

EASTERN HEALTH BOARD

MINUTIES OF PROCEEDINGS OF MONTHLY MEETING

HELD IN

THE BOARDROOM, ST. MARY'S HOSPITAL, CHAPELIZOD DUBLIN 20

ON THURSDAY, 18TH DECEMBER, 1986 AT.6.00 P.M.

PRESENTS

Mr. F. Beale	Cllr. E. Fitzgerald
Dr. J. D. Behan	Cllr. A. Groome
Mrs B. Bonar	Cllr. W.J. Harvey
Cllr. B. Briscoe, T.D.	Dr. R. Hawkins
Cllr. I. Callely.	Dr. M. Henry
Cllr. M. Carroll	Cllr. F. Hynes
Mrs D. Clune	Dr. D. I. Keane
Cllr. J. Dillon-Byrne	Dr. P. McCarthy
Cllr. P. Dunne	Dr. E. O'Herlihy
Cllr. P. Finegan	Cllr. J Reilly
	Cllr. Jr. Sweeney

APOLOGIES

Ald. B. Ahern, T.D.	Cllr. P. De Rossa, T. D
Mr. N. Andrews, T.D.	Prof. J. S. Doyle
Cllr. O. Bennett	Cllr. Dr. D. Fitzpatrick

IN THE CHAIR

Mrs. D. Clune

OFFICERS IN ATTENDENCE

Mr. K. J. Hickey, Deputy Chief Executive Officer
Mr. F. Donohue, Programme Manager, Community Care
Mr. M. Walsh, A/Programme Manager, Special Hosp Care
Mr. S. O' Brien, A/Programme Manager, General, Hosp. Care
Mr. J. Reynolds, Finance Officers
Mr. L. Kavanagh, Personnel Officer
Mr. M. Mc Nee, Management Services Officer
Prof. B. O'Donnell, Dublin Medical Officer, of, Health
Mr. M. O' Connor, Senior Executive Officer.

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Chairman's Business

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

1. **Working Group on the Budget** - "The Working Group on the Budget met on 10th December, 1986 and will meet again in mid-January 1987 following which a report will be presented to the Board dealing with the likely out-turn for 1986 and the projections for 1987".
2. **Central Mental Hospital, Dundrun** - "Following the Special Meeting of our Board held on 4th December, regarding the New Unit at the Central Mental Hospital, a telegram was sent to the Department of Health, followed by a letter, requesting a meeting with the Minister for Health. A response to our request is awaited".
3. **Services for Homeless Boys** - "In the context of the reports submitted by our Board to the Department of Health and the establishment by the Minister for Health of a Task Force to arrange for the establishment of an alternative service for homeless boys to replace the HOPE Hostel, we have been notified by the Department of Health that the Minister will make the necessary funding available to enable the service, as recommended, to commence immediately".
4. **Nurse of the Year Award** - "I am pleased to inform the Board that two members of our nursing staff reached the last six in the Annual Nurse of the Year Award. They are Sister M. Coyne, Paediatric Department, St. Columcille's Hospital, and Mrs. M. Carroll-Browne Staff Nurse, St. Mary's Hospital, Phoenix Park. I am sure our Board would wish to send congratulations to the two nurses concerned and to the Matrons and staff of the two hospitals involved".
5. **Future Health Policy** - "The consultative document on Future Health Policy has just been published by the Minister for Health. I am arranging to have copies circulated to all Board members. It was agreed that a Special Board Meeting would be held to consider these issues and arrangements in this regard can be finalised at our meeting on 8th January, 1987".
6. **Cuan Aoibheann** - "I am pleased to inform Members that the new unit for the Young Chronic Sick at St. Mary's Hospital will be officially opened on 16th January, 1987".

At the request of the Chairman, Mr. Donohue, Programme Manager, Community Care Service, elaborated on the recent developments regarding the development of an alternative service for homeless boys.

Dr. Behan expressed his regret that a report on the Budget had not been included on the agenda for the meeting. He asked that it be recorded that he was unhappy with the financial accounting systems in operation in the Board.

Mr. Hickey, Deputy Chief Executive Officer, assured the members that the financial systems currently in operation are quite satisfactory.

