

EASTERN HEALTH BOARD

Minutes of Proceedings of Monthly Meeting of the Eastern Health Board held in the Boardroom, St. Brendan's Hospital, Grangegorman, on 6th June, 1974 at 6 p.m.

Present:

Berry, Commissioner J.	Hayes, Commissioner Liam
Birmingham, Mr. Michael E.	Hickey, Cllr. Patk.
Brady, Cllr. M.	Kinsella, Miss Kay
Burke, Cllr. P. J.	Lacey, Miss Mary
Carroll, Cllr. M.	Leonard, Commissioner Tom
Carroll, Dr. Robert	Mahon, Cllr. A.
Corcoran, Mr. J., M.B.	Mahon, Dr. J. R.
Corrigan, Mr. Hugh P.	O'Flynn, Mr. Dermot
Cullen, Dr. J.	Ruane, Mr. Martin
Dockrell, Deputy H. P.	Sweeney, Cllr. John
Doyle, Dr. J. Stephen	Temple, Cllr. John
Harrington, Mr. Kevin A.	Walker, Dr. John

Apologies for Absence:

Cllr. J. Guinan, Dr. P. C. Jennings, Dr. J. McCormick and Deputy G. Timmins.

Cllr. P. Hickey, Chairman, presided.

Officers in Attendance:

Mr. E. O Caoimh, <i>Chief Executive Officer</i>	Mr. J. F. Reynolds, <i>Finance Officer</i>
Mr. J. J. Nolan, <i>Deputy Chief Executive Officer</i>	Mr. F. Elliott, <i>Planning & Eval. Officer</i>
Mr. T. Keyes, <i>Programme Manager, Special Hospital Care</i>	Mr. P.J. Swords
Mr. F. Donohue, <i>Programme Manager, Community Care</i>	Mr. J. Doyle
Prof. B. O'Donnell, <i>Dublin Medical Officer</i>	Mr. H. Dunne
Dr. C. Warde, <i>C.M.O. Wicklow</i>	Mr. P. I. Lyons
Prof. Ivor Browne, <i>Chief Psychiatrist</i>	Mr. A. O'Brien
Mr. R. N. Lamb, <i>Personnel Officer</i>	Mr. B. Garvey
	Mr. E. Dunphy
	Mr. J. Clarke
	Mr. F. McCullough
	Mr. J. A. Duggan
	Mr. K. Quinn
	Miss L. O'Kelly
	Miss K. Dolan

61/74

CONDOLENCE

The Chairman referred to the recent death of Cllr. Dr. R. Belton. He paid a special tribute to him for his illustrious career as a public representative. Deputy H. P. Dockrell, Cllr. P. J. Burke and Commissioner J. Berry associated themselves with the Chairman's remarks. The Chief Executive Officer joined in the tributes paid to the late Cllr. Belton, following which it was unanimously agreed to adjourn the meeting as a mark of respect.

62/74

CONGRATULATIONS

The Chairman referred to recent bombings in Dublin and on behalf of the Board he congratulated all those who had helped in handling the grave emergency which arose and in particular Eastern Health Board and St. James's Hospital personnel present, including Dr. O'Dea, Overseer of the Team; Mr. B. Rogan, Transport Officer; Mr. T. Garrett, Telephonist; Mr. P. Kenna, Transport Supervisor, and Messrs. J. Feeiy and T. Darcy representing the Drivers and Attendants. Cllr. Burke, Cllr. Temple, Cllr. Mahon and Commissioner Hayes all associated themselves with the congratulations. The Chief Executive Officer expressed pleasure at hearing the staff so complimented by the public representatives, and the Board passed a vote of sympathy with the families of those who had suffered. In this connection also a letter dated 23rd May from Mr. B. Corish, Minister for Health, paying tribute to those who played such a notable part in the work of rescue, treatment and general assistance was read.

63/74

ILLNESS OF MEMBER

The Chairman informed the members of the illness of Dr. P. C. Jennings and it was unanimously agreed that the good wishes of the Board for his speedy recovery should be conveyed to him.

64/74

CONFIRMATION OF MINUTES

(a) Minutes of Meeting of the Committee of the Whole House held on the 2nd May, 1974 having been circulated were confirmed on a proposal by Mr. Corrigan, seconded by Cllr. Mahon.

(b) Minutes of Monthly Meeting of the Eastern Health Board held on the 2nd May, 1974 having been circulated were confirmed on a proposal by Cllr. Sweeney, seconded by Commissioner Hayes, subject to the substitution on Page 56

Minute 54/74 of the word "the" for "that" in the first line of the motion and the substitution of "1966" for "1969" after "control of Sales Regulations".

(c) MATTERS ARISING FROM THE MINUTES.

