

EASTERN HEALTH BOARD

Minutes of Special Meeting of Eastern Health Board held
in the Boardroom, St. Brendan's Hospital, on Thursday
17 September, 1981 at 5 p.m.

PRESENT

Ald. B. Ahern T.D.,	Mr. D. G. Kelly
Cllr. L. Belton	Mr. M. Matthews
Mrs. S. Bonar	Dr. A. Meade
Cllr. D. Browne	Dr. B. Powell
Cllr. M. Carroll	Cllr. H. Reilly
Cllr. Mrs A Glenn T.D.,	Dr. B. Sheehan
Cllr. A. Groome	Cllr. J. Sweeney
Cllr. T. Hand P.C	Cllr. G. Timmins T.D
Mr. K. Harrington	Dr. J. Walker
Cllr. P. Hickey P. C,	Cllr. Mrs. M. Waugh
Cllr. F. Hynes	

APOLOGY FROM

Prof. J. McCormick.

IN THE CHAIR

Cllr. Dan Browne

OFFICERS IN ATTENDANCE

Mr. P. B. Segrave	Mr. P. I. Lyons
Mr. F. Donohue	Mr. M. O'Connor
Mr. K. Hickey	Mr. M. Cummins
Mr. J. Clarke	Dr. P. Quinn
Mr. P. J. Swords	Miss E. Larkin
Prof. I. Browne	Miss B. Kelly

122/81**CHAIRMAN'S BUSINESS**

The Chairman referred to the resignation of Cllr. Mrs. Waugh who had represented Dun Laoghaire Corporation on the Health Board for the past two and a half years. He thanked her for her contribution to the Board and wished her well in her new place of residence in England. Cllr. Mrs. Glenn regretted that Mrs. Waugh was leaving the Health Board and stated that, having regard to the contribution which she had made to public life, the Board's loss would be great. The Chief Executive Officer, on behalf of the staff and on his own behalf, stated that he wished to be associated with the remarks and good wishes expressed. In reply, Cllr. Mrs. Waugh expressed her regret on resigning from the 123/81

**REPORT OF WORKING GROUP ON THE
ORGANISATION OF GENERAL
HOSPITAL SERVICES FOR SOUTH-EAST
DUBLIN AND EAST WICKLOW**

The special meeting had been arranged to consider the report of the Working Group on the organisation of general hospital services in south east Dublin and east Wicklow, to receive deputations from the Health Board and thanked the members for their good wishes.

Wicklow, Dun Laoghaire and Dublin County Local Committees, and to consider Report of the Chief Executive Officer No. 32/1981.

The Chairman welcomed the deputation from the Wicklow Local Committee consisting of Cllr. James Miley, Dr. J. McManus and Dr. W.J. Roche. The following points were made by the deputation:-

1. The Committee was disappointed with some of the recommendations in the Report of the Working Group and while they agreed that a new board should be established for St. Columcille's Hospital they felt that the Eastern Health Board should retain a majority on it.
2. They agreed there was a need for a new 250 bed hospital in south Dublin/north Wicklow.
3. They felt that the new board should be appointed as soon as possible to plan the new hospital and upgrade the services at St. Columcille'
4. The Board should appoint two paediatric consultants - one for neonatal and one for post-natal together with one Registrar and three House Officers.
5. New regional paediatric services should be located in St. Columcille's Hospital pending the construction of the new hospital.
6. They were unhappy that there was no representative from St. Columcille's Hospital itself on the Working Group.

7. The projected growth in population from 1981 to 1991 was 14% for south County Dublin and 26% for north Wicklow; this projection indicated the need for obstetric and paediatric facilities in the area.

The deputation from Wicklow then withdrew.

