

**EASTERN REGIONAL HEALTH AUTHORITY**  
**Minutes of proceedings of Board Meeting**  
**held in the Boardroom, Dr Steevens' Hospital, Dublin 8**  
**on Thursday 5<sup>th</sup> December 2002 at 18:00**

***Present***

|                       |                        |
|-----------------------|------------------------|
| Cllr. L. Butler       | Dr. R. Hawkins         |
| Cllr. C. Burke        | Cllr. D. Heney         |
| Dr. S. Barry          | Ms. M. Hoban           |
| Cllr. C. Byrne        | Mr. P. Ledwidge        |
| Cllr. E. Byrne        | Cllr. C. McGrath       |
| Mr. M. Cowley         | Ald. M. Mooney         |
| Cllr. T. Cullen       | Mr. M. Murphy          |
| Cllr. J. Dillon-Byrne | Cllr. D. Murray        |
| Mr. J. Dolan          | Cllr. E.O'Brien        |
| Cllr. P. Doran        | Cllr. Dr. W. O'Connell |
| Ald. J. Doyle         | Dr. P. O'Connell       |
| Cllr. A. Doyle        | Mr C. O'Connor TD      |
| Mr. J. Fallon         | Sen. S. Fearghail      |
| Dr. J. Fennell        | Dr. J. Reilly          |
| Cllr. T. Fox          | Sen. T. Ridge          |
| Dr. M. Gueret         | Cllr. R. Shortall TD   |
| Dr. K. Harkin         | Cllr. D. Tipping       |
| Ms. N. Harvey         | Mr. L. Twomey          |

***In the Chair***

Ald. J. Doyle

***Apologies***

Mr P. Aspell, Cllr. Dr. D. Fitzpatrick, Ms. A. Harris, Mr. G. McGuire,  
Dr. M. Molloy.

***In attendance***

Mr L. Woods, Mr M. Devine, Mr. J. Breslin, Dr M. Laffoy, Ms A. Fitzgerald,  
Ms M. Browne, Mr D. Beaton, Ms. Sile Fleming, Ms. M. Cronin, Mr. Tom Finn;  
Ms. Louise McMahon; Ms. Mo Flynn, Ms C. Ivory, Ms H Stokes,

## **Opening Prayer**

### **12/02/95 Chairman's Business**

#### *Agenda item No. 1*

#### **Details of Forthcoming Meetings**

- There is a special meeting scheduled to discuss the Service Plan 2003 on 16<sup>th</sup> December at 4:00pm in the Boardroom, Dr Steevens' Hospital.
- The next meeting of the Finance & Property Committee is scheduled for 18<sup>th</sup> December at 11:00am in the Boardroom, Dr Steevens' Hospital to discuss the Service Plan 2003.
- A meeting of the Finance & Property Committee to discuss the Service Plan 2003 is scheduled for Wednesday 8th January 2003 at 11.00 a.m. in the Boardroom, Dr Steevens' Hospital.
- It was agreed that the January meeting of the Board would be held on 9th January in the Boardroom, Dr. Steevens' Hospital, Dublin 8 at 6:00pm
- A Special Board Meeting to approve the Service Plan has been scheduled for Monday, 13th January 2003 at 6.00 p.m. in the Boardroom, Dr Steevens' Hospital.
- The next meeting of the Continuing Care & Social Services Committee is scheduled for 6<sup>th</sup> January 2003 at 11:00am in the Boardroom, Dr. Steevens' Hospital.
- The next Acute Hospital & Primary Care Committee meeting is scheduled for 21<sup>st</sup> January at 6:00pm in the Boardroom, Dr Steevens' Hospital.

### **12/02/96 Minutes of Previous Meetings**

#### *Agenda item No. 2*

The draft minutes of the meetings of the Board held on 24<sup>th</sup> October 2002 and 7<sup>th</sup> November 2002 (*copies appended to the official minute*) having been circulated, were proposed for adoption by Cllr. E Byrne, seconded by Cllr. C Burke and agreed.

