

05/11/1992

EASTERN HEALTH BOARD

**Minutes of proceedings of Eastern Health Board Meeting
held in
The Boardroom, Dr. Steevens' Hospital, Dublin 8
on Thursday 5th November, 1992 at 6:00 p.m.**

Present

Mr. P. Aspell	Cllr. M. Barrett, T.D.
Mrs. B. Bonar	Cllr. G. Brady
Cllr. B. Briscoe, T.D.	Cllr. E. Byrne, T.D.
Cllr. L. Callely, T.D.	Cllr. J. Connolly
Cllr. B. Durkan, T.D.	Cllr. K. Farrell
Dr. C. Gallagher	Cllr. R. Greene
Dr. R. Hawkins	Dr. D.I. Keane
Cllr. D. Marren	Mr. G. McGuire
Cllr. O. Mitchell	Ms. M. Nealon
Cllr. Dr. W. O'Connell	Dr. B. O'Herlihy
Dr. C. Smith	Dr. R. Whitty
Dr. M. Wrlgley	

Apologies

Dr. R. Corcoran, Dr. J. Fennell,
Cllr. F. Hynes, Dr. J. Reilly

In the Chair

Cllr. M. Barrett, T.D.

Officers in Attendance

Mr. K.J. Hickey, Chief Executive Officer
Mr. M. Walsh, Programme Manger, Special Hospital Care
Mr. J. Doyle, A/Programme Manager, Community Care
Mr. S. O'Brien, A/Programme Manager, General Hospital Care
Prof. B. O'Donnell, Dublin Medical Officer of Health
Mr. M.A. Gallagher, Finance Officer
Mr. G. Brennan, Technical Services Officer
Ms. M. Kelly, A/Personnel Officer
Mr. M. O'Connor, Secretary

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CONDOLENCES

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

- Deputy Joe Doyle on the death of his mother.
- The family of Sister Antoinette, former Matron of Naas General Hospital.
- Ms. Nora Fitzpatrck, Matron, Wicklow District Hospital, on the death of her mother.
- Dr. Niamh Nolan, Histopathologist, St. Columelle's Hospital, on the death of her mother.
- Mrs. Joan Wilmot, Assistant Matron, St. Colomeille's Hospital, on the death of her mother.
- Bridget McCarthy, Community Nurse, St. Brendan's Hospital, on the death of her mother.

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CHAIRMAN'S BUSINESS

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

December Meeting of the Board

With the members' agreement it is proposed that the December meeting of our Board win be held on Thursday 17th December. 1992 from 6:00 p.m to 8:00p.m.

It is also proposed that the General Hospital Care Programme Committee meeting which is scheduled for 17th December win be held on Tuesday 15th December, 1992 at 11:00 a.m."

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CONFIRMATION OF MINUTES OF PROCEEDINGS OF MONTHLY MEETING HELD On 1ST OCTOBER, 1992

The minutes of the meeting held on 1st October, 1992, having been circulated, were confirmed on a proposal by Dr. Hawkins, seconded by Dr. O'Hertihy.

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QUESTIONS TO THE CHIEF EXECUTIVE OFFICE

On a proposal by Dr. O'Herlihy, seconded by Mr. Aspell, it was agreed to answer the questions which had been lodged.

1. Cllr. R. Greene

Has the Board received any complaints on issues of concern about the Stay Safe Programme and, if so, will the Chief Executive Officer of the Board be Informing the members about such complaints?

Reply:

A letter was received from a group called Parents Against Stay Safe expressing some reservations regarding certain aspects of the Child Abuse Prevention Programme. As this matter has already been dealt with in some detail by our Board and will be kept under review, it is not considered necessary to bring forward any report regarding this letter.

Participation in the CAPP is entirely voluntary insofar as the schools, teachers and parents of the children are concerned. The uptake of the programme in our Board's area has been 100% in the 600+ schools concerned and in recognising the success of the programme the Departments of Health and Education have dedicated additional resources towards the extension of the programme on a national basis.

2. Cllr. J. Connolly

Will the Chief Executive Officer report on the incidence of child abuse in the Eastern Health Board area and the action taken.