The Chairman then welcomed the deputations from Dun Laoghaire and Dublin County Local Committees who had agreed to join together for the purpose of their submission to the Board. The deputation from Dun Laoghaire Local Committee consisted of Cllr. Mrs. A. Elliott, Cllr. W. Willoughby and Miss A. Hanley and that from Dublin County Local Committee consisted of Cllr. S. Barrett T.D., Cllr. Mrs. E. Fitzgerald. Apologies were received from Cllr. D. Murray who was unable to attend as a member of the deputation.

The deputation from Dun Laoghaire Local Committee made the following points:-

1. There would be strong objections to any suggestion that Monkstown Hospital should be closed.
2. Day hospital and day care facilities should be developed in the area. In this connection reference was made to a Survey of Patient-Nurse Dependency, the results of which were published in the Journal of the Irish Medical Association on November 13, 1975 and which found that one-third of the patients examined may not have required treatment in a conventional ward.
3. Recommendations Nos. 7, 8 and 9 were welcomed.
4. St. Columcille's Hospital should be developed and upgraded.
5. St. Michael Hospital, Dun Laoghaire, should be developed and should have a representative of local general practitioners on its board of management.
6. Recommendation No. 12 regarding the establishment of a special advisory co-ordinating body was welcomed.
7. There was agreement with Recommendation No. 13 that the authorities of St. Michael's and St. Vincent's Hospital should invite some members of the new Board for St. Columcille's Hospital to join their management boards.
8. Recommendation No. 10 should be amended by the addition of the words "public medical and other" after the words "some local representation".

The following points were made by the deputation from the Dublin County Local Committee:-

1. They endorsed the views expressed by the deputation from Dun Laoghaire Local Committee.
2. Their main concern was the future of St. Columcille's Hospital.
3. The Report of the Working Group was seen as putting a planning "blight" on St. Columcille's Hospital as a result of which it would be difficult to attract the best staff to work there. Despite the architects reports no economic sense was seen in the suggestion that a hospital of 184 beds should be closed down and replaced by a new hospital with 66 extra beds.
4. The establishment of a neo-natal service in St. Columcille's Hospital was regarded as absolutely vital.

5. The deputation would like the Health Board to re-examine the area to be served and the total population in the catchment of St. Col uncilie's Hospital.
6. The deputation was not satisfied that the Eastern Health Board would have adequate representation on the new Board.

The Chairman thanked the deputations for attending at the Speical Meeting of the Board and for the manner in which they had presented their submissions.

The deputations from Dun Laoghaire and County Dublin Local Committees then withdrew.

The following Report No. 32/1981 from the Chief Executive Officer was then considered:-

"REPORT ON THE ORGANISATION OF GENERAL HOSPITAL SERVICES IN THE SOUTH-EAST DUBLIN AND EAST WICKLOW AREA

1. A Working Group, which included representatives of our Board, was established by the Minister for Health in August 1980 to consider the future organisation of general hospital services in south-east Dublin and east Wicklow and it reported on the 20th May 1981.

The Minister forwarded copies of the report to the interests involved and indicated that the report and its recommendations would receive serious consideration as part of the overall aim of achieving the highest possible standard of acute hospital services, and the best utilization of resources, in the provision of services for patients from that area.

2. The report outlines the background to the Working Group's consideration and referred to the 1974 Government decision which provided that in the future the Dublin area should have six major general hospitals, three on the north side of the city and three on the south side of the city.

The three hospitals on the south side would be St. James's, St. Vincent's and the proposed new hospital at Tallaght.

The report also outlines the arrangements made to transfer services from the smaller hospitals to the six new general hospitals and states "in relation to St. Vincent's Hospital it was envisaged that the existing general hospitals in the area i.e. St. Michael's, Dun Laoghaire and St. Columcille's Hospital, Loughlinstown, should have a close working arrangement with St. Vincent's.

The re-organisation of general hospital services in the Dublin area introduces a new and important development in that a specific population and catchment area to be served is identified in relation to each hospital, and that in addition to any regional or national specialties which may be allocated to it each hospital has, or will have, a direct responsibility to provide general hospital services for its own catchment.

