



## EASTERN HEALTH BOARD

Minutes of proceedings of Special Meeting  
held in the  
Boardroom, St Mary's Hospital, Chapelizod, Dublin 20  
on Tuesday 17 June 1986 at 5.30 pm.

### *PRESENT*

|                     |                       |
|---------------------|-----------------------|
| Mr F Beale          | Dr J D Behan          |
| Cllr B Briscoe TD   | Cllr I Callely        |
| Cllr M Carroll      | Mrs D Clune           |
| Cllr J Dillon-Byrne | Cllr P Dunne          |
| Mr P Finegan        | Cllr Dr D Fitzpatrick |
| Cllr A Groome       | Cllr W J Harvey       |
| Dr M Henry          | Cllr P Hickey         |
| Cllr F Hynes        | Mr D Kane             |
| Cllr C Murphy       | Dr B O'Herlihy        |
| Cllr J Sweeney      |                       |

### *APOLOGIES*

Ald B Ahem TD. Mr N Andrews TD,  
Prof J S Doyle, Cllr B J Durkan TD

### *IN THE CHAIR*

Cllr J Sweeney

### *OFFICERS IN ATTENDANCE*

Mr K J Hickey, Deputy Chief Executive Officer  
Mr F J Donohue, Programme Manager, Community Care  
Mr M Walsh, A/Programme Manager, Special Hospital Care  
Mr S O'Brien, A/Programme Manager, General Hospital Care  
Mr L P Kavanagh, Personnel Officer  
Mr M J O'Connor, Senior Executive Officer, Secretariat

72/86

**DEVELOPMENT OF PSYCHIATRIC SERVICES AT JAMES CONNOLLY MEMORIAL HOSPITAL, BLANCHARDSTOWN**

The following Report from the Deputy Chief Executive Officer wee circulated.'

'Since 1973 James Connolly Memorial Hospital has provided acute Psychiatric Services for the Blanchardstown area,- utilising Unit 9 which has a bed complement of 22. Prof T Lynch, Clinical Director and Dr V Greene, Consultant Psychiatrist hold joint appointments with the Eastern Health Board and James Connolly Memorial Hospital Board. In the main, the unit in James Connolly Hospital caters for female patients; male patients from the area, and all patients from the Finglas/Cabra sector of Dr Lynch's area are catered for in St Brendan's Hospital. Unit 10 accommodates thirty long-stay patients, 4 of these beds are at present vacant.

In their letter of the 4 June, a copy of which is attached, the Board of James Connolly Memorial Hospital outlined their response/proposals, which generally speaking are very much in line with our Board's proposals for that area. In fact, the proposals from the James Connolly Memorial Hospital Board bring forward the development of the services in the area inasmuch as they are making a forty-bed unit available immediately rather than our requirement for the building of a forty-bed unit.

In this context, a flexible approach is required in the transfer of patients from long-stay areas in St Brendan's Hospital to ensure that a sufficient core of beds is available for the acute needs of the total area. Otherwise, acute patients will require admission to St Brendan's thereby defeating the objective of decentralisation.

In line with the Planning document the services in area No. 6 will, in the main, be community based, with the acute needs of the service being provided from James Connolly Memorial Hospital.

As agreed by our Board at its meeting in January 1986, the detailed plans for Area 6, in line with paragraph 16 of '*Planning for the Future*', can now be prepared. This plan will incorporate the five proposals contained in the resolution adopted by the James Connolly Memorial Hospital Board.

It is proposed that the Special Hospital Care Programme Committee will be involved in formulating the detailed plans for all areas, including area No. 6, and report back to the Board at the earliest opportunity.

*Letter dated 4 June from James ConnoMy Memorial Hospital Board*

*'At the meeting of my Board which took place on Friday 30 May 1986, the Board were advised that a discussion had taken place on 6 May 1986 between representatives of your Authority and this Hospital on the proposals outlined in your Report No SHC 1/1986, 'Proposed Development of a Community Based Adult Psychiatric Service'. My Board had noted in particular, the proposal to decant a number of psycho-geriatric patients from St Brendan's Hospital and had considered in some detail the implications arising from this proposal for both the Hospital and the Health Board.*

*You will recollect that an alternative proposal, emanating from this hospital, was considered at the meeting referred to above. This proposal involved the full development of the acute psychiatric service in this hospital by linking and upgrading two existing units, units 9& 10 - and the provision of a vacant unit*