Reply :

The incidence of child abuse in the Eastern Health Board area is as follows:-

	1990	1991
Number of cases reported	1,081	1,021
Number of cases confirmed	491	466
Number of cases under investigation but not confirmed	202	196
Number of cases where report:		
(i) Could not be confirmed	203	227
(ii) was unfounded.	135	132

Investigation is carried out by our Board's social workers and the procedures set out in the Department of Health's guidelines are applied. These include case conferences convened by the Director of Community Care & Medical Officer of Health, the involvement of outside agencies e.g. the Gardai. Validation of sexual abuse at the investigative units at Temple Street and Crumlin, as appropriate.

While child abuse is confirmed, or circumstances exist which would justify intervention by our Board, an appropriate range of options is available to remove a child to a place of safety. Children may be taken into care voluntarily or by order of the courts, depending on circumstances.

Our Board's general policy with regard to child care is that :-

- [1] If at all possible the child should remain in its own home, with whatever supports are needed.

[ii] Alternatively, the child should be placed with another family.

[iii] Where neither of the foregoing is practicable, residential care is provided.

3. Cllr. J. Connolly

Is the Chief Executive Officer aware of any child abuse by "bullying" and what is the incidence and action called for.

Reply:

While our Board is aware of some incidence of child abuse by bullying, a specific classification of "bullying" e.g. in relation to bullying at school, is not provided for in the system for collecting statistics on child abuse in our Board's area.

In view of the growing focus of concern on such cases arrangements are being made to include a category "bullying" in the data being collected.

Staff in our Board's Child and Family Centres provide a treatment service for children suffering from psychological stress due to physical bullying at home or at school, or from peer pressure.

4. Cllr. J. Connolly

Will the Chief Executive Officer outline the grant aid secured under the "Lottery Act" for the past three years and will he detail its spending in each of those years.

Reply

The following block grants were received by our Board from the National Lottery Fund:-

1990	£229,500
1991	£255,000
1992	£300,000

A detailed statement setting out the individual agencies who were funded from the block grants is being compiled for each of these years and will be sent to the member in the very near future.

5. Cllr. E. Byrne, T.D.

That this Board be provided with an up-to-date breakdown of the number of persons who have contacted Tuberculois over the last three consecutive years; the figures for each year to show the follow up numbers of people traced through "contact tracing" and the numbers of people who tested positive resulting from "contact tracing".

Reply

New Cases Notified

Year	Males	Females	Total
1989	112	77	189
1990	99	83	187
1991	112	68	180

The numbers who were diagnosed as a result of contact examination are as follows :-

1989	11
1990	23
1991	19

These are included in the above totals.

It is difficult to be precise regarding the numbers of contacts examined as this information is not readily available. On average the number of contacts of a case who require examination would be six to seven.

6. Cllr. E. Byrne. T.D.

That a report be submitted to the Board members outlining how the Supplementary Welfare system works and which addresses the system used by Community Welfare Officers in deciding discretionary payments, the report should also address the issue of how and to whom cheques are made out for the purchase of items under the Exceptional Needs Payment scheme and firmly the report should comment on the Minister's statement that "it is only fair to point out that only 88% of the Exceptional Needs Payments take place in the Eastern Health Board area which only comprises 34% of Social Welfare recipients".

Reply

The S.W.A. scheme is operated through 138 Community Welfare Districts each manned by a Community Welfare Officer. The districts are organised into 17 Community Welfare areas each supervised by a Superintendent Community Welfare Officer. Applications for S.W.A. are received and payments made by the Community Welfare Officers at 102 health centres and other locations spread throughout our Board's area. Approximately 17,000 payments, including basic payments, supplements and exceptional needs payments are made each week at an annual cost of £45 m.

Each application for an Exceptional Needs Payment under the S.W.A. Scheme is dealt with on its merits. In deciding on an application the complete financial and social circumstances of the family are taken into account. In particular any current, or recent, unusual and substantial demands on the family's income are examined. The pattern of previous S.W.A. payments to the family will also be considered and any payment to be made is subject of course to any policy directives given by the Department of Social Welfare.

Exceptional Needs Payments are made for a variety of reasons. Where there are a large number of payments for a particular type of exceptional need e.g. electricity costs. It is the practice to make a block payment directly to the creditor e.g. Electricity Supply Board. This is more convenient for the applicant and administratively cost-efficient for our Board. Where an Exceptional Needs Payment is made towards the cost of goods being purchased from a retailer e.g. cooker, fridge, etc. It is the practice to make the payment payable to the retailer in question.

The position regarding the level of Exceptional Needs Payments being made in our Board's area compared with other areas is being examined in detail at present and a report on this aspect of the question will be forwarded to the member when this examination has been completed.

