs such as student grants, books and uniforms.

Mental Handicap Services

1996 Revised Determination

A once off grant of £ 0.030m towards the revenue deficit incurred by the Dunfirth Community, which is managed by the Irish Society for Autism, has been included in the Board's Revised 1996 Determination.

1997 Determination

The following additional funding has been included in the Board's 1997 Determination in respect of services to persons with a mental handicap;

£ 0.178m in respect of the ongoing costs of the provision of services to persons with autism;

£ 0.100m in respect of the changing client profile in St Joseph's Service, St Ita's Hospital, Portrane;

£ 0.050m in respect of the changing client profile in the services to persons with a mental handicap in Peamount Hospital;

£ 0.100m towards the establishment of a budget base for the services provided by the Irish Sisters of Charity, Donnybrook;

£ 0.027m on a once off basis to meet the cost of the publication of material by the Child Abuse Prevention Programme for special schools;

towards the provision of additional drugs and HIV/AIDS services in 1997. Further funding for the provision of additional services in 1997 will be allocated in the context of the implementation of the recommendations of the Ministerial Task Force on Measures to Reduce the Demand for Drugs.

Food Controls

Additional funding of £ 0.281m is being provided in 1997 for food controls will enable control systems to be further upgraded to meet the requirements of recent EU legislation on the Official Control of Food and on Food Hygiene. Further discussions will take place about the uses for which this money is intended before it will be made available to your Board.

General Practice Development Fund

Your Board's allocation includes a sum of £ 0.755m in respect of the full year costs of on-going and once off developments in general practice. A separate letter will issue to you in relation to the breakdown of this figure as between the various initiatives/grants etc. supported by this allocation.

Services for the Elderly

A further £ 0.060m is being provided to permit the setting-up of the Dementia Information Centre in 1997.

Dental Treatment Services Scheme

Your board was funded in 1996 for the introduction of Phase 2 of the Dental Treatment Services Scheme. Your determination in 1997 includes a sum of £ 0.499m for the full year cost of the Scheme.

Immunisation

A sum of £ 0.660m has been included in your Board's allocation in respect of the 1997 costs for the Primary Childhood immunisation Scheme and for the DTP(a) vaccine.

Health Promotion

Officials of the Health Promotion Unit will be in discussion with you early in the new year in relation to additional funding for Health Promotion activities.

Hickey Report (General Manager Community Services)

A sum of £ 0.433m is included in your Board's allocation to cover the anticipated additional costs involved in the appointment of General Managers (Community Services). A further letter concerning the establishment of this post will issue to your Board in due course.

Eastern Health Board
1996 Revised Determination

Description	Amount Em
1996 Original Determination of Health Expenditure	360,364
Dental Treatment Services Scheme	-0.151
PCW	0.696
S.I.P.T.U.	0.075
Non-Nursing Personnel (Outside Dublin)	0.064
Maintenance Craftsmen	0.234
Cash Allowances (Increase from 05/06/96)	0.108
Miscellaneous (See Note 1)	0.700
High Technology Medicine	0.080
Blood Transfusion Service Board:	2,300
Transfusion Positive	0.023
Positive Action	0.060
Irish Kidney Association	0.024
IP Development Fund	0.079
Aolbhneas	0.038
Tray Women's Refuge	0.094
Child Care Services (Miscellaneous)	0.096
Health & Safety Act	0.020
Development of Ambulance Services	0.225
Accident & Emergency Services	0.150
Blackrock Clinic - Cardiac Surgery Procedures	0.375
Irish Haemophilia Society	0.047
Institute of Community Health Nursing	0.020
Dr Gerry Gavin - Secondment	0.020
Dental Treatment Services Scheme	0.311
Services for the Mentally Handicapped	0.993
Health Promotion Unit	0.030
Intellectual Disability System	0.002
EU Food Directive	0.012
AWA Driving Assessment & Tuition Service	0.017
Accute Hospital Services	0.400
Peamount Hospital	0.500
Contract Beds	0.100
Demand-Led Schemes	6,902
Christmas Bonus	0.132
Drug Demand Measures	2,970
Medical Indemnity	0.229
Child Care Services/Legal Fees	1,000
Superannuation	1,600
Employers PRSI	0.291
Accident & Emergency Plan	0.450
Health (Amendment) Act 1996	0.075
Clinical Waste	0.071
Management Grades	0.075
Students of Environmental Health Science	0.010
Med Lab Technicians	0.028
Houseparents	0.341
Non-Nursing Personnel (Dublin)	1,333
Books	0.035
Radlographers	0.033
QC Recommendation - Peamount	0.045
Merical/Administrative Grades	0.242
National Lottery	0.494
Total Approved Additions	24,096
1996 Revised Determination of Health Expenditure	384,462