Arising from the Minutes Dr. Walker enquired as to what action was being taken as a result of the motion. He was advised that the Department of Agriculture and Department of Health had been informed of the Board's views. Mr. D. O'Flynn asked that "matters arising from the minutes" should be highlighted.

65/74 PROCEEDINGS OF COMMITTEES

Reports of proceedings of the following Committees having been circulated were adopted as follows:—

- (a) *No. 1 Visiting Committee meeting held at Vergemount Hospital on 9th May, 1974.*
- (b) *No. 1 Visiting Committee meeting held at District Hospital, Baitinglass on 23rd May, 1974.*
- (c) *No. 2 Visiting Committee meeting held at St. Brendan's Hospital on 29th April, 1974.*
- (d) *No. 3 Visiting Committee meeting held at St. Ita's Hospital on 25th April, 1974.*
- (e) *No. 4 Visiting Committee meeting held at St. Mary's Hospital, Phoenix Park on 2nd May, 1974.*

Arising from (b) Cllr. Temple thanked the members of the Board and staff for their co-operation in having the Unit at Baltinglass completed. In connection with (c) the question of providing adequate safety signs at St. Brendan's was raised by Cllr. Burke and Commissioner Berry and they were advised that the matter was under consideration. Mr. Corrigan raised the question of the transport of staff particularly in St. James's Hospital during the current transport strike. Mr. Swords outlined the measures which had been taken and stated that while he was not aware of any complaints, he would have the matter investigated.

Arising from (e) Dr. Walker, Mr. O'Flynn and Mr. Harrington praised the Medical Superintendent, St. Mary's and the Patients' Shop Committee for their co-operation and financial assistance at the St. Laurence O'Toole Day Centre, The Coombe. Queries were also raised as to the progress on the Vascular Medical Unit and the Laboratory facilities at St.

Mary's, and Mr. Nolan informed the meeting that consultations were at present being carried on with Comhairle na n-Ospideil in regard to the former and with the Mater Hospital regarding the latter.

66/74 LOCAL HEALTH COMMITTEES

The Minutes of the Dublin County Local Health Committee having been circulated were noted on the proposal of Cllr. P. Hickey, seconded by Cllr. P. Burke.

67/74 QUESTION

On a proposal by Mr. Bermingham, seconded by Commissioner Berry, it was unanimously agreed that the Chief Executive Officer answer the question lodged.

Question; Cllr. P. J. Burke:

"To ask the Manager will he state how many Social Welfare Officers are in the employment of the Eastern Health Board and would he state their various duties."

Reply:

The Interim Report on Community Care Services gives an account of the Social Work Services provided. The following is a brief summary :

Social Work Services provided by the Board are as follows :

(a) Community Care Programme

(1) Children's Section

1 Senior Social Worker and 14 Social Workers engaged in the care and counselling of unmarried mothers; adoption and fosterage placements; supervision of boarded out children; reception of children into residential care.

(2) Community Social Work Services

There are 10 Senior Social Worker posts and 14 Social Worker posts approved. Steps are being taken to recruit personnel for these posts. Two Senior Social Workers and 8 Social Workers have so far been appointed. The Board approved at its May meeting of the creation of a further 16 Social Worker posts. The sanction of the Minister is awaited.

In addition there are approximately 20 Social Workers provided by voluntary bodies with assistance from the Board.

(b) Special Hospital Programme

There are 19 Psychiatric Social Workers working with the area Psychiatric Teams.

(c) Other Welfare Staff

Home Assistance Staff

3 Superintendent Home Assistance Officers
(Dublin, Kildare and Wicklow)

1 Deputy Supt. Assistance Officer

3 Inspectors

54 Home Assistance Officers.

68/74

PSYCHIATRY SERVICES

PURCHASE OF TWO HOUSES AT SOUTH CIRCULAR ROAD,
KILMAINHAM

The following Report No. 24/1974 from the Deputy Chief Executive Officer was submitted:—

"The Chief Psychiatrist's Report of June, **1972**, on the Development of the Mental Health Services, adopted by the Board provided, inter alia, for the establishment of an acute hostel to serve the St. Patrick's Hospital catchment area. This development was scheduled to be undertaken in the year 1973/74.

Adjoining properties capable of meeting this need have now become available at 730 and 732 South Circular Road, Kilmainham. Their location is particularly suitable as they are within easy reach of St. James's Hospital and St. Patrick's Hospital and are on a main bus route. Suitably adapted they will function as one unit which, in addition to providing acute hostel accommodation for approximately 20 patients, will meet the need for a day treatment programme. The Clinical Director, South Central Catchment area service, has inspected the property and is satisfied as to its suitability.