7. Cllr. J. Byrne

That this Board be informed of the intended response of the Eastern Health Board to the needs of our G.M.S. patients who will be affected if the Irish Medical Organisation pursues its withdrawal of services from the 8th December next.

Reply

The statutory obligation imposed on health boards by Section 58[1] of the Health Act, 1970, will remain in force even if some general practitioners individuals their contracts under the General Medical Services Scheme from 8th December next.

It is our Board's intention to ensure that all persons covered by medical cards with the minimum inconvenience, continue to be provided with free general medical services as necessary after 8th December next.

8. Cllr. R. Shortall

Will the Chief Executive Officer please report on the legal advice which has been received regarding the legality of Circular 14/92.

REPLY

Circular 14/02 has now been superseded by a further Circular. S.W.A. 18/02. dated 21st October, 1992 from the Department of Social Welfare This circular sets out guidelines which are to replace the provisions of Circular 14/92 in relation to fuel bills. Copies of this circular have been circulated as correspondence for this meeting for the information of members."

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CHIEF EXECUTIVE OFFICERS REPORT

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

- "1. Department of Social Welfare Circular regarding Review of Exceptional Needs Payments and Circular 14/92

I have circulated, with the agenda papers for this meeting, copies of Department of Social Welfare Circular no. 18/92 dated 21st October, 1992 which refers to the review of the guidelines on Exceptional Needs Payments, including the approach to fuel debts, which is currently being carried out by the Supplementary Welfare Allowance Advisory Group representative of an of the health boards. Pending completion of this review and the preparation of comprehensive guidelines the Circular sets out guidelines intended to replace those contained in Circular 14/92 in relation to cases where an individual seeks an exceptional needs payment to help with fuel bills.

2. *Development of Psychiatric Services*

I have circulated, with the agenda papers for this meeting, copies of letter dated 21st October, 1992 from the Department of Health setting out details of a special allocation of £466,000 being made towards the cost of the development of our Board's psychiatric services.

3 **Cancer Week, 1992**
"Clean Air at Work"

I have circulated, with the agenda papers for this meeting, copies of an address by the Minister for Health at the launch of Cancer Week, 1992 and the Voluntary code of Practice on Smoking in the Workplace.

I have also circulated copies of the booklet "Clean Air at Work" which deals with the introduction of smoking control policies in the workplace. I wish to draw the members' attention to pages 25 to 28 of the Booklet regarding the Healthy Cities Project on Smoking in the Workplace and the implementation of a No-Smoking Policy in our new Headquarters Building.

4. *Address by Minister for Health at Annual General Meeting of Association of Health Boards in Ireland.*

I have circulated, with the agenda papers for this meeting, copies of the address by the Minister for Health, Dr. John O'Connell, T.D., on the occasion of the Annual General Meeting of the Association of Health Board in Ireland on 14th October 1992.

5. *G.M.S. Dispute*

Members will be aware that some General Practitioners have given notice of their intention to withdraw from their G.M.S. Scheme contracts early in December, 1992. In the case of our Board's area the number involved is 327 out of a total of 505 G.P. contract holders.

I am circulating, for the information of members, a copy of the Minister for Health's contribution to this week's Dail debate on the subject. This statement sets out, in some detail, the present position in relation to the Review of the G.M.S. contract which is ongoing at present and the proposals for the development of general practise which have been brought forward in that context

Members will note also the Minister's assurance that free general medical services will continue to be available to persons covered by medical cards after December 8th.

6. *Nuclear Assidents National Emergency Plan*

I have circulated this evening, for the information of members, copies of a statement issued on 2nd November on behalf of the Department of Energy regarding the publication of a booklet on a National Emergency Plan for Nuclear Accidents. I have also circulated copies of this booklet.

The Plan outlines national response measures to accidents which could give rise to cont? and radiation exposure to the Irish public, especially provision of information to the public.

The responsibilities of Government Departments and other national authorities are set out in Annex 1 of the booklet including those of the Department of Health on page 41.

7. *Permanent Hospital*

The Minister for Health has appointed a review group comprising officers of our Board, the Department of Health and representatives of Peamount Hospital with the following Terms of Reference:-

"To examine and agree the possible roles which Peamount Hospital can play in the provision of :-

- step down accommodation for elderly patients who are being ? and other associated services for the elderly.
- facilities and services for the care of the young chronic sick,
- services for persons with a mental handicap including an evaluation of the appropriate care requirements of existing clients.

and to determine the minimum costs associated with agreed level of service under the above three headings.

