Tallaght University Hospital | Ospidéal Ollscoile Thamhlachta

An Academic Partner of Trinity College Dublin

Annual Report and Accounts 2025

People Caring for People to Live Better Lives

TALLAGHT UNIVERSITY HOSPITAL

2025 at a glance

302,005
OPD VISITS

46,897 WERE VIRTUAL

NUMBER OF STAFF
3,721

63,294
ED ATTENDANCES

61,540
DAYCASE PROCEDURES
(INCLUDES DIALYSIS)

21,416
INPATIENT ADMISSIONS
(81% OF ADMISSIONS VIA ED)

AVERAGE LENGTH OF STAY **9.8 DAYS**

1,175
PATIENTS TREATED
EVERY 24 HOURS

193,342
DIAGNOSTIC IMAGES TAKEN
(OF WHICH 16,034 WERE TAKEN
IN COMMUNITY RADIOLOGY)

1,714,331
TESTS CARRIED OUT IN THE LAB

2,223,625
ELECTRONIC MESSAGES SENT TO
HEALTHLINK TO GPs & PRIMARY
CARE CENTRES

81,148
ELECTRONIC REFERRALS RECEIVED FROM GPs

THE AVERAGE AGE
OF ADMISSION

60 MALE

61 FEMALE

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1 Message from the Chair

Professor Anne-Marie Brady
Chair

Welcome to the 2025 Annual Report of Tallaght University Hospital. It is an honour to continue serving as Chair during a year of meaningful progress and important change for the Hospital. The past year has seen continued advancement across the Hospital, supported by the dedication and resilience of our staff as they worked to meet rising levels of demand.

A major milestone in 2025 was the launch of our new Hospital Strategy, which sets a bold and forward looking direction for the years ahead. Built around a single, powerful mission - *to deliver innovative, patient centred care that continuously anticipates and adapts to the evolving needs of our community.* The strategy reflects both our ambition and our responsibility as a major academic teaching hospital. It comes at a pivotal moment for healthcare in Ireland, as demographic change, increasing patient complexity, and a shifting national health agenda reshape the environment in which we operate.

The TUH catchment population is projected to reach one million people by 2030, up from 800,000 in 2024. West Dublin remains one of the fastest growing regions in the country, and the pressure on acute services continues to intensify. Demand for care, again exceeded capacity, and the need for additional beds and sustained capital investment has never been more urgent. Addressing these challenges is essential to ensuring timely access, safe care, and a sustainable future for the Hospital.

Despite these pressures, our team have continued to demonstrate exceptional commitment. Emergency and unscheduled care activity once again placed significant strain on services, yet staff across all disciplines worked tirelessly to maintain and improve performance. Their professionalism, compassion and adaptability remain the foundation of our success.

The insights from the Health Assets & Needs Assessment report, published in 2024, continued to guide our planning throughout the year. The report's detailed understanding of the Tallaght community's health needs has strengthened our ability to make evidence based decisions and to advocate for the resources required to meet those needs. Its influence is already visible in our strategic priorities and in our commitment to ensuring equitable, community focused care.

Our focus on innovation, research, and digital transformation also continued to grow. Building on strong foundations, we advanced initiatives that are redefining how care is delivered and improving patient outcomes supported by strong partnerships with academia, industry, and community organisations.

I extend my thanks to my colleagues on the Board, the Executive Management Team, and every member of the TUH team. I am also pleased to welcome Barbara Keogh Dunne, who took up the role of CEO in June 2025. I look forward to working closely with her as we advance the next phase of the Hospital's development.

As we look ahead, our priorities are clear: expand capacity, secure the resources required to meet growing demand, enhance infrastructure, and continue building a culture of excellence, inclusion, and innovation.

Thank you for your support of Tallaght University Hospital and the people who rely on our care every day.

Professor Anne-Marie Brady
Chair
Tallaght University Hospital

2 Hospital Board

Tallaght University Hospital is governed by a Charter approved by the Minister for Health in accordance with Section 76 of the Health Act 1970 following enactment of the Health (Amendment) (no. 2) Act 1996.

The Hospital Charter has been reviewed and updated as a consequence of the transfer of paediatric care services to the New National Children's Hospital – established under the Children's Health Act 2018 and the revised Charter will be presented to both Houses of the Oireachtas for Ministerial Approval. The Children's Health Act was enacted on January 1st 2019 which saw the transfer of paediatric services at TUH to CHI.

The Hospital Board is made up of 11 Non-Executive Directors (NED's), each of whom are independent. The revised Charter, once approved, allows for the appointment of 12 NED's.

In accordance with bye-laws made in November 2014 under the Tallaght Hospital Charter, the Board comprises 11 members appointed as follows:

- one member appointed by the Adelaide Health Foundation;
- one member appointed by the Meath Foundation;
- one member appointed by the National Children's Hospital;
- four members appointed by the Minister for Health on the nomination of the Church of Ireland Archbishop of Dublin/President of the Hospital;
- one member appointed by the Minister for Health on the nomination of Trinity College Dublin;
- one member appointed by the Minister for Health on the nomination of the HSE; and
- two members appointed by the Minister for Health on the nomination of the Hospital Board.

The Chairperson is elected from the Board from among the members appointed by the Minister. The Vice Chairperson is appointed by the Board from among its members.

No remuneration is paid in respect of Board Membership.

Board members may be recouped for reasonable expenses incurred in accordance with the standard public service travel and subsistence rates. Details of any such payments to Board members are provided in the Hospital's annual accounts.

Board Members (11)

Professor Anne-Marie Brady
(Chair)

Mr Mark Varian
(Vice Chair)

Dr Darach Ó Ciardha

Mr John Hennessy

Dr Martin Lyes

Dr Vivienne Byers
(Resigned September 1st 2025)

Ms Darina Barrett
(Term concluded December 31st 2025)

Mr Mike Beary

Reverend David Bowles

Mr Tom Lane

Mr John Byrne
(Appointed November 12th 2025)

Vacant

Name	Nomination	Expected No. of Meetings to Attend in 2025	No. of Meetings Attended in 2025
Prof Anne-Marie Brady, *Chair*	TCD	9	12
Mr Mark Varian, *Vice-Chair*	Adelaide Health Foundation	9	8
Dr Darach Ó Ciardha	Hospital Board	9	10
Mr John Hennessy	HSE	9	8
Dr Martin Lyes	Meath Foundation	9	11
Dr Vivienne Byers *(Resigned September 1st 2025)*	Archbishop	9	3
Ms Darina Barrett *(Term concluded December 31st 2025)*	Archbishop	9	8
Mr Mike Beary	Hospital Board	9	11
Rev David Bowles	Archbishop	9	11
Mr Tom Lane	Archbishop	9	12
Mr John Byrne *(Appointed November 12th 2025)*	Archbishop	1	2
Vacant	NCH		

* The Board called three additional meetings to deal with matters in-between Board meetings.

Executive Management in attendance

Executive Management Team in Attendance

1. Ms Barbara Keogh Dunne (CEO, June 30th 2025)
   Ms Lucy Nugent (CEO, resigned January 2025)
2. Mr John Kelly (DCEO), (Interim CEO January 2025-June 29th 2025)
3. Mr Dermot Carter (Chief Financial Officer)
4. Dr Mary White (Chair, Medical Board)
5. Ms Bridget Egan (Clinical Director, Peri-Operative Directorate)
6. Prof. Peter Lavin (Clinical Director, Medical Directorate)
7. Prof. Catherine Wall (Director, Quality, Safety & Risk Management)
8. Mr Shane Russell (Chief Operations Officer resigned July 2025)
9. Mr Jerome Powell (Chief Operations Officer July 2025)
10. Ms Áine Lynch (Director of Nursing & Integrated Care)
11. Ms Sharon Larkin (Director of Human Resources)

Ms Anne McKenna (Board Secretary)

Board Committees

The Committees established by the Board to date are the Audit Committee; Finance Committee; Staff & Organisation Development Committee; Quality, Safety & Risk Management Committee (QSRM), Governance and Nominating Committee and the Research & Innovation Committee.

Each committee has specific functions in assisting the Hospital Board to fulfil its oversight responsibilities.

Governance & Nominating Committee

- Prof. Anne-Marie Brady, Board Member
- John Hennessy, Board Member
- Sean McGlynn, External Member (Resigned July 2025)
- Gabrielle Ryan, External Member
- Caitriona Ryan, External Member
- Muiris O Ceidigh, External Member (Appt. July 28th 2025 – resigned November 17th 2025)

Audit Committee

- Darina Barrett- Board Member
- Mike Beary, Board Member
- Laura Ryan, External Member
- Aideen Goggin, External Member
- Glen Byrne, External Member

Finance Committee

- Tom Lane, Board Member
- John Hennessy, Board Member
- Robert Henderson, External Member
- Siobhan Donlevy, External Member
- Ray Ryder, External Member (Resigned September 10th 2025)

Staff & Organisation Development Committee

- Mark Varian, Board Member
- Claire Cusack, External Member
- Karen Maher, External Member
- Martin Leavy, External Member (Term concluded September 23rd 2025)
- John McCullough, External Member (Appt. November 24th 2025)
- Dr Feena May, External Member (Appt. 24th November 2025)

Research & Innovation Committee

- Dr Martin Lyes, Board Member
- Prof. Richard Reilly, External Member
- Dr Lorna Ross, External Member
- Ms Susan Treacy, External Member (Appt. September 29th 2025)

Quality, Safety & Risk Management Committee

- Rev. David Bowles, Board Member
- Dr Darach Ó'Ciardha, Board Member
- Dr Mary Davin-Power, External Member
- Ms Helen Strapp, Eternal Member
- Mr Adam Ward, External Member (Appt. 1st August 2025)
- Mr Declan Daly, External Member (Term concluded 23rd September 2025)

Statement of How the Board Operates

Tallaght University Hospital is a Voluntary Hospital established under a Charter approved by the Minister for Health in accordance with section 76 of the Health Act 1970 following the enactment of the Health (Amendment) (No.2) Act 1996. In accordance with by-laws made in November 2014 under the Adelaide and Meath Hospital Dublin, Incorporating the National Children's Hospital (Tallaght University Hospital) Charter, the Board comprises 11 members. The general function of the Board shall be to manage the activities of the Hospital and the services provided by it.

The Board may establish one or more Committees for such purposes as it may determine. Any committee so established shall report to the Board in relation to its activities in such a manner and at such intervals as the Board may determine. The Board of Tallaght University Hospital has established six Committees; Governance and Nominating Committee, Audit Committee, Finance Committee, Quality, Safety and Risk Management Board Committee, Staff and Organisational Development Committee and a Research & Innovation Committee. Each Committee has defined terms of reference outlining the specific duties of the Committee.

The Tallaght University Hospital Code of Governance, Section 6 details the formal schedule of matters reserved for Board decision. Specifically Section 6 provides for decisions specifically reserved to the Board:

(a) the Hospital's corporate/strategic plan and/or any similar significant policy documents;

(b) the Hospital's annual service/operating plan and budget;

(c) the annual accounts and annual report of the Hospital;

(d) any significant change in accounting policies or practices, following consideration by the Audit Committee;

(e) all proposals on individual contracts of a capital or revenue nature amounting to, or likely to amount to, more than €300,000 over a three year period or the period of the contract if longer;

(f) all property leases of whatever value;

(g) the disposal or acquisition of any land or property;

(h) the establishment of any subsidiary or associated companies;

(i) the opening of bank accounts;

(j) the appointment, remuneration and assessment of, and succession planning for, the Chief Executive;

(k) the arrangements governing the appointment and remuneration of the EMT and

(l) the HSE Annual Compliance Statement and all SLA's with a value greater than €1,000,000

1. In addition to the foregoing, the Board shall:

   (a) approve the Standing Orders, Code of Governance, Code of Conduct and Schedule of matters reserved for Board decision;

   (b) approve proposals for managing risk, ensuring quality and developing clinical governance;

   - **Managing Risk:** Take a strategic view of risks in the organisation and approve proposals for managing risk, ensuring that there are clear accountabilities for the management of risks. The Board will continuously assess and monitor risks ensuring that there are clear escalation processes in place. The Board shall receive regular reports from the QSRM Board Committee, CEO, Director of QSRM and Executive Management Team on the principal risks of the organisation and the effectiveness of risk management.
   - **Quality:** The Board will approve proposals for the delivery of high quality, safe and reliable patient care. The Board shall receive regular reports from the Board Committee's, Clinicians, Director of QSRM, CEO and Executive Management Team in the context of organisation wide collaboration, innovation and standardised quality improvement.
   - **Clinical Governance:** The Board will approve the structure for clinical governance, accountability and authority to ensure clear reporting lines and escalation processes. The Board will ensure a process for systematic monitoring of, learning from, safety incidents at local, regional and national levels.