The Chief Valuer, Dublin Corporation, has negotiated a total purchase price of £31,300. This expenditure is provided for in the Capital Budget for the current year and I propose to accept the Programme Manager's recommendation that, subject to the approval of the Board and the Minister for Health, the property be purchased on the basis of the Chief Valuer's negotiated price.

It will be further necessary to carry out some structural alterations and repairs prior to occupation at an estimated

cost of £9,000. A further report on the staffing of this hostel will be submitted at a later date."

On a proposal by Cllr. Burke, seconded by Mr. Corrigan, the proposals in the Report were unanimously adopted.

69/74 GENERAL HOSPITAL PROGRAMME

(a) *Medical and Allied Research Committee.*

(b) *Representation on Hospital Boards.*

The following Report No. 25/1974 from the Deputy Chief Executive Officer was submitted:—

" (a) *General Hospital Programme—
Medical and Allied Research Committee*

Last year it was agreed (Item 82/73) that any money requested from the Board for work of a medical research nature must be approved by a Scientific Committee to be set up by the Board. At the time it was suggested that there should be a number of doctors on the Committee as well as some public representatives and officials. Among the names put forward were Dr. Doyle, Dr. Mahon, Dr. Meade, Dr. Cullen, Dr. McCormick, Councillor Temple, Mr. O'Flynn, Mr. Corrigan, Councillor Guinan and Commissioner Hayes. I should be glad to have formal confirmation of the composition of the Committee and an indication of any guidelines the Board might wish to have in force.

(b) *Representation on Hospital Boards*

In accordance with the Board's decision I submitted a Report 14a/1973 last year giving in some detail the background to the establishment of the St. James's Hospital Board since July, 1972, and to the development of new departments, facilities and services in the Hospital. I also referred to the general position regarding control of hospitals and allied services in the Eastern Health Board area and the relation thereof to the needs of the rapidly expanding suburbs at Blanchardstown, Tallaght, Finglas and Coolock/Baldoyle. In addition a somewhat critical examination was made of the role, if any, of the Eastern Health Board as such in the management and direction of the policies and workings of the St. James's Hospital and the need in that regard to have the third Programme Manager as a member of the Hospital Board. In relation to the latter point it was agreed to set up a Working Party to examine, among other things, proposals in relation to the membership of St. James's.

Proposed membership of the Working Party included Dr. Doyle, Councillor Mickey, Dr. J. Mahon, Mr. O'Flynn, Commissioner Hayes, Deputy Dockrell, Councillor Guinan and myself.

Under the agreement with the Federated Voluntary Hospitals group, ten of the 20 members on the St. James's Board are nominated by the Eastern Health Board. Two of the ten originally selected were officers of the Board—Dr. Browne who at the time was acting as Programme Manager, Special Hospital Care in a temporary part-time capacity, and myself as Deputy Chief Executive Officer and Programme Manager, General Hospital Care. As the Board is aware, Mr. T. Keyes is now the permanent full-time Programme Manager for Special Hospital Care while Mr. Donohue had already been appointed as permanent full-time Programme Manager, Community Care. From my practical experience of working on the Board I have no doubt whatsoever that the three Programme Managers should be members of the St. James's Board and that one of them should also be a member of the James Connolly Board in addition to Mr. F. Elliott, Planning and Evaluation Officer, who has been of such great practical assistance to that Board.

St. James's Hospital is still in essence a very large community type municipal hospital and as such is very involved in aspects of our domiciliary, health, welfare and social services. This means that the day-to-day affairs and general working of the hospital (apart altogether from major questions of policy) have a very practical interest for the Eastern Health Board. In fact, the activities of the two bodies, especially in the fields of community care, care of the aged and psychiatry, are complementary. There is however, as I have previously stressed, a real need to maintain a balanced outlook at policy making and management level in the major Dublin hospitals, between the broader needs and interests of the Eastern Health Board spread across and through the whole community and the local involvements of the individual hospitals. Even with the best will in the world the local hospital representatives will tend to concentrate their activities and interests in that hospital and to remain somewhat isolated from the Eastern Health Board community services and set-up.

It is to remedy that situation that I have continually stressed the necessity to have at least one Programme Manager on each of the Boards of these hospitals. The need has been met in the case of St. Vincent's Elm Park, the Mater and Peamount Bonn's of which I am a member. A similar proposal has been

made above with regard to James Connolly and St. James's Hospitals. These proposals in no way cast any reflection on the public representatives on these two Boards, who will continue to be involved in overall general policy considerations and implementations. But it has become very evident to all concerned in recent years that the responsibilities and interests of the Eastern Health Board in relation to these hospitals can in practical working terms be best advanced and safeguarded when the public representatives are supplemented by senior officers of the Board. It should also be noted that senior medical and surgical staff in St. James's Hospital who were employed by the Dublin Health Authority at the time of the transfer have made a firm request to have additional representation on the St. James's Board.

