

## EASTERN HEALTH BOARD

*Minutes of Proceedings of Monthly Meeting of the Eastern Health Board held in the Boardroom, St. Brendan's Hospital, Grangegorman. on 2nd October, 1975 at 6 p.m.*

*Present:*

<p>Cllr. M. Brady Cllr. D. Browne Cllr. M. Carroll Cllr. J. Connolly Mr. H. Corrigan Dr. J. Cullen Cllr. J. Durning Ald. A. FitzGerald Cllr. Mrs. Glenn Cllr. T. Hand Mr. K. Harrington Cllr. P. Hickey</p>	<p>Cllr. D. Kinsella Miss K. Kinsella Miss M. Lacey Cllr. Mrs. E. Lemass Cllr. T. Leonard Dr. J. R. Mahon Dr. A. Meade Deputy C. Murphy Mr. D. O'Flynn Mr. M. Ruane Cllr. J. Sweeney Dr. J. Walker</p>
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*Apologies for Absence:*

Cllr. Mrs. J. Barlow, Dr. J. S. Doyle, Dr. P. C. Jennings,  
Dr. J. McCormick and Dr. J. O'Connell, T.D.

Mr. D. O'Flynn, Chairman, presided.

*Officers in Attendance:*

<p>Mr. E. O Caotmh Mr. J. J. Nolan Mr. T. Keyes Mr. F. J. Donohue Prof. B. O'Donnell Mr. J. Reynolds Mr. R. N. Lamb Mr. F. Elliott Mr. J. Sadlier Prof. I. Browne Mr. P. J. Swords Mr. J. Clarke Mr. F. McCullough Dr. B. Pigott</p>	<p><i>Chief Executive Officer</i> <i>D/Chief Executive Officer</i> <i>Programme Manager</i> <b><i>Programme Manager</i></b> <i>Dublin Medical Officer</i> <i>Finance Officer</i> <i>Personnel Officer</i> <i>Planning &amp; Eval. Officer</i> <i>Technical Services Officer</i> <i>Chief Psychiatrist</i> <i>Admin. Assistant</i> <i>do. do.</i> <i>do. do.</i> <i>Chief Dental Surgeon</i></p>	<p>Mr. J. Doyle Mr. H. Dunne Mr. T. McManus Mr. A. O'Brien Mr. K. Quinn Miss L. O'Kelly Mr. T. Barry Miss K. Dolan Dr. J. Noel, <i>Geriatrician</i></p>
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**CONDOLENCES**

The Chairman advised the meeting of the deaths of Dr. T. Coffey, D.M.O. and member of the Drug Formulary Committee; Dr. Laverty, Psychiatrist, St. Brendan's and Newcastle Hospitals, and the mothers of Dr. Mathews and Dr. B. Pigott, Chief Dental Surgeon. The members stood in silence as a mark of respect to the deceased and directed that their sympathy be conveyed to the families concerned.

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**CONFIRMATION OF MINUTES**

The Minutes of the September meeting having been circulated, were confirmed on a proposal by Cllr. M. Carroll, seconded by Mr. M. Ruane.

**(a) MATTERS ARISING FROM MINUTES**

Arising from the minutes Miss Kinselia asked for some information on the current position regarding the Home Help service as she understood that it could be terminated shortly due to lack of funds. Mr. J. Doyle explained the situation and said that it is likely that the scheme would have to be severely curtailed shortly unless further finance was forthcoming. Cllr. P. Hickey, having stressed the enormous advantages of the Home Help service, proposed that the Minister be asked to receive a deputation to discuss the situation. Cllr. T. Hand seconded the motion, which was unanimously agreed to. The deputation elected to wait on the Minister was the Chairman, Mr. D. O'Flynn; Cllr. M. Carroll, Vice-Chairman; Cllr. P. Hickey and Miss K. Kinselia.

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**PROCEEDINGS OF COMMITTEES**

Reports of the following Visiting Committees having been circulated were dealt with as follows:—

**(a) *No. 1 Visiting Committee meeting held at St. Columcille's Hospital on 18th September, 1975.***

After a short discussion about the development of the Maternity Wing and the heating and electrical services, it was agreed to send a deputation to the Minister to impress upon him the urgency of the situation. It was agreed that Cllr. Hand and Cllr. Sweeney should be included in the deputation already formed on the Home Help question.

