

EASTERN HEALTH BOARD

**Minutes of proceedings of Eastern Health Board Meeting
held in
The Boardroom, Dr. Steevens' Hospital, Dublin 8
on Thursday 11th February. 1993 at 6:00 pm.**

Present

Mr. P. Aspell	Cllr. M. Barret
Mrs. B. Bonar	Cllr. G. Brady
Cllr. B. Briscoe. T.D.	Cllr. E. Byrne
Cllr. I. Callely. T.D.	Cllr. J. Connolly
Dr. R Corcoran	Cllr. J. Doyle
Cllr. B. Durkan. T.D.	Cllr. K. Farrell
Cllr. C. Gallagher	Cllr. R Greene
Dr. R Hawkins	Cllr. J. Jacob. T.D.
Dr. D.I. Keane	Cllr. T. Keenan
Cllr. D. Marren	Mr. G. McGuire
Cllr. O. Mitchell	Ms. M. Nealon
Cllr. Dr. W. O'Connell	Dr. B. O'Herlihy
Cllr. J. Reffly	Dr. J. Reilly
Cllr. K. Ryan	Cllr. R Shortall. T.D.
Dr. C. Smith	Dr. R Whitty
Dr. M. Wrigley	

Apologies

Cllr. L. Creaven, Dr. J. Fennell

In the Chair

Cllr. M. Barrett

Officers in Attendance

Mr. K. J. Hickey. Chief Executive Officer
 Mr. M. Walsh. Programme Manager. 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. Gallagher. Finance Officer
 Mr. G. Brennan. Technical Services Officer
 Ms. M. Kelly. A/Personnel Officer
 Mr. M. O'Connor. Secretary

12/1993

CHAIRMAN'S BUSINESS

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

"1. Appointment of Councillor Kevin Ryan as a member of the Eastern

I am sure members will join with me in welcoming to his first meeting of our Board. Cllr. Kevin Ryan, who has been appointed by Wicklow County Council to be a member of our Board in succession to our late Chairman. Cllr. Frank Hynes.

2. Congratulations

I am sure that members will also join with me in congratulating Deputy Joe Jacob on his election as Leas Ceann Comhairle and Cllr. Joe Doyle and Cllr. Dick Roche on their election as members of Seanad Eireann.

3. Election of Chairman

I wish to advise members that the election of Chairman of our Board will be on the agenda for the March meeting of our Board.

4. Filling of vacancies caused by, the death of Councillor Hynes

In accordance with the usual practice I wish to give notice that the filling of the following vacancies caused by the death of Cllr. Frank Hynes will be on the agenda for the March meeting of our Board:-

- (a) Budget Working Group (Core Group}
- [b] St James's Hospital Board
- [c] Ballvmun Special Committee
- [d] Association of Health Boards in Ireland
- [e] Irish Public Bodies Mutual Insurances Ltd.

5. Meath Hospital Board

The term of office of our Board's representatives on the Board of the Meath Hospital terminates on the 5th April 1993. In accordance with the usual practice the election of 11 persons to represent our Board on the Board of the Meath Hospital will be on the agenda for the March meeting of our Board."

13/1993

**CONFIRMATION OF MINUTES OF MEETINGS HELD ON 14TH AND 21ST
JANUARY, 1993**

The minutes of the meetings held on 14th and 21st January, 1993, having been circulated, were confirmed on a proposal by Deputy Callely, seconded by Cllr. Dr. Dr. O'Connell.

14/1993

QUESTIONS TO THE CHIEF EXECUTIVE OFFICER

On a proposal by Dr. Hawkins, seconded by Deputy Callely. It was agreed to ' the questions which had been lodged.

1. Cllr. I Callely. T.D.

To ask the Chief Executive Officer what progress was made with the various proposals that were recommended in the report "Care and Accommodation of Young People at Risk or Homeless in Dublin" dated 1986. Can the Chief Executive Officer give a detailed statement on this matter.

