

EASTERN REGIONAL HEALTH AUTHORITY

**Minutes of proceedings of Board Meeting
held in the Grand Hotel, Malahide,
on Thursday 2nd October 2003 at 5.00pm**

Present

Dr. Siobhan Barry	Cllr Christy Burke
Cllr Larry Butler	Cllr Catherine Byrne
Cllr John Stafford	Cllr Ann Devitt
Cllr. Jane Dillon Byrne	Mr. John Dolan
Ald. Joe Doyle	Cllr. Tony Fox
Cllr. Pat Hand	Dr Kieran Harkin
Ms Noeleen Harvey	Dr Ray Hawkins
Cllr Deirdre Heney	Ms. Maria Hoban
Cllr Adrian Kane	Dr. Marie Laffoy
Mr. Paul Ledwidge	Cllr. Gerry McGuire
Ald. Mary Mooney	Dr. Bernard Murphy
Cllr. Mary Murphy	Mr Michael Murphy
Mrs. Catherine Quinn	Dr James Reilly
Cllr. James Reilly	Dr Mick Molloy

In the Chair

Alderman J Doyle

Apologies

Cllr Dermot Murray, Cllr Jim Reilly, Cllr Liam Creaven, Cllr Fiona O'Loughlin, Dr Ray Hawkins, Dr Dermot Fitzpatrick, Cllr Pat Doran and Cllr Thérèse Ridge

In Attendance

Mr Michael Lyons, Mr Jim Breslin, Mr. Martin Devine; Ms. Angela Fitzgerald, Mr Liam Woods, Ms Sile Fleming, Mr. Dougie Beaton,
Ms. Suzanne Bushnell, Ms. Patricia Mannion

Opening Prayer

03/10/83 Chairman's Business

Agenda Item No. 1

Resignation of Cllr Olivia Mitchell TD

Cllr Olivia Mitchell, T.D. has written to advise me that, she has decided to resign from the Authority with immediate effect. She asked that her appreciation of the assistance she received from the management team and staff of the Authority and the East Coast Area Health Board be recorded.

On behalf of the members of the Authority I would like to say how much we regret the departure from the Board of Cllr. Olivia Mitchell, T.D. I would like to pay tribute to the work Deputy Mitchell has done both on the Board and Committees of the ERHA, and on the East Coast Area Health Board. I know Members will join with me in wishing her every success in the future.

Appointment of New Member

Kildare County Council, at their last meeting, agreed that Councillor Adrian Kane will replace Cllr. Jack Wall TD on the Eastern Regional Health Authority following his resignation. I would like to invite Cllr. Kane to join the meeting.

The Chairman recommended that Cllr. Adrian Kane be appointed to the Board of the South Western Area Health Board and to the Continuing Care and Social Services Committee. On a proposal by Cllr. Gerry McGuire and seconded by Cllr. Pat Hand, this was agreed.

Representation on Boards

Cllr. Jane Dillon Byrne represents the Authority on the Federated Dublin Voluntary Hospital and Cllr. Gerry McGuire represents the Authority on the Meath Foundation. These Members have requested that they swap their representation on these committees. At the Protocol Committee meeting held on the 22nd September this recommendation was agreed. The Board are asked to agree this recommendation.

On a proposal by Cllr. Christy Burke and seconded by Cllr Larry Butler , this was agreed.

Motion

Dr James Reilly, Dr Mick Molloy & Cllr Ann Devitt

This Board fully supports the Minister for Health in his efforts to create a safer environment by introducing a ban on smoking in the workplace.

On a proposal by Cllr. Larry Butler and seconded by Cllr Gerry McGuire , this was agreed.

Forthcoming Meetings

The next Continuing Care & Social Services Committee meeting is scheduled to take place on Monday 6th October 2003 at 11:00am (Agenda items to be agreed)

The next Acute Hospitals & Primary Care Committee meeting is scheduled for Monday 20th October 2003 at 6:00 p.m. (Agenda items to be agreed).

The next meeting of the Authority will be held on Thursday 6th November 2003 at 6.00 p.m

03/10/84 Minutes of Previous Meetings

Agenda Item No. 2

The draft minutes of the Board held on the 4th September 2003 (copy appended to the official minute), having been circulated, were proposed for adoption by Cllr Christy Burke, seconded by Cllr. Gerry McGuire and agreed.