   (c) periodically review the organisation structures, processes and procedures to facilitate the discharge of business by the Hospital;

   (d) approve the arrangements for developing and implementing the Hospital's personnel policies including those governing the appointment, removal and remuneration of staff;

   (e) approve the Hospital's annual capital investment plan, any individual capital projects not specifically funded by the HSE in excess of €500,000, and any individual Public Private Partnership proposals;

   (f) approve any individual compensation payments to members of the EMT and hospital consultants;

   (g) periodically review the potential implications of legal actions being taken against or on behalf of the Hospital;

   (h) periodically review the Board's own effectiveness, that of its committees and individual members; and

   (i) take whatever decisions that the Board or the Chief Executive consider to be of such significance as to require to be taken by the Board.

2. The Board shall satisfy itself that there is a sound system of internal controls including financial, operational and compliance controls, and risk management processes within the Hospital. It shall undertake an annual assessment of the effectiveness of the internal control and risk management processes. It shall also approve statements for inclusion in the annual report concerning internal controls and risk management.

3. Those functions of the Board which have not been retained as reserved by the Board or delegated to a committee of the Board shall be exercised on behalf of the Board by the Chief Executive. The Chief Executive shall determine which functions he/she will perform personally and shall nominate officers to undertake the remaining functions for which he/she will still retain accountability to the Board. The Board shall satisfy itself that management arrangements are in place: (a) to enable responsibility to be clearly delegated to senior executives for the main programmes of action; (b) for performance against programmes to be monitored; and (c) for senior executives held to account. Members of the EMT may be required to report periodically to the Board or its committees on their assigned areas of responsibility.

4. The Board may at any time decide to withdraw delegated responsibility for any matter and reserve to itself decisions thereon.

5. As indicated in the Standing Orders, the powers which the Board has reserved to itself may when an urgent decision is required be exercised by the Chief Executive and the Chair after having consulted at least two Board Members. The exercise of such powers by the Chief Executive and Chair shall be reported to the next meeting of the Board for formal ratification.

6. Acquisition of Land or Buildings.

Board Responsibility for the AFS

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- One member appointed by the Minister for Health on the nomination of Trinity College Dublin
- One member appointed by the Minister for Health on the nomination of the HSE and
- Two members appointed by the Minister for Health on the nomination of the Hospital Board

The Chairperson is elected from the Board from among the members appointed by the Minister.

The Charter provides that all the powers of the Hospital are vested in and exercisable by the Hospital Board and that the Hospital shall keep all proper and usual accounts of all money received by or expended by it. Accounts kept in pursuance of this paragraph by the Hospital shall be submitted annually by it to an auditor for audit and, as soon as me be after the audit, such of those accounts as, in the opinion of the Board, may be conveniently published for the information of members of the public, shall be published by the Board.

Tallaght University Hospital is compliant with section 38 of the Health Act 2004 in producing audited accounts.

The Board, through its Audit Committee, ensures that the Hospital has an objective and professional relationship with its external auditors at all times. The external auditors are required to report in the Hospital's accounts each year (copies of which are sent to the HSE and Charities Regulator) that the Hospital complies with the Department of Health Accounting Standards for Voluntary Hospitals.

We confirm that the financial statements of The Adelaide & Meath Hospital, Dublin, Incorporating The National Children's Hospital (Tallaght University Hospital) for the year ended 31 December 2025 as set out herein are in agreement with the books of account and have been drawn up in accordance with the Accounting Standards for Voluntary Hospitals issued by the Department of Health and Children.

The financial statements on pages 64 to 68, which have been prepared under the statement of accounting policies properly show the state of affairs of the Hospital at December 31st 2025 and its income and expenditure and cash flow for the year then ended.

Executive Organisational Structure (December 2025)

HOSPITAL BOARD

Medical Board
Dr Mary White

Ms Barbara Keogh Dunne
Chief Executive Officer

Office of CEO

- **Code of Practice Compliance**
- **Legal & Insurance**
- **Communications**
- **Strategic Planning & Development**
- **Management Sciences**

Internal Audit

Mr John Kelly
Deputy CEO

Executive Management Team

Mr Dermot Carter
Chief Financial Officer

Ms Sharon Larkin
Director of Human Resources

Ms Áine Lynch
Director of Nursing & Integrated Care

Mr David Wall
Chief Information Officer

Mr Patrick Ryan
Director of Estates & Facility Management

Mr Jerome Powell
Chief Operations Officer

Dr Emily Ward
Clinical Director Radiology Directorate

Professor Peter Lavin
Clinical Director Medical Directorate Lead Clinical Director

Ms Bridget Egan
Clinical Director Perioperative Directorate

Dr Ronan Desmond
Clinical Director Laboratory Directorate

Professor Catherine Wall
Director of Quality Safety & Risk Management

Dr Aidan Grufferty
Director of Emergency Department

Executive Management Team

MR DERMOT CARTER
Chief Financial Officer

Financial Accounting | Management Accounting | Treasury | Payroll | Settlements Unit | Procurement & Contracting | Finance Systems Policies & Procedures | Stores | Financial Policy Compliance | HIPE | Accounts Receivable | ABF

MS SHARON LARKIN
Director of Human Resources

Recruitment | Staff Relations | Medical Admin & Management | Superannuation | Personal & Organisational Development | Workforce Planning & Control | Absenteeism | Policy Compliance | Workforce Systems, Policies & Procedures | Credentialing | Post Graduate Medical Centre | Learning & Development | Ethics in Public Office | Library | Occupational Health

PROFESSOR PETER LAVIN
Clinical Director Medical Directorate
Lead Clinical Director

MS BRIDGET EGAN
Clinical Director Perioperative Directorate

DR EMILY WARD
Clinical Director Radiology Directorate

DR RONAN DESMOND
Clinical Director Laboratory Directorate

DR AIDAN GRUFFERTY
Clinical Director of Emergency Department

Clinical Services Organisation and Delivery Assurance
Implementation on National Clinical Care Programmes
Management of all Staff in Directorate:

- *Medical*
- *Nursing/Healthcare Assistants*
- *Health & Social Care Professionals*
- *Clerical & Administration*

Management of Budget for Clinical Directorate
Quality, Patient Safety & Risk Management

MR DAVID WALL
Chief Information Officer

eHealth Delivery | Electronic Patient Record | Digital Innovation & Transformation | Enterprise Resource Planning (Systems) | Unified Communications | Telephony | Information Governance | Medical Records | ICT Programme Management Office | ICE Infrastructure & Service Desk | Application Portfolio Manager & Business Intelligence

MR PATRICK RYAN
Director of Estates & Facility Management

Catering | Housekeeping | Estate Management | Logistics | Facilities Management | Technical Services | Projects | Security Services | Car Parking | Mortuary | Decontamination Services | MPCE

PROFESSOR CATHERINE WALL
Director of Quality Safety & Risk Management

Development of all Hospital QSRM Policies & Procedures | Risk Management | Risk Register | Monitor/Assure Implementation of all QSRM Policies | Implement National QSRM Policies | Licensing & Regulation | QSRM KPIs | Compliance & Assurance | Clinical Audit | Health Promotion | Safety & Health at Work | Ethics Programme

MS ÁINE LYNCH
Director of Nursing & Integrated Care

Graduate, Specialist & Advanced Nursing Practice | Professional Development | End of Life Care | Patient Advice & Liaison Service | Volunteer Services | Pastoral Care | Arts & Health | Patient Community Advisory Council | Integrated Care

MR JEROME POWELL
Chief Operations Officer

Operations Oversight/Responsibility & Assurance | Service Planning | Bed Management | Operations Systems, Policies & Procedures | Production & Performance Compliance | Health & Social Care Professionals Manager | Pharmacy | Medical Photography

3 Message from the CEO

Barbara Keogh Dunne
CEO

It is a privilege to present my first foreword as Chief Executive of Tallaght University Hospital. I am honoured to lead an organisation defined by its commitment to patients and the exceptional professionalism of its people. Throughout 2025, TUH continued to deliver high quality care in an environment of unprecedented demand, demonstrating the strength, adaptability, and determination of our team.

The pressures experienced across the Hospital in 2025 continued a pattern highlighted in last year's report, with TUH once again operating at the highest level of activity since the Hospital opened. Demand rose across almost every service, and the year was marked by sustained pressure on bed capacity, increasing complexity of patient need, and the ongoing challenge of balancing urgent and scheduled care. Bed occupancy averaged 115% throughout the year, a clear indicator of the scale of need within our community and the urgency of expanding capacity. This was not simply pressure; it was a sustained and measurable shift in the volume and complexity of patients requiring acute care.

Urgent and Emergency Care saw particularly sharp increases. Since 2023, attendances to the ED have increased by 14%, representing one of the most sustained periods of growth the Hospital has experienced. The increase has been even more pronounced among older people, with attendances from those aged over 75 rising by 29% over the same period. These trends reflect demographic change and the growing complexity of care needs, and they reinforce the necessity of investment in beds, infrastructure, and modern models of care.

Despite these challenges, the Hospital delivered significant improvements in patient experience and access times. In 2025, the number of patients waiting more than 24 hours in the Emergency Department (ED) decreased by 30%, while the number of patients on trolleys fell by 33%. These improvements were supported by the provision of an additional 30 step-down beds, which enhanced patient flow and facilitated more timely transfers of care.

The gains were further reinforced through strengthened patient flow processes, enhanced multidisciplinary coordination, and stronger governance and accountability structures, maintaining a sustained performance and operational oversight on timely access to safe, high-quality care.

We also advanced several important developments that will shape the future of care at the Hospital, including the Hospital being designated as a Supraregional Endometriosis Centre. The launch of our new Hospital Strategy in 2025 provides a clear and ambitious framework for how we will evolve as an organisation over the coming years. It sets out the priorities, capabilities, and partnerships required to meet the needs of a rapidly growing population and to deliver care in new and innovative ways.

The opening of the new Aseptic Unit marked a major enhancement in our capacity to deliver the highest standards in sterile medicine preparation. In 2026, we will begin rolling out dispensing cabinets and electronic medication cards across clinical areas as part of our digital medicines management transformation programme, a key step in improving safety, efficiency, and the overall patient experience.

Towards the end of 2025, we started work on comprehensive site development plan, which will be a central focus for 2026. With bed occupancy averaging 115% throughout the year, it is clear that expanding capacity is not simply desirable, it is essential. This plan will guide how we modernise and grow our infrastructure to ensure the Hospital remains responsive, resilient, and equipped to meet the needs of our community today and into the future.

Across the organisation, there is a sustained commitment to improving effectiveness, strengthening performance, and delivering high quality care. I am deeply grateful to our staff for their professionalism, compassion, and unwavering dedication throughout the year.

As we look ahead, I am confident that, together, we will continue to build a stronger, more capable Hospital for the communities we serve.

Barbara Keogh Dunne
CEO
Tallaght University Hospital

4 Patient Access

63,294
ED Attendances

9,308 Patients aged 75 +

59,836 Patients aged 16-74

171 Patients treated every 24 hours on average

17,345
Admissions to Hospital via ED

4,918 Patients aged 75 +

12,427 Patients aged 16-74

Most common diagnosis that needed a vist to ED

- Pneumonia
- Urinary Tract Infection
- COPD & Lower Respiratory Infection

23
patients out of every 100 attending ED were admitted

1,424 Patients admitted to Critical Care from ED

3,524 PET Times >24

61,540
Daycase Activity

39,395 Daycase procedures

22,145 Dialysis

302,005
Outpatient Department Attendances

5,776
Reeves Day Surgery Centre Activity

23,521 Procedures since the Centre opened

21,416
Inpatient Admissions

9.8 days
Average Length of Stay

1,175 Patients treated every 24 hours on average

Average age of admission

60 Male | **61** Female

Most common diagnosis needing admission

- Pneumonia
- General Collapse
- COPD & Lower Respiratory Infection

1,714,331
Pathology Workload

579,313 Haematology

892,173 Clinical Chemistry

187,576 Microbiology

30,932 Cellular Pathology

24,337 Blood Transfusion

193,342
Diagnostic images taken

52,219 Radiology Unscheduled Care (ED)

50,292 Radiology Inpatient Activity

90,831 Radiology Outpatient Activity

Access

The pressures experienced across the Hospital in 2025 continued a pattern first highlighted in last year's report, with the organisation once again operating at the highest level of activity since the Hospital opened.

Demand rose across almost every service, and the year was defined by sustained pressure on beds, increased complexity of patient need, and the ongoing challenge of balancing urgent and scheduled care. Despite these pressures, teams across the Hospital worked collaboratively to maintain patient flow, improve experience times, and protect access wherever possible.

Scheduled Care

Outpatient activity continued to grow, with 302,005 appointments delivered in 2025, an increase of 5% on 2024. This reflects the commitment of teams to expand access to scheduled care despite the operational pressures experienced throughout the year.

The net result was a reduction in the Outpatient Department (OPD) waiting list from 31,311 on January 1st to 24,362 on December 31st. Significantly the number of patients waiting longer than a year to be seen reduced from 4,637 to 3,266, a 29% reduction in that patient group. The Hospital also met the HSE's end of year target of having 93% of the OPD waiting list under 15 months.