Set out below is the usual table of attendances to date at meetings in St. James's:—

	<i>Board Meeting</i>	<i>Executive Committee</i>	<i>Planning Committee</i>
R. Belton (deceased)	6	non-member	non-member
1. Browne	21	non-member	12
P. Burke	27	25	3
S. Carroll	28	non-member	non-member
M. Clinton (resigned)	20	non-member	3
H. P. Dockrell	23	29	6
P. Hickey	34	non-member	non-member
A. Mahon	33	37	non-member
J. J. Nolan	30	57	19
J. O'Connell	5	8	non-member
J. Guinan	3	non-member	1
(replacing M. Clinton Aug. 1973)"			

After a short discussion to which Dr. Doyle and Cllr. Burke contributed, the following motion proposed by Mr. O'Flynn, seconded by Dr. J. Stephen Boyle, was unanimously adopted:

"That the proposals outlined in Report No. 25/1974 be adopted."

70/74 COMMUNITY CARE PROGRAMME - INTERIM REPORT FROM THE PROGRAMME MANAGER

This Report was discussed and it was agreed on a proposal by Cllr. Temple, seconded by Miss K. Kinsella, to defer exam-

ination of the report until a later meeting because of its size and complexity.

71/74 ADDITIONAL ACCOMMODATION FOR
 ADULT MENTALLY HANDICAPPED PATIENTS

The following Report No. 26/1974 from the Deputy Chief Executive Officer was submitted:—

"At its meeting of December, 1973, the Board adopted Report No. 54/1973 recommending the provision of 100 additional beds for adult mentally handicapped persons at Newcastle Hospital. It is now considered by the Programme Manager, Special Hospital Care, following discussions with the Department of Health that St. Columcille's Hospital, Loughlinstown, because of its location, might be a more suitable place for these beds. There is sufficient space at Loughlinstown and it is clear at this stage that our ultimate needs in terms of adult mentally handicapped beds will be far in excess of the proposals for Newcastle Hospital. Accordingly, it is suggested that the Board approve of an initial provision of 100 beds for adult mentally handicapped patients at St. Columcille's Hospital and that the position at Newcastle Hospital be reviewed when the adult mentally handicapped patients there are transferred to the new accommodation. A proposal to provide an acute psychiatric unit also at St. Columcille's is at present under consideration."

After a short discussion to which Cllrs. Temple, Sweeney, Commissioner Berry and Dr. Walker contributed, and to which Mr. Keyes, Programme Manager; Professor Browne and the Chief Executive Officer replied, it was unanimously resolved on a proposal by Cllr. Temple, seconded by Mr. Corrigan:—

"That the proposals outlined in Report No. 26/1974 be unanimously adopted."

72/74 PSYCHIATRIC SERVICES

(a) *South Kildare*, (b) *North Kildare*, (c) *Tallaght*.

The following Report No. 27/1974 from the Deputy Chief Executive Officer was submitted:—

"At its meeting on the 4th March, 1971, the Board adopted Report No. 7/1971 in connection with the provision of mental health services for patients in County Kildare. Briefly, the report indicated that, arising from a resolution by the former Carlow-Kildare Mental Hospital Board, the appropriate officers of the Board and of the former Dublin Health Authority had

advised that a comprehensive mental health service should continue to be provided through the agency of St. Dymphna's Hospital, Carlow, for County Kildare exclusive of the following electoral divisions:—

Celbridge, Kilcock, Maynooth, Donadea, Balraheen, Straffan, Leixlip, Donaghcumper and Cloncurry.

It was agreed that services for that area could more appropriately be provided from St. Loman's Hospital, Ballyowen. It was subsequently agreed that the St. Loman's catchment area should be extended to include the following additional electoral divisions in the north-west of the County:—

Ballynadrummy, Kilrainy, Carrick, Carbury, Windmill Cross, Drehid, Dunfierth, Cadamstown, Timahoe North, Timahoe South and Kilpatrick.

The service for these areas has been provided from St. Loman's Hospital since January, 1972. The population of the area is about 20,000. Out-patient clinics are held at Carbury and Celbridge, day care is provided for an average of 30 patients at The Bungalow, St. Loman's, while an average of six beds are used in St. Loman's for in-patient treatment. Two adjoining semi-detached houses were purchased in a new housing estate in Maynooth for use as a day treatment centre but this project is not being proceeded with.

Due to rapid increase in population in the St. Loman's catchment area, beds in that hospital are under extreme pressure and while the provision of the planned day centre at Cherry Orchard will ease the situation in the short-term, the reconstitution of the catchment area is considered necessary to avoid difficulties in the long-term. It is now suggested by the Programme Manager in consultation with the Chief Psychiatrist that alternative arrangements be made for (a) North-West Kildare and (b) TaMaght area.