03/10/85 Questions to the Chief Executive Officer

Agenda Item No 3

On the proposal of Cllr Christy Burke, seconded by Cllr Jane Dillon Byrne, the questions were moved for reply by the Chief Executive.

3.1 Dr Siobhan Barry

Re: Allocation of 3.8m euro by the Dept. of Health & Children for inappropriate placements in acute hospital (CEO Report, Sept 2003)

Will the CEO comment on whether an equivalent sum will be allocated for vulnerable elderly people at risk in the community to prevent their admission to acute hospitals in the first place?

Reply

The allocation of €3.8 million from the Department of Health and Children was aimed specifically at addressing capacity pressures in the acute hospitals providing emergency services. This funding is facilitating the discharge to more appropriate settings of patients who have completed the acute phase of their treatment. The funding is being used not only for residential care, such as private nursing home subvention, but also for the provision of home care packages to enable patients to return home with a tailored range of supports. As well as older patients, a number of young chronic disabled persons are also being discharged to various non-acute settings under this initiative.

While this new funding initiative is aimed at facilitating the discharge of patients who have been admitted to acute hospitals and whose acute phase of treatment is now complete, the Authority continues to fund a number of other initiatives aimed at supporting elderly people to remain at home during periods of illness or when frailty necessitates additional supports. Initiatives such as home care grants, the Home

First and Slan Abhaile programmes, as well as the Re-ablement Unit at Our Lady's Hospice are examples of measures which help to maintain people in their own communities or to facilitate an early return following an acute illness episode. Four additional geriatricians are being approved by the Authority with a community commitment as an explicit part of the structure of each post, and this will provide additional clinical leadership to the ongoing care of older people in their own homes.

3.2 Dr. Siobhan Barry
Re: The newly built Psychiatric Unit at St Vincent's University Hospital

Could the CEO clarify, in light of comments in the Report of the Inspector of Mental Hospitals 2002, on the lack of progress of the Psychiatric Services in Vergemount in moving to this completed and commissioned purpose built facility & could he furthermore make a statement on the present use of this resource by St Vincent's University Hospital for other purposes?

Reply

The Authority and the management of the two organisations concerned – the East Coast Area Health Board and the St. Vincent's University Hospital Group are anxious to effect the transfer of the psychiatric service from Vergemount to the St. Vincent's site as soon as possible. There has been a significant amount of progress in the actions required for this to take place. The completion of the building is only one aspect of an overall plan to facilitate an agreed transfer. The hospital and the health board have established a joint project with sub-groups collaborating on:

- Clinical Protocols
- Nursing Protocols
- Staffing and Finance arrangements
- Non-Clinical Protocols

The groups have agreed membership, terms of reference, work plans and timescales and will report to the Steering Group before the end of this month.

Pending the full implementation of the transfer St. Vincent's are temporarily using some rooms in the unit. This has facilitated, for example, essential fire up-grade work to be conducted elsewhere in the hospital. Currently two rooms in the unit are being used on a temporary basis.

3.3 Cllr. Eric Byrne

To ask the C.E.O. if he is aware of the delay in granting Section 65 providers their Bench Marking monies? Is he further aware that in the absence of staff receiving this payment the amount of staff unrest that is evident as a result of it's non payment?

This is contrary to the purpose of Bench Marking which was established to promote good work policies and the elimination of industrial action.

Could the C.E.O. indicate if he has been funded by the Department to allocate such funding and if he will say when Bench Marking is likely to be paid to Organisations who are categorised under Section 65. And will he make a statement on this matter?

Reply

The Authority received funding for the first phase of the Public Service Benchmarking Body Report (PSBB) in two tranches and has allocated this funding to all providers in the Eastern region:-

- General Grades – funding allocated on 13 June 2003
- Social Care Staff in Intellectual Disability services – funding allocated on 19 September 2003

The Area Health Boards have advised that some Organisations which are categorised under Section 65 have been funded for the award. The Boards are still awaiting funding requests and costings from some other Organisations and these requests will be funded upon receipt.