**(b) *No. 2 Visiting Committee meeting held at Bru Chaoimhin on 17th September, 1975.—Noted.***

- (c) *No. 2 Visiting Committee meeting held at The Coombe Day Centre on 17th September, 1975.—Noted.*

It was also agreed that a report should be made available inside of three months on the proposed utilisation of the old Guinness Dispensary building.

- (d) *No. 3 Visiting Committee meeting held at St. Ita's Hospital, Portrane, on 25th September, 1975.*

After a short discussion to which the Chairman, Mr. O'Flynn, Cllr. Hickey, Mr. Ruane, Cllr. Connolly and Cllr. Brady contributed and to which Mr. Keyes, Mr. Sadlier and Prof. Browne replied, it was agreed to note the report and in the meantime to re-convene the Children's Committee at a convenient date.

- (e) *No. 4 Visiting Committee meeting held at St. Mary's Hospital on 4th September, 1975.—Noted.*

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#### GENERAL HOSPITAL PROGRAMME—REVIEW OF DEVELOPMENTS

The members congratulated the Deputy Chief Executive Officer on this report but decided that in view of its size and the lack of time available to them to study its contents, to defer it to the next meeting.

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#### CAPITAL PROGRAMME 1975

The following Report No. 43/1975 from the Chief Executive Officer was submitted:—

The following capital allocations were made for the Special Hospital Care Programme for 1975:—

1. 72-bed unit for mental handicap at St. Ita's Hospital .....	£60,000
2. Reconstruction of female chronic block. St. Ita's Hospital .....	£40,000
3. Warrenstown House — residential unit for children .....	£20,000
	£120,000

This programme is about one month behind schedule due in one case to the death of a contractor who submitted the lowest tender and in a second case to the difficulty of the

selected tenderer in getting a guarantee bond. This will mean that expenditure on above project in this year will be about £40,000 less than the allocated sum.

The capital programme for St. Ita's Hospital includes the reconstruction of the old male and female nurses' homes. These homes have 36 male places and 86 female places. The work required involves complete re-wiring, provision of wash-hand basins in each room, floor coverings and re-decoration, and the total cost would be about £60,000. It would be possible over the next 4-5 months to carry out the necessary work on the male home and to install the wash-hand basins in the female home. This would leave the electric wiring and decoration of the female home to be dealt with in 1976.

I accept that the work on these homes is not the most urgent required but it is the only work that we deal with within the short time available to us and it would cost about £30,000. In addition, the reconstruction of the two homes would enable us to demolish four chalets which are fire hazards and house 47 male staff, and would also release for the development of mental handicap services 25 places occupied by staff. It is essential to have good staff accommodation in St. Ita's to attract staff required.

I recommend the Board's approval to the above proposal. This would be subject to Ministerial sanction."

On a proposal by Cllr. Hickey, seconded by Cllr. Carroll, the following motion was unanimously adopted:—

"That the Eastern Health Board approve of the proposals outlined in Report No. 43/1975."

#### 131/75                      TEMPORARY BORROWING

The following Report No. 44/1975 from the Chief Executive Officer was submitted:—

" The Board at its June meeting approved of the temporary borrowing of up to £8m., as required, during the quarter ending 30 September, 1975.

The Board's bank account continued to be seriously in overdraft during the current year, due mainly to arrears of Health Services Grant. Representatives of the Department of Health, the Department of Finance, the Central Bank and the Associated Banks discussed the funding and liquidity problems of Health Boards, and reached the following agreement:—

1. Grant payments to Health Boards to be made on a bi-monthly basis instead of monthly.
2. A proportion of existing Health Board overdrafts to be converted to term loans.
3. Pending further review, the remainder of the Health Boards' bank indebtedness to be treated as ordinary overdraft, subject to certain conditions.

Since July the Board has received grant payments in bi-monthly instalments, the current instalments being £900,000 in the middle of the month and £950,000 on the last day.