At the April, 1974 meeting, the Board asked for a report on a suggestion which had been made that the service for the north-western portion of the county (Ballynadrummy, Kilrainy, Carbury, etc.) might again be undertaken by St. Dymphna's Hospital, Carlow. It was understood that St. Dymphna's would be willing to undertake again to provide services for the area in question. Because of distance factors it is considered that this might not be a suitable alternative to existing services.

In Professor Browne's report on the Development of Mental Health Services which the Board adopted in June, 1972, it was proposed that, gradually, the central and most populous area

of the County (Naas, Newbridge, Kildare, etc.) would be served from a comprehensive treatment centre to be developed at Naas, leaving only the southern part of the county to be served by St. Dymphna's, Carlow. The report envisaged the development of a small number of acute psychiatric beds at Naas backed up by a day treatment centre and hostel or similar facility for tertiary prevention. This would involve the creation of a special psychiatric team to serve this area. It is envisaged that, as soon as possible, the north-western section of the County should be served by this new team; meanwhile, that area should continue to be served by St. Loman's Hospital, although this will go on presenting difficulties. The Capital cost involved in providing the additional facilities at Naas will be approximately £40,000 and annual running costs approximately £30,000.

As recommended in previous reports it is proposed to develop the service in the St. Loman's catchment area in Kildare by the provision of a day treatment centre at Maynooth.. a community workshop and rehabilitation and training centre for the area, as well as hostel facilities. In order to do this it will be necessary also to increase the St. Loman's psychiatric team by one Senior Psychiatrist, one Registrar, one Charge Nurse or Ward Sister, two staff nurses and domestic staff for the day centre and workshops. The capital cost involved will be of the order of £35,000 and annual running costs approximately £20,000.

It is also suggested that a new catchment area be set up for the Tallaght area. The population of this area is growing at an extremely rapid rate and it is proposed that the development of psychiatric services would be closely linked with community services. The needs of the area are being examined in detail at this time and it is not possible to give precise details of facilities and staff proposed. It is suggested that the Board at this stage approve in principle the proposal to provide the necessary facilities at Tallaght. Full details of facilities, staff and costs involved, will be submitted as soon as possible."

Cllr. Mahon expressed satisfaction at the proposals outlined in the Report and took this opportunity to express the appreciation of the Kildare residents on the manner in which the Board had dealt with their many problems. After a short discussion it was unanimously resolved on a proposal by Cllr. Mahon, seconded by Mr. Ruane, as follows:—

"That the proposals outlined in Report No. 27/1974 be adopted."

73/74 CHILD PSYCHIATRIC SERVICES-
ADDITIONAL STAFF

The following Report No. 23/1974 from the Deputy Chief Executive Officer was submitted:—

"The Programme Manager, Special Hospitals Care Programme has examined the additional staff requirements for the Child Psychiatric Service to be developed at Warrenstown (Minute 114/73 refers) and has recommended that the following additional staff is required:—

- 1 part-time Senior Psychiatrist
- 2 Registrars
- 1 Psychiatric Social Worker
- 4 Registered Sick Children's Nurses
- 16 Child Care Workers/Misc.
- 1 Clerk Typist
- 1 Receptionist

The cost of these additional staff in a year will amount to approximately £36,000 for which provision has been made in the current estimates.

I propose with the consent of the Board to seek the sanction of the Minister for Health to the creation of these additional staff."

After a short discussion in which Mr. M. Ruane expressed some reservations as to the merits of employing registered sick children's nurses and to which Professor Browne replied, the report was unanimously adopted on a proposal by Cllr. Burke and seconded by Commissioner Berry.

74/74 HEALTH CENTRE AT KILMORE/
BONNYBROOK

The following Report No. 28/1974 from the Deputy Chief Executive Officer was submitted:—

"In January, 1971, Dublin Corporation allocated to the Board a site for a permanent Health Centre at Cromcastle Road, Coolock. It adjoins the site reserved for the Library. The Board was anxious that since the sites for the Health Centre and Library adjoined, the two buildings should be planned as a community feature and that there should be joint services with resultant economies in cost of building.

When it was learned in January, 1973, that the Corporation might not be siting the Library on the plot beside the proposed Health Centre the Board asked the Corporation to let them have the Library site, as it was, by reason of location and size, much more suitable for the Board's purposes.