### **12/02/97 Questions to Chief Executive**

#### *Agenda item no. 3*

#### **3.1 Cllr Roisin Shortall**

Will the Acting CEO provide details of all administrative staff in the ERHA, NAHB, ECAB, SWAHB, and EHSS with a breakdown of their grades and the service area in which they are employed and will he further provide details of the names, titles, location and telephone numbers for all those employed in a management capacity.

#### **Reply**

The following is the breakdown of Administrative Staff in the Eastern Regional Health Authority. The Eastern Regional Health Authority does not hold the level of detail requested for the Area Health Boards and the information requested will be supplied separately from each of the Area Health Boards.

**Administrative Staff in the Eastern Regional Health Authority as at 19 November 2002:**

***Planning and Commissioning***

- 1 x Senior Executive Officer
- 5 x Administrators – Provide Senior planning support and project management support
- 3 x senior administrative assistants – PA and administrative support
- 5 x administrative assistants – administrative support

*Total: 14*

***Monitoring and Evaluation***

- 1 x Manager
- 1 x Administrator – communications, PQ's, Reps and FOI
- 2 x senior administrative assistants – PA and administrative support
- 2 x administrative assistants – administrative support

*Total: 6*

***Regional Chief Executive and Director of Audit***

- 1 x manager
- 1 x board liaison officer
- 1 x senior administrative assistant - board and administrative support
- 3 x administrative assistants – administrative and audit support

*Total: 6*

***Corporate Services, ICT Regional Strategy, Regional Customer Services, Complaints and Appeals Plan, Public Private Partnership Pilot Project, Corporate Governance.***

- 1 x General Administrator
- 1 x Internal HR Officer
- 3 x administrators – Pilot project support – PPP's, Customer Service Regional Plan, office management, corporate fitness, training and development, health and safety
- 2 x senior administrative assistants – PA and project support, regional ICT strategy
- 9 x administrative assistants – PA support to consultants and project managers, reception and switch cover, purchasing and ordering, communications (PQ's, Reps, FOI) coordination, recruitment, facilities management.

*Total: 16*

**Human Resources and Organisation Development incorporating Nursing and Midwifery**

- 1 x Office Manager
- 4 x administrative assistants – administrative and project support – regional nursing projects, job evaluation.

*Total: 5*

### *Finance*

2 x senior administrative assistants – PA and invoicing support  
2 x administrative assistants – administrative support

*Total: 4*

### *Communications*

1 x senior administrative assistant – PA support.

*Total: 1*

### *Public Health*

1 x senior executive officer  
1 x senior administrative assistants – PA support  
6 x administrative assistants – administrative support

*Total: 8*

- **Total for Eastern Regional Health Authority:** **59**
- **Total Eastern Regional Health Authority complement to include all employees, e.g., nursing, medical, fixed term projects:** **164**

### **3.2 Cllr Roisin Shortall**

Will the CEO outline the policy relating to patients in public nursing homes and in contract beds, in respect of a. those who have a social pension and b. those who are an adult dependent on their spouses pension, and will he say how much of the pension is taken by the health board in respect of each category of pension and the legal status for this.

#### **Reply**

With regard to the policy relating to patients in contract beds;

- A) for a single /widowed person with no dependants whose sole income is a Social Welfare pension, the Board will assess the patient for a maintenance charge. When assessing the patient, the Board will allocate a 'spending comforts allowance' This 'spending allowance' can vary as it is dependent on the person's needs. The remainder of the pension is assessed towards the cost of maintaining the patient in a contract bed.
- B) For a person who is married or has dependants – the Board do not assess this individual for any maintenance charge.

This policy has been developed in line with the 1976 Hospital In-patient Regulations as amended by Hospital In – Patient Charges 1987.