With regard to (2) the term loan method of financing is to be applied to that proportion of the Board's overdraft attributable to unrecouped balances of revenue health expenditure in the period up to 31 March, 1974. The sum in question amounts to £1,552,666. The rate of interest applicable to the term loan will be the AAA 1-3 year rate (currently 11 -25%). The loan will be repaid in 1976 to 1978, and provided for in the Board's Estimates for those years.

With regard to (3) it was agreed as an interim measure that amounts outstanding to banks after completion of the term conversion loan will be treated as ordinary overdrafts, pending a reassessment early in 1976 in the light of (i) audited figures of unrecouped balances in respect of the nine-month period ended 31 December, 1974, and (ii) expenditure trends and bank borrowing in 1975.

A projection of the Board's expenditure based on the current level of health grant receipts, and the incidence of rating authority payments, indicates that if a term loan of £1,552,666 is effected in October, our overdraft will reach the following peaks in the coming three months:—

October 15	£7 -2m.
October 30	..... £7-6m.
November 13	..... £8 0m.
November 27	..... £8 0m.
December 15	..... £8 0m.
December 30	£7-5m.

The Board's allocation is at present being reviewed by the Department of Health, and I have been assured that extra grant will be forthcoming during the coming months. However, as I have no definite information on this point, I consider it would be prudent to assume that overdraft may reach the levels indicated above.

Accordingly, I request the consent of the Board to:

- (a) the raising of a term loan of £1,552,666 with Allied Irish Banks, to be repaid over a three-year period commencing on 1 January, 1976, interest to be charged at AAA 1 -3 year rate;
- (b) the temporary borrowing by way of overdraft up to £8m. as required during the three months to 31 December, 1975."

After a short discussion the following resolution, on a proposal by Cllr. Carroll seconded by Mr. Corrigan, was unanimously adopted:—

"That the Eastern Health Board hereby consent to the temporary borrowing by way of overdraft and loan as outlined in Report No. 44/1975."

132/75

#### REVISED TRAINING PROCEDURES FOR PSYCHIATRIC NURSES

The following Report No. 45/1975 from the Chief Executive Officer was submitted:—

" It has been necessary to revise the system of training psychiatric nurses. This has arisen because the results of An Bord Altranais examination are not satisfactory and this is particularly true when we contrast the results with that of general trained students. The senior nursing staff in the psychiatric service are at present reviewing in a comprehensive way the programme for the next intake of students. The aim will be to ensure that each student gets adequate experience of all areas of the nursing syllabus and it is intended that a copy of this programme will be given to the student before training commences.

In addition, it is intended that students will in the main work a Monday to Friday week but will do the minimum Sunday and night duty required for training. There will be far greater emphasis on assessment of student progress, particularly at ward level, and courses have been arranged during the month of October for Ward Sisters and Charge Nurses to familiarise them with the revised proposals. These students will be recruited on a temporary basis and while the Board will not guarantee jobs on completion of training, permanent posts will, as far as possible, be reserved for those who successfully completed their training.

The purpose of the change is to give the student more time for study in line with opportunities available to 3rd level students. One of the trade unions has agreed with these proposals on a pilot basis on the understanding that there will be no further intake on those conditions without prior agreement with unions representing nurses. The whole system will be reviewed at quarterly intervals and the Board will be kept informed of progress."

After a short discussion to which Mr. Ruane spoke and Mr. Keyes replied, the following resolution, proposed by Cllr. Connolly and seconded by Deputy D. Browne, was unanimously adopted:—

'That Report No. 45/1975 be noted and approved.'

133/75

#### ADDITIONAL STAFF—NIGHT FIRE/SECURITY ARRANGEMENTS

The following Report No. 46/1975 from the Chief Executive Officer was submitted:—

" In course of correspondence with the Department of Health seeking approval to the installation of the Fire Alarm System at the Lower House, St. Brendan's Hospital, as an interim measure to provide a higher degree of fire safety at night in this area, it was proposed to the Department of Health that one Fire Patrol Attendant be put on duty each night on each of the three floors of this building.

In a letter of 15th August, 1975, the Department of Health has conveyed approval to an increase of £5,000 (Five thousand pounds) in the current year for the employment of the following staff who will be required for this purpose:—

5 Porters

I recommend that the Board approve of these additional employments. When the Fire Alarm System has been installed these employments will cease. The estimated cost for 1976 is £16,000 (Sixteen thousand pounds)."