*to your Authority, on a term basis, for up to forty long-stay patients from St Brendan's Hospital.*

*The alternative proposal was favourably received by your team as it had the merit of providing an immediate advantage to St Brendan's. Furthermore it would save a considerable amount of expenditure in erecting a new purpose built unit on the land retained by your Authority under the leasing agreement and also save expenditure on the necessary provision of a new road. At the conclusion of the meeting both groups agreed to report back to their respective boards.*

*I now wish to confirm that my Board is willing to proceed with this project on the basis of a resolution placed before it on Friday evening and subsequently adopted. I enclose a copy of the resolution for your information. The resolution states my Board's position at this time, specifying what is on offer and outlining conditions for future discussions with your Board.*

*I wish to stress my Board's willingness to be of assistance to the Health Board at this time and would suggest that a special effort be made for the commencement of discussions between the two negotiating groups without delay. My Board will be represented by Mr P Hickey, Chairman, Mr F Elliot, Mrs D Clune, Mr P D Scully, Mr H I Browne, Medical Administrator, Mrs K Sheeran, Matron and Professor T Lynch, Consultant Psychiatrist'.*

#### **Resolution - Psychiatric Services**

1. It is agreed to assist the Eastern Health Board in two ways:
  - (a) by accepting up to forty long-stay patients from St Brendan's Hospital;
  - (b) by undertaking the linking of pavilions 9 & 10 to provide accommodation and services for an integrated short-stay unit of fifty beds for temporary and voluntary patients.
2. The two proposed developments must be regarded as a single project but without detriment to progress, as early as possible, with the transfer of a number of long-stay patients from St Brendan's Hospital as arranged by our consultant, having regard for the accommodation problems of that hospital.
3. The combined project is conditional upon prior assurance of funding for the care and maintenance of the patients to be transferred, and the necessary preparations for their reception; of capital funding for the integrated short-stay unit; and of appropriate funding for that unit as patient numbers increase from the present complement of 22, without detriment to the funding of the medical, surgical and diagnostic services of the hospital, or any necessary additions thereto in terms of staff, accommodation or services.
4. The acceptance of a group of up to forty patients from St Brendan's now is not to be taken as an agreement to provide a permanent long- stay resource for that number of long-stay psychiatric or any number.

The provision of an improved short-stay resource based on pavilions 9 & 10 must not be taken as an agreement to the deletion from the Brief for the new hospital, for which approval has now been awaited for some 2 1/2 years, of the residential, day care and rehabilitation facilities for psychiatric patients set out in detail in that document.

Following a discussion to which Cllrs Murphy, Carroll, Hickey, Groome, Hynes, Briscoe, Dr Fitzpatrick, Mr Finegan, Dr O'Herlihy, Mr Beale, Dr Henry Dr Bohan and Mrs Clune contributed and to which Mr Walsh, Acting Programme Manager, Special Hospital Care and Mr Hickory, Deputy Chief Executive Officer replied, it was proposed by Cllr Murphy, seconded by Cllr Carroll, and agreed to accept, in principle, the offer from the James Connolly Memorial Hospital Board and to appoint a Connolly Memorial Hospital Board to discuss further

- (a) methods of staffing;
- (b) the selection of patients, and
- (c) the manner in which the community service should be provided, on the clear understanding that the bad allocation in the James Connolly Memorial Hospital would enable the Psychiatric Service there to operate independently of St Brendan's Hospital.

It was agreed that the following members should meet with the representatives of the James Connolly Memorial Hospital Board:

Cll J Sweeney, Chairman  
Cllr A Groome, Chairman of Special Hospital Committee  
Mr F Beale  
Cllr M Carroll  
Dr J Behan.

It was also agreed that a report on the outcome of those discussions should be submitted to our Board at its August meeting.

Cllr Dunne's proposal that our Board should seek a commitment from the Department of Health for financial support for the development which conforms with the principles set out in the report *Planning for the Future* was agreed.

On a proposal by the Chairman, seconded by Cllr Hynes, it was agreed to thank the Board of the James Connolly Memorial Hospital for their kind offer and to pay tribute to the representatives of our Board on the James Connolly Memorial Hospital Board for the part which they had played in reaching agreement in this important development.

The meeting concluded at 6.45 pm

CORRECT: K J Hickey  
Deputy Chief Executive Officer

  
Chairman