In letter dated 9th May, 1974, the Corporation informed the Board that they are hoping to make arrangements with the Vocational Education Committee for the inclusion of a Library to serve the Coolock/Kilmore area in Stage 3 of their Vocational School project in that area and that if and when the negotiations with the Vocational Education Committee are brought to a satisfactory conclusion arrangements can be made to transfer to the Board the site reserved for the Library. The outline planning permission for the Board's scheme to incorporate the site reserved for the Library are to be submitted.

The Board will proceed to erect the Health Centre as soon as Dublin Corporation informs the Board as to whether the site at present reserved for the Library will be made available to the Board.

Provision has been made in the 1974 Capital Programme for the project."

On a proposal by Commissioner Leonard seconded by Commissioner Berry the following motion was unanimously adopted:—

"That the proposals outlined in Report No. 28/1974 be noted."

75/74 DEVELOPMENT OF THE PSYCHIATRIC SERVICES—PSYCHOSOMATIC UNIT

The following Report No. 29/1974 from the Deputy Chief Executive Officer was submitted:—

"In Section 2 of Professor Browne's report of June, 1972, on the development of mental health services, the programmes of research were described and plans for future projects were outlined. Attention was drawn to the desirability of studying the effects of stress in producing both psychological breakdown and a wide variety of physical conditions, with a view to designing treatments to alleviate them. Dr. J. H. Cullen, Director of Research, has submitted the attached Report on the subject. (Demonstration Health Care and Psychosomatic Unit.)

The recommendations in this Report have been endorsed by Mr. Keyes, Programme Manager, and by Professor Browne, Chief Psychiatrist. I have accepted those recommendations in principle and propose, subject to the concurrence of the Board and the approval of the Minister for Health, that a capital grant of about £25,000 be made available for the provision and equipment of a Psychosomatic Unit at the Garden Hill site and that the operating costs of the Unit be met by the Board by way of an annual grant under Section 65 of the Health Act, 1953, of approximately £30,000."

"DEMONSTRATION HEALTH CARE AND PSYCHOSOMATIC UNIT

By far the largest portion of our expenditure on health services is spent in hospitals on specialist services for the late stages of disease. This is the most expensive and least effective point for intervention in the development of disease. By contrast, relatively little is invested in prevention or in the early diagnosis of illness in the community, in general practice, when the progression on to serious disease might be arrested or avoided and the person re-directed to healthy living. In short we appear to spend almost all our money on the treatment of illness rather than on maintaining and fostering positive health.

The evolution of medical science, however, shows that recently there is a growing movement away from the splitting up process of analysis and definition of human functions into their component parts, and a return to awareness of the need for a 'whole-man' approach. This direction is supported by a very large and growing body of knowledge in the behavioural sciences, the implications of which for medical care are fundamental and far-reaching.

A key area in all this work relates to stress and the conditions we refer to as 'stress diseases'. Single-factor explanation of the origins of these diseases are no longer tenable. Rather they must be seen as having many causes ranging through those related to life-style, dietary habits and the coping skills learnt in the course of development, to individual vulnerability in the stability of the body's systems or metabolic pathways. We know also, now, that the cost of modern urban living generates its own powerful stresses altering behaviour and physiology in a profound manner. We know, too, that patterns of activity in the body's systems can be learned or conditioned, depending for their levels and kinds of functioning on the amount and distribution of stress factors

2. Environmental and genetic factors in respiratory diseases;
3. Psychosomatic, metabolic and environmental factors in digestive diseases ;
4. Embryotoxic, genetic and environmental factors in congenital disorders ;
5. Psychological, physiological and metabolic aspects of ageing;
6. Psychological, toxic and environmental factors in road traffic accidents.'

The essential characteristic of these disorders is that many interacting casual factors appear to be concerned. Moreover, they characteristically develop slowly over time. In their beginnings there are signs that the bodily responses to emotion brought about by stress are becoming less flexible and adaptive. Heightened activity and increasing sensitivity of bodily processes, e.g. blood pressure and glandular activity, can be detected. At the same time psychological functioning is manifestly less effective and coping skills are diminishing. The growth of knowledge in these matters over recent years has been astonishing. Hardly any of it has been applied in the health service area. We do, however, know that these early signs of failure to adapt to stress can be detected with the technological skills available to us and that we are able to retrain patients in the better management of their own bodily and psychological resources. We also know that these new skills which a patient can acquire are essential to his growth as a full person and the development of a competent and constructive personality. Many of the stresses we refer to arise in the work area of people's lives and are especially prevalent in urban areas. This unit can therefore begin to find solutions to problems that can only increase in Ireland with the economic developments of the years ahead.