After a short discussion the following motion, proposed by Cllr. Hickey and seconded by Cllr. Carroll, was unanimously adopted:—

" That the Eastern Health Board consents to proposals outlined in Report No. 46/1975."

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**DENTAL SERVICES**

The following Report No. 47/1975 from the Chief Executive Officer was submitted:—

" In compliance with the resolution adopted at the August meeting of the Board I submit the following report from Dr. B. Pigott, Chief Dental Officer, endorsed by Mr. F. Donohue, Programme Manager—

**A. DENTAL SERVICES IN DUBLIN**

1. The following persons are eligible for dental treatment under the provisions of the Health Act (1970):
  - (a) Children attending national schools.
  - (b) Children under 6 years of age attending Child Welfare Clinics.
  - (c) Persons with full eligibility and their dependants.
2. In the Dublin City, County and Dun Laoghaire area the Health Board has the following facilities for dental treatment:

Dental Clinics at 36 centres, two Mobile Clinics, an arrangement with the Dublin Dental Hospital to treat a limited number of patients and to provide specialist treatments for some of these patients. An arrangement with three dentists in Skerries and Balbriggan who treat eligible patients (in the dentists' surgeries). An arrangement with a number of dentists attached to General Hospitals to treat eligible patients in these Hospitals, and treatment facilities for mentally and physically handicapped persons in a number of schools and institutions.
3. The Board has the equivalent of 48 Wholetime Dental Officers to provide services in the Dublin City, County and Dun Laoghaire area (15/9/75). This number will be increased to 50 in October. Priority in treatment is given to children. This is in accordance with directions issued by the Department of Health and recommendations of the World Health Organisation. Dental Officers are recruited through the Local Appointments Commission and those with special experience or knowledge of preventive dentistry are given extra credit at interviews for posts. Consequently most of those appointed are orientated towards preventive dentistry and the treatment of children.

4. The number of children attending National Schools in the Dublin area is 140,000. To provide an adequate dental service for these children a ratio of one Dentist to 1,500/2,000 school children will be needed. Between 20 and 40 additional dentists will be needed to cater adequately for the children in the area. This does not take into account the number of eligible children under 16 years of age who are attending secondary schools, or children under six years of age attending Child Welfare Clinics, or the expected increase in the number of school children in the area.
5. At present dental treatment for children attending National Schools, children attending Child Welfare Clinics, eligible children under 16 years of age and eligible nursing and expectant mothers are treated at day clinics by Dental Officers. In addition, eligible adults who may require emergency treatment are seen at day clinics. Otherwise eligible adults are treated at evening sessions which are held at 12 centres.

The Dublin Dental Hospital provides a limited service for children and adults, but as this Hospital's main concern is in the teaching field, it is not possible to expand the services provided. Usually the patients treated here are referred from the Board's Clinics. Tuberculosis patients and some other adults are treated in Great Charles Street Clinic. Patients treated in General Hospitals are usually referred by the Board's Dental Officers, having been seen originally in the Board's clinics. As already stated, three private dentists in Skerries/Balbriggan provide treatment for eligible adults.

6. The majority of eligible adults (those over 16 years of age) are treated at evening sessions at present. Up to 1971 these patients were treated at the Dublin Dental Hospital but as the numbers of eligible persons applying for treatment increased, the Hospital was unable to cope with them and there were long waiting lists for treatment in all departments of the Hospital, particularly in the Prosthetic Department (Dentures).

Evening sessions commenced in February, 1971, and it was possible to reduce these lists, and at the end of 1971 the waiting list of eligible patients was in the-region of 250 persons and the waiting period ranging from none to three months. However, although the number of weekly sessions has increased from 23 on the 31/12/72 to 40

on the 1/9/75, the number of applicants for treatment has increased considerably and there has been a corresponding increase in the numbers on the waiting lists.