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Minutes of monthly meeting held on 6th November, 1986 and of Special Meeting held on 4th December, 1986

The minutes of the monthly meeting held on 6th November, 1986, and of the Special Meeting held on 4th December, 1986, were confirmed on a proposal by Cllr. Dunne, seconded by Cllr. Carroll.

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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. Dr. D. Fitzpatrick

"When is it proposed to fully re-open Quarry Road Health Centre? What services are being conducted in the Health Centre and what services are being conducted from other Centres, and where are these services sited?"

Reply:

Our Board's Technical Services Department advises that repairs to the Health Centre at Quarry Road, Cabra, which was damaged by fire in September, 1986 will be completed in March 1987. Pending the re-opening of the Health Centre, services are located as follows:-

Public Health Nurses

28A, Annamoe Terrace., Dublin 7

Community Welfare Officers

28A, Annamoe Terrace, Dublin 7 (for Phibsboro and Old Cabra Area) Quarry Road Health Centre (temporary pre-fab) All other areas.

Social Workers

Community Rooms, St. Finbar's Court, Kilkieran Road.

Dental Services

49, Phibsboro Road.

Immunisation BCG & Chiropody Clinics

Community Rooms, St. Finbar's Court, Kilkieran Road.

A notice containing this information is displayed at Quarry Road, Health Centre, the three Churches in the vicinity, the Employment Exchange, Navan Road and in each of the alternative temporary locations.

(ii) Cllr. J. Dillon-Byrne

"Could the Chief Executive Officer please inform the Board as to how the implementation of the Equalisation Directive is being handled by the Eastern Health Board staff in its areas of responsibility?"

Reply

The equalisation directive does not apply to any of the income maintenance services provided directly by our Board. The Department of Social Welfare is dealing directly with persons in receipt of benefit or assistance from that Department whose incomes are affected adversely by the Directive.

(iii) Cllr. J. Dillon-Byrne

"Did the Chief Executive Officer receive any response to the reports prepared by the Programme Manager re. the services required to deal with the Homeless in Dublin, from the Department of Health?"

Reply

We have been informed by the Department of Health that the Minister has accepted the recommendations of the Task Force, convened by him to arrange for the establishment of an alternative service for homeless boys to replace the HOPE Hostel, and that he will make the necessary funding available to enable the alternative service to commence immediately.

(iv) Mrs B. Bonar

"To ask the Chief Executive Officer:-

- (a) The names of the hospitals in the Eastern Health Board area which employ pharmacists;
- (b) The number and the grading of the pharmacists employed in each hospital;
- (c) Whether they are employed in a temporary or permanent capacity;
- (d) If there are any vacancies?"

Reply (a)	(b)	(c)	(d)
<u>St. Mary's Hospital</u>	One senior full-time	Permanent	No
<u>St. Columcille's Hospital</u>	One senior full-time	Temporary	No
<u>Naas General Hospital</u>	One senior full-time	Temporary	No
<u>St. Loman's Hospital)</u> <u>Clonskeagh Hospital)</u> <u>Dundrum Hospital)</u> <u>Bru Chaoimhin)</u>	One senior full-time	Temporary	No
<u>Hospital)</u>	One senior full-time	Temporary	No
<u>St. Ita's Hospital</u>	One senior full-time One basic grade	Temporary	No Vacant
<u>St. Brendan's Hospital</u>	One Chief II F/T) Two Senior F/T) One Basic F/T) One Sessional P/T)	All temporary except one senior	

Efforts to fill some of these temporary posts through the Local Appointments Commission have not been successful.

in addition to the above, the following posts of Pharmacist are based at Central Pharmacy and a number of these Pharmacists provide services at other hospitals, homes and clinics.

<u>Central Pharmacy</u>	One Chief I F/T)	Temporary	
	One Senior F/T (T.B.)	Permanent	No
	Four Senior F/T (Gen)	Temporary	No

The deployment of these posts is currently under review.

(v) Cllr. P. De Rossa, T.D.

"Will the Chief Executive Officer indicate when it is proposed to provide a new health centre in Bray, Co. Wicklow?"

Reply

The planning brief for this proposal is being prepared at present. When this is approved by the Department of Health an architect and project team will be selected and appointed.

