



EASTERN HEALTH BOARD

Minutes of proceedings of Monthly Meeting
held in the
Boardroom, St Mary's Hospital, Chapelizod, Dublin 20
on Thursday 6 November 1986 at 6 pm.

PRESENT

Mr F Beale	Dr J D Behan
Mrs B Bonar	Cllr I Callely
Cllr M Carroll	Mrs D Clune
Cllr P De Rossa TD	Cllr J Dillon-Byrne
Prof J S Doyle	Cllr P Dunne
Cllr B J Durkan TD	Mr P Finegan
Sen A FitzGerald Ald	Cllr E Fitzgerald
Cllr Dr D Fitzpatrick	Cllr A Groome
Cllr W J Harvey	Dr R Hawkins
Cllr F Hynes	Dr P McCarthy
Cllr C Murphy	Dr B O'Herlihy
Cllr J Reilly	Cllr J Sweeney

APOLOGIES

Aid B Ahem TD, Cllr O Bennett
Cllr B Briscoe TD, Cllr P Hickey

IN THE CHAIR

Mrs D Clune

OFFICERS IN ATTENDANCE

Mr K J Hickey, Deputy Chief Executive Officer
Mr F Donohue, Programme Manager, Community Care
Mr M Walsh, Programme Manager, Special Hospital Care
Mr S O'Brien, A/Programme Manager, General Hospital Care
Mr J F Reynolds, Finance Officer
Prof B O'Donnell, Dublin Medical Officer of Health
Mr G Brennan, Technical Services Officer
Mr L P Kavanagh, Personnel Officer
Mr M J O'Connor, Senior Executive Officer, Secretariat

121/86

CONDOLENCES

On the proposal of the Chairman, votes of sympathy were passed with the following:

- (i) Mr Tom O'Hara, Engineering Officer, St Ita's Hospital, Portrane, on the death of his wife.
- (ii) Dr Miriam Brennan, St Columcille's Hospital, on the death of her father.
- (iii) The family of Miss Monica Lynott, Public Health Nurse, Community Care Area 5 (Cherry Orchard).
- (iv) Mr Peter Byrne, Assistant Chief Nursing Officer, St Brendan's Hospital, on the death of his father.

122/86

CHAIRMAN'S BUSINESS

The Chairman read the following report which was noted by the Board.

(i) *Central Mental Hospital, Dundrum*

'At the October meeting of our Board, it was agreed that a special meeting of the Special Hospital Care Programme Committee should be held in the Central Mental Hospital, Dundrum, to consider reports and summaries of discussions with officials from the Department of Health and Senior Counsel's Opinion, regarding the decision to transfer the new unit to the Department of Justice.

Senior Counsel's Opinion has now been received and arrangements have been made to hold the special meeting of the Programme Committee on Wednesday next, 12 November 1986 at 11.00 am'.

(ii) *Health Policy for Ireland - Special Meeting*

'At the October meeting of our Board, it was agreed that a special meeting of our Board should be arranged to discuss the statement on a Health Policy for Ireland.

In response to a recent Parliamentary Question, the Minister for Health has stated that he has decided that the statement already circulated to the members should be developed into a consultative document for the dissemination shortly to all concerned with health in its broadest terms.

In the light of the Minister's statement, it is proposed to arrange a special meeting when the consultative document becomes available'.

(iii) *Working Group on the Budget*

'It is proposed that the Working Group on the Budget will meet again early in December to review the situation regarding our allocation for Non Capital Health Expenditure for 1986'.

(iv) *Official Openings - Health Centres*

'The new Health Centres at Blessington and Inchicore will be officially opened on 21 November 1986 and 5 December 1986 respectively'.

(v) Board Meetings

'The December meeting of our Board will be held on Thursday 18 December 1986 and the January meeting of our Board will be held on Thursday 8 January 1987'.

The Chairman congratulated and offered her best wishes to Cllr Jim Reilly on the occasion of his marriage.

