

EASTERN HEALTH BOARD
Minister of proceeding of Monthly Meeting
held in
The Boardroom, Dr.Steevens' Hospital, Dublin 8

On Thursday 7th October. 1993 at 6:00 p.m.

Present

Mr. P. Aspell	Mrs.B. Bonar
Cllr. G. Brady	Cllr.B. Byrne
Cllr.L. Calley. T.D.	Cllr. B. Coffey
Dr. R Corcoran	Cllr. L. Creaven
Cllr. C. Gallagher	Cttr. R Greene
Cllr. T. Keenan	Cllr. D. Marren
Mr. G. McGuire	Cllr. O. Mitchell
Mrs.M. Nealon	Cllr. Dr. W. O'Connen
Dr. B. OHerlihy	Dr.J. Reilly
Cllr.J.Reilly	Sen. D.Roche
Cllr. K.Ryan	Cllr. R. Shortall. T.D.
Dr.RWhitty	Dr. M. Wrigley

Apologies

Dr. J. Fennell
 Cllr. M. Barrett
 Cllr. J. Connolly
 Cllr. B. Durkan. T.D.

In the Chair

Cllr. KenFarrell

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
 Mr. G. Brennan. Technical Services Officer
 Ms. M. Gallagher. Finance Officer
 Ms. M. Kelly. A/Personnel Officer
 Mr. M. O'Connor. Secretary

**99/1993
CONDOLBNCES**

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

- Ms. Mary Daly. Grade II. Community Care Service on the death of her mother.
- Ms. Lilian Charles, Grade II. Child Care Services, on the death of her brother.

**100/1993
CHAIRMAN'S BUSINESS**

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

"1. Meeting of Commnity Care Programme Committee in the Dublin Dental Hospital

I wish to advise members that a meeting of the Community Care Programme Committee will be held in the Dublin Dental Hospital on Thursday. 28th October. 1993 at 11.00 a.m. at which a report on our Board's Dental Service will be considered, followed by a tour of the Dental Hospital. This meeting is. of course, open to an Board members.

2. Meeting of the Budget Working Group

A meeting of the Budget Working Group will be held in Dr. Steevens' Hospital on Friday. 22nd October. 1993 at 11.00 a.m. to consider our Board's financial position at 30th September. 1993 and other matters."

**101/1993
CONFIRMATION OF MINUTES OF MONTHLY MEETING HELD ON 2ND
SEPTEMBER, 1993**

The minutes of the monthly meeting held on 2nd September, 1993, having been circulated, were confirmed on a proposal by Cllr. Keenan, seconded by Mr. Aspen.

**102/1993
CJUE8TION8 TO THE CHIEF EXECUTIVE OFFICER**

On a proposal by Mr. McGuire, seconded by Cllr. Keenan. it was agreed to answer the questions which had been lodged.

"1. Cllr. I. Callely. T.D.

To ask the Chief Executive Officer how many applications are in process from people wishing to adopt, can the Chief Executive Officer give a breakdown of the total number of applicants on a monthly basis since January 1990. number of applicants who. after counselling meetings, confirmed their Intention to proceed, number of applicants allocated for assessment and win the Chief Executive Officer make a statement on the matter.

Reply

Forty eight (48) applications which have been on hand for some time are currently being processed from prospective adopters for children in our Board's care. Applications are not received on a monthly basis but rather as a result of advertisement. In July last, following public advertisement, 154 enquiries were received. Counselling meetings are being arranged for those who responded, following which firm applications to adopt will be processed.

2. Cllr. I Callely. T.D.

Can the Chief Executive Officer advise of the number of Speech Therapists employed by the Eastern Health Board in each Community Care Area, if the Chief Executive Officer will outline the average waiting time in each care area to avail of speech therapy, particularly for children. Is the Chief Executive Officer aware of parents' concerns on delays to avail of speech therapy and what measures will be introduced to address this matter?

Reply

The following are the numbers of Speech and Language Therapists employed in each Community Care Area and in the Speech and Language Units at BaUinter Health Centre and at St Patrick's Teacher Training Centre in Drumcondra.

<u>Location</u>	<u>No.</u>	<u>Location</u>	<u>No.</u>
Area 1	5	Area 6	4
Area 2	4	Area 7	4
Area 3	4	Area 8	6
Area 4	5	Area 9	4
Area 5	4	Area 10	5
Speech and Language Units	6		

In addition 10 Therapists are employed on a sessional basis as required and available.