3.4 Dr. Mick Molloy

"To ask the Chief Executive if he will consolidate and publish on CD/DVD

- Minutes of Board Meetings
- Reports Received externally
- Reports Generated internally
- Committee meeting reports and minutes
- Correspondence to the Board
- Financial Statements
- Provider Plans for the ERHA
- Provider Plans submitted by agencies to the ERHA
- Calendars of Meetings/Visits to be held

Furthermore that the documents would be catalogued with reference to the relevant year and subject matter and that a master file listing all documents be prepared for the same CD and that such CDS should be published annually with quarterly updates"

Reply

In response to the request to publish / distribute the following documentation on CD, I am recommending assessing the feasibility of

using the ERHA website as a means of distributing this information. A master framework document could be produced in either MS Word / Adobe Acrobat format and made available for download directly from the website. Rather than publish incremental updates the master document would be updated on a quarterly basis and uploaded to the website. This is advantageous for the following reasons, information and addenda can be made available to interested parties in a matter of minutes and is accessible from anywhere. Distributing the same information on any other media will incur a significant time/labour overhead. A significant reduction in the volume of paper based copy will be made. Finally dependent upon the electronic size of the documentation concerned it may be feasible to publish in an online readable format.

I will report back to the Board when this feasibility exercise is complete at a later date.

3.5 Dr. Mick Molloy

To ask the Chief Executive if he will investigate and report on the costs associated with using recycled paper for the boards activities and ensure the presence of a receptacle at every meeting, of the board or its committees, where members can place paper documents they no longer require which can then be recycled.

Reply

Paper and paper products make up for the largest percentage by volume of Ireland's solid waste. Approximately 509,000 tonnes of paper is disposed to landfill sites by the Local Authorities annually. This equates to 34% of the domestic and commercial waste stream. From a resource perspective it takes 17 trees to make a tonne of paper. These are good reasons for the ERHA to use post consumer paper (recycled paper).

There are some downsides to using recycled paper. The two areas of concern are the quality of the paper and the problems associated with printers, photocopiers. High-speed photocopiers, printers and fax machines have a problem with recycled paper, particularly in areas of high volume paper usage. The elevated amount of paper dust created by recycled paper and the heat from the machines combine to affect the feed mechanism of the machine causing paper to get stuck in the feed tray. This causes substantial down time for the machines and a considerable amount of frustration for staff.

The other area of concern is the quality of the paper, initially recycled paper was of poor quality and looked badly however, the quality of this paper has improved enormously in recent years.

While it may not be viable at present for the ERHA to use recycled paper as headed paper and for printing particularly in areas of high

usage, I have asked the Procurement Manager in Eastern Health Shared Services to review the central stationery contract with a view to including a provision for notepads, refill pads, post-its and envelopes etc to be made from recycled paper. I am also requesting that the ICT services/procurement services in the EHSS have an important award criteria in any future contract, put in place for printers', photocopiers and for machines which states that they are recycled paper friendly. Introducing the above clauses into contracts will avoid waste, achieve better value for money and will have a positive environmental impact.

Confidential paper security disposal services are provided on site in all larger ERHA Health Board locations. In other locations such as health centres, clinics and small offices the service is provided as required.

These consoles which are located in the main centres are available to members who wish to dispose of paper documents they no longer require, and which will be subsequently recycled.

03/10/86 Report No 32/03 – Framework for Mental Health.
(Agenda Item No. 4)

It was agreed to defer this report for the next meeting.

03/10/87 Report No. 33/03 – Review of St. Louise's and St. Clare's.
(Agenda Item No. 5)

Ms. Angela Fitzgerald, Director of Monitoring & Evaluation, presented Report 33/03 – Review of St Louise's and St Clare's *(copy appended to the official minute)*.

There followed a discussion to which the following members contributed: Dr M Gueret, Cllr Jane D Byrne, Dr K Harkin, Mr P Ledwidge, Cllr D Heney, Dr J Reilly, Ms M Hoban and Ms N Harvey. The following issues were raised:

- Waiting time to assess clients needs to be improved considerably
- Need to address the issue of efficiency v number of clients.
- Need to implement a 24 hour care should be there for everybody.
- Need for Working Group to take account of people with disabilities particularly with intellectual disabilities.

In response to these issues Ms Angela Fitzgerald advised the members that the objective of the ERHA is to try to eliminate waiting time or at least bring to at least one month but a detailed assessment needs to be carried out. She also advised targets need to be realistically set and that clarification needs to be sought as to the role of specialist units.

She further advised that she will continue to progress it with the Working Group and she intends to bring an updated report back to the Board in January 2004.

On the proposal of Cllr Jane D Byrne and seconded by Cllr Dr K Harkin Report No. 33/03 – Review of St. Louise's and St. Clare's was noted.

6.1 Cllr. Christy Burke

Cllr Christy Burke, in proposing his motion for debate, asked that the following amended motion be considered by the Board.