With regard to the policy relating to patients in public beds;

- A) Under the Health (Charges for In Patient Services) Regulations 1976, after 30 days a charge can be made on Patients in Public Nursing Homes (e.g. St. Mary's Phoenix Park or St Vincents Athy etc.). Patients with a Social Welfare Pension

are requested to hand in their pension books. The Public Nursing Home become agents on the pension and the patient is allowed a minimum of €20 as a personal allowance depending on their circumstances. The balance of the pension goes towards maintenance.

B) Adult dependants. Pension Books are not requested where there are adult dependants. A small charge is asked for as a contribution towards maintenance but there is no obligation to make this payment.

### 3.3 Cllr Eric Byrne

Given the ratification of the Nice Treaty on the expansion of Europe by the Irish electorate and the rapid Multi-Cultural nature of Irish Society, will the C.E.O. list the number of Chaplains engaged by the Authority on its payroll?

Will he also state the total cost to the Authority in employing Chaplains and give a detailed breakdown of the religious affiliation of the Chaplains including by whom and by what method of recruitment these Chaplains are employed and will he clarify to who the Chaplains are answerable to in their employment?

#### Reply

The Authority does not directly employ any chaplains within the ERHA Corporate. The services of approximately 100 WTE Chaplains are utilised in the Eastern region, 78% of which are Roman Catholic, 17% are Church of Ireland and 5% are Methodist or Presbyterian.

The total cost is approximately €1.5m.

Roman Catholic Chaplains are nominated by the Archbishop and appointed by the Area Health Board or agency, in line with Department of Health and Children Circular 10/99. This Circular outlines agreed provisions in relation to the following:

- Contract Of Employment
- Job Description
- Certification
- Recruitment

The reporting arrangements for Roman Catholic Chaplains is outlined in the Appendix 2 of the Circular:

‘The Chaplain will accept managerial accountability and will be directly responsible to the Chief Executive Officer/Secretary Manager or designate, as well as to the appropriate Ecclesiastical Authority’.

There is no equivalent circular governing the appointment of non-Roman Catholic Chaplains however all are nominated by the head of their Religious order and appointed by the relevant Area Board or agency. The internal reporting arrangements are identical to those for Roman Catholic Chaplains.

**3.4 Dr Siobhan Barry**

Could the CEO inform the Board on the full cost to the Authority of the 4-page Commercial Report on the ERHA, published by the Irish Times on the 13<sup>th</sup> November 2002.

**Reply**

The four page supplement on the work of the ERHA was produced by the Irish Times without charged to our Authority

**3.5 Dr Maurice Gueret**

Could the CEO outline the detail for each service, the number of new patients that are seen annually in the eight Hospitals providing Dermatology Services in the Eastern Region? Could he also detail how many Dermatologists are employed by each providing service and how many weekly outpatient sessions are provided at each Hospital?

**Reply**

The ERHA asked each of the acute hospitals in the Eastern Region to provide it with the number of new patients, Dermatologists and weekly outpatient sessions that are Dermatology Services. The table below summarises the responses:

**Dermatology New OPD Attendances**

| Agency                | New Attendances Activity Jan-Oct 2001 | New Attendances Activity Jan-Oct 2002 | Number of Consultants | Number of Consultant sessions |
|-----------------------|---------------------------------------|---------------------------------------|-----------------------|-------------------------------|
| <b>NAHB</b>           |                                       |                                       |                       |                               |
| Beaumont              | 992                                   | 1181                                  | 2                     | 9                             |
| Mater                 | 2479                                  | 2195                                  | 3                     | 19                            |
| *JCM                  | 218                                   | 161                                   | 1                     | 3                             |
| Temple Street         | 215                                   | 626                                   | 2**                   | 10                            |
| <b>SWAHB</b>          |                                       |                                       |                       |                               |
| St James's            | 1779                                  | 2094                                  | 3                     | 21                            |
| Crumlin               | 880                                   | 622                                   | 2**                   | 10                            |
| Tallaght              | 474                                   | 405                                   | 1                     | 9                             |
| <b>ECAHB</b>          |                                       |                                       |                       |                               |
| St Vincents           | 700                                   | 649                                   | 2                     | 11                            |
| Hume Street           | 1384                                  | 1139                                  | 4                     | 15                            |
| <b>Regional Total</b> | <b>9121</b>                           | <b>9072</b>                           | <b>20</b>             | <b>107</b>                    |

\* Activity Data available Jan-Jun

\*\* Please note that for both Temple Street and Crumlin one of the Consultant posts is Locum and they perform 4 sessions each.

