

EASTERN HEALTH BOARD

**Minutes of proceedings of Monthly Meeting
held in
the Boardroom, Dr. Steevens' Hospital, Dublin 8
on Thursday 14th January, 1999 at 6.00 p.m.**

Present

Mr. P. Aspell	Cllr. M.Barrett
Dr. S. Barry	Mrs. B. Bonar
Cllr. G. Brady	Cllr. L. Butler
Cllr. E. Byrne	Cllr. I. Callely, T.D.
Cllr. B. Coffey	Cllr. J. Connolly
Cllr. T. Cullen	Cllr. A. Devht
Cllr. J. Dillon Byrne	Cllr. K. Farrell
Cllr. M. Flaherty	Cllr. C. Gallagher
Dr.K.Harkin	Dr. R. Hawkins
Dr. M. Laffoy	Cllr. S. Laing
Mr. G. McGuire	Cllr. M. McWey
Cllr. O. Mitchell, T.D.	Cllr. Dr. B. O'Connell
Dr. P. O'Connell	Cllr. C. O'Connor
Cllr. C. Quinn	Cllr. J. Reilly
Cllr. K. Ryan	Dr. J. Reilly
Cllr. P. Vance	Cllr. P. Upton, T D.
Cllr. R. Shortall, T.D.	

Apology

Dr.J.Fennell
Dr. C. Smith

In the Chair

Cllr. C. Gallagher

Officers in Attendance

Mr. P. McLaughlin, Deputy Chief Executive Officer
Mr. M. Walsh, Programme Manager
Mr. S. O'Brien, Programme Manager
Ms. M. Windle, Programme Manager
Ms. B. Clarke, Programme Manager
Ms. M. Kelly, Personnel Officer
Dr. B. O'Heriity, Director of Public Health
Ms. M. McGahem, Management Accountant
Mr. J. Curran, Technical Services Officer
Ms. M. Crowe, Management Services Officer
Mr. P. Doyle, Estate Management Officer
Ms. M. Browne, Communications Director
Ms O. Treacy, Secretary

3/1999

CONDOLENCES

On a proposal of the Chairman a vote of sympathy was passed with Deputy Frank Fahy, Minister of State at the Department of Health and Children on the recent death of his mother.

4/1999

CHAIRMAN'S BUSINESS

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

1. Condolences

I am sure members will join with me in expressing our sympathy with Mrs. McCarthy on the death of her husband Pat who was a member of our Board from 1977 until 1991.

I also wish to propose votes of sympathy to those whose names have been included on the list of condolences, which has been circulated to members.

2. Ballymun Special Committee Meeting

I wish to advise members that the venue for the Ballymun Special Committee Meeting scheduled for 18th January, 1999 at 11.00a.m. has been changed to the Regency Hotel.

3. Board Presentation & Dinner

I wish to remind members that this evening we are holding a presentation and dinner for Mr. P. J. Fitzpatrick who will be resigning from his post as Chief Executive Officer on 17th January, 1999. The meal will be served at 8.15p.m. Refreshments will be available prior to the meal being served.

5/1999

MINUTES OF PROCEEDINGS OF MONTHLY MEETING HELD ON 17th DECEMBER 1998.

The minutes of the proceedings of the monthly meeting held on 17th December 1998, having been circulated, were confirmed on a proposal by Cllr. J. Reilly, seconded by Dr. R. Hawkins.

6/1999

QUESTIONS TO THE CHIEF EXECUTIVE OFFICER

On a proposal by Cllr. C. O'Connor, seconded by Cllr. M. Barrett, it was agreed to answer the questions which had been lodged:-

1. Dr.K.Harkin

"Could the Chief Executive Officer please

1. estimate the prevalence of Hepatitis C within the Eastern Health Board area.
2. describe the morbidity & mortality associated with Hepatitis C.
3. estimate the resources likely to be required to offer appropriate treatment to this group of patients in the years ahead."

