



## EASTERN HEALTH BOARD

Minutes of proceedings of Monthly Meeting  
held in the  
Board Room, St Mary's Hospital, Chapelizod, Dublin 20  
on Thursday 4 February 1988 at 6 pm

### *PRESENT*

Mrs B Bonar	Cllr B Briscoe TD
Cllr I Callely	Cllr M Carroll
Dr R Corcoran	Mrs D Clune
Cllr P De Rossa TD	Dr P Devitt
Cllr J Dillon Byrne	Prof J S Doyle
Cllr P Dunne	Cllr B J Durkan TD
Ald A FitzGerald	Cllr C Flood TD
Cllr M Gannon	Cllr A Glenn
Cllr A Groome	Cllr W Harvey
Dr R Hawkins	Cllr P Hickey
Cllr F Hynes	Dr D I Keane
Dr P McCarthy	Prof J McCormick
Mr G McGuire	Cllr C Murphy
Dr J O'Boyle	Dr B O'Herlihy
Cllr J Reilly	Mr R Roche TD
Cllr J Sweeney	

### *APOLOGY*

Ms M Nealon

### *IN THE CHAIR*

Mrs D Clune

### *OFFICERS IN ATTENDANCE*

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

12/88

**CONDOLENCES**

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

1. Cllr Sam Carroll on the death of his sister.
2. Mr Gerry Brennan, Technical Services Officer, on the death of his sister.
3. The family of Breda Blanche, Clerical Officer, Mental Handicap Service, Ballyboden.

13/88

**CHAIRMAN'S BUSINESS**

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

*'The following items are for information only and are not for debate.*

1. I am sure that the members will join with me in welcoming to his first meeting, Dr Jim O'Boyle, who has been appointed by the Minister for Health to replace Dr Jim Behan, and also in wishing Dr O'Boyle well in his term of membership of our Board.

2. I have learned from the Chief Executive Officer that Mr Fred Donohue our Programme Manager for Community Care has been elected as its chairman by the General Medical Services (Payments) Board. This is a very well deserved honour and a measure of the esteem in which Mr Donohue is held.

I know I am speaking for all members of this Board in offering our sincere congratulations to Mr Donohue and also our best wishes to him in carrying out this onerous task.

3. I am sure also that members will be very pleased to learn that Miss Theresa Heffernan of James Connolly Memorial Hospital was recently selected as Student Nurse of the Year in the National Competition sponsored by Lucozade.

This reflects great credit on Miss Heffernan herself and on her matron and tutors who are all deserving of our heartiest congratulations.

I would also like to advise members that Mrs Paula Hurrell, a nurse in the Geriatric Department of St James's Hospital was selected as Nurse of the Year in the same competition. Congratulations are also due to Mrs Hurrell and the authorities of St James's Hospital.

4. Since the last meeting of our Board further discussions have taken place with representatives of Cheeverstown House Ltd. including its chairman. I am pleased to be able to report further progress in this matter.
5. The mobile day hospital service for the elderly serving North Dublin and North Kildare, will be officially inaugurated by the Minister for Health and Chairman on Monday 29 February 1988 at 2.30 pm at St Mary's Hospital, Phoenix Park.'

Cllr Hickey thanked the Chairman, members and staff for their good wishes during his recent stay in hospital.

14/88

**CONFIRMATION OF MINUTES OF MONTHLY MEETING HELD ON 7 JANUARY 1988 AND OF SPECIAL MEETING HELD ON 12 JANUARY 1988**

The minutes of the monthly meeting held on 7 January 1988 and of the special meeting held on 12 January 1988, having been circulated, were confirmed on a proposal by Cllr Callely, seconded by Cllr Hynes.

(a) *Matters arising from the minutes*

Cllr Callely referred to item 6/88 regarding nominations for appointment to the Tallaght Hospital Board and stated that, in proposing Mrs Clune, Chairman, for appointment by the Minister for -Health, he did so in the context of our Board securing an additional place on the Tallaght Hospital Board, as requested in earlier submissions to the Department of Health.

Mr Hickey, Deputy Chief Executive Officer, referred to the resolution regarding the advertising of vacant medical posts in the General Medical Services and stated that, since the January meeting, his attention had been drawn to Article 5 of the Health Services Regulations 1972, regarding the making of arrangements by way of agreements with registered medical practitioners under Section 26 of the Health Act 1970, and which specified that any function relating to these arrangements shall be a function of the Chief Executive Officer. While the making of such arrangements was not a matter for decision by the Health Board he would have regard to the spirit of the resolution as far as possible.