Eastern Health Board

1997 Determination of Non-Capital Expenditure

Description	Amount
	Em
1996 Revised Determination of Health Expenditure	384,462
Once-Off in 1996	
GP Development Fund	-0.625
JCM - Development of Day Services	-0.220
EU Food Controls	-0.053
Health & Safety Act	-0.060
Ambulance Services	-0.400
Dublin A&E Plan	-0.250
National Women's Council of Ireland	-0.018
European Institute of Womens Health	-0.020
Langley Freeman Design Group	-0.001
STSB (Gerry Coffey - Salary)	-0.030
Irish Society for Autism	-0.030
Mental Health Association	-0.038
Supl. Registrars Office - Overtime	-0.075
Printing of Offer Document in Relation to Nurses Pay & Conditions	-0.011
High Technology Medicine	-0.080
Hepatitis C - B.T.S.B.	-2.300
Hepatitis C	-0.095
GP Development Fund	-0.079
Aoibhneas	-0.038
Child Care Services (Miscellaneous)	-0.096
Development of Ambulance Services	-0.225
Dublin A&E Plan	-0.050
Blackrock Clinic - Cardiac Surgery Procedures	-0.375
Irish Haemophilia Society	-0.047
Dental Treatment Services Scheme	-0.071
Services for the Mentally Handicapped	-0.035
Intellectual Disability System	-0.002
Drug Demand Measures	-0.170
Christmas Bonus	-0.150
Lump Sums	-1.432
Clinical Waste	-0.071
A&E Plan	-0.100
SIPTU	-0.075
Maintenance Craftsmen	-0.144
Management Grades	-0.045
Med Lab Technicians	-0.018
Houseparents	-0.217
Non-Nursing Personnel (Dublin)	-0.531
Books	-0.022
Radiographers	-0.021
National Lottery	-0.494
Total Once-Off in 1996	-8.814
1996 Revised Base Determination	375,648

1~ HBS

CUMULATIVE EXPENDITURE REPORT TO _____ 199
 £M

----- CURRENT MONTH -----

----- YEAR TO DATE -----

----- FULL YEAR -----

DEPARTMENT	ORIGINAL BUDGET by (+/-) (to APPROVED AMOUNT)	APPROVABLE INCREASES (NOTE 1)	APPROVED REVISED ALLOCATION (NOTE 2)	CATEGORY	MONTH BUDGET	MONTH EXPEND.	MONTH VARIANCE	EXPEND. FOR COMPARABLE PERIOD 1993	PERIOD BUDGET	PERIOD EXPEND.	PERIOD VARIANCE	REVISED PROJECTION 1993	PROJECTED VARIANCE 1993
				PAY									
				NON-PAY									
				TOTAL									
				INCOME									
				NET									

11
 ALLOCATION £ ~ 11

NOTE 1 : Items notified by Department, cost of which have not, as yet, been agreed with Finance Unit i.e. estimated cost only.

NOTE 2 : Revised allocation which has been the subject of approval by the Department.

CUMULATIVE EXPENDITURE REPORT TO _____ 199

PAY

FM

SECTION	ORIGINAL BUDGET (with Approval Allocation)	APPROVED INCREASES	APPROVED REVISED ALLOCATION	CATEGORY	MONTH BUDGET	MONTHLY EXPEND.	MONTHLY VARIANCE	EXPEND. FOR COMPARABLE PERIOD 199	PERIOD BUDGET	PERIOD EXPEND.	PERIOD VARIANCE	REVISED PROJECTION 199	PROJECTED VARIANCE 199
				MANAGEMENT/ ADMINISTRATION									
				MEDICAL/DENTAL I (NCHD)									
				MEDICAL/DENTAL II (Consultants)									
				NURSING									
				PARAMEDICAL									
				SUPPORT SERVICES *									
				MAINTENANCE/ TECHNICAL									
				PENSIONS & REFUNDS									
				GRATUITIES & LUMP SUMS									
				TOTAL PAY									

* SUPPORT SERVICES = CATERING, HOUSEKEEPING, PORTERS AND STAFF FORMERLY INCLUDED IN NURSING AND ALLIED

Appendix 12

HEALTH PROMOTION

This service plan for health promotion for 1997 builds on activities already being undertaken and outlines specific initiatives planned for 1997.