As indicated in a reply to a similar question tabled for the April 1993 meeting of our Board, the waiting periods for speech and language therapy assessment and treatment vary from area to area, having regard to a number of factors e.g. area, population and demand for services, especially where special schools or other institutions are located in an area.

In some areas the Speech and Language Therapists are in a position to deal immediately with cases where priority assessment is deemed necessary. In others, the average waiting period is three months. For non-priority, or general, assessment the average waiting period is six months.

Prioritised waiting lists are maintained both for assessment and treatment in AU areas. Priority is determined by the type and severity of the disorder, the age of the client and the degree of parental or client anxiety. Priority is, of course, given to children, especially younger children.

3. Cllr. J. Connolly

Will the Chief Executive Officer indicate the numbers affected by the following illnesses in 1980,1985,1990 and 1993:-

- [a] Measles
- [b] T.B.
- [c] Cancer
- [d] Drug Addiction

Reply

The number of statutory notifications in respect of our Board's area in each year is as follows:-

(a)		(b)	<u>Tuberculosis</u>
1980:	218	1980:	404
1985:	1.746	1985:	252
1990:	77	1990:	190
1993: (to date)	2.077	1993: (to date)	93

- (c) Cancer is not a statutorily notifiable disease. However, a National Cancer Registry is currently being developed. It is only possible to give information relating to deaths from cancer, as distinct from statistics for those suffering from cancer. Deaths from cancer in our Board's area were as follows:

1980:	2.261
1985:	2.591
1990:	2.768
1993 (1st quarter)	760

- (d) Drug addiction is not a statutorily notifiable condition. However, a Drug Misuse Database has been under development for the greater Dublin area and is now being extended to the rest of the country in accordance with the Government Strategy to Prevent Drug Misuse. It will collate information from a number of relevant sources, i.e. Treatment agencies. Virus Reference Laboratory. Gardat. Customs, Central Statistics Office etc.

Information on treated drug misuse is perhaps the most pertinent of the range of Indicators used in the Drug Misuse Database. A pilot project involving 12 European cities, including Dublin, has already produced its first report through the Health Research Board covering the year 1990. This showed that 1.752 persons received treatment from drug misuse in 1990, including 574 who entered treatment for the first time. The 1991 report is expected before the end of this year.

4. Cllr. B. Byrne

Given the implementation of Section 5 of the "Child Care Act, 1991" will the Chief Executive Officer outline in detail-

- [a] How the Board ascertains that a child to its area is homeless?
- [b] What enquiries are made as to the child's circumstances?

- [c] How does the Board satisfy itself that there is no accommodation available to the child which he or she can reasonably occupy?
- [d] What steps as are reasonable does the Board take to make available suitable accommodation for the child?
- [e] What forms of accommodation are made available to homeless children?
- [f] The numbers of young homeless children placed in B&B accommodation, adult hostels, etc. if any. their gender, age and duration in these forms of accommodation since 1992.

Reply

- (a) Our Board's staff and the staffs of voluntary organisations operating in this field have an agreed definition of what constitutes homelessness as affecting children and young persons. A decision on a child's status is made based on these criteria.

We define young persons aged 18 and under as being homeless if they are:

- (1) Sleeping rough;
 - (2) Squatting;
 - (3) 'Out of Home' e.g. in unsuitable emergency accommodation such as Bed and Breakfast or hostel for adults: in a flat without parent or guardian and unable to cope: in unsettled accommodation, with friends or relatives and intermittently homeless.
- (b) The young person's home circumstances are always checked in order to determine whether return there is an option before any other arrangements are considered.
- (c) Depending on the general situation, including the outcome of enquiries referred to at (b) above and the time of day or night when the homeless child presents, a decision will be taken on whether there is accommodation available to the child which he or she can reasonably occupy or whether appropriate accommodation must be found.
- (d)(e) Emergency residential services for homeless young persons funded by our Board are provided by Crosscare at Becks Street for boys and by the Homeless Girls Society at Sherrard Street. The Focus Point hostel at Stanhope Street which provides emergency accommodation for young homeless persons in the age range 16-18 years is also provided by Our Board and is also developing an emergency family carers scheme under which families will provide emergency accommodation for individual young persons who find themselves out of home. In appropriate cases. Bed & Breakfast accommodation is used on a short-term basis if no other accommodation is available.