In endoscopy there was also significant challenges, with the number of patients on that waiting list increasing from 995 on January 1st to 1,849 by December 31st. This is the result of unscheduled activity resulting in escalation bed pressures and the discontinuation of NTPF funding for 3rd party insourcing initiatives

The most significant challenge remained hospital occupancy, which averaged 115% across 2025, this is the equivalent of 47 beds. This level of sustained pressure had the greatest impact on scheduled activity, with elective care frequently disrupted to accommodate rising unscheduled demand. The Hospital continues to work closely with the Dublin Midlands Region and the HSE to progress the funding and development of additional beds, recognising that increased capacity is essential to relieving both current and forecasted pressure on the system.

Urgent & Emergency Care

Demand for Urgent & Emergency Care continued to rise at a significant pace in 2025. Since 2023, attendances to the ED have increased by 14%, representing one of the most sustained periods of growth the Hospital has experienced. The increase has been even more pronounced among older people, with attendances from those aged over 75 rising by 29% over the same period.

Within the past year, ED attendances increased by a further 6%, while presentations from patients aged over 75 rose by 11%. These trends continue to place considerable pressure on the Hospital's capacity, patient flow, and the ability of teams to respond to increasingly complex clinical needs.

Despite these challenges, the Hospital achieved meaningful improvements in Patient Experience Times. In 2025, there was a 30% reduction in the number of patients waiting over 24 hours in the ED, a significant achievement given the scale of demand. This progress was supported by a 33% reduction in patients on trolleys, reflecting strengthened patient flow processes and the sustained multidisciplinary effort across the Hospital to improve access and reduce delays.

Pharmacy Supporting Patients

The Pharmacy Department continues to play a central role in ensuring patients receive safe, effective, and timely access to the medicines they need. In 2025, demand for complex and high cost therapies continued to grow, reflected in an overall medicines expenditure of €43.4m, a 15% increase on 2024. This rise is driven largely by innovative treatments that offer significant benefits for patients with cancer, neurological conditions, and rare diseases.

A substantial portion of this activity relates to medicines reimbursed through the HSE Oncology and Neurology Drug Management Schemes, where funding increased to €17.3m in 2025. These therapies, include treatments such as Onpattro/ Amvuttra, Spinraza, and Ondexxya which support some of our most vulnerable patients and enable access to life changing care that would otherwise be unaffordable. Total HSE reimbursements are €23.3m for the year, representing 54% of all funding for medicines in 2025 and 92% of the increase in expenditure, reflecting both increased clinical need and the Hospital's commitment to providing advanced therapies.

Throughout this period of rising demand, the Pharmacy team has remained focused on stewardship and value. By actively pursuing biosimilar adoption and engaging in price negotiations, the team achieved savings of €560,000 in 2025. These efforts ensure that resources are used responsibly while maintaining the highest standard of patient care.

A major milestone for the department this year was the opening of the new aseptic unit, a development that significantly enhances our capacity to prepare sterile medicines including chemotherapy and other high risk preparations in a safe, controlled environment. This investment strengthens the Hospital's ability to deliver personalised treatments, reduce waiting times, and support expanding clinical services.

Across all areas, the Pharmacy Department continues to work closely with clinical teams to optimise medicines use, support patient safety, and ensure equitable access to essential therapies. The combination of clinical expertise, financial stewardship, research and service innovation underscores the department's vital contribution to patient care and to the wider hospital mission.

Laboratory Services

Laboratory Medicine recorded an overall workload increase of 0.53% in 2025, contributing to a total rise of 11.5% since 2023. This figure does not include outsourced GP activity from Clinical Chemistry, which would have added a further 11.5% to GP related work. Activity shifts in Cellular Pathology and Haematology reflected external service arrangements and capacity constraints, with some outsourcing continuing into 2026.

In 2025 the laboratory completed its second ISO 15189:2022 Quality Management System (QMS) inspection. A QMS inspection is an external evaluation of how effectively the laboratory's systems ensure accurate, reliable and safe diagnostic results, a core requirement for high quality patient care. Achieving a successful inspection outcome in the context of ongoing capacity and staffing challenges is a testament to the dedication, professionalism and resilience of our staff, who continue to uphold the highest standards of quality.

A key highlight of 2025 was the exceptional level of staff engagement in quality and improvement activity. A total of 1,108 non conformances were raised, with all but 21 closed and corrective actions underway. Staff submitted 71 improvement suggestions, 47 of which led to positive change, and the continual improvement programme documented 117 improvements across the service.

These achievements reflect the commitment, professionalism, and resilience of staff who continue to maintain high quality standards in challenging circumstances. Their willingness to participate in audits, raise issues, propose solutions, and drive improvements demonstrates a strong culture of accountability and patient centred care.

This work directly supports the organisation's strategy to accelerate improvements in healthcare delivery. Behind the scenes, teams are continually examining how processes can be made smarter, faster, and more efficient, ensuring that resources are used effectively and that patients benefit from safe, timely, and high quality diagnostic services.

Patient feedback from the 2025 Phlebotomy Unit user survey was positive, further reinforcing the impact of staff dedication on the patient experience.

Radiology Service

The Radiology Service delivered significant, service improvements in 2025, expanding diagnostic capacity in the context of rising demand and the withdrawal of NTPF funding for imaging. Through targeted investment, extended operating hours and redesigned pathways, the service increased access to diagnostic imaging and supported hospital wide flow.

CT capacity grew by 328 additional scans per month through the operation of a third CT scanner and the introduction of insourced evening and weekend sessions. These measures increased throughput and improved turnaround times across a number of services.

MRI capacity saw the largest increase, with an additional 430 appointments available per month, through a combination of insourcing, outsourcing and the introduction of AI assisted reconstruction technology. This enabled faster image acquisition and increased monthly imaging capacity. These developments reduced waiting times for complex imaging and improved access across a range of clinical specialities.

Ultrasound capacity increased by 64 appointments per month through the introduction of additional evening sessions, improving responsiveness for both GP and hospital referrals.

A redesigned DXA referral pathway now enables the Fracture Liaison Service to refer patients directly to Primary Care Community Radiology, facilitating access for approximately 40 additional patients per month and supporting timelier osteoporosis screening and service utilisation patterns.

Overall activity rose to 193,342 examinations, representing an increase of 3,450 compared with 2024. Outpatient and inpatient imaging activity both increased, while ED imaging reduced slightly, reflecting evolving clinical pathways and patients are often admitted to wards before imaging requests being completed in the ED.

These initiatives highlight the central role of radiology, supporting timely diagnosis facilitating patient access to care and supporting clinical services across the Hospital.

> **“Through expanded capacity, extended hours and redesigned pathways, the department improved access to diagnostic imaging and supported timely patient management across the Hospital.”**

	2024	2025	Variations
Radiology Unscheduled Care (ED)	53,147	52,219	-928
Radiology Inpatient Activity	48,780	50,292	+ 1,512
Radiology Outpatient Activity	87,965	90,831	+ 2,866
Total	**189,892**	**193,342**	**+3,450**

5 Integrated Care

Integrated care remained a cornerstone of the Hospital's mission, reflecting both national health policy priorities and the rapidly evolving needs of our growing, ageing community.

The Hospital's new Strategic Plan 2025–2029 outlines a clear commitment to delivering *smarter, more connected and patient centred models of care,* enabled by stronger partnerships across the health system and a renewed focus on delivering care closer to home. This vision is set against the backdrop of significant demographic change, with the TUH catchment area projected to reach one million people by 2030, intensifying the need for coordinated, sustainable and community based care pathways.

In 2025, the Hospital advanced its integrated care programmes across chronic disease, older persons' services and community based supports, aligning with the National Sláintecare agenda. Integrated models such as the Chronic Disease Management Hubs and the Integrated Care Programme for Older Persons (ICPOP) continued to play a vital role in reducing hospital attendances, supporting self management and delivering multidisciplinary care in community settings.

These programmes have demonstrated measurable benefits for patients across Tallaght and the Dublin South West catchment, including improved continuity of care, reduced exacerbations of chronic conditions, and more streamlined patient pathways across primary, community and acute services.

The year also saw continued recognition of TUH's leadership in integrated, award winning community partnerships, from innovative chronic disease prevention initiatives to collaborative dementia education with local Gardaí. These achievements highlight not only the dedication of our teams but also TUH's evolving role as a hospital without walls: one that leverages innovation, partnerships and community-based expertise to ensure people receive *the right care, in the right place, at the right time.*

As we look ahead, integrated care remains central to our future direction. With reinforced investment in community collaboration, digital innovation and multidisciplinary practice, TUH enters 2026 and beyond with a strong, patient focused framework that will continue to enhance outcomes, improve access and strengthen the health and wellbeing of the communities we serve.

Supporting Patients with Chronic Respiratory Disease through Integration & Innovation

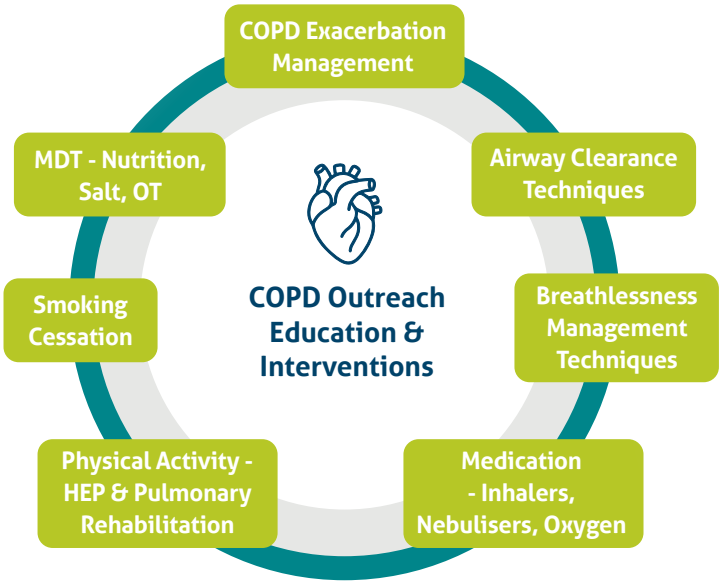
Aims

- Facilitate early discharge
- Reduce hospital admissions
- Reduce LOS
- Promote independent living & enhancing quality of life
- Integration with the respiratory community hub & services

The COPD Outreach team (COPDOR) identifies patients in the ED who are suitable for admission avoidance and admitted patients suitable for early supported discharge. Patients are followed for two weeks as per national guidelines and are provided with education regarding inhaler technique, self-management of symptoms and when to seek medical care.

Furthermore, patients being discharged out of hours can be referred electronically to the COPD Outreach team who, in collaboration with the Respiratory Integrated Care team, contact the patient on the next working day, confirm that they have appropriate treatment and arrange in-person review if required.

A pathway to refer to smoking cessation advisors is in place, to ensure patient care and flow is continuous. Referrals take place to Pulmonary Rehab teams in Tallaght Cross and Boot Road. Patients are also referred to community exercise classes.



An out of hours service is available for patients who present to ED and discharged home from ED outside of normal working hours. Patients are contacted within 24 hours and thereafter organises a face-face outpatient appointment in the respiratory hub, aimed at reducing the risk of readmission, and promoting self-management by providing patients with skills and confidence.

Finally, COPDOR collaborates with the community intervention teams to ensure care is continued over the weekend. If a patient presents and is suitable for discharge from the Hospital on a Friday, with the patient consent, a referral is made to the Community Intervention Team who will take over their care and ensure that a patient is managed well in their own home over the weekend, and handback to COPDOR on the Monday. This ensures a patient is well supported within the community.

Integrated Care Programme for Chronic Disease

Tallaght is the top performing Clinical Specialist Team in the region and nationally, powered by a team located in a permanent hub, close to an acute hospital, with strong clinical governance and multidisciplinary meetings to deliver patient care.

In September, the Hospital hosted a visit by Dr Richard Lewanczuk who spearheaded the introduction of a province wide integrated chronic care model in Alberta, Canada.

The purpose of his visit was to learn about our integrated care practices, observe service delivery and engage wit staff from the Community Healthcare Network and Community Specialist Teams base in the community hub and the Hospital.

Pictured left to right during the recent visit were Sinead Feehan, Marie Egan, Dr Paul McElwaine, Áine Lynch, Dr Richard Lewanczuk, Orlagh Claffey, Ciara Parthiban, Olga Hill, Alanah Quinsey, Dr Natalie Cole and Gillian O'Loughlin

Pictured from left to right at the official launch of the education resource were Lisa Dunne, CNMIII ICU; Emma Forde & Mark Vergara, CNMII's ICU; Niamh Gavin, CEO of the Adelaide Health Foundation; Dr Melanie Ryberg, Clinical Psychologist, Critical Care; Dr Yvelynne Kelly, ICU Consultant. Absent from picture Joanne Coffey, Head of Communications

Virtual ICU Tour to Support Patient Recovery Launches

The Hospital launched a new Virtual ICU Tour to help survivors of critical illness and their families better understand and process their experience in intensive care. Funded by the Adelaide Health Foundation's New Initiatives Scheme, the project reflects the ongoing commitment to innovation, compassion, and patient-centred care.