Strategy

Our Board's aims to reflect the direction provided by significant health promotion policy developments such as the publication of the World Health Organisation's *Health for All 2000* plan and the subsequent establishment of targets for the European Region of WHO. Additional impetus was provided by the *Ottawa Charter for Health Promotion* (1986) which set out five areas in which action may be required in order to support and promote health, as follows:

- public policy
- the environment (physical, social, cultural)
- community development
- the education of individuals
- reorientation of the health service
Increased attention has been focused on disease prevention and health promotion

The Health Strategy emphasised health promotion as a priority in order to improve health and quality of life. Cardiovascular disease, cancer and accidents were identified as the main cause of premature mortality in Ireland and targets were set to reduce these diseases. Six topics were identified as imperatives:

- smoking
- alcohol
- nutrition and diet
- cholesterol and blood pressure
- exercise
- accidents

Action plans which were further developed in the subsequent health promotion strategy document have provided further impetus and direction. Four key settings for health promotion were identified - the school, the community, the workplace and in the health services.

While the health sector has primary responsibility in some of these areas our Board recognises the importance of multisectoral and multidisciplinary collaboration is a key component of health promotion. Special efforts are made to involve disadvantaged communities and groups.

higher in urban than in rural areas. While current activities to address nutrition, activity, smoking and alcohol will contribute to reducing mortality from cancer our Board will examine the national cancer strategy document. Our Board will co-operate with national health promotion initiatives in the implementation of national cancer strategy.

Our Board will continue to participate in the National Accidents Forum under the auspices of the Office for Health Gain.

The development of information systems for accident and emergency departments is being supported by our Board. A multidisciplinary working group will make recommendations to the Department of Health and to the health boards.

A collaborative research project on the treatment of paracetamol poisoning is being undertaken with the Liver Unit in St. Vincent's Hospital and the Poisons Information Centre in Beaumont Hospital.

Our Board is supporting the National Council for the Elderly in the development of a national health promotion policy for older people.

Early in 1997 the activities of Dublin Healthy Cities will be reviewed and a plan devised for future activities, with a view to maximising the benefits to be gained from the multisectoral nature of the project.

Review of 1996

Initiatives took place in hospitals, health centres and communities throughout the region during National Healthy Eating Week. This week will be supported again during 1997 when the theme will be: 'Eat more foods rich in starch and fibre'.

The community-based peer-led nutrition education programme continued as part of the Greater Blanchardstown Development Project in Community Care Area 6. During 1997 the course will be further developed in Area 5, with the Clondalkin Women's Network, and in the North Inner City in Area 7 based in the Belvedere Youth Centre.

Our Board continued to support the promotion of physical activity through its collaboration with the Dublin Health Cities Project and with other agencies (Community employment schemes in Ballymun and in the Inner City, the Ten Million Mile Walk, Slí na Sláinte and PROAction - physical recreation for Older Adults). Support for these initiatives will continue in 1997.

Health Promotion Schools Network: ten schools in the region are participating in this network. These include primary and post-primary schools and are involved in a range of activities. Our Board will continue to support the Health Promotion Schools Network in 1997.

A pilot project was begun involving Dublin Healthy Cities Project, Dun Laoghaire/Rathdown County Council and our Board which focused on accident prevention in the Dundrum area. The project will continue during 1997 and other local authorities will chose an additional community for intervention. Priorities will be identified in consultation with the community involved.

Projected Activity in 1997

In addition to 1996 activities outlined above which will continue in 1997, the following priority activities will take place:

- Five Education Officers will be assigned to the Drugs/AIDS Service in 1997 (see the Drugs/AIDS Programme Service Plan for 1997). They will work to the relevant Areas Operations Managers in devising, implementing and evaluating education initiatives as applied to drug misuse and AIDS prevention. These initiatives will be co-ordinated with other health promotion activities by our Board.
- The priority regarding health promotion among Travellers in 1997 will be to develop an information system for traveller births. This will require the assignment of Liaison Officer for Travellers. Detailed plans for the delivery of services for Travellers are set out in the Community Care Service Plan for Travellers.
- The Health Strategy and the national breastfeeding policy set targets for increasing the rate of breastfeeding. An action plan for breastfeeding was drawn up by our Board and priority is being given to the following: (See also the Service Plan for Community Care Programme). The RICHS child information system will be extended to include information on breastfeeding at hospital discharge. A resource public health nurse is being provided and breastfeeding clinics are being set up in each Community Care Area, with priority being given to disadvantaged areas. Action is being taken to make health centres more mother and baby friendly. A study of breastfeeding in the region will be carried out in 1997
- The consultative process on women's health and a survey of our Board's female staff identified the following priorities: domestic violence, stress, and alcohol. The extent of service provision by our Board in these areas is