Young persons who cannot return home are placed in longer term residential units which are run, for the most part, by voluntary groups and funded by our Board. Our Board also operates two units directly, one in Tattaght and another in KUdare. Homeless children are also placed with Carers for Young People, a project developed to enable particularly disadvantaged young persons to experience normal family life. Our Board also operates a number of day, occupational, recreational and care projects. The total number of places available is 180.

(f) 23 young homeless children were placed in B&B accommodation in the three months to 30 June 1993. None were placed in adult hostels.

One girl was aged 17. seven boys and three girls were aged 16. four boys and four girls were aged 15. two boys and one girl were aged 14 and one girl was aged 13.

5. Cllr. B. Byrne

Will the Chief Executive Officer say how many Juveniles, both boys and girls, are placed in secure residential units by this Board on foot of care orders, and would he detail the names and locations of these units.

Reply

Place of Safety and/or Fit Person Orders are sought by our Board from the Courts to ensure the welfare of children whose parents cannot, or do not, care adequately for them. Children in our care are placed mainly in foster care; a number are placed in residential care.

Children who are the subject of Court Orders committing them to detention are not the responsibility of Health Boards. Health Boards have no authority or facilities to detain children in secure units.

Secure units, such as the industrial schools and detention centres, are operated by the Department of Education who are licensed by the Department of Justice. These units are at Trinity House Detention Centre and Oberstown House Industrial School located at Lusk, at St. Michael's Assessment Unit and St Laurence's Residential Unit in Glasnevin and at St Joseph's School, Clonmel.

6. Cllr. E. Byrne

Will the Chief Executive Officer explain who is responsible for children who have been assessed as requiring secure residential care for psychiatric and therapeutic treatment if no facilities either:

- (a) exist, or
- (b) where existing facilities cannot admit because they are full.

Reply

Child and adolescent psychiatric services are organised on a community basis and are based in Child and Adolescent Centres at strategic locations as follows:-

- (a) Eastern Health Board- Mainly West Dublin and Kildare.
- (b) Hospitaller Order of St John of God -South Dublin and Wicklow.
- (c) Mater Child and Family Centre- North Dublin. (Area 7/Area 8).

In-patient treatment facilities are provided in community settings at Orwell Road. St Paul's. Beaumont Courthall. Warrenstown House, and James Connolly House. Services in these centres are designed to meet specific clinical needs and levels of dependency, with Warrenstown House staffed for the more dependant children.

The requirement for secure facilities is more a feature for the containment of young people who are in trouble with the law and are involved in anti-social behaviour, and detention centres are provided through the Department of Education as detailed in the reply to the previous question. The child psychiatric services provide an assessment and liaison service to those centres.

7. Cllr. L Callely, T.D.

To ask the Chief Executive Officer are all persons with a disability in the Eastern Health Board services, particularly early learners with special needs, obtaining statutory education, if not will the Chief Executive Officer outline any such cases and make a statement on the matter.

Reply

The provision of education to all children is the responsibility of the Department of Education. Education is provided for children in ordinary classes in National Schools, in special classes provided by Remedial Teachers within National Schools and in Special Schools.

While to our knowledge all persons with a disability in our Board's services are receiving statutory education, difficulties arise from time to time in relation to the appropriate level of education which should be made available for some children with special needs i.e. to which of the three streams outlined above should a particular child be assigned. Where difficulties arise in individual cases, our Board, in liaison with the Department of Education, works towards a resolution of these difficulties to ensure that the optimum level of education is provided."

103/1003

CHIEF EXECUTIVE OFFICER'S REPORT

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

1. Child Care Act, 1991

I have circulated with the agenda papers for this meeting copies of letter dated 8th September, 1993 from the Department of Health conveying the Minister's approval to developments in the child care area to be funded from the »n» 11lopiecenthr set aside lor tte in 1993.

The estimated cost, pay and non-pay. of the developments in our Board's area in a full year is £2.365 million. Our Board's allocation for 1993 will be adjusted on a pro-rata basis.

Progress in relation to the bringing of the new services into operation win be advised to the Commimtty Care Programme Committee.

I have also circulated for the Information of members, copies of a press release issued by the Minister for Health on 22nd September. 1993 in this matter.