To review the existing budget allocation to Peamount and agree on its optimum deployment to current and proposed services, on the assumption that the service provided at the cheat unit at the hospital will continue at its present level."

Progress in relation to the deliberations of the Review Group will be advised to our Board on a regular basis through the General Hospital Care Programme Committee.

8. *Central Mental Hospital, Dundrum*

The new unit at the Central Mental Hospital, Dundrum, opened on 21st October, 1992. There are now 21 patients in residence.

The opening of the new unit is associated with the closure of wards to the old hospital and with the introduction of nursing services to the hospital. In this regard we are satisfied that the programme of care in the Central Mental Hospital has, in accordance with our Board policy, been re-oriented from a custodial regime to a modern therapeutic service.

9. **"One Stop Shop" and Computerised Information System**

I have circulated this evening, for the information of members copies of the following report regarding the formal launch of our Board's "One Stop Shop" and computerized public information system :-

"I am pleased to announce that the launch by our Chairman, of our Board's "One Stop Shop" located at Dr. Steevens' Hospital and computerized public information database has been arranged for Monday 30th November, 1992 at 4 p.m.

The "One Stop Shop" will provide a central facility where the public can have all their questions, requests for information, complaints and advice on all aspects of our Board's services dealt with. Members of the public will be welcome to call into the "One Stop Shop" or to make contact by means of a freephone telephone line. [Freephone Number 1800 520 520].

The public information database is a decentralized information facility which will be held on a network of computer terminals located in public offices, shopping centres, central rail and bus stations and other key public sites in our Boards area. These computer terminals, one of which will be located in our "One Stop Shop", are user-friendly and simple to operate and will give the public, at the touch of a button, comprehensive information on a full range of services including those provided by our Board. In particular information can be instantly obtained regarding:-

- [i] All Hospital Services in our Board's area including :-
 - details of in-patient and out-patient services
 - times for hospital visiting
 - times for out-patients and special clinics
 - bus routes of each hospital
- [ii] The location and details of all community based services in our Board's area including :-
 - Services available from our local Health Centres and Area Community Care Headquarters.
 - Psychiatric and Mental Handicap Services and Clinics.
 - Times of Dental and Child Health Clinics etc.
- [iii] Details of all services available for the Elderly including information about:-
 - services provided directly by our Board
 - services available from Nursing Homes
 - Nursing Home Subventions
 - Home Help Services
 - Meals on Wheels Services, etc.
- [iv] Details of services provided by Voluntary Organisation.
- [v] Health information about healthy lifestyles e.g. nutrition, exercise and weight control.

- [vi] Women's Health Issues.
- [vii] Details of services for AIDS victims and drug abusers.
- [viii] Lists of General Practitioners in our Board's area.

This network of information terminals will also provide details of services available from:-

- Department of Social Welfare
- Revenue Commissioners
- Dublin Local Authorities
- Bus and Rail Services
- Training and Employment Agencies

The costs of this service are shared Jointly by the participating agencies.

The main locations of the computer terminals where information may be accessed will be:-

- The "One Stop Shop" at Dr. Steevens' Hospital
- Community Care Office, Naas
- Community Care Office, Wicklow
- Dublin City Hall
- The Motor Registration Office
- Dublin Corporation Housing Department
- Civic Offices
- The Central Library
- The PAYE Enquiry Office
- Gandon House
- Oisín House
- Kilbarrack Employment Exchange
- The Central Shopping Mall, Ilac Centre.

Further terminals coming on-line shortly will be located in shopping centres and public offices throughout our Board's area."

Following a discussion on Circular S.W.A. 18/92 regarding the review of Exceptional Needs Payments, it was agreed to prepare a report on this matter for a future meeting of the Community Care Programme Committee.

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DISPOSAL OF PROPERTY AT LORD EDWARD STREET. DUBLIN 2

The following report no.22/1992 from the Chief Executive Officer was submitted :-

"Notice is hereby given pursuant to Section 83 of the Local Government Act, 1946. that it is proposed to dispose of the property described below which is no longer required for the purpose of the powers and duties of our Board.

