

EASTERN HEALTH BOARD

Minutes of Proceedings of Meeting of the Eastern Health Board held in the Boardroom, 1 James's Street, on Thursday, 7th January, 1971, at 3 p.m.

Present:

Mr. Patrick Belton, T.O.	Miss K. Kinsella
Dr. F. de Burgh Whyte	Councillor A. Mahon
Mr. P. J. Burke, T.D.	Dr. A. Meade
Mr. M. A. Clinton, T.D.	Dr. J. McCormick
Mr. J. Corcoran, M.B.	Dr. J. St. L. O'Dea
Dr. J. Cullen	Dr. B. O'Donnell
Councillor M. Cunningham	Mr. D. O'Flynn
Councillor J. Dowling	Dr. B. O'Herlihy
Mr. D. Gallivan, B.D.S.	Mr. T. Riordan
Commissioner J. Garvin	Mr. R. Ryan, T.D.
Councillor P. Hickey, P.C.	Councillor J. Sweeney
Miss E. Horgan	Mr. G. Timmins, T.D.
Dr. P. C. Jennings	Mr. E. Timmons, T.D.

Apologies for absence:

Councillor Dr. R. Belton, (Senator)
Mr. D. J. Kennelly, M.P.S.I.
Mr. K. O'Reilly-Hyland
Councillor J. Temple

Dr. J. McCormick, Chairman, presided

Officers in attendance:

Mr. E. O'Caomh, Chief Executive Officer,
Eastern Health Board

Also present:

<i>Dublin Health Authority:</i>	<i>Department of Health:</i>
Mr. J. J. Nolan, Chief Executive Officer	Mr. J. O'Dwyer
Mr. A. O'Brien Miss K. Dolan	<i>Kildare County Council:</i>
<i>Wicklow County Council:</i>	Miss A. Farrington Mr. P. Sheehan
Mr. J. A. Duagan	<i>McKinsey & Co.. Inc.</i>
	Mr. R. Senior

1/71 CONFIRMATION OF MINUTES

The Minutes of the meeting of the Board held on 17th December, 1970 having been circulated, were confirmed—on a proposal by Councillor Hickey, seconded by Councillor Clinton.

2/71 MANAGEMENT IN THE HEALTH BOARDS
—FURTHER CONSIDERATION OF THE MANAGEMENT
STRUCTURE RECOMMENDED IN THE MCKINSEY
REPORT

The Chairman introduced Mr. Richard Senior of McKinsey & Co., Inc., who attended at the request of the Board, and asked him to clarify two points that had concerned the Board at the previous meeting.

1. Would the recommendation of three programme managers result in a tripartite structure?
2. What was the relationship of programme managers to the functional officers?

Mr. Senior briefly put the the need for programme managers in perspective by explaining how they would work towards a better health care in the Health Board's area by:—

- (a) focusing management attention on problems and opportunities;
- (b) developing plans for improving health care; and
- (c) working with others to implement these plans.

The McKinsey Report states that programme managers will need to work closely with those under them, as well as with their colleagues on the management team. Specifically McKinsey recommends that a necessary personal quality of any programme manager is the ability to get things done by persuasion.

On the point of working as a management team, there was no disagreement on the need for programme managers to work together. Mr. Senior said that he thought programme managers would in fact work together because their success depended on it and they needed—

- (a) the Chief Executive Officer's support for proposed plans which would not be forthcoming if the impact of one programme manager's plans on another programme manager's plans had not been made clear to the Chief Executive Officer;

- (b) co-operation from other programme managers in the execution of the plans. For example, it would be no use returning geriatrics to the community if the community had not prepared the services to receive them;
- (c) help from functional officers in developing plans and training and developing staff (reference: McKinsey Report, Volume 1, page 2-3).

On the relationship of programme managers to functional officers. Mr. Senior pointed out that programme managers were executives and functional officers were basically advisors. He then summarised the main activities of the programme managers and functional officers as described in the McKinsey Report, Volume 1, Page 2-4. 5.

He went on to say that all members of the Management Team are very important, but programme managers are next in importance to the Chief Executive Officer because of their *direct* impact on improving health care.