15/88

**QUESTIONS TO THE CHIEF EXECUTIVE OFFICER**

On a proposal by Dr Hawkins, seconded by Cllr Dillon Byrne, it was agreed to answer the questions which had been lodged:

(i) *Cllr J Dillon Byrne*

‘How many new beds for homeless persons were provided by the Eastern Health Board (or supported by the Eastern Health Board) in the year 1987?’

*Reply*

In 1987, the Board funded the full running costs of Percy Place Hostel which opened in December 1986, with ten beds for homeless boys. In the case of teenage girls the Board increased its funding in 1987 to St Ann’s Hostel, Sean McDermott Street to enable extra places to be provided.

In addition to these there are twenty other residential homes and hostels where children and young people are placed when in need of care away from home. Our Board also make extensive use of fostering families in the care of young children. There are over 450 long term foster families and 80 short term.

The number of places for single adult homeless men and women exceeds the demand and our Board has, in recent times, provided a specially built hostel at Rathmines for women and children who find themselves homeless as a result of family violence.

The provision of hostel places or beds is not, of course, the only response available to meet the needs of homeless persons, children or adults. Five additional social workers were recruited in 1987 to deal specifically with homeless children and young people. These work closely with the special Homeless Unit at Charles Street staffed by Community Welfare Officers who pay for or towards the cost of hostels, lodgings or bed and breakfast accommodation for homeless adults and for some young people where that is appropriate.

(ii) *Cllr J Dillon Byrne*

'What is the exact sum of money that this Health Board pays out for drugs for its patients?'

*Reply*

For the year 1987, our Board spent a total of £11.829 million on drugs and medicines. This figure included an amount of £8.7 million in respect of the community drugs schemes, mainly the refund of medicines scheme.

The General Medical Services (Payments) Board paid £17.5M for drugs and medicines supplied to medical card holders in our Board's area.

(iii) *Cllr J Dillon Byrne*

'Could the Chief Executive Officer estimate the difference in cost, if all the drugs used by the Eastern Health Board patients were generic (where they exist) vis-a-vis present use of branded drugs?'

*Reply*

Expenditure on drugs and medicines in hospitals and institutions controlled by our-Board amounted to £3.129 million in 1987. Drugs usage policy in our hospitals and institutions is based on standard generic or lowest cost products and prescribing practices are reviewed by hospital drugs committees to ensure that this policy is followed. It follows, therefore, that there would be very little difference in costs if all the drugs used in our hospitals and institutions were generic.

In relation to the costs of the refund of drugs scheme the information available to our Board is not adequate to enable a comparative analysis and costing of alternative drug dispensing practices to be undertaken. However, this type of evaluation was carried out in respect of the costs of drugs and medicines paid for by the General Medical Services (Payments) Board. In the month of December 1986 the General Medical Services (Payments) Board identified forty-four of the preparations claimed for as being available in generic form. If the lowest price preparation had been dispensed and claimed, a reduction of 5.8% of the total cost of drugs and medicines supplied under the scheme would have been achieved. Applying this reduction to the cost of the refund scheme would produce an annual saving of about £0.4 million. It should also be stressed that, there can be wide disparity between the costs of similar generic products and, in some instances, generic products are more expensive than their branded counterparts.

(iv) *Cllr J Sweeney, Cllr F Hynes, Cllr C Murphy*

'Will the Chief Executive Officer give the following information:

(i) the number of patients in Crooksling Hospital (St Brigid's)

(ii) the number of nurses, nurses' aides, attendants and other staff.

Also relating to St Colman's Rathdrum and Brú Chaoimhin the same information.

The cost per patient per week in each hospital for year ending 1987'.

<i>Reply</i>	St Brigid's Crooksling	St Calman's Rathdrum	Brú Chaoimhin Cork Street
Beds Occupied 31/01/88	158	136	188
<b>Staffing</b>			
Matron	1	1	1
Asst. Matron	1	1	1
Ward Sisters	6	6	6
Staff Nurses	31	32	36
S.E.N.'s	4	–	2
Attendants	20	14	6
Domestics	20	27	22
	83	81	114
<b>Average Weekly cost</b>	<b>£197.58</b>	<b>£196.00</b>	<b>£198.00</b>

(v) *Cllr I Callely*

'Can the Chief Executive Officer comment on implications since the delisting of 900 items from the General Medical Services?'

Can the Chief Executive Officer advise of financial savings and any noticeable substituting of prescribing drugs which were left available on the General Medical Services list?'

*Reply*

Approximately 900 items were excluded from the General Medical Services Scheme in October 1982. These were relatively inexpensive items obtainable over the counter without prescription.