123/86

**CONFIRMATION OF MINUTES OF MONTHLY MEETING
HELD ON 2 OCTOBER 1986**

The minutes of the Monthly Meeting on 2 October 1986 having been circulated, were confirmed on a proposal by Dr Hawkins, seconded by Cllr Callely.

124/86

QUESTIONS TO THE CHIEF EXECUTIVE OFFICER

On a proposal by Cllr Callely, seconded by Cllr Carroll, it was agreed to answer the questions which had been lodged:

(i) Cllr P De Rossa TD

'To ask the Chief Executive Officer to indicate the extent to which Home Help Services have had to be cut back due to financial shortage, and if these cut backs are compatible with the policy of developing Community Care in place of institutional care?'

Reply

In apportioning the allocation made for the delivery of services in its area the Board had particular regard to the need to maintain and improve services for the elderly in the community. Details of the numbers assisted and the expenditure in the Home Help Services in each of the last four years are set out below:

	Numbers in receipt of Home Help Service at the end of each year	Expenditure by the Board on Home Help Services in each year
1983	3,470	£1,796,000
1984	3,826	£1,908,000
1985	4,218	£2,055,616
1986	4,545*	£2,260,000 (projected)

*(at end of June)

(ii) Cllr P De Rossa TD

'To ask is it proposed to close the Rotunda Annexe on the Whitworth Road, and if so, why, and what alternative use would be intended for the building and grounds?'

(vi) Cllr I Callely

To ask the Chief Executive Officer, in relation to the Rotunda Annexe on Whitworth Road,

- (a) When was it closed;
- (b) When was the Health Board advised regarding the closure;

- (c) What services have been lost due to the closure and where have they been accommodated;
- (d) Is the closure temporary or permanent;
- (e) What development plans exist for the site?

Reply

The Rotunda Annexe on Whitworth Road was closed on 1 September 1986 due to the hospital's adverse financial position.

The Health Board was not advised with regard to this closure as the Rotunda Hospital state that they are under the direct jurisdiction of the Department of Health.

The Hospital states that no services have been lost due to the closure. The Hospital Board is monitoring patient care at regular intervals with particular regard to peak periods of activity and together with the Department of Health they will decide if it is possible to satisfactorily look after patients without the use of the 31 bed unit at the Annexe.

We have been informed that the matter is due for review and further consideration by the Hospital Board and the Department of Health in January 1987.

We are advised that no development plans exist for the Rotunda Annexe site.

(iii) *Mr P Finegan*

May I please have the following information as regards Report No. 23/1984 which was adopted by the Board on 13 December 1984.

1. What developments have taken place to date regarding the information of a central training school for psychiatric nursing?
2. A list of interested bodies who have had consultation with you regarding the above, and also copies of their replies to their queries?
3. A detailed 'cost benefit' that was recommended to the Board regarding the above proposals.

Following the adoption of Report No. 23/1984 by the board my officers have consulted a wide range of interested bodies and groups. The more significant bodies/groups from whom observations were sought and meetings held were on An Bord Altranais, Department of Health, Clinical Directors, Chief Nursing Officers and trade unions/staff associations.

Because of on-going events in a number of areas relating to psychiatric nurse education/training generally it was not possible to achieve a consensus on the practical steps to implement Report No. 23/1984. With a view to ensuring that a Central Psychiatric Nurse Training School will be operational in October 1987 I will shortly be appointing a Director of Psychiatric Nurse Training and a Working Group to achieve this target. The Director and the Working Group will continue the consultative process with the various parties.

I will be requesting the Working Party to prepare a detailed costing of the proposal as a priority.

(iii) *Cllr I Callely*

'Could the Chief Executive Officer advise are there any regulations in regard to the standard of General Practitioners' surgeries?
Is the Board concerned with general facilities i.e. waiting/consulting area, receptionist/secretary, patient records?
What assistance do General Practitioners receive towards practice expenses and what percentage of the Board's budget is allocated towards these expenses?'

Reply

Doctors entering the General Medical Service are required to sign an Agreement with our Board for the provision of general practitioner services. The schedule to the Agreement sets out the terms and conditions to be complied with by the holder of the Agreement.