Statutory Information

1. Site [c. 1/6 acre] at Lord Edward Street. Dublin 2

2. The said property was transferred to our Board by the Dublin Health Authority.
3. It to proposed to dispose of the site to Bolton Enterprises Ltd. 7 Millmount Ave. Drumcondra, Dublin 9 on a Joint venture basis with Dublin Corporation, the owners of an adjoining site of equivalent size [total disposal c.1/3 acre].
4. The consideration in respect of the disposal in £390.000 to be divided equally between our Board and Dublin Corporation, less costs.

At a meeting of our Board to be held after the expiration of ten clear days from the date of the sending of tins Notice, our Board may resolve as follows :-

- [a] That the disposal shall be carried out in accordance with the terms specified in the resolution,
or
- [b] That the disposal shall not be carried out

If our Board resolves that the disposal shall be carried out in accordance with the terms specified in the resolution, the disposal may, with the consent of the Minister for Health, be carried out in accordance with those terms.

If our Board resolves that the disposal shall not be carried out then the disposal shall not be carried out

If our Board does not pass a resolution, the disposal may, with the consent of the Minister, be carried out"

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

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REPORT OF BUDGET WORKING GROUP – FINANCIAL POSITION AT 30TH SEPTEMBER, 1992 AND OTHER MATTERS.

Report No.75/1992 [copy filed with official minute] was noted on a proposal by Cllr. Brady, seconded by Cllr. Dr. O'Connell.

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GREEN PAPER ON MENTAL HEALTH – DRAFT RESPONSE

It was agreed that members who wished to make comments or observations on the final draft, which had been circulated, should communicate with the Secretary before Wednesday 11th November so that their views could be considered at the meeting of the Special Hospital Care Programme Committee to be held on 12th November 1992.

122/1992

HIV/AIDS AND DRUG MISUSE - PROGRESS REPORT ON SERVICES

The following report no. 23/1992 from, the chief executive Officer was noted:

“Since this matter was last reported on and considered in detail by our Board in June. 1992 significant progress has been made in the establishment of further services by the Eastern Health Board. These arise from the recommendations of two National committees and continue to be monitored at that level. These Committees are the National AIDS Strategy Committee, chaired by Dr. John O’connell, T.D., Minister for Health and National Co-Ordinating Committee on Drug Misuse, chaired by Mr. Chris Flood, T.D., Minister for State at the Department of Health.

Satellite Clinics

Two Satellite Clinics were established by the Eastern Health Board at the end of August 1992-one at Ballyfermot and the other at Baggot Street. The Baggot Street Clinic was established as an interim measure until the designated premises in the North Inner City is ready for occupation. The purpose of the clinics is to provide primary healthcare to those HIV positive or at risk of becoming so. As a large proportion of users of this service will be drug users the initial demand on the clinics is, as expected, coming from drug users seeking medical treatment which is currently not available to them. Since the clinic at Ballyfermot opened 90 new patients have commenced on methadone maintenance. At the clinic in Baggot Street there are now a total of 160 patients on methadone maintenance.

Community Drug Teams

The two Community Drug Teams in Ballymun and the South Inner City are evolving along lines appropriate to their locations, as has happened in the U.K. where the common features of the Community Drug Teams were found to be:-

- narrowly defined geographical focus:
- community emphasis;
- multi-disciplinary composition.

Through this the teams are best equipped to fulfil their roles as outlined in the report of the National Co-Ordinating Committee on Drug Misuse:

- measurement of the problem;
- establishing contact with drug users and persons at risk;
- referring individuals for treatment;
- developing primary prevention programmes.

The Ballymun team currently comprises a core of the following-Eastern Health Board Consultant Psychiatrist. Addiction Counsellor and Outreach worker, a local General Practitioner and members of the staff of the Ballymun Youth Action Project. A premises is being sought which will meet the needs of the team.

The team in the South Inner City is more diffuse because of the wider geographical area; one component of the team is based at Rialto at St Andrew’s Resource Centre and comprises the health board addiction counsellor, outreach worker and staff of the Rialto Youth Development Project. The other component comprises staff from the Merchant’s Quay Project together with Eastern Health Board addiction counsellors and outreach workers. General Practitioners are involved in both locations and psychiatric cover is being arranged. Co-ordinators are being recruited for both teams.

Psychiatric Cover - Prescribing.