It is envisaged that the south-east Dublin/east Wicklow catchment now served by St. Vincent's, St. Michael's and Loughlinstown will have a population of about 332,000 persons in 1991.

3. The report was circulated to our members for the June meeting of the Board and a summary of the recommendations in the report is attached herewith for the convenience of our members.

Our Board, in a preliminary consideration of the report at its meeting on June 4, 1981, authorised the early implementation of recommendations 7, 8 and 9. The current position in relation to this' decision may be summarized as follows:-

- RECOMMENDATION 7** Discussions with the National Maternity Hospital have reached a stage where that hospital is agreeable in principle to become directly involved in the operation of the obstetrical and neo-natal units at St. Columcille's through an arrangement integrating them totally with the National Maternity Hospital under their Charter and Mastership system.
- RECOMMENDATION 8** Following discussions with representatives of Our Lady's Hospital, Crumlin, regarding the interim arrangements referred to in the Working Group's Report, agreement in principle has been reached on the provision of the necessary sessions for paediatric services on both an in-patient and out-patient basis.

RECOMMENDATION 9

Preliminary discussions have taken place with representatives of St. Vincent's Hospital, Elm Park and a positive response to the concept of joint appointments, on a permanent basis, between St. Columcille's and St. Vincent's is forthcoming. However it is also clear that further progress in discussions along these lines is dependent upon an expression by our Board of its acceptance of the other recommendations made in the report, principally recommendations No. 10 and 12.

4. For some time now the position regarding arrangements for acute hospital services at St. Columcille's has been quite unsatisfactory. The report however provides an opportunity for the hospital to have a clear role in the provision of such services in that area for some years to come and to form a basis for the development of services in the long term. Certainly the best interests of the patients from the area, the hospital and staff would not be served by maintaining the status quo.

The Board in its consideration of a report on services at St. Columcille's Hospital at an earlier meeting (Ref. Minute No. 12/80 of 10/1/80) endorsed the concept of integration and joint appointments, provided such arrangements would ensure the continued progress of St. Columcille's as an active acute hospital. This objective would be achieved if the recommendations of the report were to be implemented, with the proviso that in the long term St. Columcille's would evolve to and eventually be replaced by a new general hospital, probably in Co. Wicklow.

Joint arrangements including a coming together of the interests of the Board and of St. Vincent's, for the provision of services at St. Columcille's would lead to a situation where consultant staffing would be enhanced and put on a firm and permanent basis. This could also result in fuller participation by St. Columcille's in the South Dublin Hospitals "on call" arrangement for emergencies. The hospital could also assume a positive role in medical education with the possibility of teaching hospital status.

5. The discussions outlined in paragraph three above and particularly those with representatives of St. Vincent's Hospital, have not yet reached a stage where I am in a position to make a firm recommendation to the Board concerning the adoption of recommendations 10 and 12 of the report. On the other hand however, we are unlikely to make further significant progress unless an indication is given of a positive attitude by our Board to these two recommendations.

A possible way forward at this stage, therefore, might be that, if our Board were to decide to accept recommendations 10 and 12 in principle, then our Board's Management Team would be in a position to progress the discussions further. The progress of these discussions could be reviewed on a regular basis with the St. Columcille's Hospital visiting committee (Mo. 1 Committee) before a final report and recommendation was brought back to the Board for its consideration."