Paragraphs 10. 11 and 12 of this schedule, which refers to practice premises, are quoted hereunder:

'10 Subject to any supplementary agreement made between the medical practitioner and the Board for the use by him of premises maintained by the Board, the medical practitioners shall provide and maintain the following facilities for persons on his list.

- (a) A waiting room with a reasonable standard of comfort, sufficient in size to accommodate the normal demands of his practice for both eligible and private patients and with adequate seating accommodation.
- (b) A surgery sufficient in size for the requirements of normal general practice, with facilities including electric light, hot and cold running water, an examination couch and other essential needs of such practice.

The medical practitioner shall arrange that a telephone shall be available to him on the premises of his centre or practice or, if he has two centres of practice, at least at the main centre of practice.

- (11) The medical practitioner shall not make arrangements which discriminate between eligible persons and private patients.
- (12) The medical practitioner shall, if required, allow a medical officer to inspect, by prior arrangement, any premises provided under paragraph 10'.

Our Board is satisfied that doctors participating in the General Medical Service comply with the conditions specified in paragraph 10 and 11 of their Agreements.

Former permanent Dispensary Medical Officers have guarantees relating to the use of health board accommodation rent free.

Paragraph 18 of the schedule relates to records and states:

'That Medical Practitioner shall keep a record of attendance in a form approved or directed by the Minister in relation to his attendance on persons for whom he is obliged to provide services and shall make any such record available, when required, for inspection by a medical officer of the Board or of the Minister authorised in that behalf. He shall also keep adequate clinical records'.

Our Board makes available free of charge to all General Medical Services doctors two types of record cards to facilitate them in their record keeping.

While there is no requirement under the Agreement for a doctor to have the services of a receptionist/secretary, many doctors employ a secretary/receptionist, especially those doctors who have large panels of patients.

The General Medical Services Scheme provides for payment of grants where appropriate, for the improvement of practice premises. It also provides for payment each year of a locum and practice expense allowances at a maximum rate of £460 per annum to all doctors (other than former permanent District Medical Officers, who have different entitlements). The total cost of these payments is approximately £220,000 (0.13% of total budget).

Former Dispensary Medical Officers are entitled to annual and study leave with pay and our Board contributes to the cost of their locums.

(v) *Cllr I Callely*

'Could the Chief Executive Officer advise the total number of general practitioners practising in the Board's area, and would the Board approve educational courses (possibly compulsory) for doctors operating in our Board's area?

Reply

The number of doctors participating in the General Medical Service in our Board's area at the 31 December 1985 was 498. There are also other doctors practising on a private basis. These include doctors who opted not to join the General Medical Service, who have retired from the General Medical Service and who are not eligible for admission to the General Medical Service.

The Postgraduate Medical and Dental Board is involved in National Training Schemes for general practitioners in the Eastern, Southern, Western and North-Western Health Boards.

The Scheme involves a three year course, two years of which are spent in hospital training and one year in general practice training under the supervision of a general practitioner. Our Board funds the general practitioner element of training, in its area and currently there are ten doctors undergoing such training.

There are also a number of continuing education programmes being run on a pilot basis in different parts of the country which are funded by the Postgraduate Medical and Dental Board.

The matter of education courses for general practitioners is included in the discussions on the re-organisation of the General Medical Services which are ongoing between the Department of Health, the Health Boards and the Medical Organisation.

Special arrangements apply to former District Medical Officers, who have study leave entitlements.

125/86

CHIEF EXECUTIVE OFFICER'S REPORT

The Deputy Chief Executive Officer read the following report which was noted by the Board:

1. *St Brendan's Hospital*

'I wish to advise Board members that units L, M & N of St Brendan's Hospital have now been vacated and are closed since the 3 November 1986. Arrangements are in hand for their immediate demolition'.

2. *Services for Homeless Boys*

'A copy of the press release by the Minister for Health regarding the establishment of a Task Force to arrange for the establishment of an alternative service for homeless boys to replace the HOPE Hostel, has been circulated for the information of members.