The recommendations of both National Committees are, of necessity, intertwined because of the high prevalence of drug misuse among people with the HIV Virus in the Eastern Health Board region. The issue of psychiatric cover for the Eastern Health Board Drug Treatment Service is now clarified with the assignment of Clinical Directors. The Satellite Clinics have evolved a methadone prescribing protocol to ensure uniformity in all the Eastern Health Board services. Considerable further liaison and operational arrangements need to be developed with Trinity Court where urine testing for the new service takes place. The co-operation of retail pharmacists is being sought.

Educational Programmes

The Eastern Health Board is producing an educational pack aimed at early school leavers. It is hoped to launch this during "European Drug Prevention Week" which commences on 13th November, 1992 and to make it available to interested groups. Including community drug teams.

Liaison with Voluntary Groups

This is well established. Currently all groups in the region. Dublin AIDS Alliance. Merchant's Quay Project. Ana Liffy Project. Ballymun Youth Action Project. Irish Haemophilia Society and Our Lady's Hospice. Harold's Cross, receive their funding following consultation and agreement of commitments with the Eastern Health Boards AIDS/Drug Co-Ordinator.

Rehabilitation

A Horizon Project aimed at rehabilitation of drug users has been commenced by the Eastern Health Board in association with the National Rehabilitation Board. There are two components to the Project:-

- a programme for drug users with teaching of appropriate marketable skills;
- a programme for the training of voluntary workers.

A Project Leader has been recruited and premises have been acquired.

Proposal for Residential Unit Teenage Drug Misusers

A Planning Group has been established within the Eastern Health Board comprising representatives of drug services. Community Care and Special Hospital Care Programmes, together with representation from the Ballymun Youth Action Project.

It is felt that the Unit should be able to retain teenagers, ideally by mutual agreement and that the treatment programme would last between six weeks and three months. A final Report, including resource implications, is currently being prepared for the National Co-ordinating Committee on Drug Misuse.

Projected Services Needs in the Field of Drug Treatment

The most conservative estimates suggest that there are 2,000 injecting drug users in Dublin. About 200 are in treatment including methadone maintenance, in Trinity Court and a further 250 in the Health Board Clinics. The latter group tend to be mainly those who have not succeeded at Trinity Court. The current need is to identify about six locations in the city where the services can be delivered.

In addition to the above, as already reported, the following services continue to be

- respite unit and terminal care beds for HIV positive patients at Cherry Orchard Hospital;
- AIDS Resource Centre at Baggot Street Hospital

To facilitate the planning of new services and the monitoring and evaluation of existing services it is important that a bank of social, behavioural, epidemiological and demographic information is built up. In this regard it is worth noting that arrangements have been made to assemble data on the number of cases by health board area and broken down into the divisions required by each health board.

It has been recently decided to supplement the existing sero-surveillance of HIV to assess more accurately the extent of the epidemic in the community with a system of unlinked anonymous testing."

123/1992

COMMITTEE TO MONITOR THE IMPLEMENTATION OF GOVERNMENT POLICY ON TRAVELLING PEOPLE

The following report no. 24/1992 from the Chief Executive Officer was noted:-

"The Committee to Monitor the Implementation of Government Policy on Travelling People has recently published its seventh report [for 1991]. A copy of this report is enclosed for the information of members.

The total number of travelling families as per the 1991 Annual Count carried out on 28th November 1991 was 3,671. The numbers of travelling families in our Board's area on that date are as follows:-

Dublin City	430
Dublin County	450
Dun Laoghaire	15
Co. Kildare	69
Co. Wicklow	57
	1,021

Chapter 3 of the Report, which deals with health issues, is of particular interest to our Board. The Report refers to the special efforts being made to successfully deliver health services to the Travellers and to ensure that these are tailored to meet the specific needs of the Travelling Community.

Primary health care for Travellers is delivered through our Board's Community Care Programme and involves a co-ordinated multi-disciplinary approach by Public Health Nurses, Area Medical Officers, Social Workers, Community Welfare Officers and General Practitioners in the General Medical Services Scheme.

Members will note that a special grant of £75,000 was made available by the Department of Health to our Board to enable us to replace the mobile clinic which has been used since 1986 to bring health services to Travellers on sites around the Dublin area. The new mobile clinic, which it is expected will come into operation towards the end of the year, will consist of a specially designed and constructed body on the chassis of a 13 tonne vehicle. The replacement four-wheel drive unit will be shorter in length than the unit currently in use and this will facilitate access to sites. The Report notes that a number of other health boards are currently examining the possibility of providing a similar service in their areas.