Each year, hundreds of patients are admitted to the Critical Care Service. Many experience fragmented memories or distressing hallucinations due to ICU delirium. The Virtual ICU Tour, available on the Hospital's YouTube channel offers a guided walkthrough of the unit, explaining the sights, sounds, and equipment patients may have encountered.

The resource aims to support psychological recovery and reduce anxiety for families, especially those unable to be present during a loved one's ICU stay. The patient voice played a central role in shaping the content, with ICU survivors providing valuable feedback throughout development. This initiative marks another step forward in delivering empathetic, innovative care.

Hospital Launches First Staff Guide on AHDs

As part of our commitment to integrated, person centred care, the Hospital launched its first dedicated staff guide to Advance Healthcare Directives (AHDs). This initiative was informed by new research led by Professor Brendan Kelly, Consultant Psychiatrist, which identified a significant gap in awareness and understanding of AHDs among both patients and staff.

The study, involving 120 inpatients and 102 staff members, found that none of the patients surveyed had completed an AHD, and only 11.7% were aware of the option to do so. Despite this, the research highlighted strong willingness to engage in advance care planning: two thirds of patients indicated they would consider making an AHD with professional guidance, while 61.7% of patients and 84.3% of staff expressed openness to discussions about future care preferences.

Pictured from left to right Holly Canavan, Assisted Decision Making Lead and Professor Brendan Kelly, Consultant Psychiatrist

In response to these findings, Holly Canavan, Senior Social Worker and the Hospital's Decision Making Act Lead, developed a comprehensive staff guide to support meaningful conversations about future care. The resource aligns with the Assisted Decision Making (Capacity) Act 2015, which came into effect in April 2023, and reinforces the Hospital's commitment to promoting self determination and shared decision making.

The guide provides practical tools to help staff explain AHDs, explore patient values, and document care preferences in a clear and legally compliant manner. It also supports staff in meeting their ethical and statutory responsibilities under the new legislation, ensuring that care decisions reflect what matters most too each individual.

New Indirect Calorimetry Machine Enhances Critical Care Nutrition

The Hospital introduced an advanced indirect calorimetry machine, making it one of the few centres in Ireland with this capability. The equipment was secured through funding obtained by senior ICU dietitians via the SPARK Innovation Programme and represents a significant enhancement in the nutritional care of critically ill patients.

Indirect calorimetry is the gold standard for accurately measuring a patient's energy expenditure by analysing oxygen consumption and carbon dioxide production. This enables dietitians to tailor nutrition plans with far greater precision, ensuring patients receive the optimal amount of calories and nutrients during critical illness.

Critically ill patients experience rapid and unpredictable changes in metabolic demand. Underfeeding or overfeeding can delay recovery and increase complications. The new technology enables the ICU team to respond to these changes in real time, supporting safer and more effective care.

With this capability, the Hospital can:

- Personalise nutritional care and reduce risks associated with inaccurate feeding
- Adjust feeding plans promptly as a patient's condition evolves
- Support faster, safer recovery by optimising energy intake during critical care

This investment strengthens our leadership in patient centred ICU nutrition and reflects our commitment to applying the best available science and technology to improve outcomes.

Pictured from left to right Shannon Brothers, Senior ICU Dietitian; Fionnuala Staunton, Senior ICU Dietitian; Stephen Bligh, Clinical Specialist Clinical Engineer, ICU; Aine Kelly, Clinical Specialist ICU Dietitian and Kate Muldowney, Senior ICU Dietitian

6 Enhanced Infrastructure & Support Services

623,900
Patient meals

16,999
Regular maintenance call-outs

10,823
Medical Devices managed by Clinical Engineering

1,422,022
Items of bed linen / changed / cleaned

291,517 m3
Oxygen used

207,720
Number of jobs completed by porters

350,000 Km
Distance covered by porters

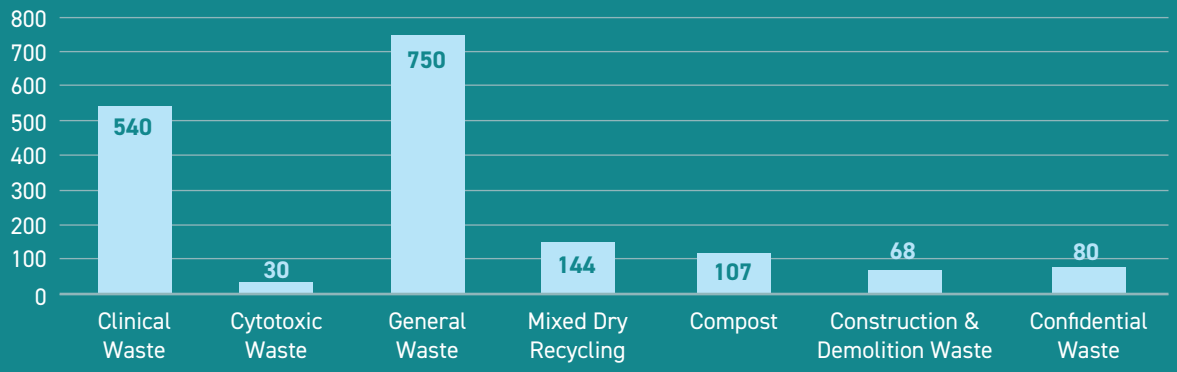
23,545
Discharges/bed spaces cleaned

ENERGY USED

29.76 GWh
Gas

13.07 GWh
Electricity

Types of Waste 2025 (tonnes)



New Ward Block Development

Detailed feasibility studies continued this year for our New Ward Block, a project central to resolving the Hospital's current capacity challenges. A significant milestone was reached with the appointment of a Multi-disciplinary Design Team for the development. Once complete, the project will deliver 192 beds across two dedicated blocks.

Infusion Pump Replacement Programme

TUH currently manage an inventory of 718 infusion pumps, which are critical to the delivery of fluids, medications, and nutrients across the Hospital. Following the delivery of 500 new pumps in December 2025, the Clinical Engineering department is currently commissioning the first two phases of this vital rollout.

This represents a massive, hospital-wide initiative with a direct impact on every clinical service. To ensure a seamless transition and maintain the highest standards of patient safety, the project is being managed by a multi-disciplinary team, including:

- **Pharmacists** to manage drug library integration.
- **Nurse Trainers** to lead clinical education.
- **Anaesthetists and Consultants** to oversee clinical application and protocols.

Theatre Pendants

In 2025, the phased replacement of pendants across eight operating theatres started. The original units, installed in 1998, served the Hospital well for over 25 years. However, as these units became obsolete, sourcing spare parts became increasingly difficult, posing a potential operational risk. The new installations ensure a modern, reliable surgical environment.

Spinal Navigation System

A state-of-the-art Spinal Navigation System was purchased in 2025. This technology allows for the highly accurate placement of spinal implants, significantly enhancing patient safety and reducing surgical risk.

Robotic Navigation platforms are transforming spinal surgery by:

- **Enhancing Patient Care:** Improving surgical accuracy, reducing radiation exposure, and facilitating minimally invasive techniques.
- **Improving the Surgeon Experience:** Reducing the physical strain and cognitive load associated with complex spinal procedures while eliminating radiation in the operating theatre.
- **Driving Hospital Efficiencies:** Reducing operative times and lowering the rate of complications or revisions. Furthermore, the increase in minimally invasive surgeries leads to shorter lengths of stay and improved patient outcomes.

New Aseptic Unit

The Hospital officially opened its new €8.8 million Pharmacy Aseptic Unit, marking a major advancement in medication safety and high risk medicine preparation. Funded by the HSE, the state-of-the-art facility is four times larger than the previous unit and has been built to full Good Manufacturing Practice standards. It will support the safe production of sterile, ready to administer medications including cancer therapies, clinical trial treatments, and other complex injectables.

Located beside the main pharmacy, the 200m² unit incorporates advanced cleanroom technology, four isolators, and an Environmental Monitoring System with CCTV to ensure real time oversight of sterility and quality. These features will enhance efficiency, improve turnaround times, and strengthen support for both inpatient and outpatient services.

The project was delivered through the collaboration and expertise of John Kelly, Deirdre Mooney, Niamh Cullen, John O'Byrne, Tim Delaney, Seamus Foran, Brendan Redington, Shane Russell, Sean Humphreys, and the Aseptic Unit team. Their work has resulted in a facility that reflects the Hospital's commitment to excellence, innovation, and the highest standards of patient care.

This new unit represents a significant investment in the future of treatment delivery and medication safety.

Members of the team from left to right are Yvonne Keogh, Senior Pharmaceutical Technician; Louise Byrne, Aseptic Unit Manager; Deirdre Mooney, Senior Pharmaceutical Technician-Team Leader; Iarlaith Doherty, Senior Pharmacist; Katie Brophy, Senior Pharmaceutical Technician; Aisling McGowan, Senior Pharmacist; Nicola Ward, Pharmaceutical Technician. Pharmacy Technicians absent from the image are Laura Ryan, Senior Pharmaceutical Technician; Niamh Cullen, Senior Pharmaceutical Technician and Hannah Berman, Pharmaceutical Technician

Pictured at the official opening were from left to right 1st row Claire Williamson, Deputy AU Manager; Laura Ryan, Senior Pharmaceutical Technician; 2nd row Cillian O Donovan, Senior Pharmacist; Patrick Ryan, Director of Infrastructure & Capacity; Barbara Keogh Dunne, CEO; Séamus Foran; Head of Project Management. Back Row Louise Byrne, Aseptic Unit Manager; Maeve Harty, Lead Pharmacist Cancer Care and John O Byrne, Pharmacy Executive Manager

New Equipment Installed in Cellular Pathology Laboratory

The Cellular Pathology Laboratory introduced a cutting edge Axlab AS 410M, significantly enhancing the Hospital's capacity to process patient tissue samples. This investment will accelerate workflows and support the substantial growth in demand for pathology services, which has increased by 25% in recent years.

The Axlab AS 410M automates one of the most time consuming and repetitive stages of sample preparation, enabling the Laboratory to manage higher volumes with greater efficiency and consistency. This upgrade comes at a critical time, as the Hospital continues to expand services across dermatology, gynaecology, surgery, and endoscopy, areas that directly drive increased demand for cellular pathology testing. The complexity of testing is also rising, placing additional pressure on laboratory capacity.

The Laboratory currently receives approximately 65,000 patient samples each year. A single sample may require up to 20 blocks, with each block producing between one and 20 slides. Prior to the installation of the new equipment, the Laboratory faced a daily shortfall of around 160 blocks. With the Axlab AS 410M, capacity has increased to 200–300 blocks per day, providing essential future proofing as clinical activity continues to grow.

The Hospital is the first site in Ireland to introduce this advanced technology. The purchase was funded by Bowel Screen, the national screening programme that originated in the Hospital.

Pictured from left to right with the new machine are Laura-Anne Williamson, Senior Medical Scientist; Christopher Owens, Medical Laboratory Aide; Andrea Byrne, Medical Scientist; Caoimhe Gibbons (seated), Medical Scientist; Dannie Loayon, Medical Laboratory Aide; and Sarah Delaney, Chief Medical Scientist

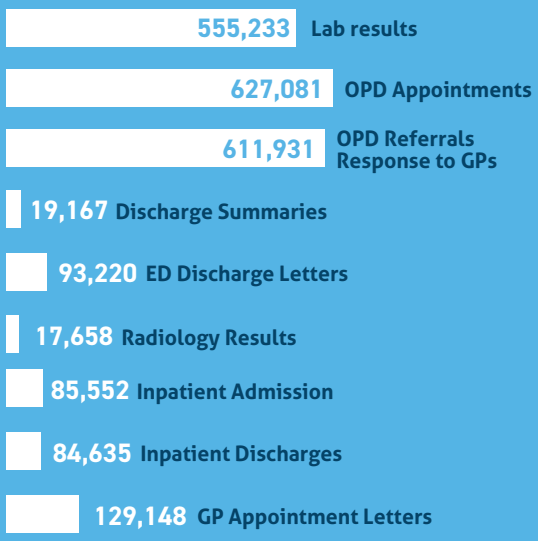
7 Operational Effectivness

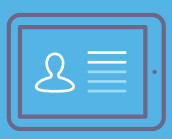
Building a Smarter Hospital TUH is transforming how care is delivered - digitising records, streamlining pathways, strengthening safety, and improving patient flow.

Organisational Effectiveness is about making every system work better, so every patient's journey is safer, faster and more coordinated.

2,223,625
Electronic Messages send to Healthlink to GPs

87,075
OPD Letters sent to GP via Healthlink





81,148
e-Referrals received from GPs via Healthlink

75,146
Patients checked in for OPD via Check-in Kiosks

34,890
ICT Helpdesk Calls received in 2025

302,005
OPD Attendances

1,298
Virtual OPD visits

45,599
OPD Telephone Appointments

501,963
Medical Records Physical Chart Activity

5,215
Scanning Bureau Activity (Live Sept '25)

EPR Electronic Data Capture since Go-live **

132,983
Doctor Note

557,372
Nursing Progress Note

15,641
Nursing Specialist Note

14,633
Pharmacy Note

4,282,068
Nursing Shift Handovers

2,562
Staff Trained on EPR 2025

Nursing Risk Assessments EPR Since Go-live

17,198
Bed Rail Use

17,489
Mobility Moving & Handling

Data Protection Office

3,750
Requests for information received under FOI / GDPR / GPs or other Hospitals.