"This Board calls on the Department of Health & Children to enter into talks with the management of Beaumont Hospital with a view to open a children's wing and also an A&E Children's department. There is now a large percentage of young children living in this area"
It was agreed that the role of the individual hospital needed to be incorporated into the review of national paediatric services.

On the proposal of Cllr C Burke, seconded by Cllr M Murphy, the motion was agreed.

6.2 Cllr. Christy Burke & Cllr. Gerry McGuire

That this Authority agrees to provide funding for the continuation of services in Alcohol at Barrymore House, North Circular Road, Dublin 7.

On the proposal of Cllr J Stafford, seconded by Cllr G McGuire, it was agreed to defer this motion until the report on Barrymore House is published.

6.3 Cllr Ann Devitt, Cllr Thérèse Ridge, Cllr Andrew Doyle and Cllr Pat Hand

Cllr Ann Devitt, in proposing the motion for debate, asked that the following motion be considered by the Board.

In view of the fact that consultants and unions have called on the ERHA to release funds to open beds in the acute hospitals and in the community to relieve the pressures in A&E, that the Authority requires clarification on the funding position of the ERHA and the Department of Health & Children's allocation to the ERHA towards meeting the budgets of the two hospitals in the NAHB.

Cllr Hand seconded the motion and the motion was moved for debate. In speaking to the motion Cllr Devitt expressed concern that recent media articles stated that the ERHA were holding funds that should be issued to the hospitals.

In response the Chief Executive advised the members that each provider, including the two hospitals have been notified of funding available in the current year. He further advised that the pressure in the A&E departments does not relate to pressure in hospitals themselves as it is partly due to inappropriate placement of people in

hospitals. However, due to the allocation of 3.8m in the current year from the Department of Health & Children, patients are now placed into nursing homes etc. In relation to NAHB where pressure is acute, 143 people have been identified and discharged to date under new arrangements.

There followed a discussion to which the following members contributed:-

Cllr G McGuire, Cllr L Butler, Dr S Barry, Dr J Reilly, Dr K Harkin, Dr M Molloy, Cllr C Burke, Ms N Harvey, Ms M Hoban, Cllr A Devitt & Mr J Dolan. The following issues were raised:-

- Need to provide extra funding in the community so that patients can be released from the acute sector.
- Need for a longterm solution as it is a recurring problem yearly
- Preventative care is necessary to alleviate the bed problem.
- Need to define what an acute hospital is for.
- GP's having difficulty acquiring nursing homes for patients

The Chairman informed the meeting that he had agreed with the Chief Executive to hold a Special Board meeting in November to discuss priorities for 2004.

In response the CEO advised the members that he is now looking at issues to try and solve the problem such as improving bed management, discharge lounges, transitional units, provide accommodation at a lower cost while waiting for a bed in a nursing home. He further advised that there are a category of patients with no where to go and who do not qualify for subvention are now occupying 100 beds in the region and this needed to be addressed.

On the proposal of Cllr T Fox, seconded by Cllr L Butler, this motion was noted.

03/10/89 Chief Executive's Report
(Agenda Item No. 7)

The Chief Executive's Report (*copy appended to official minute*) was circulated. The report dealt with the following items: -

- Estimated Revenue Costs of New Acute Hospital Units, 2003-2004
- Delayed Discharge Initiative
- Influenza Season Is Here: Protect Yourself
- Treatment Purchase Fund

On a proposal by Cllr J. Dillon Byrne, seconded by Cllr John Stafford, the Chief Executive's Report, as circulated, was noted.

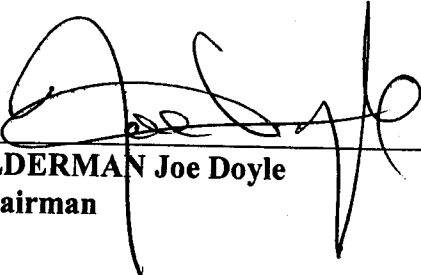
03/10/90 Date & Time of Next Meeting
(Agenda Item No. 11)

***The date and time for the next meeting was agreed for Thursday 6th November 2003
at 18:00 in Dr Steevens' Hospital***

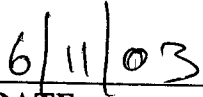
The meeting concluded at 18.45hrs.

CORRECT

Michael Lyons
Regional Chief Executive



ALDERMAN Joe Doyle
Chairman



DATE