Reference is also made in the Report to the special foster care programme initiated by our Board for young Travellers, aimed at recruiting foster parents from within the Travelling Community with whom some of the Traveller children who come into our care may be placed, thereby enabling them to retain their links with their families.

It is also noted in the Report that Trudder House in Co. Wicklow received a grant of £24,000 through our Board in 1991 from the Disadvantaged Youth Fund of the National Lottery to assist young Travellers in an after-care programme. In addition, Exchange House, Dublin, which operates as a day care centre and resource centre received £252,000 in 1991 from our Board, while Trudder House and Derralossary House, which cater for Traveller children, received funding amounting to £408,000 in 1991. Funding for Childcare Assistants at St Kieran's School in Bray, St. Declan's School in Milltown and St Thomas's School in Clonsaugh was provided by our Board to the extent of £21,000.

The Monitoring Committee, which reports annually to the Minister for Health on progress made in the implementation of Government policy in relation to Travelling people, states that, in each annual report, the issue of accommodation for Travellers features prominently and that it has been, and continues to be, a principal concern of the Committee as it is of the Travelling people themselves.

If members wish to consider any of the matters in the Report in more detail this can be done at a meeting of the Community Care Programme Committee."

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PROGRESS REPORTS FROM PROGRAMME COMMITTEES

1. Special Hospital Care Programme

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

The report dealt with the draft response to the Green Paper on Mental Health.

2. Hospital Care Programme Committee

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

The following matters were dealt with in the report:-

[a] Patients' Charter

- [b] Naas Ambulance Base
- [c] Upgrading of I.C.U./C.C.U. at St Columcille's Hospital
- [d] Purchase of Echocardiograph System for James Connolly Memorial Hospital
- [e] Report on services In Cherry Orchard Hospital.

3. Community Care Programme Committee

On a proposal by Mr. Aspell, seconded by Mr. McGuire, it was agreed to adopt the report.

The following matters were dealt with in the report:-

- [a] Election of Cllr. J. Jacob. T.D., as Chairman of the Committee and of Cllr. D. Marren as Vice-Chairman.
- [b] Annual Report of the General Medical Services [Payments] Board. 1991.
- [c] Report on adoption of foreign children by Irish residents.
- [d] "Reach Out" Programme for the Elderly.
- [e] Our of Hours Social Work Service.
- [f] Report on services in Area, no. 4.

128/1992

NOTICES OF MOTION

1. The following motion was proposed by Cllr. R Greene and seconded by Cllr. D. Marren:-

"That this Board call on me Minister for Health to issue legally binding safety precautions to the general public for the disposal of used condoms, especially in public places and beaches, in order to ensure that children stay safe from any viruses or contamination, that these condoms may contain."

Following a discussion to which Cllr. Greene and Deputy Byrne contributed and to which Prof. O'Donnell, Dublin Medical Officer of Health replied the motion was lost on a show of hands.

2. The following motion which was proposed by Cllr. Greene was not seconded and was, accordingly, dropped:-

That the Stay safe Programme be stopped in view of the fact that the C.P.S.M.A. recommendations were not adhered to.

3. *The notice of motion in the names of Deputy Durkan regarding the department of Social Workers was, in his absence, not moved and was, accordingly, dropped.*

4. The following motion was proposed by Cllr. J Connolly and seconded by Cllr. K. Farrell:-

“That Chief Executive Officer indicate and report on the number of Health Inspectors in the Eastern Health Board area and if he is satisfied that he has the required number of staff to regularly inspect all eating houses and ensure the protection of health of customers.”

The Chief Executive Officer informed the members regarding the manpower situation in relation to Environmental Health Officers, 20 of whom are trained each year. The complement of Environmental Health Offices in the Dublin City area is 9 below strength at present.

Members agreed that our Board's concern regarding the need for an increase in the number of Environmental Health Officers being trained should be communicated to the Department of Health.

5. The following motion was proposed by Cllr. Connolly and seconded by Cllr. Farrell:

“That the Eastern Health Board consider setting up of a Sports Health Clinic in view of the vast interest in sport in this country and where injuries can be given special attention and expertise in coaching can be provided.”