The Board is proposing a contribution to tackling this situation by putting into operation a unit for diagnosing and treating the early stages of breakdown under stress. The service will be undertaken jointly by the Eastern Health Board, and the Foundation for Man of the Department of Psychiatry, University College, Dublin. It will be associated with the teaching and research group practices set up by Professor James McCormick and his Department of Social Medicine, Trinity College, Dublin, and with the College of General Practitioners. The Foundation has a suitable building for the purpose on the Garden Hill site at St. James's Hospital.

nt the patient's life experience. A complex picture thus builds up of the interweaving of life-style and personality with bodily processes. This presents an obvious challenge to the health adviser for the individual patient who must be able to call on a very wide range of skills and knowledge if he is to intervene for the patient's benefit in any, or all, of the processes going on.

The first emphasis in the contribution of the family physician to prevention must be in this vital area of the alleviation of stress syndromes and the prevention of the fully developed stress diseases. He has a unique potential and privilege in this field. He is, ideally, the custodian of the developing health status of the child from birth onwards and can thereby facilitate and protect the growth of healthy life-styles. He is, also, frequently the first resource in times of crisis or major stress in the family. Here he can intervene to ensure healthy adjustment and to prevent the development of chronic states of poor adaptation to the stresses of life. These chronic maladjustments may be either mainly psychological or predominantly physiological. More usually both present in a complex picture of disability.

Doctors currently in practice face a serious disadvantage in dealing with psychosomatic or 'stress diseases'. They have shared an undergraduate training which provided little time for the development of concepts and skills required for a rational and professional approach to them. A major exercise in training will be required if this situation is to be honestly faced and remedied. Training and identifying the appropriate aspects to be emphasised in *this* training will be a central task of the unit proposed.

The major hazards to health facing Western society in the latter part of the 20th century are utterly different from those which faced clinical medicine during its period of great expansion and successful intervention in the latter half of the 19th and early years of this century when the major infections and surgical conditions still remained unconquered. The emphasis now must lie elsewhere and especially in the area of *the* stress disorders and psycho-social problems as is shown by the E.E.C. expert medical research committee who have recently reported to the Commission that:—

Following a *detailed* analysis, which took into account the criteria mentioned above, the following subjects were considered to be of high priority :

1. Metabolic and psychosomatic factors in cardiovascular diseases ;

The unit will be under the direction and control of Dr. John Cullen, the Board's Clinical Director for Research. He has over the past three to four years been building up the necessary staff and methodology in the Behavioural Studies Unit of the Foundation at St. Brendan's Hospital and in the Psycho-endocrine unit of the Foundation at St. James's Hospital. Dr. Dermot Fitzgerald has joined the team as a consultant and will use some of his techniques for the measurement of change in the cardio-vascular system with appropriate cases in the unit. Dr. Cullen has discussed the proposals for the unit with appropriate international authorities and some of these are acting as consultants to the work. The principal authorities involved are Professor Seymour Levine of the Department of Psychiatry, Stanford University; Dr. Lennart Levi of the Unit for Clinical Stress Research, the Karolinska Institute, Stockholm, and Dr. Aubrey Kagan of W.H.O. Professor Hans Selye of Montreal has invited collaboration with the unit and Dr. Cullen is currently exploring its role in proposals of the E.E.C. Commission for Science, Education and Research through his membership of two committees of that Commission.

The Psychology Department of the Board will be an active participant in the work of the Unit.

FUNCTIONS :

1. The provision of a health-care unit where a patient suffering from one or other of the manifestations of stress may be investigated fully in both the psychological and physiological aspects of his health and where he can be treated or helped to adapt to his life situation more effectively in the future.
2. To develop skills and techniques in the unit which can be applied for diagnosis and treatment by the family doctor in the primary health care services.
3. To research into methods of early diagnosis of psychological or physical maladaptation—the precursors of disease and to seek ways in which these techniques could be used in pre-symptomatic diagnosis at community level. These facilities could also be placed at the disposal of organisations concerned to preserve the health of their staffs.
4. To develop programmes of health education which make a real contribution to enabling every citizen to participate in the preservation of his own health and of those around him and to the integration of personality development at every stage in the life-cycle.

FACILITIES :

1. *An out-patient department* where the diagnostic potential of the existing research units of the Foundation can be applied to clinical cases. For example, the resources of the Behavioural Research Unit and the Psychoendocrine Unit can be applied to the study of the psychophysiological stress sensitivity of the individual case.
2. *A day-treatment department* where psycho-social coping skills can be developed by the patient and where special treatment techniques like special problem-oriented groups, behaviour therapy or biofeedback may be applied. Dietary management and control of physiological stress responses can be taught to the patient.
3. *A short-stay in-patient department* with a limited number of beds where more complex treatments can be initiated on a 24-hour basis are required or where diagnosis which requires observation throughout a prolonged period lasting perhaps over a few days can be undertaken.

The additional cost to the Board will be an initial capital outlay of about £25,000 and an annual subvention of about £30,000 in addition to salaries already approved."