To ensure that eligible persons would not suffer undue hardship because of financial circumstances the Board introduced a scheme operated by the Directors of Community Care, whereby persons requiring any of the excluded items would be supplied with them. The cost of this service for 1987 was in the region of £150,000.

Since the exclusion of approximately 900 items the situation has been closely monitored by the General Medical Services (Payments) Board. A study carried out by that Board on prescribing patterns and costs over the first year after the exclusion of the items estimated that there were savings in the region of £6M. The study also showed that there was a degree of substitution by some doctors and estimated the cost to be approximately £0.5 million thus leaving a net saving of £5.5 million.

The General Medical Services (Payments) Board are continuing to monitor the situation. Their annual reports for the years 1982, 1983, 1984, 1985 and 1986 indicate that the usage of certain drugs has increased since 1982 but the increase is not necessarily due in total to substitution for excluded items as other factors such as changes in market trends and changes in prescribing patterns also effect the usage of drugs.

(vi) *Cllr I Callely*

'Can the Chief Executive Officer advise if our Ambulance Training Programme will be accommodated in the new Fire Brigade Training School in Marino, Dublin 3'.

Reply

The Ambulance Training Programme is centralised at the National Ambulance Training School located at St Mary's Hospital. There are no plans to change this arrangement.

It is understood that the Training School at Marino deals exclusively with the training of personnel in fire-fighting and related procedures.

(vii) *Cllr P DeRossa TD*

'To ask the cost of providing incontinence pads for handicapped children and adults, the number of handicapped persons supplied in the Eastern Health Board area in 1986/1987 and projected for 1988'.

Reply

Among the several measures taken in 1987 to keep expenditure within the allocation of monies made available, steps were taken to standardise the minimum quantities of incontinence wear issued to people registered under the long term illness scheme to 60 items per month. This step was taken in the knowledge that some other health boards had no arrangements to provide or supply such items as a matter of course and that in one of this Board's areas a basic 60 items had been provided for some years without causing hardship to recipients.

The cost of supplying items for incontinence in 1986 and 1987 and the expected cost for 1988 is as follows:

1986	1987	1988
£318,000	£291,000	£272,000

Over 1,000 people have been supplied each year.

When the decision to standardise issues was made, provision was also made to deal with those who had greater need than the norm and who would suffer financial hardship if they had to provide for these themselves. Holders of medical cards are given additional items when these are recommended by our Board's community medical officers. Additional supplies are made available to non-medical card holders if they would suffer undue hardship on account of their financial circumstances and are medically recommended in the same way.

Some 320 enquiries have been received from people who do not hold medical cards and of 180 of those who have so far given information requested by the Board some fifty were provided with extra supplies. Replies to requests for information from the remainder are awaited and they will be dealt with as soon as this comes to hand.

(viii) Cllr P De Rossa TD

'Please outline the Eastern Health Board services available for homeless boys and girls under sixteen years, the proposals to develop these services and the projected period over which these developments will take place, the number of hostel beds available, and projected, and the extent of the problem in the estimation of the Board'.

*Reply*

Children in need of residential care are placed by the Board in centres approved by the Minister for that purpose. There are over twenty such centres. At any time we would have some 350 children in residential care, including hostel care, and some 600 in foster care. It is important to make clear that in providing child care services the approach of the Board is to maintain children in their own families and only when this fails to provide alternative care for them, be it day care, foster care or residential care.

As an adjunct to the emergency hostel for boys opened in December 1986, in October 1987, five social workers were assigned to deal specifically with homeless children and young people. They are backed up by a centralised crisis service at the Homeless Unit based at West Charles Street since December 1987.

**SERVICE DEVELOPMENT PRIORITIES ARE AS FOLLOWS.**

- (1) Development of five more community residential centres to accommodate eight to ten people, on similar lines to the two existing centres in Community Care Area 7, viz Tabor House and the Amiens Street Centre of the St Vincent De Paul Society. The estimated running costs of such development is £500,000 per annum plus capital outlay.
- (2) Recruitment of special foster parents who would be capable with necessary backup by support staff of the Board, of caring for the more difficult young persons. The estimated cost of paying twenty such foster parents plus support staff is £184,000 per annum.
- (3) Provision of six secure places for girls similar to Trinity House for boys. (In the course of a recent survey social workers became aware of a number of homeless girls who are extremely disruptive and will not respond to voluntary care services). As our Board has no authority to provide custodial care, implementation of this proposal is a matter for the Departments of Education and Justice.

These proposals have been conveyed to the Department of Health for consideration and the necessary financial allocation.