Subject to the allocation of the necessary finance it is hoped that construction of the new centre could start towards the end of 1987.

(vi) Cllr. J. Callely

"Could the Chief Executive Officer advise if there has been any research in health or social problems that have developed in large local authority housing schemes. Would the Chief Executive Officer or the Chief Medical Officer have any suggestions on the total number of housing units to form a local authority housing scheme, and would the Chief Executive Officer like to see an input from the Health Board on the health and social needs of local authority housing estates?"

Reply

There have been many descriptive accounts of the health and social problems which result from re-housing families in large authority housing schemes.

As far back as fifty years ago an account was written of what happened to families in an industrial Midland City in England who were re-housed in a new suburban housing scheme from slum houses in the centre City. It was expected that their health would improve but the reverse turned out to be the case. An investigation carried out revealed that these families were spending a lot of their weekly income - most were unemployed - on hire purchase of new furniture for their new homes. This, plus increased expenditure on bus fares, resulted in their having to cut-back on expenditure on food, with resultant adverse affects on their health.

Since then there have been many other published accounts of the problems encountered by low income families in new suburban housing estates and they generally mirror the problems being encountered at present in a number of peripheral local authority housing developments in Dublin. These are general unhappiness, inability to settle down and develop friendships with neighbours, upset from rowdy teenagers, burglaries, high bus fares, lack of facilities etc. Most wish to be re-housed nearer to the central City for one reason or another.

When these housing estates were being built it was envisaged that, within the new towns, sub-estates of about 7000 houses with a population of about 40,000 would emerge as identifiable communities or townships. Each would have its own focal points which would include shops, schools, church, community centre etc. This did not happen, largely because the latter amenities, which should have been provided by various bodies and by private enterprise, and as part of the infrastructure which should have been built simultaneously with the houses, did not materialise, causing dissatisfaction and inconvenience to the families re-housed there.

With regard to the Health Board having an input into the health and social needs of housing estates, it must be pointed out that Public Health Nurses and Health Board Social Workers and Community Care Teams generally are very much involved in such activity. Health Centres are provided by the Health Board in the larger housing estates.

(vii) Cllr. I. Callely

"Could the Chief Executive Officer advise what are the statutory regulations for birth registration. Are all born/births registered? In the case of a clerical error made in the registration, is a complete new birth certificate issued?"

Reply

The Statutory Regulations, governing the registration of births are "the Regulations for the discharge of the duties of Registrars of Births, Deaths and Marriages, 1880".

Live born children are registered but not still born children. Article 56 of the above regulations provides:-

.... the registrar must not register still-born children either in his birth or death book; but if a child is born alive and dies immediately or soon after birth both the birth and death must be registered separately in the proper form. This applies to entries on Coroners certificates as well as to other entries...."

If a clerical error occurs in a birth registration and is subsequently amended both the original incorrect particulars and the superceding amendment are shown on the full birth certificate.

This is so because the obligation on Registrars and Superintendent Registrars is to issue certified copies of the entries in registers. A certified copy is deemed to be an exact copy of an entry, including any corrections and this is supported by legal advice to the Registrar General's Office, Department of Health.

A short form birth certificate (with name and date of birth only) is also available.

(viii) Cllr. I. Callely

"Can the Chief Executive Officer advise of the number and breakdown (age/sex) of patients in St. Vincent's Hospital, Richmond Row, Fairview, Dublin 3. Could the Chief Executive Officer advise of the number of patients admitted over the past twelve weeks and about where were they referred from?"

Reply

Our Board has two Units in St. Vincent's Psychiatric Hospital, Fairview, available to it on an agency basis for patients from the Dublin North Central Catchment Area - Freeman Unit (Male) and St. Teresa's Ward (Female). The following information is in relation to these two Units.