The following table shows these figures:—

<i>Date</i>	<i>No. on waiting applicants List</i>	<i>No. of for treatment</i>
31/12/72	615	2045 (1972)
31/12/73	1578	4091 (1973)
31/12/74	2137	4572 (1974)
8/8/75	3800	4010 (from 1/1/75 to 8/8/75)

The number who apply for treatment has increased considerably since Medical Cards have become available to young persons over 16 years of age in their own right. The following table shows the age groups of those who applied for treatment between 1/12/74 and 3/5/75:—

<i>Total</i>	<i>Over 60 &amp;</i>	<i>Students under 16</i>	<i>Students over 16</i>	<i>Others</i>
2654	560	246	1141	717
%of total	22%	7%	43%	28%

43% of the applicants were students over 16 years of age, and these formed the largest single group.

7. In the seven months period 1/1/75 to 31/7/75, 3,440 persons applied for treatment and 1,776 persons were treated during this period. Priority in treatment is given to those who are over 60 years of age, or who are handicapped or who are in urgent need of treatment, and consequently the waiting period for these persons is not as long as for others (e.g., students).

However, it can be seen that under the existing arrangements the Board's Dental Staff cannot cope with the demands for treatment. A number of new dental officers will take up duty within the next two months to fill existing posts and it may be possible to increase the number of evening sessions but this will only have a marginal effect on the waiting lists. If arrangements could

be made to have the student population over 16 years of age treated by Private Dentists this would improve the situation considerably, reduce the waiting lists, and could be the commencement of a comprehensive Dental Scheme for adults.

8. Over recent years the approval of the Department of Health has been sought to a scheme for the involvement of Private Dentists in the treatment of certain categories of eligible persons throughout the area. However, approval has not been granted. A sum of £20,000 was included for this purpose in this year's Estimate but was omitted from the Budget allocation in the absence of funds for such development.
9. During the current year the expansion in the School Dental Service has been considerably curtailed. Only four new dental officer posts have been advertised and filled. Provision was made in the original Estimate for a further twelve posts. However, the financial allocation received does not provide for this proposed development.
10. Discussions have taken place between officials of the Department of Health and the Board's Officers, and between the Department Officials and the Irish Dental Association on the treatment of eligible adults. As the discussions between the Department and the Irish Dental Association deal with all aspects of Dental Service and so are likely to be protracted, I recommend that the Board should now request the Department of Health to deal specifically with the eligible student population in its discussions with the Irish Dental Association, and that a scheme for the treatment of this group by Private Dentists be formulated as a matter of urgency.

#### B. CONSULTANT SERVICES IN DUBLIN

##### (a) *Oral Surgery Services*

These are provided by (a) the Dublin Hospital, (b) a number of General Hospitals on the staff of which there are oral surgeons, (c) St. Colmcille's Hospital, Loughinstown, (d) the Maxillo Facial Unit—Dr. Steevens' Hospital.

Facilities, however, in these centres are limited and it is at times difficult to get beds for patients who require hospitalisation for treatment. This situation should improve when the Dental Unit in James Connolly Memorial Hospital will be

ready for use at the end of the year. Four beds will be available for dental patients in this Unit.

The Piatt Report on Medical and Dental Staffing (U.K.) recommended a ratio of one Consultant Oral Surgeon per 250,000 persons. The Consultants group of the Irish Dental Association has had discussions with the Department of Health and Comhairie na nOspideal about the recognition and appointment of Dental Consultants to hospitals, but as yet Dental Consultants have no representation on the Comhairie. Until this position is clarified it will not be possible to assess the needs in the Dublin areas.

Mr. K. Harrington did state in Report No. 53/74 that 'probably as many as half (if not more) of the accident cases involving facial injuries are not examined by an oral surgeon while the patient is in hospital.' The position has not changed essentially since then.

**(b) Orthodontic Services**

Consultant Orthodontic Services are available to eligible patients at the Dublin Dental Hospital, the Maxillo Facial Unit, Dr. Steevens' Hospital, and in the Board's clinics where the services of two Consultants are used on a part-time basis—approximately two days per month—to advise dental officers on the necessary treatments.

The Local Appointments Commission has advertised on a number of occasions in recent years for a post as Orthodontist to the Eastern Health Board but it has not been possible to fill this post. Discussions are taking place at present with the Department of Health and the Dublin Dental Hospital on possible modification in the terms of appointment.