(ix) Cllr P De Rossa TD

Please outline the Eastern Health Board services at present provided for the assessment, validation and treatment of sexually abused children, and the proposals to develop these services'.

*Reply*

In accordance with guidelines issued by the Minister for Health, Directors of Community Care and Medical Officers of Health have overall responsibility for the monitoring and co-ordination of the

investigation and treatment of cases of child abuse, including child sexual abuse, occurring in their areas.

The guidelines emphasise the need for a multi-disciplinary approach and the importance of close co-operation with outside agencies including the Gardai, the holding of case conferences which are an essential feature of inter-agency co-operation, the exchange of information between different professionals involved with the child and his family, assignment of key worker with responsibility for ensuring that the agreed programme is implemented and through whom all subsequent relevant information on the family should be processed.

The professional service of the Children's Hospitals and of the Child Psychiatric Services are used as necessary in the investigation, validation and treatment of cases.

The services of Temple Street and the Children's Hospital, Crumlin have been recently enhanced by the assignment of a Child Psychiatrist to each hospital and recruitment of additional social workers and psychologists to provide an expanded multi-disciplinary assessment and investigation service.

16/88

#### CHIEF EXECUTIVE OFFICER'S REPORT

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

##### *Naas General Hospital*

The Minister for Health has been requested to receive a deputation concerning the delay in progressing the proposed psychiatric unit at Naas General Hospital. An early response is expected.

##### *Meeting with Minister for Sport*

Arising from the discussion at the last meeting of our Board, a meeting has been requested with the Minister for Sport in order to seek further information and clarify the position in relation to the siting of the proposed National Sports Centre.

The Minister has agreed to meet the Chairman and Chief Executive Officer and this meeting will take place shortly.

##### *St James's Hospital Board*

Dr Brendan Powell has, because of his current location and consequent inability to attend meetings, with regret, tendered his resignation as one of our Board's nominees on the St James's Hospital Board.

The question of making a nomination to the Minister for Health for the appointment of a replacement for Dr Powell will be on the agenda for the March meeting of our Board.

##### *Maternity Services*

I wish to advise the Board that:

- (a) that the new baby clinic to be provided at St Columcille's Hospital, Loughlinstown by a consultant in neo-natal paediatrics from Holles Street, commenced on Tuesday of this week.

- (b) The new ante-natal clinics to be provided at Bray and Greystones by consultant obstetricians from Holles Street will commence early next month.
- (c) Discussions have been held with the authorities of the Coombe Hospital regarding the ante-natal clinics formerly provided at Tallaght and Rowlagh. They have agreed to re-examine the question of providing these clinics initially involving Tallaght. Further progress will be reported through the General Hospital Programme Committee.

#### *Aids*

Funding has been provided by the Department of Health from the National Lottery to enable our Board to establish an out-reach programme aimed at IV drug abusers. The total sum for this programme is £150,000 in the current year. A full report on the proposed programme will be brought to the next meeting of the Community Care Programme Committee.

#### *Foster Care — Campaign*

Our Board's Fostering Resource Group, with the co-operation of RTE have arranged a public information programme and campaign seeking foster parents. This will feature on the 'Evening Extra' programme on RTE Television during the week commencing 22 February 1988.

17/88

#### **TEMPORARY BORROWING**

The following Report No. 21/1988 from the Deputy Chief Executive Officer was submitted:

'The approval of the Board to borrowing by way of overdraft during the period ending 30 June 1988 to a maximum of £5M is requested.'

On a proposal by Cllr Carroll, seconded by Cllr Reilly, it was agreed to adopt the proposal contained in the Report.

18/88

#### **PROGRESS REPORTS FROM PROGRAMME COMMITTEES**

##### 1. *General Hospital Care Programme Committee*

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

The following matters were dealt with in the Report:

1. Update report on the development of Out-Patients Department and Operating Theatre Suite at St Columcille's Hospital, Loughlinstown.
2. Report regarding the supply and installation of new screening room equipment for the X-ray Department in Naas General Hospital.
3. A recommendation that the Board approve of the introduction for an initial trial period of one year, of a General Practitioner Access Scheme for the District Hospital, Wicklow.

4. An update report on the new unit for the care of the elderly at Baggot Street Hospital.
5. A report on the arrangements for the provision of emergency cover for maxillo-facial plastic surgery and orthopaedic trauma cases following the closure of Dr Steevens Hospital and their re-location as follows with effect from 21 December 1987.

Maxillo-Facial — St James's Hospital  
 Plastic Surgery — St James's Hospital  
 Orthopaedics — Meath/Adelaide Hospitals

6. An update report on the Mobile Day Hospital.
7. An outline of arrangements made to come into effect in the event of the Dublin Fire Brigade industrial dispute commencing on 22 January 1988.
8. Report on services in Brú Chaoimhin.