Reply

Hepatitis C is not specifically a notifiable disease under the 1981 Infectious Disease Regulations, but is classed under the heading "Viral Hepatitis - type unspecified".

Clinical notifications of Hepatitis C, or Viral Hepatitis - type unspecified, sent to the Director of Public Health as Medical Officer of Health, are outlined in the table hereunder

Year	Viral Hepatitis : - type unspecified	Hepatitis C
1994	15	13
1995	26	10
1996	28	4
1997	10	31
1998 **	7	41

Data incomplete

Clearly there is under-notification of Hepatitis C infection.

There are two populations where Hepatitis C is known to be prevalent in our Board's area

- (a) Clients, mostly women, who contract Hepatitis C directly or indirectly from the use of Human Immunoglobulin - Anti-D or through another blood product or blood transfusion.
- (b) Injecting drug users.

The first category of clients have been provided for under legislation, the Health (Amendment) Act 1996 (Hepatitis C). There are 528 clients registered with our Board. These clients are entitled to a comprehensive range of community-based services free of charge, as required, i.e. general medical services, prescribed drugs and medical and surgical appliances, nursing, home help, dental, ophthalmic, aural, and counselling services. The allocation for this service in the coming year is £871,000.

In relation to the injecting drug users, there have been a number of cross sectional surveys of Hepatitis C prevalence in attenders of drug treatment services provided both by our Board and Trinity Court, over the last number of years. The consistent finding has been that between 60 and 80% of injecting drug users are tested as Hepatitis C positive. If these findings were extrapolated to injecting drug users outside of formal drug treatment services, it would imply that there would be between 6,000 to 8,000 people who are Hepatitis C positive, assuming the drug injecting population is 10,000 or thereabouts. The proportion of clients with Hepatitis C would have to be adjusted upwards should the drug injecting population be greater than 10,000.

Persons with acute Hepatitis C infection typically are either asymptomatic or have a mild clinical illness: 60 - 70% have no symptoms; 20 - 30% have jaundice and 10 - 20% have non specific symptoms such as abdominal pain. After acute infection, 15 - 25% of persons appear to resolve their infection without sequelae. Chronic infection develops in most persons (75 - 85%). The course of chronic liver disease is usually insidious, progressing at a slow rate without symptoms or physical signs in the majority of patients during the first two or more decades after infection. Most studies have reported that cirrhosis develops in 10 -20% of persons with chronic Hepatitis C over a period of twenty to thirty years and hepatocellular carcinoma in 1 - 5%. In contrast, an Irish cohort of > 200 women followed up for seventeen years after they received HCV contaminated Rh factor IgG, has shown that only 2.4% had evidence of cirrhosis.

The Department of Health and Children has set up an ad-hoc committee to consider the medium/long term health problem that will arise in the drug injecting population; our Board is represented on this committee.

2. Cllr. R. Shortall, T.D.

"Will the Chief Executive Officer report on the reasons for the delay in the provision of a Primary Care Centre at the Meath Hospital and will he give a clear indication of when this much needed facility will be completed."

Reply

In December 1996 our Board agreed that negotiations should take place with the Board of the Meath Hospital, with a view to the purchase of the hospital following the transfer of services to the new hospital in Tallaght.

In June 1998, a licence agreement was negotiated with the Board of the Meath Hospital to facilitate our Board in taking over and managing a 60 bed unit for long-stay elderly patients.

The Board of the Meath Hospital was required to enter a lengthy legal process in order to establish The Meath Hospital Foundation which, when established, could then discuss the disposal of its assets. The High Court approved the establishment of the Foundation in December 1998. On further legal advice, The Meath Foundation has sought an up-to-date market valuation of the hospital, which I understand is still awaited.

Our Board's Estate Manager is in constant contact with the representative of The Meath Foundation and every effort is being made to conclude negotiations as soon as possible. Should these discussions prove successful, the existing services for the elderly will be further developed; in addition, a comprehensive range of primary care services will be developed on the campus.