Reply

The following services have been put in place, or expanded, in respect of homeless young persons in recent years:

- * Emergency Hostel for boys at Eccles Street [12 places] and for girls at Sherrard Street (10 places).
- * Long-stay places have been provided for boys in the Don Bosco house at Clontarf.[8 places], the Los Angeles Society house at Dalkey [10 places] and in a residential project in Tallaght [6 places].
- * Six long-stay places for girls have been provided in a residential project in Ballymun.
- * Sheltered flatlets have been provided at Lennox Street. Rathgar Ave.. Blessington St. and at Nephin Road [12 places].
- * A special foster care scheme, which has included the recruitment of special carers, has been developed with the task of placing homeless young people with families.
- * Glen House Therapeutic Centre has been developed in Co. Kildare [8 places] and 20 boys are undergoing training in a Sports and Cultural Youth Development Project in Sallynoggin.
- * Family Resource Centres, which include family support services for otherwise homeless young people, have been developed at Ballymun. Finglas and Tallaght.
- * A special team of ten social workers has been put in place to work with homeless young persons and to ensure that an out-of-hours service is available for them.
- * It is also planned to commence the following services during 1993:-

An Off-the-Street Project operated with Focus Point at Stanhope Street a Neighbourhood Youth Project at Blanchardstown and a Family/School Project at Clonalkin.

2. Cllr. I Callely, T.D.

To ask the Chief Executive Officer to give a breakdown of the number and cause of deaths of patients under the care of the Special Hospital Care Programme who died other than from natural causes for the years 1987. 1988. 1989. 1990. 1991 and 1992.

Reply

Details of deaths, other than from natural causes, of patients either under the direct care of, or in contact with, the Special Hospital Care Programme are set out hereunder:-

	1987	1988	1989	1990	1991	1992
In Hospital	3	3	3	5	4	3
In contact with Community						
Services	<u>10</u>	<u>3</u>	<u>5</u>	<u>11</u>	<u>7</u>	<u>12</u>
	13	6	8	16	11	15

3. Cllr. I Callely. T.D.

Can the Chief Executive Officer advise what arrangements have been agreed Between the Eastern health Board and Beaumont Hospital for provision of psychiatric services from the purpose designed Acute Psychiatric Unit in Beaumont Hospital.

Reply

The acute psychiatric unit at Beaumont Hospital has not yet opened due to a combination of other priority requirements within the hospital for the use of this accommodation and the absence of final arrangements for funding the running cost of the new unit

The date for the opening of the unit has been the subject of a number of discussions with representatives of Beaumont Hospital and of the Department of Health. The current position appears to be that it is unlikely that the unit will open for at least 2 years.

4. Cllr. J. Connolly

Win the Chief Executive Officer give a full report on drug addiction and its effects in the Board's area.

Reply

At the meeting of our Board on 5th November. 1992 a comprehensive Report (no. 23/1992] on "HIV/AIDS and Drug Misuse - Progress Report on Services" was noted.

In view of Motion No. 8(iii) on the agenda for discussion at this evening's meeting of our Board. I am arranging to re-circulate Report No. 23/1992 together with an up-date report on relevant aspects of the matter.

5. Cllr. R. Shortall, T.D.

Will the Chief Executive Officer please outline the procedure for the inclusion of General Practitioners in the General Medical Services. Will he further say the average number of such practices which become available in any 12 month period and give details of the way which the vacancies are advertised and the criteria used to select applicants.

Reply

General Practitioners may enter the General Medical Services Scheme in the following ways:-

1. On the death or resignation of a participating doctor if it is agreed that the resultant vacancy should be filled, consultation takes place with the Irish Medical Organisation, following which, subject to Board agreement, arrangements are made to fill the vacancy by public advertisement and interview. Approx. 15 vacancies per annum occur in our Board's area, but all of these may not necessarily be filled.
2. Where a participating doctor applies to our Board to take on an Assistant/Partner, a similar procedure is followed i.e. consultation with the Irish Medical Organisation. Health Board agreement if the number of patients on the doctor's panel warrants the engagement of an Assistant/Partner, followed by public advertisement and interview. The average number of such appointments is 4 per annum.
3. A doctor who has completed five years continuous service in full-time general practice at a particular centre may apply for a General Medical Services contract at that Centre. This facility will cease at 31st December, 1993. At present 80 doctors in our Board's area are eligible to apply for entry to the General Medical Services Scheme in this way.

Applicants are selected for appointment by competitive interview by a Selection Board constituted in accordance with an agreement between the Minister for Health and the Irish Medical Organisation. In this process regard will be had to factors such as training, qualifications and experience in general practice and general suitability for appointment

A review of the agreement on entry to the General Medical Services between the Minister and the Irish Medical Organisation is currently under discussion.