New Out Patient attendances at Dermatology clinics have remained largely unchanged in 2002 (total of 9,121 until end of October as compared to 9,072 in the same period in 2002) return attendances also remain unchanged 15,310 to the end of October as compared with 15,410 in 2002. However, there has been an increase in both In Patient and Day Case Dermatology activity during 2002. The number of Day Case discharges has increased by 31% approx and In Patient Discharges by 33% approx compared to last year. One of the recommendations of the review of OPD services is to look at protocols re length of time in OPD system.

As indicated from previous question of 7<sup>th</sup> November 2002 it has been acknowledged that there is a need to review capacity in Dermatology Services both regionally and nationally. In this context the ERHA, in consultation with providers in the region, is participating in a national review of Dermatology Services that is being undertaken by Comhairle na nOspideal. Consultant manpower is one of the issues which is being considered as part of this review which is due for completion by the end of this year.

### 3.6 Dr. Maurice Gueret

Could the CEO please detail the current waiting times for first ENT Outpatient Appointments at each providing hospital?

#### Reply

The ERHA asked each of the acute hospitals in the Eastern Region to provide it with the next available new patient ENT Out Patient appointment broken down by clinical priority. The table below summarises the responses:

**First available ENT Out Patient appointments by clinical priority in Eastern Region**

| Hospital                 | Urgent                             | Soon                             | Routine                     |
|--------------------------|------------------------------------|----------------------------------|-----------------------------|
| *AMNCH                   | 3 weeks                            | 3 weeks                          | 1 year                      |
| Beaumont                 | 2-3 weeks                          | 2-3 months                       | *8 months - 2.5 years       |
| JCM                      | 2-3 weeks                          |                                  |                             |
| Crumlin                  | 4-6 weeks or as requested          | July 2003                        | 18 months                   |
| Mater                    | 2-3 weeks                          | 3-6 months *                     | *August 2003-September 2004 |
| St James's               | Next clinic                        | within 3 months                  | within 12 months            |
| St Vincent's             | 1-2 emergency slots per consultant | Depending on consultant          | 15-19 weeks                 |
| St Michael's             | 2-3 weeks                          | 4-6 weeks                        | 25/03/2003                  |
| Royal Victoria Eye & Ear | As required                        | with 2 months or referred to A&E | 9 - 12 months               |
| Temple St                | 2 months                           | Depending on complaint           | 13 months                   |

\* Will vary depending on Consultant

## **ERHA Review of OPD Services**

The Eastern Regional Health Authority (ERHA) is committed to the implementation of improvements in outpatient services in conjunction with hospitals in the region. During 2002 the ERHA undertook a review of outpatient services in the region with a specific focus on ENT services.

A major problem identified by the review for both providers and patients is the waiting time for first outpatient appointments. Our findings suggest that in order to address this we need to adopt a whole systems approach, that improves the patient pathway through from the point of referral to treatment and follow-up.

In this context, there is a role for both primary and secondary care to improve waiting time, as detailed within the following areas targeted for improvement.

- **Referral** – Improving the flow of information from the point of referral would contribute to a reduction in waiting times for appointments.

*Primary Care:* waiting time to be improved through:  
Standardised referral letter.

### **Improved communications between hospital and GP possibly through electronic referral information systems**

*Hospital Care:* active management of referral within hospital e.g. ensure that referral is assigned to team and scheduled for appointment within 7 days of receipt.