Review of the South Inner City of Dublin Partnership in Primary Care (December 1998) attached.

SOUTH INNER CITY OF DUBLIN

Partnership in Primary Care

The South Inner City of Dublin Partnership in Primary Care was established to enhance the range of primary care services available in the community. By extending the range of services provided by the individual G.P.S and by the provision of additional diagnostic, nursing, and paramedical services, it is planned to further develop overall health services in this area. For this reason it has been necessary to develop protocols and joint management programmes between the G.P.s, Community Services, and St James's Hospital, to underpin this development

To date, wide-ranging discussions have been held with all parties involved. These discussions have been very productive and confirm widespread support for the Project

In the four months that the Project has been in operation, various multi-disciplinary professional teams have been working together in drawing up care plans for patient groups and arrangements for access to services - physiotherapy, X-ray, etc.

- **Phlebotomy** - A system has been put in place to enhance the phlebotomy service provided by the G.P.S involved in the Partnership. This service became effective from

The 12th October and transports, on average, 220 specimens to St. James's Laboratory every week (Daily collection of specimens and return of laboratory results).

- **Physiotherapy** - A physiotherapist has been employed to provide a G.P. direct access physiotherapy service for the patients of G.P.S in the Partnership. This service is being provided from Baggot St Community Hospital since the 16th November and sees, on average, five new patients a week.
- **Wound Management** - A specialist nurse has been appointed to co-ordinate a Wound Management Clinic and an associated out-reach service from the Meath Community Unit. This clinic will be supported by St James's Hospital with the provision of an out-reach Vascular Leg Ulcer Clinic in the Meath Community unit - the first of its kind in Ireland. The clinic will also be supported by dietetic service provided by the community. The protocols for the provision of this service have been agreed and it is planned that the clinic will be operational in mid January.
- **Anti-coagulation (Warfarin)** - A subcommittee is in the final stages of completing protocols for the provision of a community-based anti-coagulation service. It is planned that this service will be operational early in the New Year.
- **Diabetic Service** - Discussions are taking place with G.P.S in the Partnership and St. James's Hospital on the establishment of shared care protocols for the care of type U diabetic patients.
- Work has commenced on integrating community and nursing services with G.P. services and the development of a counselling service for the area.
- Consultation with various G.P.s on the development of their information needs and improving their facilities has taken place. Agreement has been reached on the needs of particular practices in relation to these areas and the manner in which these needs will be met
- Secretarial assistance, as set out in the programme has been provided for eligible G.P.s.
- **Research and Evaluation** - This programme was developed in consultation with all participating G.P.S as a major pilot project Research and evaluation was seen as an essential component with a significant budget being set aside for this purpose. A Research Committee has been established and terms of reference on the methodology to be used in carrying out this research have been submitted. This proposal was accepted by the Management Committee at their last meeting.

An end of year meeting took place recently which involved the Management Committee and participating G-P.s. The main outcome from the meeting was that the development of the Project was well ahead of target and overall there was a general satisfaction with the quality of the service being put in place.

Michael Walsh
Programme Manager
Community Services

December 1998

14/01/1999

3. Cllr. C. O'Connor

"To ask the Chief Executive Officer to update the Board on plans to provide and Ambulance Base at Tallaght Hospital confirming discussions which have taken place on the subject and detailing current proposals in the matter and will he make a statement."

Reply

Discussions are continuing with the Management of the new hospital at Tallaght with a view to establishing the suitability of an identified site for the development of an ambulance sub-base on the hospital campus. Our Board has set aside developmental monies in the 1999 Service Plan for this purpose.

4. Cllr. C. O'Connor

To ask the Chief Executive Officer to explain process by which names for the wards in the new psychiatric unit at Tallaght were approved, detailing the consultations which took place and confirming information on the names chosen and will he also confirm who is responsible for such as decision and make a statement"

Reply

The selection of names for new units in Tallaght Hospital is a matter ultimately for the hospital itself.