6. Cllr. R. Shortall, T.d.

Will the Chief Executive Officer please outline the implications, financial and other, visualised for this Board for the implementation of Section 3 of the Child Care Act and will he make a statement on the matter.

Reply

Section 3 of the Child Care Act, 1991 imposes on health boards the general function of promoting the welfare of children who are not receiving adequate care and protection.

Because of the general enabling nature of the Section, it is not possible to be specific regarding the financial and other implications of that Section alone. Section 3 places new emphasis on the welfare of the child as the first and paramount consideration and on providing support and assistance so that children can remain at home rather than be taken into care.

The Act as a whole contains a number of significant provisions, in particular the extension of the age of children under the Act to 18 years and the provision of accommodation for homeless children. Under the Programme for Economic and Social Progress, it is planned to phase implementation of the Act over seven years. In 1992, additional funding of £0.7m was provided to our Board out of a national allocation of £2m for this purpose. No information is yet to hand regarding extra child care funding for 1993.

7. Cllr. R. Shortall, T.D.

Win the Chief Executive Officer please give details as to the gender and number of children and young people under 18 years of age, placed in Bed and Breakfast accommodation in 1992, their respective ages, the duration of stay in such accommodation and the cost of this accommodation.

Reply

Details regarding the detached children and young people under 18 years of years of age who were placed in bed and breakfast accommodation during 1992 through the Homeless Persons Unit at, Charles Street ant set out hereunder.-

	Number	Cost	Average no. Of nights
Males under 16 years	8	£1341	11
Mates 16 -17 years	17	£3712	13
Females under 16 years	7	£2701	23
Females 16-17 years	16	£2940	12

Bed and breakfast accommodation for young persons is used for short periods, only as a last resort where more appropriate accommodation is not available or where the young person refuses to avail of a hostel or other place.

Day support is provided, where the young person will avail of it, through programmes such as FAS training schemes and involvement in VEC youth reach programmes. These arrangements are made through our social workers, who maintain contact with the young persons during the day.

15/1903

CHIEF EXECUTIVE OFFICER'S REPORT

The Chief Executive Officer read the following report which was noted and agreed-

1. Sports Health Clinic and licensing of gymnasia

I have circulated with the agenda papers for this meeting copies of letter dated 15th January. 1993 from the Private Secretary to the Minister of State at the Department of Education in response to our Board's resolution in relation to the establishment of a sports health clinic and the licensing of gymnasia and sports training facilities.

2. Resolution regarding contribution towards the cost of alcohol abuse treatment programmes

I have circulated with the agenda papers for this meeting, copies of letter dated 15th January. 1993 from the Association of Advertisers in Ireland in response to the resolution adopted by our Board at its September 1992 meeting calling for the dedication of a proportion of the expenditure on advertising of alcohol products towards the cost of alcohol abuse treatment programmes.

3. health Services News

I have circulated with the agenda papers for this meeting, copies of the February 1993 edition of the Health Services News, which is prepared by the Health Services Development Unit of the Institute of Public Administration.

4. Child Care Advisory Committee

I have circulated this evening for the information of members copies of letter dated 9th February. 1993 from the Department of Health in response to our letter of 28th January requesting that the number of members of our Board on the Child Care Committee should be increased from three to five.

The appointment of members, including the Chairman and Vice-Chairman of the Child Care Committee is on the agenda for this evening's meeting of our Board (item no. 6).

5. End of Year [1992] Summary of HIV/AIDS Statistics and Service Developments

I have circulated this evening, for the information of members, copies of a Press Release issued by the Department of Health in relation to their review of HIV/AIDS Statistics and service developments.

The Department's document includes details of the cumulative cases of AIDS at 31st December. 1992. An international comparison of AIDS cases shows Ireland as ranking 11th among the 12 E.C. Member States at a rate 1.80 per 100.000 population as against the highest rate for Spain at 10.40.

The statistics also reveal that-

- the number of new cases of AIDS reported in 1992 was 50 compared to 71 in 1991.