2. HIV/AIDS Cases

I have circulated with the agenda papers for this meeting copies of a press release Issued by the Minister far Health on 16th September. 1993 setting out the latest statistics on HIV/AIDS.

The statistics show an increase of 4 new cases of AIDS assessed at 31st Jury and 4 deaths from AIDS since that date.

I.V. drug abusers continue to account for the largest number. (152 or 43%) of cases of AIDS while homosexual/bisexuals account for 117 (33%) of AIDS cases

1.407 tests for HP/, anti-bodies up to the end of August. 1993 have proved positive. LV. drug abusers represent 51% of the total, homosexuals 19% and heterosexuals 13%

3. Report of the Inspector of Mental Hospitals for 1990

I have circulated with the agenda papers for this meeting, copies of a press release issued by the Minister for Health on 24th September. 1993 regarding the publication of the Report of the Inspector of Mental Hospitals for the year 1990.

The Inspector noted that the numbers resident in psychiatric hospitals fell from 7,897 at the end of December. 1989 to 7,334 at the end of December 1990 and welcomed the many developments which had taken place in mental health services since 1990.

The developments which have taken place in our Board's area are listed on page 1 of the Appendix to the press release.

4. Miscarriage Association of Ireland Booklet - Miscarriage*

I have circulated with the agenda papers for this meeting copy of a press release issued by the Miscarriage Association of Ireland on the occasion of the launch of their booklet. "Miscarriage" by Dr. Martina Millet and Ann Byrne-Lynch. Clinical Psychologist

The booklet was launched by the Minister for Health. Mr. Brendan Howlin. T.D. at a reception held in Dr. Steevens' Hospital on 27th September. 1993.

Copies of this booklet will be made available free of charge by hospitals, family doctors, nurses, and by The Miscarriage Association of Ireland.

5. Backlog of maintenance

We have been advised by the Department of Health that it is hoped to make available in 1994 a sum of not less than £0.25 million for a backlog of maintenance works similar to the allocation made in 1992 for this purpose.

I am sure members will welcome this special allocation which will be used to improve the appearance of a number of our Board's facilities.

6. Report of the Working Group on Metabolic Disorders

I have circulated this evening, for the information of members, copies of a press release regarding the launch by the Minister for Health. Mr. Brendan Howlin. T.D. of the Report of the Working Group on Metabolic Disorders which recommends practices and procedures to ensure that all infants are screened for metabolic disorders.

The National Neonatal Screening Programme, which was established in the Children's Hospital. Temple Street in 1966. now screens for five conditions at the Metabolic Unit which is one of the largest such units in Europe.

Copies of the Report and the leaflet, "Has your infant been screened for Metabolic Disorders will be made available to all involved in the care of infants immediately after birth, such as maternity hospitals, public health nurses and general practitioners".

7. Southern Health Board/Royal Victoria Hospital - Agreement on Surgical Procedures

I have circulated this evening, for the information of members, copies of a press release issued by the Minister for Health. Mr. Brendan Howlin. T.D. regarding the agreement reached between the Southern Health Board and the Royal Victoria Hospital. Belfast, under which patients from that Board's area will have the option of taking early appointments for hip procedures to be carried out to the Royal Victoria Hospital

The Minister, in welcoming the agreement, referred to its significance in indicating the possibility for co-operation between the health services. North and South, to our mutual advantage and, in particular, to the advantage of patient care throughout the island."

104/93**TEMPORARY BORROWING**

The following Report no. 25/1993 from the Chief Executive Officer was submitted:-

"The approval of the Board to temporary borrowing by way of overdraft during the period ending on 31 December 1993 to a maximum of £8.2 million is requested. This is the same figure as that approved for the previous Quarter."

On a proposal by Dr. O'Herlihy seconded by Mr. Aspell, it was agreed to adopt the proposal contained in the Report.

105/1988**SERVICES FOR HOMELESS PERSONS**

The following Report no. 26/1993 from the Chief Executive Officer was submitted:-

1. Role Of Housing Authorities

The Housing Act 1988 firmly placed on the housing authorities the primary and major role in meeting the accommodation needs. Including the emergency accommodation needs, including the emergency accommodation needs of adults i.e. those over 18 years of age or those under 18 years of age who are or have been married. The Child Care Act 1991 has also clearly placed responsibility for accommodating homeless children on the health boards

The roles and powers of the housing authorities to provide accommodation for homeless people were emphasised by the Department of Environment in a circular letter issued in May 1991. This includes the provision of housing for persons living in a hospital, county home, night shelter or other such institution who are living there because they do not have accommodation which they can reasonably occupy.