Following a discussion to which Cllr. Connolly, Dr. Hawkins, Dr. O'Herlthy, Mrs. Bonar, Cllr. Greene, Dr. Whitty, Deputy Durkan, Cllr. Dr. O'Connell and Cllr. Brady contributed and to which the Chief Executive Officer and Mr. O'Brian, A/Programme Manager, Hospital Care replied, it was agreed to advise the Minister for Sport of our Board's concern regarding the need for communication, to young people Board's concern regarding the avoidance of injuries caused by sporting activities it was also agreed that consideration should be given to the licensing of centres engaged in training for sports activities. The position will be kept under review by the General Hospital Care Programme Committee.

- 68.5 *The notices of motion in the names of Cllr. Shortall regarding Department of Social Welfare Circular 14/92 and regarding the Orthodontic Service were, in her absence, not moved and were, accordingly, dropped.*

8. The following motion was proposed by Deputy Durkan and seconded by Cllr. Connelly:

‘That this Board would consider the causes of juvenile crime within its administrative area with a view to identifying by what means the Board might assist in co-operation with the Junior Liaison Services in alleviating the causes.’

Following a discussion to which Deputy Durkan and Dr. Whitty contributed and which the Chief Executive Officer replied, it was agreed that senior officers from our Board's Community Care services should meet with Officials from the Juvenile Liaison Service to discuss the position in our Board's area, following which a report would be brought to a meeting of the Community Care Programme Committee.

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CORRESPONDENCE

Items of correspondence as referred to in the Chief Executive Officer's Report were noted.

The meeting conducted at 7:40 p.m.

Correct: K. J. Hickey
Chief Executive Officer.



CHAIRMAN

EASTERN HEALTH BOARD

Report No. F.5//1992

At a meeting of the Budget Working Group held on 23rd October 1992 the Chief Executive Officer reported on our Board's financial position at 30th September 1992 and projected outturn at 31st December 1992.

FINANCIAL PERFORMANCE TO 30TH SEPTEMBER 1992

	<i>£000</i>	
Expenditure to 30th September 1992	205,827	
Allocation	198,610	
Net over run	7217	
Accounted for by:--		
[A] <u>Demand Led Schemes</u>	£000	£000
[i] <u>Community Drugs Schemes</u>		
Drug Refund Scheme	3,250	
Drug Cost Subsidisation Scheme	1,170	
Long Term Illness Scheme	403	
Hardship Medicines	358	5,181
[ii] Welfare Allowances	<hr/>	1,064
		<hr/> 6,245
[B] <u>Other Variances</u>		
- Maintenance		115
- Special Hospital Programme		252
- General Hospital Programme		221
		<hr/> 588
[C] <u>Child Care Services</u>		220
[D] <u>Statutory Changes Impact on Community Care</u>		
- Ophthalmic Services		108
- Maternity and Child Health		24
		<hr/> 132
[E] <u>Miscellaneous Variances</u>		32
Total Variance		<hr/> <hr/> £7,217

The Chief Executive Officer informed the members that, apart from the over-expenditure incurred on the demand led schemes, the demand for which is outside of our control and is not amenable to any management action by our Board, our Board's expenditure to 30th September was approximately £970,000 above our target. Of this amount £220,000 was incurred in providing increased service levels for child care services in response to increased demands and £132,000 was in respect of additional expenditure incurred due to changes implemented in Ophthalmic and Maternity and Child Health Schemes. The residual variance of £610,000 would be eliminated by the year end.

Members noted that our position at the end of the 3rd quarter and prospective outturn for 1992 shows that we are on course to come within budget in respect of all aspects of our Board's very wide-ranging and diverse range of services with the exception of the items set out above almost all of which represent expenditure arising from statutory entitlements and decisions outside of our direct control. The over expenditure on child care services reflects our obligation to respond to growing needs in this area. Our budget performance-date reflects the tremendous ongoing efforts and co-operation of staff at all levels.

The Chief Executive Officer also circulated separately a copy of a detailed report to the Department of Health on our Board's Value For Money performance in recent years. Members noted the concern expressed in that report regarding our ability to continue to secure the additional levels of savings required to bridge gaps in our budget allocations each year and that further efforts in this area would require investment and longer lead-times to produce results.

Members also noted and agreed proposals to advertise the sale of six vacant staff houses at St Brendan's Hospital and three houses at Mount Pleasant Square which are no longer suitable for their present use and which it is intended to replace by the acquisition of two other properties. The current position in relation to the completion of the purchases of five houses at Maynooth and the proposed disposal of a three acre site at the Navan Road was also noted.

M BARRETT T.D.
Vice Chairman

28th October 1992