Over the past 12 weeks, there have been 117 admissions to these Units. A breakdown of referral sources is set out below:-

REFERRAL SOURCE	NO. REFERRED		TOTAL
	MALE	FEMALE	
St. John's Day Centre, Clontarf	—	3	3
Jervis Street Hospital	1	1	2
Mater Hospital	4	—	4
Marino Psychiatric Clinic	—	3	3
Ballymun Psychiatric Clinic	1	—	1
St. Brendan's Hospital	18	9	27
North Strand Psychiatric Clinic	—	2	2
St. Laurence's Hospital	2	—	2
James Connolly Memorial Hospital	1	—	1
St. Patrick's Hospital	—	1	1
Bon Secours Hospital	—	1	1
Orthopaedic Hospital, Clontarf	—	1	1
From home	30	39	69
Total:	57	60	
	Grand Total		117

Number of Patients in Hospital at present; 58 (29 Male and 29 Female).

Breakdown of Age Group

AGE GROUP	MALE	FEMALE	TOTAL
15 - 19 years	2	—	2
20 - 44 years	18	11	29
45 - 64 years	4	11	15
65 - 74 years	1	2	3
75 years +	4	5	9
Total:	29	29	
Grand Total	58		

Our Board does not have information on admissions to the remaining Units in St. Vincent's Hospital which are run directly by St. Vincent's.

(ix) Sen. A. Fitzgerald (Ald.)

"Can the Chief Executive Officer outline the extent to which General Practitioners under the General Medical Scheme advise the Eastern Health Board or the Department of Health about the incidence of illness that arise in their practices. Would statistical information of this kind not be very useful data for the City or County Medical Offices and otherwise?"

Reply

General Practitioners are obliged under the Health Acts to advise the Health Boards of all notifiable Infectious Diseases. There is no obligation to advise the Health Board/Department of Health of any other illness.

Certain groups of doctors have prepared reports analysing morbidity levels encountered in their practices and these reports have been published. The G.M.S. (Payments) Board Annual Report gives details of prescribing patterns of various drugs issued. Our Board's epidemiological requirements across a broad front are being defined at present as part of an information system which is being developed.

(x) Dr. J. Behan

"To ask the Chief Executive Officer to furnish a detailed and comprehensive statement on the establishment, operation and closedown of the Resocialisation Project at St. Brendan's Hospital, including specific information under the following headings:-

- when established;
- the objectives;
- extent and origin of capital and revenue funding, including details of all applications for European Social Fund Grants;
- the professional staff complement;
- the duties, appointment structure and terms of employment of the Project Director;
- the origin of the Project case load;
- its success or otherwise;
- the criteria used for measuring the success or lack of;
- the lay administration of the Project;

- the composition, powers, role and reporting relationships of the Project's Management Board;
- a statement as to why, by whom, when and on whose recommendations, and on what criteria of success or failure, the Resocialisation Project was closed down;
- the present location, duties and tenure of appointment of each member of the professional staff of the Project;
- the present location and treatment arrangements for each of its patients".

Reply

1. Project established 1st November, 1983.
2. To develop and demonstrate techniques for reintegrating long stay psychiatric patients back into the community.
3. Funding 55% E.S.F
 45% E.H.B

		PAY	NON-PAY	TOTAL
1983}		£ 9,000	£ 20,000	£ 29,000
1984}		£251,000	£124,000	£ 375,000
1985}	Expenditure	£314,000	£125,000	£ 439,000
1986}		£298,000	£123,000	£ 421,000
		£872,000	£392,000	£1264,000

		CLAIMED	RECEIVED	DOE
E.S.F.	Grants 1983	£ 16,150	£ 16,150	————
	1984	£240,264	£248,123	————
	1985	£283,771	£102,064	£ 102,064
	1986	£240,625	£120,312	£ 120,312
		£780,810	£486,649	£ 222,376

Refurbishing of Unit 23 £110,000

4. 1 Project Director
16 Nurses (Advocates)
1 Senior Psychologist
1 Research Assistant
1 Community Co-ordinator
1 Occupational Therapist
1 Educational Co-ordinator

5. To manage the project on a day to day basis subject to the direction of the Board of Directors. Terms of employment were for a three year period on a secondment basis at Registrar's salary scale plus agreed supplement.
6. Long stay patients from St. Brendan's Hospital.
7. 60 trainees have passed through the project, of these 38 are now living in the community.
30 in supervised housing provided by Dublin Corporation
5 in a high support hostel
2 in other hostels
1 in a private dwelling
8. A very crude norm: integration into the community was considered successful, re-admission to hospital was considered a failure.
9. Community Co-ordinator/Administrator under the control of the Project Director.
10. Project's Management Board consisted of:

The Management Services Officer, Eastern Health Board (Chairman)
2 Senior Executives of the National Rehabilitation Board The Director of Psychology, Eastern Health Board
A Consultant Psychiatrist, Eastern Health Board

The Management Board had power to spend money on the project and to employ staff thereon. All staff working on the project were accountable, through the Director, to the Board for their work on the Project.