The statement by the Minister that whatever funding is required for the new service is to be made available is particularly welcome and, in this regard, our Board's Programme Manager, Community Care, who is to be a member of the Task Force, had already submitted to the Department of Health detailed proposals and financial requirements for the development of a comprehensive service for homeless boys in line with the report already presented and adopted by our Board's Community Care Programme Committee'.

3. *Beaumont Hospital*

'The request of the General Hospital Committee at their last meeting that the proposed meeting with members of the Beaumont Hospital Board would also include a visit to the hospital was duly conveyed to the Hospital Manager. I am advised that the matter of finalising arrangements for the meeting and visit is on the agenda for next week's meeting of the Beaumont Hospital Board'.

4. *Dispute in Ambulance Service*

'The unofficial industrial action by ambulance personnel at the Eastern Health Board ambulance base at 1 James's Street arises from the necessity to pay wages by cheque rather than by cash.

All of the Board's 7,500 staff with the exception of about 60 ambulance men at this base are paid by cheque. It is necessary for the Board to change from cash payments for security and personnel safety reasons. This necessity was highlighted recently by an armed robbery of cash wages at the base.

The Board advised the staff concerned of the necessity for change on the 1 October with effect from today 6 November. During discussions with the unions concerned in the interim, agreement was not reached on the amount of compensation for the change from cash to cheque payment.

The Board is extremely concerned at the unofficial action as it effects a vital emergency service'.

126/86

PROGRESS REPORTS FROM PROGRAMME COMMITTEES**(i) General Hospital Care Committee**

On a proposal by Dr O'Herlihy, seconded by Cllr Carroll, it was agreed to adopt the Report.

The following items were dealt with in the Progress Report:

1. Meeting with members of the Beaumont Hospital Board;
2. Progress Report on the construction of the new operating Theatre Suite and Out-Patients' Department at St Columcille's Hospital;
3. Progress Report on the development of the Psychiatric Unit and on the Development Control Plan for Naas General Hospital;
4. Inspection of Private Nursing Homes, to ensure their compliance with the requirements of the Homes for Incapacitated Persons Regulations 1985;
5. The Accident and Emergency Service Rota Scheme and other matters relating to the ambulance services in the Dublin area;
6. Services provided in the District Hospital, Baltinglass;
7. Official opening by the Chairman of the St Joseph's Group Home at the District Hospital, Baltinglass;

Following a discussion to which Dr O'Herlihy, Cllr Fitzgerald, San FitzGerald, Cllr Callaly, hynes, Dr Hawkins, Cllr Carroll, Dr Behan, Cllr Dunna and Cllr Durkan contributed, and to which Mr Hickey, Deputy Chief Executive Officer replied, it was agreed that a further progress report would be presented to me General Hospital Programme Committee in January on the Homes for incapacitated Person Regulations 1985.

In response to a request from Dr Hawkins, Mr Hickey stated that the statistical data relating to the activities of our hospitals would, in future reports, be accompanied by financial information.

(ii) Special Hospital Care Committee

On a proposal by Cllr Groome, seconded by Cllr Callely, it was agreed to adopt the Report;

The Progress Report dealt with the following matters:

1. Mental Handicap Services and Cheeverstown House;
2. Fitzgibbon Bathing Place, Kilrock, Howth;
3. Services provided at Sunbeam House and Ballyraine House, Arklow;
4. A comprehensive report on the development of a community based Psychiatric Service in the St Loman's catchment area covering Community Care Areas 4, 5 and North Kildare, which was unanimously adopted by the Committee at its meeting held on 22 October 1986.

Following a discussion on Cheeverstown House, to which Councillors Dunne, Groome, Fitzgerald, Dillon-Byrne, Sweeney and Dr Behan contributed, and to which Mr Hickey, Deputy Chief Executive Officer replied, it was agreed to give further consideration to the relationship between the Health Board and organisations such as Cheeverstown House following consideration by the Special Hospital Care Committee of the Report on Mental Handicap Services at its next meeting.