8,437
Release of Information inbox received emails

10,638
Telephone calls received and made

DPO inbox received
1,023
emails

OPD Activity

1,298
Telemedicine Virtual

45,599
Telephone Appointments

Organisational Effectiveness is a core pillar of our strategy, focused on strengthening the systems, processes and technologies that enable TUH to deliver high quality, sustainable care.

In 2025, the Hospital made significant progress in improving service efficiency, enhancing service effectiveness, embedding outcome measurement, strengthening financial performance and accelerating digital adoption. These improvements are not ambitions, they are visible every day in how patients move through our services, how staff access information, and how care is delivered across the organisation.

Our commitment to delivering safe quality care continues, by building on existing governance structures, strengthening our clinical and corporate governance with the appointment of a Clinical Director for the ED providing further assurances of the delivery of safe effective care in the department. Despite increased demand for services, a renewed focus on organisational effectiveness, with enhancements of our processes and policies on our patient's journey through the Hospital, have resulted in reduced wait times for patients in the ED with improved access for patients overall.

Working collaboratively with our colleagues in the community, expansion of our offsite bed capacity and expansion of services in the community Chronic Disease Hubs, in line with Sláintecare principles, further supports our mission and ensures our patients get the right care, at the right time, in the right place.

Work has continued on existing business intelligence and data quality assurances processes, facilitates better data based decisions enabling safe care with a focus on productivity and a value for money approach.

As we continue to transition to Public Only Consultant Contracts, the presence of consultants at weekends enhances the patient's journey, ensuring effective care across the full week.

This year saw major advances in digital transformation, including the rollout of Synergy 2.0, the next phase of our electronic patient record, and the introduction of the HSE's Hospital Medicines Management System, within the Pharmacy. These developments have standardised documentation, reduced duplication, improved data accuracy and laid the foundation for a more integrated digital ecosystem across the Hospital.

Service redesign and pathway optimisation also played a central role. From the expansion of innovative daycase surgery in the Reeves Day Surgery Centre, to the impact of the Emergency Rapid Assessment & Treatment (ERAT) pathway, to the transformation of hip fracture care, teams across the Hospital have delivered measurable improvements in patient flow, safety and experience.

Initiatives such as the Positive Patient Identification campaign and the opening of the Scanning Bureau further strengthened our safety culture and operational efficiency.

These achievements reflect the dedication and collaboration of staff across all disciplines. Together, they demonstrate how TUH is building a more agile, data driven and patient centred organisation, one that is better equipped to meet rising demand, support staff in their work and deliver consistently excellent care.

Hospital Medicines Management System Go-Live

The Pharmacy Department advanced its digital transformation in November when it successfully implemented the Hospital Medicines Management System (HMMS). This is a standardised pharmacy dispensing and stock control system, which was implemented as part of a National HSE Project.

As a modern medicines management platform HMMS will significantly enhance the Pharmacy Department's ability to manage:

- Medication inventories
- Ward based medication supply
- Patient specific dispensing
- Procurement processes
- Reporting functionality

As part of this medicines management initiative, HMMS integrates with several other HSE systems including Finance and the Hospital's Patient Administration System. This enables single data entry and seamless information flow across Pharmacy, Finance, and wider hospital systems. This interoperability will reduce duplication, improve data accuracy and support more efficient workflows.

The introduction of HMMS marks a significant milestone in the digital transformation of the Hospital's medication management processes. It paves the way for future integration of the Pharmacy Dispensing Robot and Automated Dispensing Cabinets which will begin rolling out across the Hospital next year. These advancements will strengthen medication safety, streamline processes and support more effective use of resources.

Team Publishes Study on Nurse-Led Emergency Care Model

The ED nursing team published a study evaluating the design and impact of a new Advanced Nurse Practitioner (ANP) led service, the ERAT pathway. Developed in response to service needs within the ED, ERAT focuses on low acuity, non injury presentations such as abdominal pain and chest pain, that traditionally account for high patient contact hours and contribute to congestion in the ED.

More than 2,300 patients have been treated through the ERAT pathway with no major adverse events since its introduction in 2022. Nearly 75% of patients were safely discharged, aligning with national ED performance metrics. Patients also experienced significantly shorter wait times and reported high levels of satisfaction, with 94% stating that the care they received met their expectations.

The study demonstrates that ANP led services like ERAT are safe, efficient, and effective in improving patient experience while reducing pressure on the ED. By streamlining care for appropriate patient groups, the model enhances service flow, optimises clinical resources, and supports timely access to care.

The paper was published in the International Emergency Nursing Journal, authored by Advanced Nurse Practitioners Orla O'Keeffe and Doireann Deay; Mary Byrne, Assistant Director of Nursing; Barry McBrien, TUH ANP and Assistant Professor in General Nursing at the School of Nursing & Midwifery, Trinity College Dublin; and Dr Aileen McCabe, Consultant in Emergency Medicine.

Pictured from left to right members of the team Dr Aileen McCabe, Consultant in Emergency Medicine; Orla O'Keeffe and Doireann Deay, Advanced Nurse Practitioners and Mary Byrne, Assistant Director of Nursing

Strengthening Patient Safety Through Positive Identification

As part of our ongoing Positive Patient Identification Campaign, the Hospital launched *Expect to be Checked,* a short animated video now available on the Hospital intranet, YouTube channel with regular postings on social media. This engaging educational resource reinforces one of the most fundamental elements of safe, high quality care: accurate patient identification.

Using everyday clinical scenarios, the animation highlights how staff verify key patient details, such as name, date of birth, and MRN and encourages patients to expect and welcome these checks as a routine part of their care. The message is simple but powerful: repeated checks are not an inconvenience, but an essential safeguard that protects patients at every stage of their journey.

The initiative aims to strengthen our safety culture by reframing identity checks as a shared responsibility between staff and patients. By normalising and promoting these behaviours, the campaign supports safer workflows, reduces the risk of error, and enhances patient confidence in the care they receive.

All staff are encouraged to view and share the video within their teams and use it as a prompt for discussion during handovers and huddles. Produced with the support of the Meath Foundation, *Expect to be Checked* is an important step in reinforcing consistent, reliable safety practices across the Hospital.

Scanning Bureau Opens to Support Digital Transformation

The Hospital's new Scanning Bureau officially opened in September marking another important milestone in TUH's digital transformation journey. Upon opening all external patient related correspondence, such as letters from other hospitals can be uploaded directly to Synergy, ensuring timely and accurate integration of information into the patient record.

Outpatient Departments and Wards are responsible for submitting documents to Medical Records using the new labelling functionality within Synergy, supported by dedicated label printers installed in each area. Scanning bags are provided to all locations that receive external correspondence, enabling a streamlined and standardised process for document submission.

This development strengthens the Hospital's move toward a more efficient, paper light environment. By digitising external correspondence, the Hospital will improve information accessibility, reduce delays in clinical decision making, and support safer, more coordinated care. The Scanning Bureau also enhances organisational efficiency by reducing manual handling, improving traceability, and ensuring that key patient information is available when and where it is needed.

Reeves Day Surgery Centre Marks Five Years of Transforming Surgical Care

In December, the Reeves Day Surgery Centre (RDSC) celebrated a major milestone, five years since opening as TUH's first dedicated location for day surgery. Since its launch, the Centre has established itself as a pioneering model of care and has become the blueprint for the HSE's Surgical Hubs now operating nationwide.

Over the past five years, more than 50 consultants across 10 specialties have used the Centre's theatres to deliver high quality daycase surgery. During this time, over 20,000 patients have been treated, contributing significantly to reductions in TUH's daycase waiting lists, an ongoing organisational priority.

The RDSC has also led the development of innovative surgical pathways, enabling more patients to receive timely, efficient, and safe care without the need for overnight admission. These include daycase spinal discectomies, Rezum and Urolift procedures for enlarged prostates, and laser surgery for pilonidal sinuses. A new admission avoidance pathway for ureteric stone management now facilitates surgery within seven days of ED presentation, reducing the need for inpatient beds and increasing capacity for patients requiring complex emergency care.

The Hospital's Pain Service is now based in the RDSC, with protected theatre access for inpatients requiring appropriate procedures, further enhancing service flow and efficiency.

In addition, the Centre has expanded its spinal surgery offering to include lumbar microdiscectomies, a procedure to remove part of a slipped disc compressing a nerve. Patients undergoing this surgery at the RDSC can return home the same day, improving patient experience and supporting patient flow. This approach aligns with international guidance from the Association of Anaesthetists, which recommends that 75% of elective surgeries be delivered as day procedures.

Daycase microdiscectomy is a safe, viable, and cost effective option for selected patients, with potential savings of €1,660 per case compared to traditional inpatient surgery. In 2025, 11 day case discectomies were successfully performed at the Centre.

Reaching this five year milestone is a testament to the dedication, expertise, and collaboration of all staff involved in the development and operation of the RDSC. Their commitment has enabled the Centre to become a national exemplar of efficient, patient centred surgical care and a cornerstone of TUH's organisational effectiveness.

Transforming Hip Fracture Care

The Hospital made significant strides in improving the quality, safety, and timeliness of hip fracture care through a series of targeted service enhancements led by a dedicated multidisciplinary team. Hip fractures are one of the most complex and high risk emergency presentations in older adults, and ensuring rapid, coordinated care is essential for improving outcomes and reducing complications.

In 2025, the Hospital's hip fracture team, comprising colleagues from Emergency Medicine, Orthopaedic Surgery, Orthogeriatric, Nursing, Physiotherapy, Occupational Therapy, Dietetics, Anaesthetics and Patient Flow redesigned key elements of the patient pathway from admission through to recovery.

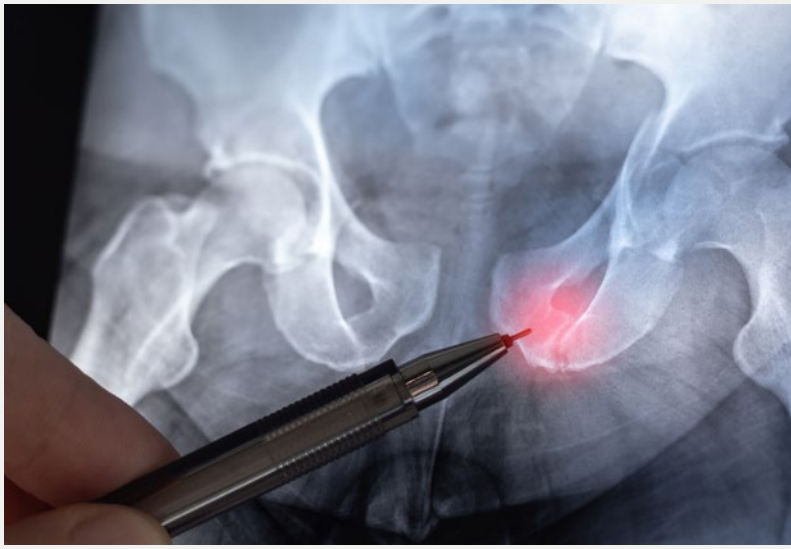
Several important improvements have been introduced, including:

- **The "Hip Bleep" alert system,** which notifies trauma ward staff of incoming patients, enabling earlier preparation and faster transfer.
- **A streamlined admission pathway,** prioritising early assessment, pain management, and timely access to specialist care.
- **A seven day physiotherapy service,** ensuring patients receive early mobilisation and rehabilitation support.
- **The establishment of a dedicated orthogeriatric service,** providing comprehensive assessments focused on falls prevention, bone health, delirium management, and holistic care planning.

These changes have directly addressed one of the most significant challenges faced by hospitals nationwide: achieving the national target of transferring hip fracture patients from the ED to the trauma ward within four hours. The improvements have strengthened patient flow, enhanced safety, and ensured that older adults receive the right care at the right time.

The team continues to use audit data to monitor performance, identify opportunities for further improvement, and ensure that every hip fracture patient receives high quality, timely, and compassionate care.

This work was recognised nationally when the team received the inaugural Most Improved Performance Award in the Irish Hip Fracture Standards, presented by the National Office of Clinical Audit, an achievement that reflects the commitment, expertise, and collaboration of the entire multidisciplinary team.



Major Digital Milestone: Synergy 2.0 Transforms Inpatient Documentation

Between February and April, one of the most significant digital transitions in its history with the rollout of Synergy 2.0, the next phase of the Hospital's electronic patient record (EPR) was undertaken. This upgrade represents a major step toward a predominantly digital inpatient record and has had a transformative impact on how clinical information is recorded, accessed, and shared across the Hospital.