11. The Resocialisation Project was established as a three year research project. The Board of Management had the task of evaluating that research. This they did with senior staff of the Project. From their findings, a proposal for a "Board wide" rehabilitation programme was prepared and presented to the Programme Manager. This Report will now be discussed with the relevant professionals. The Resocialisation Project was not closed down; the research project came to the end of its three year term. A Report on the Project is being prepared for the E.E.C.

In the meantime, rehabilitation activity is continuing in St. Brendan's Hospital in Unit 23. A further 20 patients are, at present, undergoing rehabilitation with a view to placement in the community – 6 of these patients are now ready to move into recently renovated staff houses.

12. The former Project Director is finalising arrangements for the transfer of clinical responsibilities for those successful trainees now living in the community to the appropriate community services and will then revert to his substantive post in the Psychiatric Service.

The Psychologist and the Research Officer are finalising the research paper.

The Community Co-ordinator is managing the activity centre in Clondalkin and is engaged in monitoring those living in the community.

The Nursing staff are performing nursing duties in St. Brendan's Hospital.

13. Successful trainees living in the community attend out-patient clinics in St. Brendan's Hospital.

Those in the high support hostel are under the care of the Psychiatric Services.

134/86

Chief Executive Officer's Report

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

1. Tobacco Products Regulations 1986. " I have circulated to the members a summary of the Tobacco Products (Control of Advertising, Sponsorship and Sales Promotion) (No. 2) Regulation 1986, which came into effect on 1st December 1986".
2. Medical Card Guidelines – " I have circulated to the Members copies of the Medical Card Guidelines which have been revised and will come into effect on 1st January, 1987".
3. Overdraft accommodation – "As indicated in my previous report at the October Board Meeting, the figure for overdraft accommodation would require to be kept under review during the current quarter.

Having reviewed our requirements approval is requested to revised overdraft accommodation of the order of £6.5M for the period ending 31st December, 1986. Our requirements will be kept under continuing review with the Department of Health".

On a proposal by Cllr. Callely, seconded by Dr. Hawkins, it was agreed to adopt the proposal regarding overdraft accommodation of the order of £6.5M in the period to 31st December, 1986.

- 4 **Beaumont Hospital** – "I have circulated copies of letter dated 5th December, 1956 from the Department of Health regarding the commissioning of Beaumont Hospital and a review of the Beaumont Hospital Board.

In accordance with our usual practice the matter will be on the agenda for the January meeting of our Board."

- 5 **AIDS** – "I have received a letter from the Department of Health giving the following information in relation to AIDS:

- 1 There have been twelve cases of AIDS in Ireland to date. Eight homosexual/bisexual cases, two haemophiliacs and two paediatric cases. Seven deaths have occurred.
- 2 Anti-body testing results from the Virus Reference Laboratory to end September, 1986, show the following pattern of infection:

<u>At Risk</u>	<u>No. Tested</u>	<u>No. Positive</u>	<u>% Positive</u>
Blood donors	200,000	4	
Haemophiliacs	431	102	24%
Intravenous Drug Abusers	1,403	313	22%
Babies of HIV positive mothers	27	17	62%
Homosexuals/Bisexuals	776	49	6.3%
Hospital Staff (on request)	45	0	0
Others at risk	—	17	—
Total		502	

- 3 The Department will continue to keep Health Boards informed of developments and has indicated that in the absence of a cure for or vaccine against AIDS, it is essential that every effort is made to inform the public about AIDS and how it is spread. The Department is currently considering what further measures can be taken at national level to combat the spread of AIDS and we will be kept informed in this regard".