In response to a question as to why McKinsey had rejected the possibility of a geographic organisation of programme managers, Mr. Senior pointed out that a division of responsibility on geographic lines was most needed in the provision of community care. Further recommendations for the organisation under Programme Manager Community Care will be along geographic lines. However, a geographic division within a health board was not desirable for institutions because it provided no improvement over the situation before the Health Act 1970 and detracted from effective planning for institutions which were, after ail, about 70 per cent of the total cost of the health service.

It was then formally proposed by Mr. O'Flynn and seconded by Or. Jennings:

'That we, the Eastern Health Board, adopt the management structure as set out in Table 8 of the McKinsey Report'.

A lengthy discussion followed in the course of which a number of members expressed dissatisfaction at the absence of information in the Report on such matters as methods of selecting staffs and the grading structure below management team level, and at the lack of information from the Minister. They said there was a good deal of anxiety in the minds of the administrative staffs as to what their position would be after the 1st April, 1971. Reference was made to the position stated to have obtained on the setting up of the Dublin Health Authority in 1960, when the absence of such information

adversely affected staff morale and led to difficulties which should not be allowed to recur on this occasion.

The Chief Executive Officer pointed out that staff selection was not in the Consultant's brief. Under the Health Act 1970 arrangements for staff appointments and salaries were to be in accordance with the directions of the Minister. It appeared to the Chief Executive Officer that appointments could be considered only after the Board had performed its function of determining the number and types of offices necessary for the Board's work.

In regard to administrative grades below the Management Team level the Report recommended that a working party, including staff representatives, should undertake a comprehensive study of staffing requirements. This working party had in fact been already set up and would hold its first meeting on the 14th instant. Other staff consultative arrangements had also been set in train which, in his experience, represented an advance on previous arrangements.

After referring to the views he had expressed on the filling of senior posts at the previous meeting, the Chief Executive Officer went on to say that in his opinion the adoption of the structure recommended in the McKinsey Report would provide promotional outlets which would be open to competition among the staffs to be transferred from the three constituent bodies. Moreover, salary scales for the senior administrative grade in the Dublin Health Authority and the staff officer grade in Counties Kildare and Wicklow called for a re-appraisal in the light of the recommendations in the Report and of the changes that would take place after 1st April, 1971. Irrespective of the outcome of any such re-appraisal, officers would, on transfer, retain their existing salary scales and existing conditions of employment such as superannuation benefits, sick pay, leave allowance, etc.

Before the motion was put the Chairman read a letter dated 5th January, 1971 from the Dublin Health Authority Branch of the Irish Local Government Officials' Union.

On being put the motion was carried on the following voting:—

FOR

Dr. F. de Burgh Whyte. Mr. J. Corcoran, M.B.. Dr. J. Cullen.
Mr. D. Gallivan, B.D.S., Commissioner J. Garvin, Miss Eileen Horgan, Dr. P. C. Jennings, Miss K. Kinsella, Dr. A. Meade, Dr. J. McCormick. Dr. J. St. L. ODea. Dr. B. O'Donnell. Mr. Dermot O'Flynn, Dr. B. O'Herlihy, Mr. T. Riordan.

(15)

AGAINST:

Councillor P. J. Burke, T.D., Councillor M. A. Clinton, T.D.,
Councillor J. Oowling, Councillor P. Hickey, P.C., Councillor
A. Mahon, Mr. R. Ryan, T.D., Councillor J. Sweeney, Coun-
cillor G. Timmins, T.D., Mr. E. Timmons, T.D.

(9)

3/71 **APPOINTMENT OF COMMITTEES**
 DELEGATION OF FUNCTIONS

After discussion it was unanimously agreed that the Recommendations in the Consultant's Report be approved in principle. It was also agreed that the Chief Executive Officer should report to the next meeting on appropriate arrangements for implementing the Recommendations.

4/71 **NEXT MEETING**

It was decided to hold the next meeting at 3.00 p.m. on Thursday, 4th February, 1971.

The meeting terminated at 4.50 p.m.

Correct:

EOGHAN O'CAOIMH.
Chief Executive Officer.


Chairman.