- the number of deaths from AIDS reported in 1992 was 42 compared with 21 in 1991.
- the largest no. of cases (27) and deaths (21) occurred among those whose infection was caused by intravenous drug use [50% approx.]
- the greatest percentage [64%] of cases occur in the 20 - 34 year age group and 85.5% of cases have occurred in males and 14.5% in females of all age groups.

* **Heterosexual Spread of AIDS**

To the end of 1989 there had been 126 cases of AIDS in Ireland. 4 (3%) classified as heterosexual. At the end of 1992 there were 308 cases of AIDS. 30 (10%) classified as heterosexual. Thus the relative contribution of heterosexual cases has risen considerably although the actual increase in cases is much greater in drug users and homosexual men.

It is not possible to say what proportion of people who contracted the HIV virus in 1992 were heterosexual non drug users. Newly diagnosed cases last year arise from transmission of the virus up to 10 years ago. Because the contribution of drug use to HIV transmission in Ireland is relatively large compared to most European countries the potential for transmission to heterosexuals and drug users axe heterosexual and sexually active.

The number of persons classified as heterosexual who have developed AIDS *to* Ireland is too small to makes meaningful projections. However, the educational message is still clear - HIV Is transmitted by needle sharing and sexual intercourse.

6. Department of Health Press Release regarding tallaght Hospital Project

I have circulated this evening, for the information of members, copies of a press release Issued on behalf of the Department of Health referring to the confirmation of the Minister for Health that construction of Tallaght Hospital is a top Government priority and that it will commence as soon as possible this year.

7. Revised Conditions of Contract - General Medical Services Scheme

Members will be aware that an agreement was recently reached between the Minister for Health and the Irish Medical Organisation following national negotiations on revised conditions of contract for General Practitioners In the General Medical Services Scheme. The main elements of the agreement are as follows: -

7.1 Payments to General Practitioners

7.1.1 Implementation in full of the 17 1/2% increase recommended by an Arbitrator in 1992 in addition to any general pay round increases.

7.1.2 The provision of additional funding to GPs for-

- (i) the provision of realistic rostering and out of hours arrangements

- (ii) Practice maintenance equipment and development. A Health Board will be entitled to satisfy itself that practice premises meet the criteria laid down in the GMS contract
- (iii) A supplementary grant to those GPs who employ Secretaries and/or Nurses

7.2 General Practice Units

The establishment of a general practice unit at national level within the Department of Health and the establishment of a Regional General Practice Unit by each Health Board.

The Department of Health has given approval and funding for the setting up of such a unit by our Board, the staffing of which will include the input of a General Practitioner and Pharmacist expertise. It is envisaged that the unit will have a role in:-

- (i) raising standards in general practice
- (ii) facilitating an improvement in the interface between general practice and the other health services including hospital services
- (iii) improving the organisation of general practice
- (iv) identifying opportunities for extending the services provided by general practice where this can be done more cost effectively than at present
- (v) assisting general practitioners to prescribe appropriately and cost effectively
- (vi) identifying with GMS issues relating to contracting doctors and eligible patients.

7.3 Fond for the Development of General Practice

The basis of the agreement in relation to funding of items No. 7.1.2 and 7.2 above is that funding for these and certain other items would be regarded as an investment to be recouped from savings to be realised from the overall GMS drug budget in 1993 and 1994.

7.4 Indicative Drug Budgets for General Practitioners

Each GP has been allocated an individual annual target budget for 1993 under the GMS Scheme. In accordance with the agreement between the Minister and the Irish Medical Organisation there is a commitment to the objective of appropriate and cost effective prescribing.

7.5 National Provisions

At national level the agreement includes a commitment for the establishment of a Council for General Practice. As stated above it also includes provision for the setting up of a General Practice Unit within the Department of Health.

The agreement is due for review at national level before the end of 1994 and offers an opportunity to begin to develop and strengthen the role of general practice as part of the overall health services in our Board's area. It is important that general practice should be supported and developed so that the contribution of the primary health care system can be fully realised as part of an integrated health service. The general practice units to be established both at national and regional level will have an important role in supporting potential developments.

In order that the full development potential may be realised it is vitally important that the targeted drug savings are realised in 1993 and 1994 and indeed that savings over and above these targets are made which could be further invested in the development of general practice.