- 6 **Death of Child in Care** – "I feel it necessary to make a brief comment concerning this matter which has received an amount of publicity recently :

- (a) The child was one of a family of children taken into care by our Board. It is not our policy to make public comment on the reasons for such decisions in individual cases.
- (b) This child was placed in a Residential Home from which it was decided to have her admitted to a Specialist Child Psychiatric Unit.
- (c) The regimen and treatment provided in the Unit concerned are matters for the authorities in charge of the Unit and the medical staff there.

- (d) A report on the circumstances surrounding this child's death, which has already been the subject of public inquest, is being obtained and members can be assured that this report will cover all relevant aspects of the case."

135/86
Notice of Motion

At the request of Dr. Behan, the members agreed to consider, at this stage, the following motion which was proposed Dr. Behan and seconded by Cllr. Callely:

"That the Board, have regard to the complaints made by the proposer of this motion about the operation and closedown of the Resocialisation Project, convene an enquiry into the reasons therefore"

Dr. Behan stated that he wished to make two charges:

1) he charged officers of the Health Board with incompetence and an abuse of trust, and 2) he charged that officers of the Health board had defrauded the European Social Fund by making applications for certain monies to be applied to certain purposes and not so applied. He further stated that he was asking the Health Board to convene an enquiry into the reasons for the obstruction, frustration and danger that they had posed to the European Resocialisation Project; that if the Health Board did not convene an enquiry it would be failing in its duty and he would have to consider approaching the Minister for Health who might order an enquiry and that he would consider writing to the E.E.C. Commissioner regarding the Project.

Mr. Hickey, Deputy Chief Executive Officer, in reply stated that he was saddened to hear the remarks made by Dr. Behan and rejected each one of them categorically.

He referred to the Project's Board of Management which included two representatives of the National Rehabilitation Board and stated that any allegations made by Dr. Behan must reflect against this group.

He reputed absolutely that any funds for the Resocialisation Project were mis-applied in any way.

He pointed out that it was not part of the contract for the Resocialisation Project that a village would be built as had been suggested by Dr. Behan; the European Social Fund does not provide money for buildings.

He stated that it was incorrect to suggest that the patients concerned had been failed in any way.

During the course of the discussion which followed to which Dr. Behan, Cllr. Callely, Cllr. Fitzgerald, Mrs Bonar, Cllr. Mrs Dillon-Byrne, Mr. Finegan, Cllr. Carroll, Cllr. Harvey and Cllr. Dunne contributed and to which Mr. Hickey, Deputy Chief Executive Officer and Mr. Walsh, A/Programme Manager, Special Hospital Care replied, the following points were made:

- the Resocialisation Project was established to run for three years and came to the end of its term in November, 1986;

- the Director of the Project had a clear contract under which he was assigned to the Project for a three year period with an appropriate allowance in addition to his basic salary;
- the rehabilitation of patients continues in St. Brendan's Hospital and in other hospitals;
- there was not much enthusiasm for building a village in the centre of a Psychiatric Hospital; rehabilitation in a community setting receives a more favourable response, generally.

On a proposal by Cllr. Harvey, seconded by Mrs Bonar, it was agreed to hold a special meeting of the Board, in committee, to consider the matter further.

It was also agreed that the outcome of the special meeting would be made public, having regard to the very serious charges which had been made.

136/86

Application by Dr. J. W. O'Connell, Vale Road, Arklow, Co. Wicklow for permission to take on an assistant with a view to a partnership.

The following Report No. 17/1986 from the Deputy Chief Executive Officer:

"Dr. O'Connell is participating in our Board's General Practitioner Service. He has a large list of eligible persons and his practice premises are at 32 Upper Main Street, Arklow, Co. Wicklow.

In his letter of 14th August, 1986, he expressed a wish to take on an assistant with a view to a partnership.

In accordance with paragraph 21 of the circular letter 875 dated 9th April, 1975, issued by the Department of Health, the observations of the Irish Medical Organisation were sought on Dr. O'Connell's request. The Medical Organisation have stated that they have no objection to Dr. O'Connell's proposal.

I recommend subject to the approval of our Board, that Dr. O'Connell's application for an Assistant with a view to partnership be granted".

On a proposal by Dr. Hawkins, seconded by Cllr. Callely, it was agreed to adopt the proposal contained in the Report.