Synergy 2.0 standardises inpatient documentation for all clinical staff involved in the delivery of inpatient care, replacing many elements of the traditional paper chart with a unified digital workflow. Doctors and nurses now use a single, streamlined admission process, marking a substantial shift in practice and improving consistency across teams. Clinical notes for medical, nursing, and pharmacy staff are now fully documented within Synergy, joining the existing Health & Social Care Professional notes, significantly reducing the need to retrieve historical paper records.

The upgrade also introduced several new digital tools that enhance communication, safety, and decision making:

- **ISBAR handover functionality,** supporting structured, reliable clinical communication
- **Dynamic doctor review tasks,** with updatable and visible diagnostic information
- **Digitised resuscitation and treatment escalation forms,** with corresponding alerts displayed on the inpatient dashboard
- **A consolidated patient dashboard,** giving teams real time access to key clinical information
- **Quality Control Metrics** for mandatory nursing risk assessments are now fully digitised

To support this transition, staff across all disciplines received role specific training in the new system functions. The successful rollout of Synergy 2.0 reflects the culmination of several years of collaborative work, involving hundreds of clinical staff who contributed to system design, testing, feedback workshops, and data validation.

This milestone strengthens TUH's digital infrastructure, enhances the quality and accessibility of clinical information, and supports more efficient, safer, and coordinated care, a clear demonstration of commitment to organisational effectiveness and digital transformation.

2,562

Staff trained on 2.0 during the year

Pictured from left to right in the Synergy Control Room are Ciara Blair, EPR Programme Manager; Dean Molloy, ICT Applications Support Analyst; Dr Jason Carty, Chief Clinical Information officer; Dean Farrelly, EPR Team Intern; Amanda Bates, Nursing Clinical Information Lead ADON and Linda Duggan, EPR Applications Support Analyst

8 Research & Innovation

The Hospital is driving discovery through clinical research, global collaborations and innovative technologies.

From international dementia studies to new diagnostic pathways and survivorship research, our teams are expanding the evidence base that shapes better care for patients today and tomorrow.

Driving Discovery, Improving Care & Shaping the Future

Research & Innovation continued to accelerate in 2025, reflecting the strategic commitment to expanding clinical research, strengthening academic and industry partnerships, and embedding innovation into every aspect of patient care. This year saw a remarkable increase in research activity across the Hospital, with teams publishing high impact studies, leading national collaborations, and advancing new models of care that directly benefit patients.

To highlight this growing momentum, the Communications Department launched a dedicated campaign showcasing newly published research papers across traditional media and social platforms. This initiative generated significant positive attention and reinforced the Hospital's reputation as a centre of excellence for research led healthcare. The volume and diversity of publications featured in the Papers Published section of this Annual Report demonstrate the depth of expertise across our clinical, academic, and multidisciplinary teams.

Throughout the year, TUH researchers delivered impactful studies that are shaping national and international practice, from pioneering global dementia research and advancing gastrointestinal diagnostics, to improving survivorship care for cancer patients and developing innovative, patient centred diagnostic pathways.

These achievements reflect the core objectives of our Research & Innovation pillar: increasing research output, expanding clinical trials, accelerating the adoption of new technologies, and strengthening collaboration with academic and industry partners.

The stories that follow illustrate how TUH is translating research into real world impact. They highlight the dedication of our clinicians, scientists, and allied health professionals, and demonstrate how evidence based innovation is improving outcomes, enhancing patient experience, and informing the future of healthcare delivery in Ireland.

TUH Selected as Irish Site for International Down Syndrome Research

The Institute of Memory & Cognition was selected as the Irish site for a major international study aimed at improving care and outcomes for people with Down syndrome worldwide. Funded by the US National Institutes of Health and sponsored by the Alzheimer's Therapeutic Research Institute at the University of Southern California, this collaboration reflects the Hospitals growing role in global research partnerships.

The Trial Ready Cohort for Down Syndrome (TRC DS) study is being delivered through the National Intellectual Disability Memory Service and led in Ireland by Professor Seán Kennelly and his team. The study will follow adults aged 25 to 55 over almost three years, involving regular assessments including memory testing, blood work, and MRI scans. Its goal is to better understand how and why changes occur in the brain, enabling the development of new treatments and prevention strategies for dementia in people with Down syndrome.

A key objective of the project is to establish a trial ready cohort to support rapid enrolment into future Alzheimer's clinical trials, ensuring equitable access for adults with Down syndrome. TUH is one of only 17 global sites participating, and one of just four in Europe—alongside the University of Cambridge, Sant Pau Medical Research Institute in Spain, and Institut Jérôme Lejeune in Paris. This selection underscores TUH's leadership in specialist memory research and its commitment to advancing international scientific collaboration.

Pictured from left to right members of the study team at the Institute of Memory & Cognition Dr Naomi Davey, Memory Service SpR; Evelyn Reilly, ID Memory Service ANP; Ruth Ennis, Research Manager; Professor Seán Kennelly, Study Principle investigator & Clinical Director of National Intellectual Disability Memory Service; Garret McDermott, Memory Service Neuropsychologist; Jasmine Joseph, Research Nurse and Martina Leigh, ID Memory Service ANP

New Study Demonstrates Benefits of At Home Testing for H. pylori Infection

A new study demonstrated that telemedicine and at home testing offer significant advantages for diagnosing and managing Helicobacter pylori (H. pylori) infection. Published in the Journal of Clinical Medicine, the research highlighted the effectiveness, convenience, and environmental benefits of using an at home Urea Breath Test (UBT) as an alternative to traditional in clinic testing.

Patients in the community were provided with C13 UBT kits and supported through virtual appointments with a GI laboratory technician, who guided them through the testing process remotely. Samples were then returned to the Hospital for analysis via GP practices, postal delivery, or designated drop off points.

The study reviewed 423 virtual appointments and found that test positivity rates were comparable to in person clinics, with exceptionally high attendance and minimal cancellations. The virtual model also reduced travel by nearly 10,000 kilometres, saving an estimated 254 hours of travel time and 1.24 metric tonnes of CO_2 emissions. Patient feedback was overwhelmingly positive, with 92% rating their experience as good or excellent.

Led by the GI Laboratory Team and Gastroenterology Specialist Registrar Dr Conor Costigan, with senior authorship from Professor Deirdre McNamara, the study demonstrates that home based UBT is accurate, patient centred, and environmentally sustainable. The service continues to operate weekly at TUH, supporting earlier diagnosis, reducing reliance on invasive procedures, and aligning with the Hospital's strategic goals of innovation, efficiency, and improved patient experience.

423

Virtual appointments reviewed

The virtual model also reduced travel by nearly

10,000km

saving an estimated 254 hours of travel time and 1.24 metric tonnes of CO_2 emissions.

92%

Rated their experience as good or excellent

Study Highlights High Rates of Obesity and Poor Diet Among Patients with Mild Cognitive Impairment

New research from the Institute of Memory and Cognition identified concerning levels of overweight and obesity among patients attending the Brain Health Clinic with Mild Cognitive Impairment (MCI). Published in the Professional Nutrition and Dietetic Review, the study underscores the importance of diet and lifestyle in supporting brain health and reducing dementia risk.

The analysis, conducted by Senior Dietitian Eimear Mullen, examined anonymised data from 101 patients aged primarily between 70 and 79 years. The findings revealed that 74% were overweight or living with obesity, and most reported low levels of physical activity. Blood tests showed that one in three had insufficient vitamin D levels, while a similar proportion had high cholesterol. Adherence to the Mediterranean diet, a dietary pattern strongly associated with reduced cognitive decline was generally low.

The Brain Health Clinic focuses on early intervention for individuals with MCI, supporting them to address modifiable risk factors such as nutrition, physical activity, smoking, and alcohol consumption. The study highlights the need for tailored dietary and lifestyle plans, particularly for individuals with higher levels of obesity who may be at increased risk of developing dementia.

The findings reinforce the importance of a multidisciplinary approach to brain health, combining medical, nutritional, and behavioural support. They also contribute to the growing evidence base that informs TUH's clinical practice and research priorities, aligning with the Hospital's strategic focus on prevention, personalised care, and improved long term outcomes.

Research Identifies Long Term Health Risks for Testicular Cancer Survivors

Researchers at the Hospital published important new findings on the long term health of Testicular Cancer survivors, highlighting the need for structured follow up care for this young patient group. Testicular Cancer is the most common cancer in men aged 15 to 35, and while treatment success rates are high, this new study shows that survivors face increased risks of significant health complications many years after their initial diagnosis.

The research, published in *Supportive Care in Cancer,* examined men attending TUH's Advanced Nurse Practitioner (ANP) led Testicular Cancer Survivor Clinic. All participants were at least five years post treatment, with an average of ten years since diagnosis. The study found that survivors were substantially more likely to develop conditions such as hypertension, dyslipidaemia, and coronary artery disease, and kidney problems often occurring decades earlier than expected in the general population. One patient, for example, experienced a heart attack at just 45 years of age.

The findings reinforce international evidence from Norway and the United States showing that men treated for Testicular Cancer may experience reduced life expectancy if these risks go unrecognised. In response, TUH established Ireland's first ANP led Testicular Cancer Survivor Clinic in 2022, developed by Consultant Oncologist Dr Raheel Khan (then a Registrar at TUH) and Oncology ANP Patrice Kearney Sheehan. The clinic provides annual screening for cardiovascular, metabolic, and renal complications, enabling early detection and timely intervention.

To date, 78 men have been recruited through the Hospital's Cancer Trials Unit. The study found that 40% had high blood pressure, 55% had abnormal cholesterol levels, and several had evidence of coronary artery disease or kidney dysfunction. Three participants had developed a second malignant neoplasm, underscoring the importance of long term monitoring.

This research provides a practical model for survivorship care and highlights the need for similar specialist clinics nationally. It also marks the establishment of Ireland's first Testicular Cancer database, supporting ongoing research into the long term effects of treatment and informing future improvements in survivorship pathways.

New Study Identifies Simple, Innovative Solution to Improve Capsule Endoscopy Completion Rates

A new study led by the Hospital identified an innovative and patient friendly solution to improve the completion rates of capsule endoscopy, the gold standard diagnostic test for examining the small intestine. Capsule endoscopy involves swallowing a tiny camera that captures images as it travels through the digestive system, enabling clinicians to diagnose a range of gastrointestinal conditions.

For some patients, particularly those with conditions such as diabetes or hypertension the capsule can become delayed in the stomach, causing the device to run out of battery before it reaches the small intestine. This results in incomplete studies, which may require repeat testing or alternative procedures, increasing inconvenience for patients and placing additional demands on hospital resources.

The TUH study explored whether a simple intervention—administering peppermint oil diluted in water at the time the capsule is swallowed could help overcome this challenge. Conducted over six months and involving 135 patients with known risk factors for delayed transit, the research found that peppermint oil significantly improved completion rates. An impressive 98% of participants successfully completed the test using this protocol.

The findings demonstrate that peppermint oil is a safe, effective, and cost neutral solution that enhances the diagnostic value of capsule endoscopy. By reducing incomplete studies, the protocol supports earlier diagnosis, improves patient experience, and optimises the use of clinical resources.

Led by Consultant Gastroenterologist Fintan O'Hara, with longstanding leadership in capsule endoscopy provided by Professor Deirdre McNamara, the study highlights the Hospital's commitment to practical, research driven innovation. The team has recommended further studies to refine the protocol and expand its clinical application.

This work exemplifies TUH's strategic focus on advancing research, improving diagnostic pathways, and adopting simple yet impactful innovations that benefit patients and services alike.

National Report Highlights Major Advances in Bowel Health Diagnostics

A landmark national report, led by Professor Deirdre McNamara, Consultant Gastroenterologist and Chairperson of the Irish Capsule Endoscopy Registry (ICaRe), highlighted significant progress in bowel health diagnostics across Ireland. The national report, showcases how capsule endoscopy is transforming gastrointestinal care and easing pressure on traditional diagnostic pathways.

Capsule endoscopy uses a pill sized camera that patients swallow, enabling clinicians to examine the digestive system without invasive procedures. Ten centres nationwide have now adopted Colon Capsule Endoscopy (CCE), offering patients a quicker, more comfortable alternative to colonoscopy. With more than 25,000 people currently waiting for traditional colonoscopies, this technology is helping to reduce waiting lists and improve access to timely diagnostics.

The 2024 ICaRe Report published in July 2025 brought together anonymised data from thousands of procedures across participating hospitals. This national dataset provides a comprehensive overview of performance, safety, and outcomes, ensuring that Ireland's capsule services meet international standards and continue to evolve.

Key findings from the report include:

- **High performance in small bowel capsule endoscopy,** with strong completion rates, preparation scores, and lesion detection rates.
- **Capsule retention rates within internationally accepted parameters,** with ongoing data collection to support further refinement.
- **CCE demonstrating polyp detection rates comparable to standard colonoscopy,** with early evidence suggesting it may be even more effective in certain cases.
- **Variation in bowel preparation and transit rates across centres,** with early adoption of alternative booster medications already improving outcomes.
- **Registry data actively informing quality improvement initiatives,** supporting consistency and excellence across all participating hospitals.