The housing authorities accept that the major responsibility for meeting the accommodation needs of homeless persons is theirs and, mainly through our Community Welfare Service, we have a continuing and effective liaison with them

Prior to the passing of Housing Act 1988 a Joint Inter-Departmental/Health Board Group which considered the roles of housing authorities and health boards in regard to homeless persons recommended, that because of the need for intensive counselling and other support services, health boards should share responsibility for those rendered homeless because of family violence. The extent of that responsibility has not been finally worked out, particularly as to whether it extends to the direct provision, or financing, of secure accommodation as distinct from the provision of the other support services mentioned. Discussions are continuing with regard to the cost of accommodation provided by our Board which should properly be funded by the housing authorities, with our Board retaining its role of providing support services. Prior to the 1988 Housing Act our Board had established, in liaison with the Dublin local housing authorities, a Homeless Persons' Unit at Charles Street. Since most of the functions of the Unit are now appropriate to the housing authorities our Board is now acting as their agent in continuing to operate the Unit

The local housing authorities are contributing to the cost of the Homeless Persons Unit as follows:-

Dublin Corporation	£50.000
Dublin Co. Council	£20.000
Dun Laoghaire Corporation	£5.000

The numbers of persons presenting at the Unit are increasing: in excess of 2.000 persons/families per annum, over 1.500 of whom are presenting themselves for the first time. Most homeless persons, as well as needing accommodation also need money, household goods, etc. which are provided by the Community Welfare Officers who staff the Unit

Up until now the Charles Street Unit has operated on a Monday to Friday basis only, providing a telephone service between 10.00 a.m. and 1.00 p.m. and a service to personal callers from 2.00 p.m. to 6.00 p.m.

These service hours have been the subject of a review involving the local authorities and the Department of the Environment and agreement has been reached on a proposal whereby our Board will provide an after-hours and weekend service on behalf of the local authorities to ensure that persons and families who find themselves in need of emergency accommodation in our Board's area will be provided with a service. The extended service will be provided from 5.00 p.m. to 1.00 a.m. Monday to Friday and from 10.00 a.m. to 1.00 a.m. on Saturday and Sunday. It will be a telephone contact service provided through Freephone telephone facilities.

Additional funding for the extended service will be made available by the Department of the Environment through Dublin Corporation to our Board.

It is expected that these arrangements will be in operation within a month or so. They are aimed at ensuring that any homeless person requiring accommodation in emergency circumstances can be provided with it and that nobody should need to go without shelter or spend a night on the street

3. ANNOUNCEMENT BY MINISTER OF STATE AT THE DEPARTMENT OF THE ENVIRONMENT

Attached is a copy of an announcement by the Minister of State of the Department of the Environment issued on 16th September, 1993 which also deals with a number of other matters in relation to the Government's response to homelessness, including the provision of finance to voluntary housing bodies, an increase in the grant to voluntary bodies providing accommodation for homeless persons, and an increase from 80% to 90% in the level of recoupment by the Department of the Environment to local authorities on expenditure in meeting the needs of homeless persons. The particular attention of members is drawn to the grant made available to the Salvation Army to secure the retention of York House (92 places) and for the provision of the major new project for the homeless at Granby Court, Dublin (107 places).

A further report will be made to our Board in due course regarding the Granby Court development and other aspects of services for the homeless."

The Report was noted.

106/1993**NATIONAL FUEL SCHEME 1993/1994**

The following Report no. 27/1993 from the Chief Executive Officer was submitted:-

"Duration

The scheme will run for 26 weeks - from week commencing 19th October, 1993 to week ending 15th April, 1994.

Amount of Payment

The level of payment is £5 per week.

Note

In the areas covered by the ban on the sale and distribution of bituminous coal an additional £3 per week "smog allowance" is payable as part of the National Environment Action Plan. These areas include the whole of Dublin City and Dun Laoghaire, the built-up areas of Dublin County and adjacent areas including Little Bray. This additional allowance will be paid in conjunction with the National Fuel Scheme Allowance.