- **Patients within system/Return patients** – Reducing the number of follow-up appointments would 'free up' some space for new referrals.  
*Primary Care:* examine the possibility that some follow-up appointments could be managed competently at a primary care level.

*Hospital Care:* address frequency and purpose of review appointments. It was noted within the patient satisfaction survey that patients sometimes felt their return visit had not achieved any objective.

Recommendations for good practice suggest that all patients should be reviewed by a senior decision maker on every 3<sup>rd</sup> visit to hospital to see if a discharge is appropriate.

- **Patients that do not attend for appointments (DNAs)** – Reduce the number of DNAs by improved planning, scheduling and notification of patients so that resources can be directed to patients requiring an appointment.

Hospital Care: focus on prevention of DNAs – through reminders or sending out appointment time nearer to visit – as experience of return and new patients suggest they forget appointments when they are booked very far in advance.



- **Discharge** – patients can remain within the system because of uncertainty regarding their prognosis, with consequent lack of discharge, thus blocking time for new appointments.

The Authority proposes to take immediate action on this issue and has identified initiatives in both primary and acute sectors as follows.

#### **Acute System**

It is proposed to implement a client centred approach to OPD Services and to pilot this approach in one of the sites early in 2003 and evaluate its impact and efficacy.

#### **Primary Care**

It is proposed to use implementation projects under the Primary Care Strategy to improve the interface between the acute and primary care sector, with a particular emphasis in this context on development of improved links with GP's and referral pathways.

**Primary and Hospital Care:** Increased contact, and continuity of communication between GPs and hospitals could raise the confidence levels of hospitals in discharging patients back into the community where there is uncertainty about the level of follow-up required. Hospitals in consultation with local primary care teams could develop a specific policy/procedure for discharging patients from outpatient service.

#### **Paediatric Waiting Times for ENT Appointments**

A Locum was funded for Temple Street to address the ENT service this is reflected in a 3% increase in inpatient activity levels.

The Council for Children's Hospital Care which is representative of the three paediatric hospitals, completed a report on improvements in paediatric ENT services and the authority is working with the Hospitals on the implementation of this report.

### **3.7 Dr Kieran Harkin**

At the April 2002 Board Meeting the following motion was unanimously agreed "That the ERHA shall urge the Department of Health & Children to review as a matter of urgency the agreement whereby the GMS Capitation fees of patients over the age of seventy is multiplied by a factor of five for the patients whose income at the time of application exceeds a predetermined limit"

Could the CEO please detail the communication between the ERHA and the Department of Health and Children, with particular regard to the response of the Department?

#### **Reply**

The motion was considered as part of a debate on medical cards at the April 2002 Meeting of the Board as two motions had been listed on the agenda. At the meeting the members were advised that the agreement on the GMS Capitation Fees was made

between the Department of Health & Children and the Irish Medical Organisation. In addition the Health Board CEO Group had set up a Medical Card Review Group to consider all matters relating to the Scheme.

There has been no formal correspondence with the Department of Health & Children on the matter as the issue concerns a national agreement between the Department of Health & Children and the Irish Medical Organisation. However, I have asked that specific attention to this issue be given by the Medical Card Review Group in its deliberations

#### **12/02/98 Matters for Mention**

*Agenda item no.4*

There were no matters for mention

#### **12/02/99 Report No 29/02 –End of Year Review – Report from Director of Monitoring and Evaluation**

*Agenda item no. 5*

Ms Angela Fitzgerald, Director of Monitoring and Evaluation presented Report No 29/02 – End of Year Review (*copy attached to the official minute*).