The naming of the psychiatric unit at Tallaght Hospital was undertaken by the St Loman's Commissioning Group for Tallaght Hospital. A subcommittee from the Commission Group was established comprising of membership of nurse managers, clerical administrative, social work and medical staff .The criteria for selection of names for the unit was as follows

1. Names should be user friendly and easy for patients / visitors to read and pronounce
2. Names commemorating individuals connected with the mental health service (should not include the name of Irving person).
3. Names should have a connecting theme.

The service users consultation involved meeting with service user focus groups in five specific groups. One group was the hospital in-patient group. The other four groups were service users attending the service and were held in three of the community mental health centres and in the psychiatric clinic of a health centre covering the four sectors, i.e. Clodalkin, Tallaght, Ballyfermot / Lucan and Crumlin sectors. Following initial suggestions they were categorised into specific themes and all staff were circulated further regarding an indication of preference for themes. All responses were then collated by the subcommittee and the final results were presented to the Commissioning Group in June 1998 where the final decision was made, i.e. Rowan, Cedar and Aspen. This decision was ratified by the St Loman's Area Management Team and communicated to the Chairperson of Tallaght Hospital.

5. Cllr. C. O'Connor

"To ask the Chief Executive Officer to furnish an up-to-date report on plans to move the psychiatric unit at St Loman's to Tallaght Hospital, noting the anxiety of many that the move be made and will he make a statement in the matter."

Reply

The Board is extremely anxious to finalise the move to Tallaght Hospital at a early date of the acute psychiatric services. New proposals to try and break the deadline in the industrial

relations area are being communicated to the Labour Relations Commission to form the basis of further negotiations with the parties. Our Board's solicitors have forwarded our views on the final draft service contract to the solicitors representing the Tallaght Hospital.

6 Cllr. Betty Coffey

"To ask the Chief Executive Officer to list the number of days/hours granted to the (name supplied) family in having access to their daughter during the Christmas period."

Reply

The access visit, as agreed at the court hearing, took place on 11th December, 1998 for 1.5 hours and another one took place on 23rd December, 1998 for 1.5 hours. An access visit will take place on 20th January, 1999.

7/1999

CHIEF EXECUTIVE OFFICER'S REPORT

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

1. Information Technology

I have circulated with the agenda papers for this meeting copies of letter dated 8th December, 1998 from the Department of Health & Children advising of a grant of £2,325,330.34 under the Capital Information Technology Investment Program in respect of project developments in the board.

2. Promotion of Local Environmental Health Initiatives/Partnerships

I have circulated with the agenda papers for this meeting copies of letter dated 22nd December, 1998 from the Department of Health & Children regarding provision made within the letter of determination under the heading of Environmental Health for expenditure of £0.120m. Of this sum £0.030m provides for developing environmental health initiatives and local partnerships. The Department of Health & Children has requested that our board bring together local ideas and initiatives in this area and keep the Environmental Health Unit at the Department of Health & Children informed of progress on these initiatives.

3. Promotion of a Smoke Free Society

I have circulated with the agenda papers for this meeting copies of letter dated 22nd December, 1998 from the Department of Health & Children regarding our letter of determination and an additional provision made within the Environmental Health allocation totalling £0.095m for improvement of smoking controls and payment of a grant by our board to ASH Ireland. The Department of Health & Children has requested that our board bring together local ideas and initiatives in this area and keep the Smoke-Free Policy Group c/o Environmental Health Unit at the Department of Health & Children informed of progress on these initiatives.

4. New Anti Smoking Campaign Launched by Minister for Health & Children

I have circulated with the agenda papers for this meeting copies of a press release issued by the Minister for Health & Children dated 21st December, 1998 announcing a major new advertising and promotional campaign to encourage people to give up smoking for the new year.