Who Qualifies for Payment from the Eastern Health Board?

Recipients of Disabled Persons (Maintenance) Allowance, Infectious Diseases (Maintenance) Allowance, and basic Supplementary welfare Allowance who

- (a) satisfy the living-alone condition
- and
- (b) are unable to provide for their own heating needs.

Who qualifies for Payment from the Department of Social Welfare?

Recipients of any of the general range of Social Welfare pensions and allowances (including Disability Benefit, Unemployment Assistance) who also satisfy the conditions (a) and (b) above. Recipients of E.C. or Austrian, Australian, Canadian and American Social Security Pensions can also qualify.

The Department of Social Welfare will continue to exclude residents of Local Authority Housing Estate where central heating is supplied at a subsidised rate. This decision applies to people who have not received the National Fuel Scheme in the estates specified in previous years. Persons who have received the National Fuel Scheme payments while residents in these estates are, as an exceptional measure, to continue to receive these.

Method of Operation

The operation of the scheme for 1993/94 will be on the same basis as it has been for a number of years. Applications are made directly to the local Community Welfare Officer on the National Fuel Scheme application form. The Community Welfare Officer assesses the application using the criteria laid down in the Department of Social Welfare circular. Following the required approval from the Superintendent Community Welfare Officer a cheque will be prepared at local level for distribution to eligible applicants. Payments are generally collected by eligible applicants at normal Community Welfare clinics by appointment."

The Report was noted.

107/1903

PROGRESS REPORTS FROM PROGRAMME COMMITTEES**1. Special Hospital Care Programme Committee**

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

The following matters were dealt with in the report-

- [a] Psychiatric Services Area 8/Beaumont Hospital.
- [b] Recommendation that the Health Board should request the Minister for Education to meet a deputation from our Board to request the Department to accept autism as a specific syndrome which requires a specific educational approach.
- [c] Agreement regarding the establishment of a central assessment service for children with autism and that the Minister for Health should be requested to make available sufficient capital and revenue funding to facilitate this development in our Board's area.

**Cllr. B. Byrne queried why there had been no reference in the Progress Report to the discussion regarding the setting up of a Special Committee to review the protocol to be followed at various official
It was agreed that the Chief Executive Officer would arrange for the preparation of a draft protocol for such occasions for consideration by**

It was noted that regular progress reports will be brought to the Special Hospital Care Programme in relation to the integration of our Board's psychiatric services with Beaumont Hospital

2. Community Care Programme Committee

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

The following matters were dealt with in the report:

- [a] Report on Services for Elderly:
- [b] General Medical Services (Payments) Board - Annual Report 1992:
- [c] Filling of vacancy in the General Medical Services Scheme:
- [d] Child Care Act 1991 - Press Release issued by Department of Health:
- [e] Report on Services in Area 9 (Kildare).

106/1993

NOTICE OF MOTION

The notice of motion in the name of Deputy Durkan regarding the Child Psychology Service was in his absence, deferred to the November meeting of Board.

07/10/93

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108/1988

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

110/1988

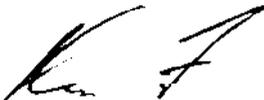
The Chief Executive Officer briefed members on the current position in relation to the industrial action taken by ambulance personnel and in relation to the industrial relations background to the dispute. The pay and conditions of all health board employees including ambulance personnel is subject to Government pay policy as embodied in the Programme for Economic and Social Progress (P.E.S.P.). He assured them that all urgent and emergency calls for ambulance service were being met within normal response times. He confirmed that the Labour Court had indicated to both parties that it was available, at short notice, to assist in seeking a resolution to the dispute in the context of the P.E.S.P. and that our Board was prepared to co-operate immediately with any renewed attempt by the Labour Court to resolve the dispute. He urged SIPTU to do likewise and to return to the Labour Court for further discussions as an alternative to engaging in a widening of the dispute..

Members noted the position as outlined by the Chief Executive Officer and expressed their hope for a speedy resolution to the dispute.

In response to an enquiry from Cllr. Byrne, the Chief Executive Officer stated that leaflets and literature on family planning matters would be available in our Board's Customers Services Department. He also stated that he would be bringing a Report to a future meeting of our Board regarding services related to women's health issues.

The meeting concluded at 7:00 p.m

Correct: K.J. Hickey


CHAIRMAN