Professor Deirdre McNamara with members of the TUH team at the launch of the ICaRe Report in the RCPI

The report also highlights the importance of continued investment in clinician training, protocol optimisation, and collaboration between centres. Future developments, including artificial intelligence and enhanced quality assurance frameworks—are expected to further strengthen the reliability and impact of capsule technology.

This national initiative reflects TUH's leadership in research, innovation, and service transformation. By driving the development of ICaRe and contributing to a robust evidence base, TUH is helping shape the future of gastrointestinal diagnostics in Ireland and ensuring patients benefit from modern, accessible, and high quality care.

Understanding Compulsive Sunbed Use in Ireland

A study published led by Professor Anne Marie Tobin, Consultant Dermatologist, raised important questions about whether sunbed use may share characteristics with other compulsive behaviours. Despite widespread awareness of the risks, and Ireland having one of the highest rates of skin cancer globally many people continue to use sunbeds, even after being referred for investigation at our Skin Cancer Clinic.

The anonymous study examined the behaviours of 104 patients and revealed several concerning trends. Two thirds of users were under the age of 22, most were women, and a quarter were below the legal age of 18. The earliest reported age of first use was just 13. Safety practices were also inconsistent, with nearly one third of users reporting that they did not use protective goggles, increasing their risk of developing cataracts later in life.

The research found that patient demographics aligned with previous studies: younger female users living in urban areas. However, it also highlighted significant gaps in regulatory compliance among tanning salons. More than half of premises lacked protective goggles, and almost half failed to provide any information on health risks. These findings point to a broader public health concern and underline the need for stronger enforcement and education.

Participants cited appearance and confidence as key motivations for sunbed use. The study suggests that psychological and behavioural interventions including cognitive behavioural therapy may help address the compulsive patterns observed.

This research contributes valuable evidence to national discussions on skin cancer prevention and reinforces TUH's leadership in advancing dermatological and public health knowledge.

> **"Two thirds of users were under the age of 22, most were women, and a quarter were below the legal age of 18. The earliest reported age of first use was just 13."**

Innovation

Introducing Ultrasound Technology in Speech & Language Therapy

As part of our strategic commitment to strengthening Research & Innovation, the Speech & Language Therapy Department has introduced new ultrasound technology to transform the assessment and management of patients with voice and swallowing disorders. Supported by funding from the HSE Spark Productivity Boost, this investment positions TUH as the first hospital in Ireland to use ultrasound both clinically and in research for these specialist areas, firmly placing the Department at the forefront of national practice and innovation.

Swallowing and voice difficulties can significantly affect a person's health, independence, and quality of life. Traditional assessment tools, while effective, can be invasive, uncomfortable, or costly.

Ultrasound offers a non invasive, patient friendly, and cost effective alternative that can be used flexibly across inpatient and outpatient settings. Its adoption directly supports our strategic objective to embrace technologies that enhance patient experience, improve service efficiency, and deliver high quality, evidence based care.

Two research studies are being undertaken, this work will deepen our understanding of voice and swallowing disorders, strengthen our research output, and contribute to new models of care within and beyond the Hospital. The introduction of ultrasound exemplifies our commitment to accelerating innovation, expanding clinical research, and ensuring patients benefit from the most advanced tools and approaches available.

Pictured from left to right Anna Gillman, Clinical Specialist Speech & Language Therapist – Dysphagia; Éadaoin Flynn, Clinical Innovation Specialist and Fiona Hill, Speech & Language Therapy Manager with the new equipment

Pioneering New Treatment Pathways

In line with our strategic focus on advancing clinical research, adopting new technologies, and expanding innovative treatment options, TUH successfully performed its first EUS guided gallbladder drainage procedure. Led by Dr Neil O'Móráin, Consultant Gastroenterologist, this minimally invasive technique offers an alternative to surgery for patients with gallbladder infections who are not suitable surgical candidates.

Using endoscopic ultrasound, a stent is placed through the stomach or duodenum to enable infected bile to drain internally into the digestive tract. This approach avoids the need for external drains and can be performed under sedation or anaesthesia.

This milestone marks the beginning of a new treatment pathway in the Hospital, spearheaded by Dr O'Móráin and Professor Barbara Ryan. The procedure itself has only been possible since 2021, following innovations such as smaller lumen apposing metal stents and the Hot Axios delivery system, technology already used in the management of pancreatic fluid collections, an area in which Professor Ryan has significant expertise.

EUS guided gallbladder drainage provides long term internal drainage with promising three year outcomes. While complications such as stent blockage or migration can occur, the benefits for appropriately selected patients are substantial. This development reflects the Hospital's commitment to expanding innovative services, strengthening clinical expertise, and enhancing patient outcomes through research led practice.

Pictured from left to right members of the Nursing Team involved in the case Kylie Cadacio, Elizabeth Nyandari, Ciara Heatley and JudyAnne Garcia with Dr Neil O'Móráin, Consultant Gastroenterologist

Ground Breaking Dysphagia Treatment

The Hospital became the first acute hospital in the country to implement Phagenyx, a cutting edge treatment for severe dysphagia in acute stroke and critical care patients. Reflecting our strategic commitment to accelerating innovation, expanding research led practice, and adopting new technologies that improve patient outcomes and service efficiency.

Dysphagia is a serious condition that can lead to pneumonia, malnutrition, and prolonged hospital stays, placing pressure on recovery pathways and bed capacity. Phagenyx directly addresses these challenges. Using targeted electrical stimulation, the system promotes neuroplastic recovery in the brain, enabling the restoration of safe swallowing function—even in patients unable to participate in traditional rehabilitation.

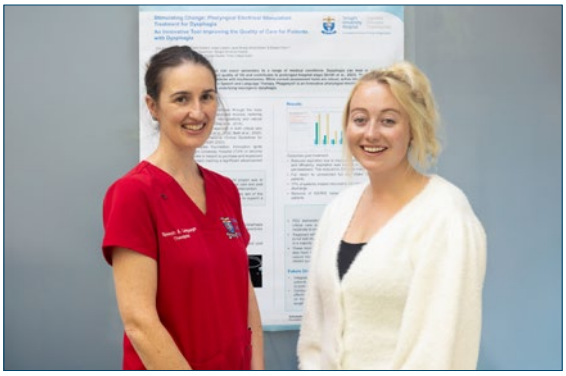
Led by the Speech & Language Therapy Department, the project was supported through TUHF's Ignite for Impact programme, which funds transformative healthcare innovations. Delivered via a dual function catheter, the treatment enables early intervention in intensive care settings, where timing is critical to recovery.

Results from the initial pilot were remarkable: aspiration rates fell from 89% to 33%, and 77% of patients returned to full oral intake by discharge. These outcomes not only enhance patient quality of life but also align with TUH's strategic goals of improving recovery trajectories, reducing length of stay, and optimising bed utilisation.

Aspiration rates fell from

89% to 33%

The project was showcased at the European Society for Swallowing Disorders (ESSD) conference, positioning the Hospital as a national leader in clinical innovation. A research study is now underway to evaluate long term outcomes and financial impact, further strengthening our research output and evidence base. This initiative ongoing commitment to shaping the future of Irish healthcare through strategy driven innovation and measurable impact.



Pictured from left to right Julie Keane and Sarah Rowland Clinical Specialist Speech & Language Therapists who led out on the development of this new initiative

First Renal Denervation Procedure Performed

The first renal denervation (RDN) procedure was completed, marking a significant milestone in the treatment of uncontrolled hypertension and advancing our strategic focus on adopting innovative services and expanding research informed care.

Hypertension affects more than 1.28 billion adults worldwide, yet only one in five achieve adequate control. For patients who continue to struggle despite medication and lifestyle changes, RDN offers a promising alternative. The procedure is now endorsed in major international guidelines, including the 2023 European Society of Hypertension and 2024 European Society of Cardiology recommendations.

Led by Dr Richard Armstrong, Consultant Interventional Cardiologist, and supported by the Cath Lab team, the service was developed through extensive preparation and cross departmental collaboration. Expert guidance was provided by Professor Faisal Sharif from Galway University Hospital. Funding support from the Adelaide Foundation and HSE Spark Innovation, secured through the efforts of Innovate Health was instrumental in enabling this new service.

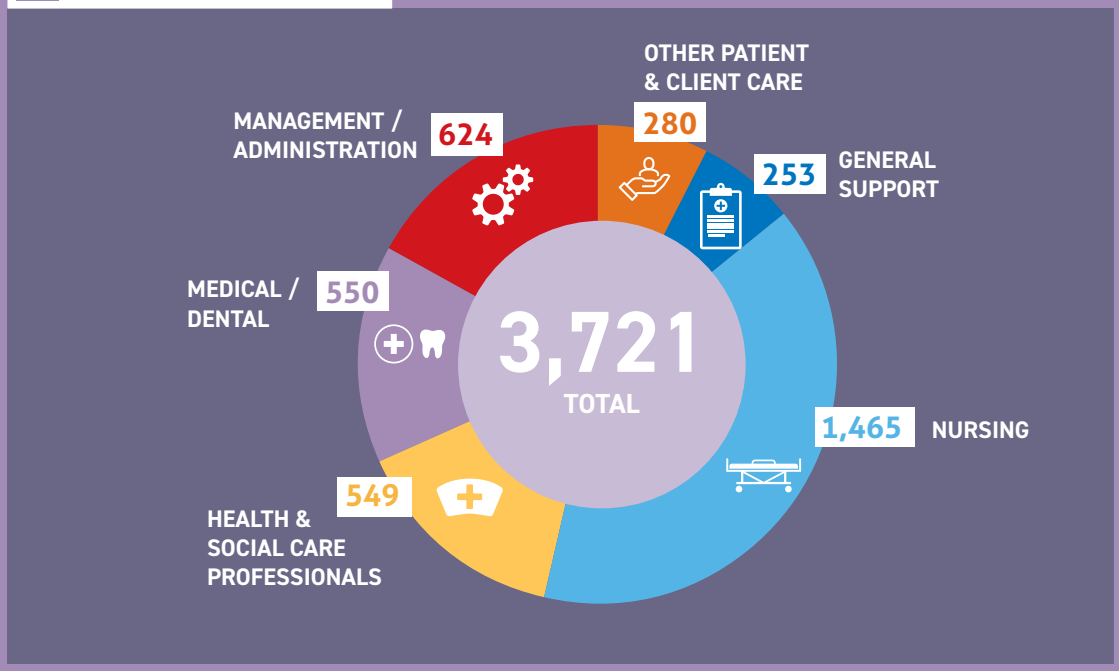
RDN involves inserting a thin catheter into the artery near the kidney and using radiofrequency energy to calm overactive nerves that contribute to high blood pressure. The procedure is minimally invasive, and no implant is left behind.

The introduction of RDN at TUH strengthens our commitment to expanding innovative treatment pathways, enhancing patient outcomes, and contributing to national clinical expertise. It also reflects our broader Research & Innovation objectives: adopting evidence based technologies, collaborating with academic and clinical partners, and improving long term health outcomes for patients.

Pictured from right to left following successful completion of the first patients to receive the treatment members of the clinical team, back row, Clive Sullivan, Clinical Specialist Radiology; Dr Niall McEvoy, SPR Cardiology; Dr Richard Armstrong, Consultant Cardiologist and front row left to right Staff Nurse Hannah Torres; Carmel O Callaghan, CNM2; Aoife Duffy; Chief 1 Cardiac Physiologist; Dr Bryan Loo; Clinical Lead Cardiology TUH; Prof Faisal Sharif, Professor of Translational Cardiovascular Medicine & Innovation in Galway University Hospital, Staff Nurses Elaine Killion & Julianne Sheridan