I am sure that our Board will welcome the opportunity for the development of a closer and a more supportive working relationship with general practitioners in our region which is now opening up, the ultimate objective of which is the provision of a better service to patients. Further and more detailed progress reports will be made through the Community Care Programme Committee in due course."

16/1993
REPORT OF BUDGET WORKING GROUP - FINANCIAL POSITION AT 31ST
DECEMBER, 1992 AND EXPENDITURE LIMIT TO 18TH MARCH, 1993

Report no. Ft/1000. copy filed with official mental copies of which had been circulated, was noted.

17/1993

CHILD CARE ACT, 1991 - APPOINTMENT OF MEMBERS INCLUDING THE
CHAIRMAN AND VICE CHAIRMAN OF THE CHILD CARE COMMITTEE

The following Report no. 3/1993 was submitted:-

"At the meeting of our Board held on 21st January, following consideration of Report no. 1/1993 regarding the appointment by our Board of three members, including the Chairman and Vice-Chairman, of the Child Care Committee. it was agreed to request the Minister for Health to increase the number of members of our Board on the Child Care Committee from three to five and to defer the making of the appointment, pending the Minister's reply, to the February meeting of our Board."

In noting department of health reply of 9th February in response to our Board request that like Minister should consider increasing the number of members of the Board on the Child Care Committee from three five, members asked that the Ministry Health be advised that while our Board had appointed three of it members to be of the Child Care Committee, it was still of the opinion that the committee should include five of its members.

It was agreed that the following members should be appointed as members of the Child Care Committee:-

1. Cllr. Ivor Callely. T.D. [Chairman]
2. Cllr. Roisin Shortall. T.D. [Vice-Chairman]
3. Dr. James Reilly

18/1993

PROCURESS REPORTS FROM PROGRAMME COMMITTEES

1. General Hospital Care Programme Committee

On a proposed by Deputy Durkan, seconded by Deputy Callely, it was agreed to adopt the report.

The following matters were dealt with in the report:-

- [a] Allocation of extra funds to our Board for the provision of additional Facilities for the elderly to help ease problems being experienced in the acute hospitals.
- [b] Blocking of acute hospital beds by inappropriately placed elderly patients.
- [c] Recommendation that a portion of the £20 m. earmarked to reduce hospital waiting lists be allocated towards the development of faculties for the elderly with the objective of freeing up acute hospital beds.
- [d] Report on services in St Clare's Home.
- [e] Recommendation that surplus properly assets available to the Health Board be disposed of to facilitate the development of services for the elderly [e.g. community units] and. in particular, the replacement of old buildings currently being used to provide long-stay accommodation for elderly patients, especially those at St. Clare's Home.

At the request of Deputy Durkan it was agreed to write to the Department of Health following up our Board's request for the reception of a deputation by the Minister for Health to discuss the progressing of the development of Naas General Hospital

2. Community Care Programme Committee

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

The following matters were dealt with in the report-

- [a] New Mobile Clinic for travelers.
- [b] Report on services in Area no. 6.

19/1993

NOTICES OF MOTION

1. The following motion was proposed by Cllr. Byrne:-

"That this Board agrees to request from the Minister for Health a commitment that, in the future, all miscellaneous grants from the National Lottery be processed and administered by this board for applicants which fall within our Board's area of jurisdiction."

The motion was seconded by Cllr. Connolly and, following a discussion to which Cllr. Byrne, Cllr. Connolly, Deputy Durkan and Deputy Callely contribute, and to which the Chief Executive Officer replied, was agreed.

2. The following motion was proposed by Cllr. Byrne:-

"That this Board welcomes the commitment of the Coalition Government to dramatically reduce waiting time over the next five years for persons awaiting treatment for orthodontic and dental services and calls upon the Chief Executive Officer to report to the Board on the procedures for involving all newly qualified dentists in providing this service. The report should also cover the involvement of graduate hygienists to do scaling and cleaning for all children under the age of sixteen as promised in the Programme for Government."

The motion was seconded by Cllr. Connolly and, following a discussion to which Cllr. Byrne and Dr. Keane contributed, and to which the Chief Executive Officer replied. It was agreed that a report would be prepared for consideration at the special meeting of our Board to be arranged to coincide with the proposed visit to the Dublin Dental Hospital.