After a discussion to which Mr. O'Flynn, Dr. Carroil, Dr. Doyle, Councillor Burke, Mr. Corcoran, Mr. Ruane, Dr. Cullen, Dr. Walker contributed and to which Professor Browne replied the following motion proposed by Councillor Burke, seconded by Mr. O'Flynn was unanimously adopted :—

"That Report No. 29/1974 be adopted subject to Scientific Committee meeting to consider the Report inside 14 days—i.e., not later than Thursday, June 20th, 1974."

76/74

NOTICE OF MOTION

The following Motion in the name of Councillor J. Guinan was seconded by Councillor P. Hickey :—

"That a discussion take place to ascertain what positive action the Eastern Health Board have taken, or are contemplating taking, to give effective support—financial or otherwise—to the Irish Women's Aid Society."

Mr. Donohue, Programme Manager, explained the current situation vis-a-vis this organisation with whom he was in correspondence.

77/74 DELEGATION OF FUNCTIONS

The Chief Executive Officer advised the Board that he had delegated to Mr. T. Keyes functions under the Mental Treatment Acts, 1945-70.

78/74 CORRESPONDENCE

(a) The following letter of May 31st, 1974, from the Department of Health was read and noted :—

" i . in accordance with the provisions of rule 16(2) of the Second Schedule to the Health Act 1970 the Minister has appointed Thursday, July 11th, 1974, as the date of the first meeting of the Eastern Health Board following the local elections.

2. It is presumed that local authorities are well aware of:

(a) Rule 1 of the Second Schedule to the Health Act 1970 in relation to membership and meetings of the health boards and

(b) Rule 1 of the Schedule to the Health (Local Committees) Regulations, 1972 in relation to the appointment of members to local health committees.

However, you may consider it advisable to remind the relevant local authorities in your area of the provisions of the above rules.

3. When the new appointments have been made to your board and to the local health committees in your area by the relevant local authorities perhaps you would convey to this Department the following particulars in respect of each member so appointed :—

(i) name and address

(ii) occupation

(iii) party affiliation (if known)."

(b) Letters dated May 10th to the Chairman Councillor P. Hickey and Mr. E. O Caoimh, Chief Executive Officer, from the Irish Society for Autistic Children thanking the Board and the staff for the successful opening of the Training Centre and Training Home at North Circular Road were read and noted.

(c) Letter dated April 4th, 1974, from the Town Clerk, Dun Laoghaire Borough Council advising that Mr. J. O'Mahony, 5 Castle Villas, Dalkey, had been selected to fill the vacancy on the Local Health Committee created by the resignation of Councillor F. O'Mahony, was read.

(d) The following letter dated May 8th, from the Dublin Corporation was read :—

"I wish to inform you that the Commissioners for the Corporation, at their Monthly Meeting on May 6th, 1974, adopted the following resolution :—

That Dublin Corporation recommend to the Eastern Health Board that arrangements be made for recipients of turf under the free fuel scheme to have this turf delivered free.' "

The Chief Executive Officer advised the meeting that discussions were currently taking place on this very subject and members would be advised of the outcome.

(e) The following letter dated May 23rd from the Dublin County Council was read and noted :—

"On the adoption of the Chief Veterinary Officers' report at its meeting on the 13th inst. it was proposed by Councillor Belton, seconded by Councillor Hickey and Resolved :

That Dublin County Council supports the Eastern Health Board's resolution which calls on the Minister for Health to introduce legislation to control the use of additives, mainly antibiotic, in feeding stuff for farm animals and fowl.' "

At the conclusion of the meeting which in view of the forthcoming local elections was the last one for some of the members in view of their retiral, Mr. Corcoran paid a tribute to the representatives of the local authorities for the enormous amount of work they had put into making the work of the Board such a success and he hoped that as many as possible of them would be members of the Board again after the local elections. Commissioner J. Berry complimented the Chairman and the vocational representatives who had made such a valuable contribution to the business of the Board.

Councillor Burke who announced his retirement from local politics, paid a compliment to the Chief Executive Officer and his staff for their courtesy at all times to him and their dedication to the public in the normal course of their duties and to the efficient service they rendered to the Board at all times.

The Chairman thanked the members for their assistance during the year and reviewed generally the main events of his Chairmanship. He paid a special tribute to Councillor Burke. The Chief Executive Officer thanked members for their tributes. Councillors Sweeney and Mahon associated themselves with the remarks made and stated that their constituents in Wicklow and Kildare were very satisfied with the manner in which they had been treated by the Board.

The meeting terminated at 8.15 p.m.

CORRECT:

Eoghan O Caoimh,
Chief Executive Officer.

CHAIRMAN.