There followed a debate to which the following members contributed:- The Chairman, Cllr E Byrne, Dr S Barry, Dr M Molloy, Cllr C Burke, Cllr J Dillon Byrne, Cllr L Butler and Dr B Murphy and the following issues were raised:-

- the increase in the number of older persons in Acute Hospitals awaiting alternative placement.
- Waiting times for A & E Services
- The linking of Autism with mental health.
- The operation of the Treatment Purchase Fund
- Alcohol abuse particularly by young people
- The strict implementation of catchment boundaries
- Home care for older persons
- Developments in the orthodontic services

Ms A Fitzgerald clarified the position on the issues raised. ***On the proposal of Cllr J Dillon Byrne, seconded by Cllr C Burke, Report No 29/02 was noted.***

#### **12/02/100 Report No. 30/02 - Reports from Committees of the Board**

*Agenda Item No. 6*

At the meeting of the Continuing Care & Social Services Committee held on the 4<sup>th</sup> November 2002, Ms. Sheila O'Malley, Director of Nursing & Midwifery gave a presentation on the Teen Parents Support Initiative. The Committee was of the view that the Board should review the possibility of developing a scheme such as the Teen Parent Support Initiative in the three Area Health Boards and that funding be made available and it recommended that this should be brought to the attention of the Board.

**Report No 30/02 – Report from the Committees of the Board (copy appended to the official minute, having been circulated, was noted on the proposal of Cllr T Fox, seconded by Cllr C Burke.**

**12/02/101 MOTIONS**

**Agenda Item No.7**

**7.1 Dr Kieran Harkin**

*That the Authority examined the extent of sponsorship by the pharmaceutical industry within the healthcare system of the ERHA and explore the consequences of such sponsorship, with a view to issuing appropriate recommendations.*

***On the proposal of Dr K Harkin, seconded by Cllr L Butler, the motion was moved for Report.***

**7.2 Dr Kieran Harkin**

*That this Authority*

- *recognises that every patient who is obliged to ingest their medication under the direct supervision of a community pharmacist should be able to do so in private;*
- *shall encourage and support the area boards in assisting pharmacists to offer this supervised ingestion facility in private;*
- *shall do a baseline audit on this issue and report to the ERHA board on progress made not later than March 2003*

***On the proposal of Dr K Harkin, seconded by Cllr L Butler, the motion was moved for Report.***

**12/02/102 Chief Executive's Report**

**Agenda Item No. 8**

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

- Once off Grants from Department of Health and Children
- Regional Human Resource Forum and Action Plan on People Management
- Clinical Psychology Training Course in Trinity College
- Brief on Budget 2003 – Health
- Update on Drugs Service
- Clerical Abuse Helpline
- Nomination of Cllr Pat Hand to the Board of ERHA
- List of Publications

***On a proposal by Cllr C Burke, seconded by Cllr L Butler, it was agreed that Councillor Pat Hand, who was nominated by Dun Laoghaire- Rathdown County Council to replace Cllr Maria Corrigan as a representative of Dun Laoghaire- Rathdown County Council on the Board of the Authority, be appointed as a member of the East Coast Area Health Board.***

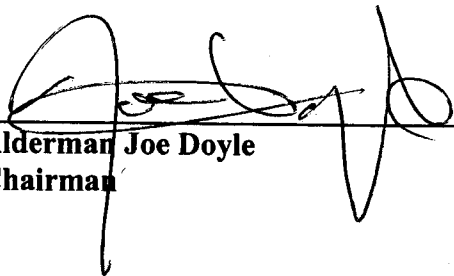
***On a proposal by Cllr Eric Byrne, seconded by Cllr Tony Fox, the Chief Executive's Report as circulated was noted.***

**12/02/103     Date & Time of Next Meeting**  
***Agenda Item No. 9***

***The date and time for the next meeting was agreed for Thursday 9<sup>th</sup> January 2003 at 18:00 in the Board Room, Dr. Steevens' Hospital.***

The meeting concluded at 19:00hrs

**CORRECT**  
**Liam Woods**  
**Deputy Regional Chief Executive**

  
Alderman Joe Doyle  
Chairman

\_\_\_\_\_  
**DATE**