137/86

Application by Dr. Declan Connolly, "Bredecon", Templarainey, Arklow, Co. Wicklow, to take on an assistant with a view to partnership.

The following Report No. 18/1986, from the Deputy Chief Executive Officer:

"Dr. Declan Connolly is participating in our Board's General Practitioner Service. He has a large list of eligible persons and his practice premises are at 3 Upper Main Street, Arklow, Co. Wicklow.

In his letter of 1st November, 1985, he expressed a wish to take on an assistant with a view to a partnership.

In accordance with paragraph 21 of circular letter 875 dated 9th April, 1975, issued by the Department of Health, the observations of the Irish Medical Organisation were sought on Dr. Connolly's request. The Medical Organisation have stated that they have no objection to Dr. Connolly's proposal.

I recommend, subject to the approval of our Board, that Dr. Connolly's application for an assistant with a view to a partnership be granted."

On a proposal by Dr. Hawkins, seconded by Cllr. Callely, it was agreed to adopt the proposal contained in the Report.

138/86

Adoption Bill – 1986

It was agreed to refer the Adoption Bill 1986 to the Community Care Programme Committee for consideration.

139/86

Progress Reports from Programme Committees

It was agreed that the progress reports from the General Hospital, Special Hospital and Community Care Programme Committees, which were adopted, should be re-circulated with the papers for consideration at the January meeting of our Board.

140/86

Proceedings of Local Committees

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

(i) Kildare Local Committee Meeting held on 2nd October, 1986.

On a proposal by Cllr. Carroll, seconded by Cllr. Groome, it was agreed to note the Report.

The following matters were dealt with in the Report –

- 1) Report on meeting of deputation with Minister for Health regarding Psychiatric Services for Co. Kildare.
- 2) Election of Chairman and Vice Chairman.
- 3) Naas General Hospital Development.

(ii) Dublin City Local Committee Meeting held on 10th November, 1986.

On a proposal by Cllr. Carroll, seconded by Cllr. Briscoe, it was agreed to note the Report.

The report dealt with the following matters.

Motions agreed regarding:-

- 1) the erection of visible road signs in Blanchardstown Village indicating the direction and location of James Connolly Memorial Hospital and any other large General Hospital not so catered for by the Corporation Roads Department.

- 2) The location of traffic lights or bollard lights at the main entrance to St. Brendan's Hospital.
- 3) The support of the Committee for the Campaign of the Cystic Fibrosis Association of Ireland (Northside Branch) to have specialised hospital services provided on the North Side of Dublin for Cystic Fibrosis children, if possible, at Beaumont Hospital.

The report also included a recommendation that favourable consideration be given to the requests for increased funding submitted by St. Monica's Home and Portland Row.

(iii) Dun Laoghaire Local Committee Meeting held on 11th November, 1986

On a proposal by Cllr. Dillon-Byrne, seconded by Cllr. Briscoe, it was agreed to note the Report. The Report dealt with the following matters:-

- 1) A report on Dental Services in Community Care Area 1, which had been presented by the Principal Dental Surgeon, was discussed at the meeting.
- 2) Prof. O'Donnell, Dublin Medical Officer of Health, addressed the members on diseases transmitted by domestic pets, following which the members expressed the view that the Health Education Bureau should be approached regarding the production and distribution of educational leaflets which would improve public awareness of the measures to be taken to control or prevent the transmission of diseases by domestic pets.

(iv) Dublin County Local Committee Meeting held on 13th November 1986

On a proposal by Cllr. Carroll, seconded by Cllr. Briscoe, it was agreed to note the Report.

Members of the Local Committee expressed their support for the terms of the resolution adopted by the Health Board at its October meeting that the Health Board should not, without further consultation, allow the Department of Justice to enter the New Unit of the Central Mental Hospital in Dundrum.

141/86

Notice of Motion

It was agreed to defer the motion in the name of Cllr. I. Callely, regarding Accident and Emergency Services at Beaumont Hospital to the January Meeting of our Board.

142/86

Correspondence

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

1. Letter dated 20th November, 1986 from the Department of Health regarding extra payment of allowances for one week in December.