2. The following motion was proposed by Cllr. Connolly:-

"That the Eastern Health Board, acknowledging that drugs are the root cause of crime escalation, accepts at the same time that drug addiction is a serious problem causing grave dangers to every responsible person in the country, particularly Dublin, calls on the Government to involve all persons so affected by placing them in restrictive care custody until their affliction is satisfactorily cured."

The motion was seconded by Cllr. Greene and following a discussion to which Cllr. Connolly, Cllr. Greene, Dr. Smith, Deputy Callely, Cllr. Byrne, Deputy Durkan, Mr. McGuire, Dr. Reilly and Ms. Nealon contributed, and to which the Chief Executive Officer replied, was agreed, having been amended following:-

"That the Eastern Health Board, acknowledging that drugs are the root cause of crime escalation, accepts at the same time that drug addiction is a serious problem causing grave dangers to every responsible person in the country, particularly Dublin, calls on the Government to give priority treatment to this matter and to bring it to a satisfactory conclusion."

4. The following motion was proposed by Cllr. Connolly:

That the grant aid originally provided by the Eastern Health Board to the Walkinstown Association for Handicapped be again granted to that organisation for administrative and equipment purposes in view of its continued dedication to handicapped in Walkinstown, Crumlin, Drimnagh and Ballyfermot areas."

Mr. Walsh, Programme Manager, Special Hospital Care, advised the members regarding the funding arrangements for the Walkinsatown Association for the Handicapped, following which it was noted that he would arrange a meeting with representatives of the Association to consider the current position.

5. ***It was agreed that the motion in the name of Cllr. Greene regarding additional long-stay beds for the elderly should be deferred to the March meeting of our Board.***

20/1993 CORRESPONDENCE

Items of correspondence as referred to in the Chief Executive Officers report were noted together with letter dated 2nd February, 1993 from Carnew Community Care conveying their Committees sympathy to the members of our Board on the recent death of our esteemed Chairman, Cllr. Frank Hynes.

The meeting concluded at 9:00 p.m.

Correct: **K.J. Hickey,
Chief Executive Officer.**



CHAIRMAN

EASTERN HEALTH BOARD

Report No. F1/1993

1. Revised Allocation 1992 and Expenditure Limit to 31st March 1993

At a meeting of the Budget Working Group held on 1st February 1993 members considered a report from the Chief Executive Officer in relation to our Board's revised allocation for 1992 and expenditure limit to 31st March 1993.

1.1 Revised Allocation 1992

The Budget Working Group noted that the likely out-turn of our Board's budget for the year ended 31st December 1992 is as follows:-

	<i>£000</i>
Original Allocation	£261,167
Approved increases in respect of Pay, Allowances, Service Developments and Other Adjustments (Net of reduced allocation notified July 1992)	<u>£ 23.338</u>
Revised Allocation 1992	£284,505

Discussions are continuing with the Department of Health to finalize a number of outstanding matters which our revised allocation does not take into account. In particular there still remains an unfunded expenditure overhang of £1.12m in respect of the demand led schemes which although recognised as outside of our Board's control will nevertheless have to be carried over for funding in 1993.

In addition, a number of other budget adjustments for 1992 require further discussion relating to various matters such as agreed developments in mental handicap services, child care services, extra cost of medical defence fees and the increased demand for adult ophthalmic services arising from the change in policy on eligibility by the Department of Social Welfare in relation to adult ophthalmic and dental services.

1.2 1993 Position

The interim allocation notified to our Board for the first quarter of 1993 is £72.74 lm. This allocation does not reflect the carry-over costs of the matters referred to in the previous paragraph above.

1.3 The Budget Working Group agreed to a proposal that our Board should take up the matter of outstanding adjustments further with the Department of Health as a matter of urgency with a view to agreeing the final position for 1992 and our budget base for 1993. The outcome will be the subject of a further report through the Budget Working Group to our Board.

2. Property

Members noted the current position in relation to the disposal of six vacant staff houses at St Brendan's Hospital and the proposed acquisition of a property on Rathgar Road as a replacement for our Board's houses at Mount Pleasant Square which are no longer suitable for their present use. They also agreed that further discussions should take place regarding the proposed disposal of a three acre site at the Navan Road, following which a further report will be brought to our Board through the Budget Working Group.

**M Barrett
A/Chairman
1993**

9th February