2. *Special Hospital Care Programme Committee*

On a proposal by Cllr Callely, seconded by Cllr Groome, It was agreed to adopt the report.

The following matters were dealt with in the Report:

1. Update report on progress on major capital and service developments in the Special Hospital Care Programme.
2. List of capital priorities agreed by Committee.
3. Report on the development of a community based alcoholism service.

It was proposed by Cllr Dillon Byrne and seconded by Cllr Carroll that the two thirty-two bed units proposed for location at Tivoli Road, Dun Laoghaire should be added to the list of capital priorities for consideration in 1988. Following a discussion to which Cllrs Dillon Byrne, Carroll, Dunne, Callely and Prof McCormick contributed, the Chairman ruled that the capital priority list should be referred back to the Special Hospital Care Committee for further consideration.

Deputy De Rossa referred to the proposal that accommodation in Ballymun Flats be acquired from Dublin Corporation for use as a Crisis Intervention Centre. He had become aware that there was a danger of considerable local misunderstanding about the type of use which would be made of the accommodation and of the type of services to be provided. He felt that this should be clarified in discussions with the local community coalition. Following a discussion to which Deputy De Rossa, Cllr Glenn, Cllr Callely and the Chairman contributed it was agreed to arrange a meeting of the Special Committee on Ballymun with the Corporation's Committee on Ballymun, initially, with a view to clarifying to them the uses to which the accommodation would be put by the Health Board.

3. **Community Care Programme Committee**

On a proposal by Cllr Callely, seconded by Cllr Dunne, it was agreed to adopt the report.

The following matters were dealt with in the report:

1. Resumption of cervical cytology testing facilities in St Luke's Hospital from January 1988.
2. Motion referred from the November meeting of the Health Board regarding the feasibility of employing or seconding a medical officer with full-time responsibilities for the homeless.

Having noted that the members of the Committee had requested that a special meeting of the Committee should be held to review the work of the voluntary organisations assisting the Board in its services for the homeless it was agreed that the Committee should visit some of these organisations.

3. A report 'Mothers Alone' on a research project undertaken by the Federation of Services for Unmarried Parents and their Children and the Health Research Board.
4. Report on services in Area 6.

The Committee noted that additional resources needed to be made available to strengthen the Community Care Services, particularly in areas of need.

The Committee also noted the need for additional residential facilities to cater for chronically physically handicapped people in the 45 - 65 age group.

While noting that the uptake in measles immunisations in the area was reasonably satisfactory the Committee requested that a special effort should be made to reach those who are most at risk and who are not availing of the service.

19/88

**NOTICES OF MOTION**

- (i) The following motion was proposed by Cllr I Callely:

*'That patients referred to Casualty Departments of Hospitals with a referral letter from a General Practitioner should be exempted from any charge'.*

The motion was seconded by Deputy Roche and following a discussion to which Cllr Callely, Deputy Roche, Dr Devitt, Dr Hawkins contributed was agreed. It was noted that the Minister for Health had already stipulated who is liable to the £10 casualty charge and what categories of persons are exempt. The motion as passed would have to be referred to the Minister for consideration.

(ii) The following motion was proposed by Deputy De Rossa:

*'That the members of this Board express their serious concern at the distress to the disabled and their families arising from restriction on the issuing of incontinence pads and calls on the Board to urgently review the scheme to ensure that the needs of disabled children, teenagers and adults are adequately met, and furthermore requests a report on such a restructured scheme for its next meeting'.*

The motion was seconded by Cllr Dillon Byrna. Following a discussion to which Deputy De Rossa, Cllr Dillon Byrne, Deputy Durkan, Cllr Dunne, Cllr Glenn, Cllr Calley, Deputy Roche, Dr Hawkins, Dr Davitt and Mrs Bonar contributed and to which Mr bonohue, Programme Manager, Community Care Service replied, It was agreed that a review report would be presented to the Community Care Programme Committee.

20/88

#### CORRESPONDENCE

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

1. Letter dated 31 December 1987 from the Department of Health regarding the National Lottery proceeds 1987/1988.
2. Letter dated 22 January 1988 from the Department of Social Welfare regarding EEC Food Aid Scheme.
3. Department of Health Circular 1/1988 dated 15 January 1988 regarding entry of doctors into the General Medical Services Scheme.

The meeting concluded at 8.30 pm

CORRECT: K J Hickey  
Deputy Chief Executive Officer

  
Chairman