SUMMARY OF RECOMMENDATIONS

1. A total of at least 200 additional beds will be required to be provided in the area by the early 1990's. (Paragraph 6.3 and 6.4).
2. St. Vincent's Hospital should be retained and developed as the major hospital in the area and as the hospital to provide all, or nearly all, the specialised hospital services required for the area (Paragraph 6.4 and 6.11).
3. In the long-term, the acute general hospital services at St. Columcille's Hospital should be discontinued (Paragraph 6.7).
4. A new hospital of about 250 beds should be provided, probably in County Wicklow to cater for the growing needs of East County Wicklow and the area around the Wicklow/Dublin border. This hospital would replace St. Columcille's. Hospital. (Paragraph 6.8 and 6.10).
5. St. Michael's Hospital, Dun Laoghaire should be retained and extended and should develop the closest links with St. Vincent's Hospital (Paragraph 6.9 and 6.11).
6. The major trauma centre for the area should be established at St. Vincent's Hospital closely linked with St. Michael's and St. Columcille's Hospitals and there should be proper co-ordination of the services in the area as a whole (Paragraph 6.12 and 6.13).
7. The obstetrics and neo-natal unit should continue in St. Columcille's Hospital pending the provision of the new hospital. The approaches which have already been made by the Eastern Health Board to the National Maternity Hospital, Holies Street, should be urgently pursued with a view to that hospital becoming directly involved in the operation of the obstetric and neo-natal unit at St. Columcille's Hospital. (Paragraph 6.14).
8. Paediatric services should be provided in the new hospital as well as at St. Vincent's Hospital. Paediatrics should be developed as soon as possible on an out-patient level, in the interim period, in St. Columcille's as in St. Michael's Hospital and both hospitals should have paediatric consultation available to their children's wards. This service should be provided in direct association with Our Lady's Hospital for Sick Children, Crumlin pending the provision of the unit at St. Vincent's Hospital. (Paragraph 6.15).
9. In the interim period, the operation of St. Columcille's Hospital particularly its consultant staffing should be put on a firm basis and developed at the appropriate level. Such should be brought about through joint appointments on a permanent basis between St. Columcille's and St. Vincent's. (Paragraph 6.16)
10. The Eastern Health Board should relinquish the administration of St. Columcille's Hospital and a new board should be established to administer the Hospital. This board should include representatives of the Eastern Health Board, and St. Vincent's Hospital, some representation from St. Michael's Hospital and some local representation. (Paragraph 7.3).
11. A function of the new board should be the planning, building and equipping of the new hospital. (Paragraph 7.4).
12. A special advisory co-ordinating body should be established representative of the authorities of St. Vincent's, St. Michael's and St. Columcille's Hospitals together with representatives of local general practitioners, directors of community care, University College, Dublin and the other hospitals serving the area. The function of this body would be the consideration of matters relating

to the significant development of services in the area and the structuring of consultant medical posts in the hospitals. (Paragraph 7.6).

13. The authorities of St. Michael's and St. Vincent's hospitals should invite some members of the new board to join their management boards. (Paragraph 7.7).
14. The establishment of joint departments between the hospitals should be pursued. (Paragraph 7.8.)"

Following a lengthy discussion to which Drs. Powell, Sheehan, Meade, Harrington, Kelly, Cllrs. Hickey, Carroll, Sweeney and Timmins contributed the following motion was proposed by Cllr. Carroll and seconded by Cllr. Hickey:-

"That Report No. 32/1981 dated 17/9/1981 be referred to the Local Health Committees for their consideration and observations".

The motion was put to a vote and declared lost. The voting was as follows:-

FOR (2) Cllr. P. Hickey and Cllr. M. Carroll

AGAINST (12) Cllr. D. Browne

Dr. D.G. Kelly

Dr. B. Powell

Cllr. G. Timmins

Cllr. A. Groome

Mr. M. Matthews

Dr. B. Sheehan

Dr. J. Walker

Dr.K. Harrington

Dr. A. Meade

Cllr. J. Sweeney

Cllr. Mrs. M. Waugh

Following a further discussion, to which Drs. Sheehan and Walker contributed and to which the Chief Executive Officer replied, the following motion was proposed by Dr. Powell, seconded by Dr. Harrington and adopted:-

"That this Board accept recommendations 10 and 12 (on Page 25 in the Working Group Report) in principle."

Cllr. Carroll wished to have it recorded that he was against the motion. Report No. 32/1981

from the Chief Executive Officer was noted.

The meeting concluded at 9.30 p.m.

CORRECT: P.B. Segrave

Chief Executive Officer

Signed