The campaign has been developed in co-operation with the Irish Cancer Society and the eight regional health boards and urges smokers to "Break the Habit for Good." Smokers are being offered support through the availability of a free comprehensive stop smoking advice kit and counselling from trained health professionals in the Irish Cancer Society who have expertise in this area.

5. Euro Conversion Rates

I have circulated with agenda papers for this meeting copies of a letter dated 31st December, 1998 from the Department of Health & Children advising of the conversion rate between the euro and the Irish pound which was fixed by the European Commission at 12.30p.m. on 31st December, 1998. The rate will be expressed to six decimal places, ie. one euro = £0.787564.

I have also circulated the Forfas document 'A Guide to Conversion and Rounding' for your information.

6. Child Abuse Bill

I have circulated with the agenda papers for this meeting copies of press release dated 16th December, 1998 welcoming the passing of the final stages of the "Protections for Persons Reporting Child Abuse Bill, 1998".

This Bill provides effective protection for persons responding to children in need of intervention and provides safeguards against malicious reporting.

7. Critical Incident Stress Debriefing

I have circulated with the agenda papers for this meeting copies of press release dated 16th December, 1998 advising of the launch of a Critical Incident Stress Debriefing Programme for the ambulance service.

Ambulance personnel by the nature of their work, are at the very forefront of providing care and assistance to people in need and this is the first formal initiative to address the issue of Critical Incident Stress Debriefing in the emergency services.

8. Hypothermia Campaign

I have circulated with the agenda papers for this meeting copies of press release dated 7th January, 1999 advising of the launch of a Hypothermia Campaign at the South Dublin County Council Offices at Tallaght.

The purpose of the campaign is to alert everyone to the dangers of hypothermia for older people. The campaign is part of the Reach Out, Be a Good Neighbour Campaign which is co-ordinated by Dublin Corporation our Board and the Health Promotion Unit of the Department of Health. It is also supported by the Garda Síochána and a number of voluntary groups who cater for the needs of older people living in the community.

9. European Communities (Purity Criteria on Food Additives other than Colours and Sweeteners) Regulations. 1998.

I have circulated with agenda papers for this meeting copies of letter dated 8 January, 1999 from the Department of Health & Children together with a copy of Statutory Instrument No. S41 of 1998 entitled European Communities (Purity Criteria on Food Additives other than Colours and Sweeteners) Regulations, 1998.

8/1999

CHILDCARE ADVISORY COMMITTEE - MEMBERSHIP.

Report No. 57/1998 from the Programme Manager, Children and Families was submitted (copy filed with official minute).

Having noted and agreed the report the following three members of our Board were nominated to be members of the Childcare Advisory Committee:-

Cllr. E. Byrne (Chairman)
Cllr. C. O'Connor (Vice-Chairman)
Cllr. J. Reilly

9/1999

CANCER IN IRELAND 1995 - INCIDENCE AND MORTALITY – REPORT OF NATIONAL CANCER REGISTRY

Following a discussion to which Dr. R. Hawkins, Cllr. J. Connolly, Cllr S. Laing, Cllr J. Reilly C. O'Connor and Cllr. C. Quinn contributed, it was agreed to note Report No. 1/1999 (copy filed with official minute)

10/1999

DEVELOPMENT OF ORAL MAXILLOFACIAL SURGERY SERVICE IN THE EASTERN HEALTH BOARD REGION

It was agreed on proposal by Dr. R. Hawkins, seconded by Cllr. E. Byrne, to refer Report No. 2/1999 (copy filed with official minute) to a special joint Programme Committee meeting of Acute Care and Services for the Elderly and Community Services, for consideration and report back to the Board.

11/1999

PROGRESS REPORT FROM PROGRAMME COMMITTEE

1. *Health Promotion, Mental Health, Addiction and Social Development.*

On a proposal by Mr. P. Aspell, seconded Dr. R Hawkins, it was agreed to adopt the report. The following matters were dealt with in the report.