During 1974 in the Dublin area 1,200 children were undergoing orthodontic treatment in Health Board clinics but it is estimated that about 4,500 children would need active orthodontic treatment each year. At present there is a waiting list of 1,800 in Health Board clinics but many of these are not yet ready for treatment, and the list is not as formidable as it looks. As services expand more people avail of them, and consequently more children in need of orthodontic treatment are seen. At present most dental officers carry out some orthodontic treatment and have the services of the two consultants to advise, but there are some patients who require complicated treatment which need the services of a consultant. At present these patients are referred to, the Dental Hospital or to the Maxillo Facial Unit in Dr. Steevens' Hospital, but facilities in both these centres are limited. In the period

1/7/74 to 30/6/75 treatment was approved in these hospitals for 92 children. A further 62 were referred but treatment had not commenced at 30/6/75. It can be seen that a relatively small number of children were referred to these hospitals; the majority of patients are treated in Health Board Clinics by Dental Officers. The functions of the Consultant Orthodontist will be to advise dental officers and to deal with patients who have complex orthodontic problems.

The Piatt report recommended that one consultant orthodontist be appointed for every 500,000 persons in England, and one for every 350,000 persons in Scotland. In the Eastern Health Board area as a whole, at least two consultant orthodontists will be needed.

### C. THE DENTISTS ACT 1928

There has been no change in the legislation governing the Registration of Dentists since the Act was passed in 1928. In the United Kingdom there have been two Dentists Acts in this period, the 1956 Dentists Act and the 1957 Dentists Act. These Acts brought up to date previous legislation and provided for the training and use of ancillary personnel in Dentistry.

No such provision exists in the Dentists Act 1928. The Dental profession has been requesting the Department of Health to amend the Act since 1956, and the Eastern Health Board at its meeting of November 7th, 1974, passed a resolution requesting the Minister for Health to amend this Act. The Department of Health has informed the Board that consideration is at present being given to amending the Dentists Act. Provision for the registration by the Dental Board of ancillary dental staff is among the proposed amendments being considered."

The members complimented the staff who prepared such an informative report and generally agreed that paragraph 10 was the most urgent part of the report, agreeing fully with the recommendations therein. After a lengthy discussion to which Dr. Meade, Cllr. Hand, Cllr. Browne, Cllr. Duming, Aid. FitzGerald, Cllr. Connolly, Deputy Murphy, Mr. Harrington, Cllr. Mrs. Lemass and Chairman Mr. O'Flynn contributed and to which the Chief Dental Surgeon, Dr. Pigott, replied, the following motion, proposed by Dr. A. Meade and seconded by Cllr. T. Hand, was unanimously adopted:—

"That the Report No. 47/1975 be noted and approved and that steps be taken forthwith to implement paragraph 10 of the report and that the Minister for Health be requested to supply the necessary funds."

135/75

**GENERAL MEDICAL SERVICES—CHOICE OF DOCTOR  
SCHEME— PARTNERSHIP— FINGLAS AREA**

The following Report No. 48/1975 from the Chief Executive Officer was submitted:—

" Doctor J. Barnes, 92 Cappagh Road, Finglas, who is a participating doctor in the Board's General Medical Service, has requested permission to take on an assistant with a view to partnership in accordance with the provisions of the Department's circular letter 8/75 dated 9th April, 1975.

Having regard to the number of doctors in Finglas and the continuing housing development there I am satisfied that an additional doctor would improve the service and would give wider choice to eligible persons in the general Finglas area.

The Irish Medical Association and the Medical Union have no objection to Doctor Barnes' proposal.

I recommend that the Board approve of Doctor Barnes' request and that the position be filled in accordance with the procedure laid down in paragraphs 21/22 of the Department's circular letter 8/75 dated 9th April, 1975. The relevant extract from this letter is attached."

*Extract from Circular 8/75 dated 9th April, 1975. from Department of Health—In relation to right of entry of doctors to the General Medical Service paragraph:—*

"21. The creation of a position as partner, or as an additional member of a group practice, or as an assistant with a view to partnership for the purpose of the General Medical Service, will be subject to the approval of the Health Board. In considering any such proposal the Board shall have regard to the total practice of the applicant. Before giving approval the Board must be satisfied:—

- (a) that the creation of the position is preferable to the creation of an additional position which could be filled by open competition in the normal way; and
- (b) that the creation of the position will not result in the admission of a particular person into the General Medical Service while other equally well or better

qualified persons are not given a reasonable chance to compete. Where the Chief Executive Officer proposes to seek the approval of the Board to the creation of a position as a partner, or as an additional member of a group practice, or as an assistant with a view to partnership he shall, before doing so, consult the medical organisations.