Dr Behan referred to the report on the Development of a Community Based Psychiatric Service for the St Loman's catchment area, and drew the members' attention to the detailed recommendations in the report which he welcomed. Mr Beala also welcomed the report. Mr Walsh, Acting Programme Manager indicated that the proposals were consistent with the framework set out in the policy document adopted by our Board at its March 1986 meeting 'Proposed Development of a Community Based Adult Psychiatric Service'.

(iii) *Community Care Committee*

On a proposal by Cllr Carroll, seconded by Cllr Dunne, it was agreed to adopt the reports:

The following matters were dealt with in the reports:

1. Matters arising from the minutes of meeting held in Kildare on 25 September 1986;
2. Motion regarding the provision of a comprehensive family/mother health care service at the new Health Centre in Loughlinstown;
3. Report on services in Area 4, Crumlin, Tallaght;
4. General Medical Services;
5. Refund Scheme and Long-Term Illness Scheme;
6. Services for the homeless;

Following a discussion to which Cllr Dunne, Dr Hawkins, Mrs Bonar and Dr O'Herlihy contributed, and to which Mr Donohue, Programme Manager, Community Care, replied, it was agreed to refer the section dealing with the General Medical Services back to the Committee for further consideration.

127/86

PROCEEDINGS OF LOCAL COMMITTEES

The reports of the following Local Committee meetings, having been circulated, were dealt with as follows:

- (i) *Wicklow Local Committee meeting held on 19 September 1986.*
On a proposal by Cllr Dillon-Byrne, seconded by Cllr Carroll, it was agreed to note the report.

- (ii) *Dublin County Local Committee meeting held on 9 October 1986.*

On a proposal by Cllr Carroll, seconded by Cllr Dunne, it was agreed to note the report.

128/86

NOTICES OF MOTION

- (i) The following motion was proposed by Cllr Dillon-Byrne,

'That this Health Board expresses its concern at the proposed reduction in out-patient facilities and requests that they be reviewed'.

The motion was seconded by Cllr Dunne and following a discussion to which Cllr Dillon-Byrne, Dr Hawkins and Or O'Herlihy contributed, was agreed.

- (ii) The following motion was proposed by Cllr Sweeney, seconded by Cllr Dunne, and agreed:

'That in the awarding of contracts for the supplies needed by the Board's institutions, emphasis is placed on the use of Irish materials and ingredients, where they are acceptable'.

- (iii) The following motion was proposed by Cllr De Rossa:

'That the Eastern Health Board notes with concern that the manner in which the Government intends to implement social welfare equalization will result in a drop in income for tens of thousands of families who are already on low income, in some cases by as much as £40 per week, and in view of the intolerable hardship that this will cause and the totally inadequate measures announced by the Government, calls on the Government to review the manner in which it is intended to implement the proposals and particularly to

- (a) *set a minimum figure below which no family's income would be allowed to fall, and*
- (b) *where families stand to lose entitlements, phase the proposals in over a six year period and, in the meantime, increase the level of basic benefits so that there will be no net loss of cash'.*

The motion was seconded by Cllr Dunne and, following a discussion to which Councillors Dr Rossa, Dunne, Fitzgerald, Dillon-Byrne and Dr Hawkins contributed, and to which Mr Donohue Programme Manager, Community Cars Services replied, was agreed.

128/86

CORRESPONDENCE

The following letters, copies of which were circulated were noted:

- (i) Letter dated 31 October 1986 from Mr Michael Butler. Consultant Urologist, Meath Hospital, regarding the installation of a lithotripter in the Meath Hospital in the New Year.

- (ii) Letter dated 4 November 1986 from the Department of Social Welfare regarding the introduction of the final phase of the equal treatment package in the Social Welfare System.

129/86

OTHER BUSINESS

Following a discussion on the Irish Public Bodies Mutual Insurances Ltd Group Personal Accident Scheme for members of Health Boards, it was agreed that cover under Scheme A should be arranged and that members who wished to be included in Scheme B would be liable for the additional premium.

The meeting concluded at 9.15 pm

CORRECT: K J Hickey
Deputy Chief Executive Officer


Chairman