- (a) Visit to Cuan Dara Detoxification Unit and Report on Services.
- (b) Education/Prevention Initiatives.
- (c) Central Treatment List.
- (d) G.P.'s and Pharmacists.

2.. *Services for Persons with Disabilities.*

On a proposal by Cllr. M. Barrett, seconded by Mr. P. Aspell, it was agreed to adopt the report. The following matters were dealt with in the report

- (a) Interim Report on Service Provision, 1998 - Mental Handicap Services.
- (b) Interim Report on Service Provision, 1998 -Physical and Sensory Disabilities Services.
- (c) Report on Physical and Sensory Disabilities Services - CCA9.
- (d) Overview of Services provided by the Irish Wheelchair Association.

12/1999

NOTICES OF MOTION

- (i) The following motion was proposed by Deputy Callely, seconded by Cllr. C. Quinn, and agreed:-

"That a reporting procedure to the Board is put in place on all matters that front line employees experience on issues that are causing reoccurring problems in our services."

The Chief Executive Officer in his response agreed to examine the proposal and liaise with members to attain their agreement prior to proceeding with this matter.

- (ii) The following motion was proposed by Deputy Callely, seconded by Cllr A. Devitt:-

"That the Board agrees to draw up draft regulations for consideration as the Eastern Health Board criteria for payment of rent supplements and deposits".

Following a discussion to which Deputy Callely, Cllr. Devitt, Cllr Quinn and the Chairman contributed, and to which the Chief Executive Officer and Mr. Walsh, Programme Manager, replied informing members that the drafting of regulations for payment of rent supplements and deposits is not a matter for our Board. It was noted that Mr. Walsh, Programme Manager would prepare a report on the Supplementary Welfare Allowance Scheme and payment of rent deposits and supplements for the February meeting of the Programme Committee.

- (iii) The motion in the name of Cllr. Flaherty was not moved.
- (iv) The motion in the name of Deputy Callely regarding criteria to enter student nurse training was, at his request deferred to the February meeting of our Board.
- (v) It was agreed to defer the motion in the name of Cllr. Byrne, regarding the number of ten, twelve and fourteen year old boys and girls who are dropping out of school and who are in need of structured support, to the February meeting of our Board.
- (vi) The following motion was proposed by Deputy Shortall:-

"That early consideration be given to the establishment of a specialist child psychiatric service for deaf children in view of the particular difficulties which deaf children encounter with their disability, this service to include staff with specific training in deaf issues and in deaf communication methods."

It was noted that Ms. Clarke, Programme Manager, would bring a report on this matter to the next meeting of the Programme Committee.

- (vii) It was agreed to defer the motion in the name of Deputy Shortall, regarding the number of parent representatives on the Central Planning Committee for Mental Handicap, to the February meeting of our Board.
- (viii) The following motion was proposed by Cllr. E. Byrne, seconded by Cllr. B. Coffey:-

"Given the palpable fear of residents who live in close proximity to the proposed treatment centre on the Old County Road in Crumlin, this Board recognise (a) that this fear is real, (b) that every effort is made to achieve, by way of dialogue, or by engaging the services of an outside independent mediator, agreement with the resident's representatives, (c) that no methadone is dispensed until an agreement is signed."

Following a discussion to which Cllr. Byrne, Cllr. Coffey, Deputy Upton, Cllr. Devitt, Cllr. O'Connor, Cllr. Butler and Dr. J. Reilly contributed, and to which the Chief Executive Officer replied, it was agreed to note the motion.

- (ix) It was agreed to defer the motion in the name of Cllr. O'Connor, regarding the move of Psychiatric Unit at St Loman's Hospital to the new facilities at Tallaght Hospital, to the February meeting of our Board.

13/1999 CORRESPONDENCE

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

The meeting concluded at 8.15 p.m.

CORRECT:

PAT MCLOUGHLIN

DEPUTY CHIEF EXECUTIVE OFFICER

CHAIRMAN