22. Where a Health Board agrees to the creation of a partnership or an addition to a group practice or to the recruitment of an assistant with a view to a partnership, the position will be advertised in the normal way, but the doctor or doctors involved or a nominee of the doctor or doctors involved in the proposed taking in of a partner or additional member or assistant will be entitled to sit on the selection board. The selection board shall pay due regard to any objection of this representative to the giving of the post to a particular individual or individuals. If the board considers it desirable it may not recommend any candidate for appointment."

After a short discussion the following resolution, proposed by CHr. Mrs. Glenn, seconded by Cllr. Mrs. Lemass, was unanimously adopted:—

"That the Board consents to the proposals outlined in Report No. 48/1975."

136/75

## NOTICE OF MOTION

The following motion in the name of Dr. J. Walker was seconded by Cllr. Hickey:—

"That the Secretariat be requested to prepare, each January, a detailed Index (with cross indexing facilities) to the Minutes of Proceedings of Meetings of the Eastern Health Board held during the previous twelve months, and that in respect of the years 1970, 1971, 1972, 1973 and 1974 arrangements be set in train, forthwith, to have the appropriate Indices prepared, printed and made available to members."

Dr. Walker explained his reasons for putting down the motion and was supported by Dr. Meade, Cllr. Hickey and Cllr. Duming. The motion was unanimously agreed to.

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## CORRESPONDENCE

- (a) Copy of speech by Mr. R. Barry, T.D., Parliamentary Secretary to the Minister for Health, at the opening of an International Symposium on Preventive Cardiology in St. Vincent's Hospital, Dublin, on 12th September, 1975, was circulated and noted.

- (b) Letter from the Irish Nurses' Organisation was read advising of the resignation of Mrs. M. J. Hennessy, Public Health Nurse, from the Kildare Local Health Committee and nominating Miss Johanna Mullane, Public Health Nurse, Celbridge, as a replacement. This was agreed to unanimously.

138/75

## GENERAL

- (a) Dr. A. Meade asked the permission of the Chair to raise a matter of importance regarding Directors of Community Care and was granted permission to do so. He urged that the Local Appointments Commission, in dealing with the current competition for Directors of Community Care in other health board areas, should be requested to include the posts for the eight Directors of Community Care in the Eastern Health Board area. The Chief Executive Officer explained that he had written to the Department of Health arising from the Minutes of the 3rd July, 1975, and was awaiting a reply. Mr. F. Donohue, Programme Manager, Community Care, explained to the meeting that the situation obtaining in the other health board areas was different from that of Dublin on account of geographical factors and the fact that the post of the Dublin Medical Officer currently being advertised contained some conditions which would modify the duties of Directors of Community Care in the Dublin area. He also pointed out that until support staff and office accommodation was available there was little point in appointing Directors of Community Care. Further, it was his intention to have Community Care areas conform with parish boundaries, and as these had been altered lately it necessitated a further look at the areas.

Dr. Meade requested that action should be taken in this field and it was agreed that further information be made available for the next meeting of the Board.

- (b) Cllr. Mrs. E. Lemass pointed out that due to the non-delivery of post at week-ends her agenda was not available to her until the Tuesday before the meeting. It was agreed that agendas would in future be circulated to members on the Thursday preceding the meeting.
- (c) Mr. Corcoran raised the question of the sale of the dispensary residence at Arklow. The Chief Executive Officer, adverting to his report some months ago on the sale of dispensary residences generally (Report No.

29/1975), said that he felt it was unwise to sell premises of this type in urban areas because of the Board's possible requirements for hostel accommodation, etc., but undertook to review the situation in Arklow.

The meeting terminated at 8.30

p.m. CORRECT:

**E. O CAOIMH.**

*Chief Executive Officer.*

Signed: *Chairman.*