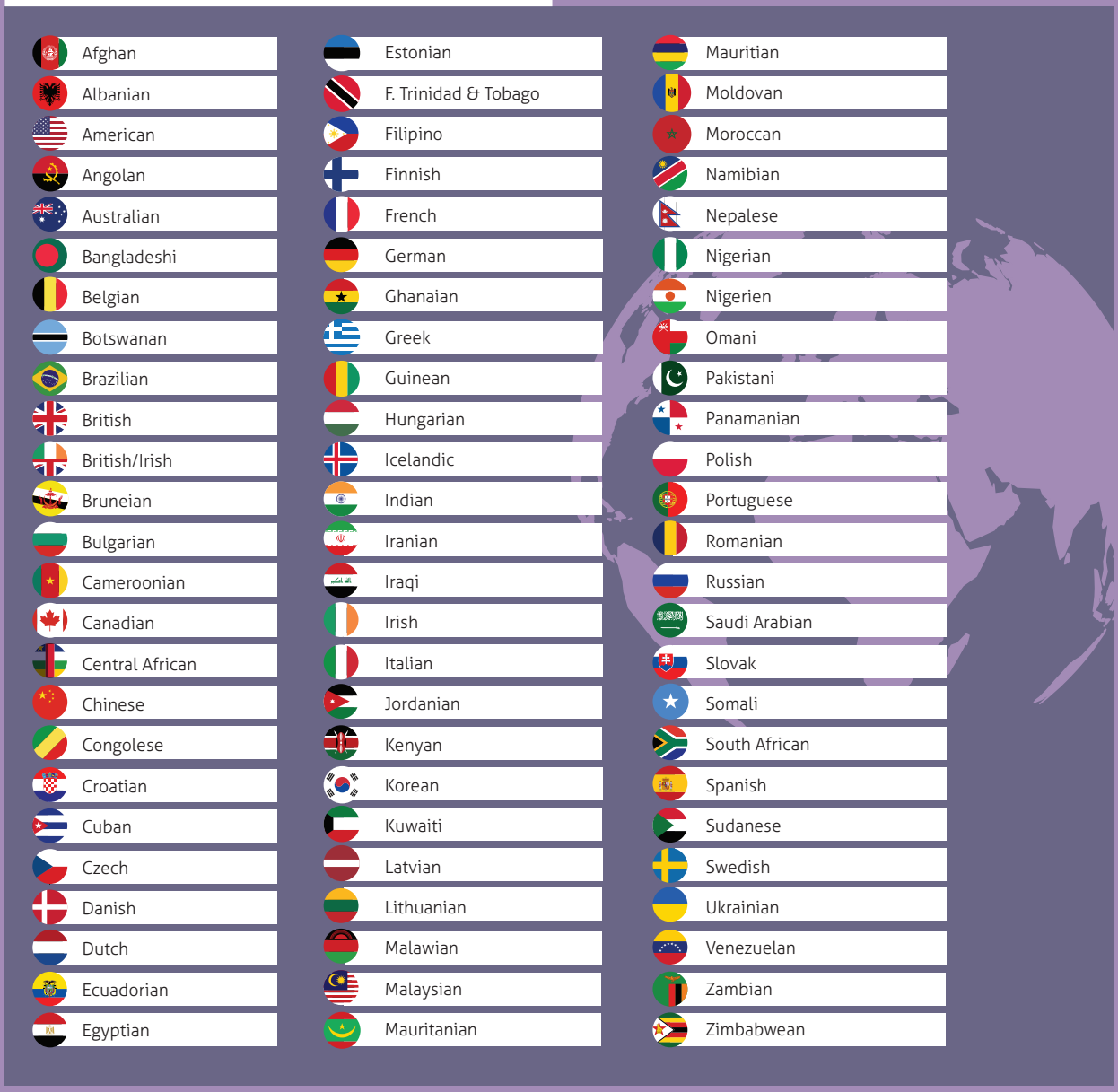
9 People

Staff by Category



Gender Breakdown

75 Nationalities Represented in TUH



Recruitment in 2025

Nursing

156

General

346

Medical Staff

10 Permanent

46 Temporary Consultant

New Consultants

72%

of Consultants on Public Only Contract

Occupational Health

Vaccinations / Screening

1,088

Consultation / Assessment

1,897

Injuries

151

Total

4,777

Management Referrals / Reviews

1,039

Pre-employment Medicals

500

Occupational Blood Exposures

102

Our people are the foundation of everything we achieve. This year, we continued to strengthen a culture where staff feel deeply supported, valued and empowered to thrive. Our vision is clear: to create a workplace where wellbeing is prioritised, performance is recognised, and every contribution is appreciated. Across the Hospital, teams are united by a shared purpose grounded in innovation, inclusion and excellence. Our people create the culture that makes TUH a place to lead, learn and make a difference

This hospital is a place where people come not only to work, but to lead, learn and make a meaningful difference. Continuous improvement is part of our daily rhythm, visible in the way teams collaborate, embrace new ideas and strive to enhance the experience of patients and colleagues alike.

From pioneering simulation based learning, to expanding access to library services, to celebrating exceptional staff through our annual awards, this year's achievements reflect the dedication and creativity of our workforce.

The stories in this section highlight the people who bring our values to life every day. Their commitment, compassion and leadership shape the culture of TUH and drive our mission to deliver outstanding care for our community.

Investors in Diversity Bronze

The Hospital was awarded the Investors in Diversity Bronze accreditation by the Irish Centre for Diversity, an important milestone in our commitment to building a workplace where every colleague feels supported, valued, and able to thrive. This recognition reflects the progress we are making toward a culture that champions wellbeing, performance, and inclusion at every level.

With staff from 75 nations, TUH is a vibrant, multicultural organisation serving an increasingly diverse community. Our people bring a richness of experience, perspective, and identity that strengthens the care we provide. The Bronze accreditation acknowledges this strength and reinforces our dedication to embedding Diversity & Inclusion into our policies, practices, and everyday culture.

This achievement also marks the beginning of a deeper journey. As we work towards the achievement of the Hospital Strategy 2025–2029, we are placing even greater emphasis on creating an environment where everyone feels safe, respected, and empowered to be themselves.

Recent events in Ireland have been a stark reminder that many communities continue to face discrimination and hostility simply for who they are. In this context, our role as a hospital, a place of healing, dignity, and compassion is more important than ever.

We care for our patients, but we also care for each other. That means standing together, speaking out against hate, and fostering a workplace where every culture, identity, and voice is valued. The Investors in Diversity Bronze award is a meaningful step forward, and a testament to the people who make the Hospital a truly inclusive place to work.

Simulation: Raising Standards, Strengthening Teams

Simulation based learning continued to be a standout feature of our education and development programme this year, setting the Hospital apart as a leader in innovative, interdisciplinary training. Our Simulation Team was proud to deliver the Hospital's first interdisciplinary simulation training for Trinity College Dublin HSCP undergraduate students, many of whom were new to both the critical care environment and to working together as a team.

Students from Nutrition & Dietetics and Speech & Language Therapy took part in immersive sessions designed to build familiarity with the ICU setting, equipment and team dynamics, while also supporting key technical learning outcomes. Feedback was overwhelmingly positive, with participants describing the experience as an invaluable opportunity that strengthened their confidence, knowledge and readiness for clinical practice.

Our commitment to advancing simulation education was further recognised when the Hospital was invited to host the National Simulation Office Spring School in March in the Centre for Learning & Development.

Participants from TCD, the Hospital and across the region, including nursing, medical staff, HSCPs, Dublin Fire Brigade and the National Ambulance Service came together for a day of shared learning. The programme combined engaging talks with hands on workshops, giving attendees the chance to explore how simulation could enhance training in their own settings. The event sparked a vibrant exchange of ideas, and the TUH Simulation Team looks forward to collaborating with participants on future simulation initiatives.

First Simulation training session of 2025 with HSCP undergraduate students

Together, these developments highlight how we are embedding simulation not only into student education but also into staff development, strengthening our culture of continuous improvement and ensuring our teams are equipped to deliver excellent, safe and innovative care.

A new eLearning programme **'Telemetry Monitoring in the Adult Services of TUH'** developed by the Centre for Learning & Development and the Coronary Care Unit (CCU) was launched in July 2025.

This programme will enhance patient safety and enhance quality communication between the CCU desk nurse and the ward staff, so that both parties collaborate effectively in caring for the patient receiving Telemetry Monitoring.

The organising team were from left to right, Katie Burke, TCD Practice Placement Coordinator; Sarah Rowland, ICU Clinical Specialist Speech & Language Therapist; Aine Dalton, ICU Clinical Facilitator; Dr Vicky Meighan, TCD Simulation Lead; Aine Kelly, HSCP Critical Care Lead; Stephen Bligh, Clinical Engineer; Anne Marie Bennett, TCD Practice Placement Co coordinator and Dr Hugh O'Reilly, Consultant in Emergency Medicine

Pictured from left to right: Cathy Mullen, Simulation Nurse Lead; Sharon Larkin, Director of Human Resources; John Kelly, Interim CEO; Dr Victoria Meighan, Emergency Medical Consultant and TCD Simulation Lead; Clodagh McLoughlin, Deputy Head of Learning and Development; Professor Dara Byrne, National Simulation Office Lead; Niamh Gavin, CEO Adelaide Health Foundation

TUH / Meath Foundation Fellowships 2025

Four staff members, Rhonda Mooney, Karl Doran, Hannah Lyons and Jiby Joy were awarded the TUH / Meath Foundation Fellowships 2025: The four started their Master's Degree programmes in the Institute of Leadership, Royal College of Surgeons in Ireland in September.

The HR Masterclass workshops and HR CORE & SAP Training workshops continued in 2025 and were very well received by the Line Managers.

Pictured from left to right Shauna Ennis, Head of Learning & Development; Sharon Larkin, Human Resources Director; Rhonda Mooney, Senior Data Manager/Study Start Up Manager for Oncology/Haematology Clinical Trials; Karl Doran, Scan4Ssafety Department Deputy Manager; Gerard Prendergast, CEO Meath Foundation; Hannah Lyons, Senior Cardiac Physiologist and Jiby Joy CNM3 Patient Flow

Colleagues that were presented with Hero Awards in June 2025

Celebrating Our Heroes

The annual TUH Hero Awards once again shone a light on the extraordinary people who make our hospital a place of compassion, excellence and shared purpose. Established in 2019, the awards recognise individuals and teams who consistently go above and beyond in their dedication, service and leadership. This year's celebration brought staff, families and colleagues together in the Centre for Learning & Development to honour those whose actions have made a meaningful difference to patients, peers and the wider hospital community.

The 2025 Heroes reflect the depth of talent, commitment and humanity across TUH. The Ruttle Ward Team received the Patient Experience Award for the exceptional care and support they provided to a patient and family during a prolonged and challenging stay. The People Caring for People Award was presented to Staff Nurse Megan Berry, recognised for her outstanding professionalism, compassion and consistently high standards of patient care.

The Unsung Hero Award went to Clinical Nurse Manager I Josephine Diwa, whose positivity, flexibility and unwavering support for colleagues and patients exemplify the spirit of teamwork. The Service Excellence Award was awarded to Dorothy Hughes of the Neurovascular Service, acknowledging her long-standing dedication, reliability and consistently exceptional service.

The Professor Seán Tierney Mentoring Award was presented to Directorate Nurse Manager Bernadette Corrigan, whose guidance, encouragement and leadership have shaped the professional growth of countless colleagues.

Joint winners of the Teamwork Award, Lung Cancer Nurse Coordinators Clodagh Glynn and Michelle Kissane, were recognised for two decades of collaborative, resilient and high impact service that has significantly enhanced patient care and strengthened the reputation of the lung cancer service.

The Critical Care Outreach Team was named Team of the Year for their cohesive, highly skilled and deeply supportive approach to emergency response, multidisciplinary collaboration and patient safety. Their work has had a transformative impact on the early recognition and management of deteriorating patients across the hospital.

Members of the TUH Team presented with their 25 Year Service Medal

Two Special CEO Recognition Awards were also presented. The Telecoms & Reception Team were honoured for their professionalism, warmth and vital role as the hospital's first point of contact for patients and families. The Synergy Team received recognition for their leadership, commitment and exceptional delivery of Phase 2 of the Synergy IT project, a major step forward in enhancing efficiency and innovation across the hospital.

Together, our Heroes embody the values that define TUH - compassion, excellence, teamwork and a shared commitment to improving the lives of those we serve. Their achievements reflect the strength of our culture and the dedication of our people, who continue to lead, learn and make a difference every day.

Patient Experience Award - Team on Ruttle Ward

People Caring for People Award - Megan Berry, Staff Nurse on Osborne Ward

Unsung Hero Award - Josephine Diwa, CNM I Theatre

Professor Sean Tierney Mentoring Award - Bernadette Corrigan, Directorate Nurse Manager

Service Excellence Award - Dorothy Hughes, Administrator for Neurovascular Service

Teamwork Award - Clodagh Glynn & Michelle Kissane, Lung Cancer Nurse Coordinators

Team of the Year Award - Critical Care Outreach Team

Special CEO Recognition Awards - Telecoms & Reception Team / Synergy Team

Honouring the Next Generation of Clinical Leaders

Now in their fourth year, the NCHD Awards have become a much anticipated highlight in the calendar for our Non Consultant Hospital Doctors. Jointly sponsored by the Medical Board and the Executive Management Team, the awards recognise NCHDs who exemplify the values of the Hospital through their professionalism, dedication and commitment to patient care.

The 2025 recipients were selected for their outstanding contribution to clinical excellence and their embodiment of the Hospital's ethos.

The award for Outstanding Intern was presented to Dr Nicola McNally, recognised for her exceptional performance and patient centred approach during her intern year. Dr Orlagh O'Brien received the Outstanding Senior House Officer award for her strong clinical skills, teamwork and leadership. The Outstanding Registrar award was presented to Dr Conor Toale, acknowledging his high standards of care, clinical expertise and positive impact on both patients and colleagues.

These awards highlight the calibre of emerging medical talent within TUH and reflect our ongoing commitment to supporting, developing and celebrating the next generation of clinical leaders.

Outstanding Intern - Dr Nicola McNally

Outstanding Senior House Officer - Dr Orlagh O'Brien

Outstanding Registrar - Dr Conor Toale

A New Chapter for Library Services

As a teaching hospital, TUH has long recognised the vital role of its academic library in supporting staff and students through access to high quality clinical, research and educational resources. In 2025, this commitment to learning and wellbeing expanded even further with the launch of a new and innovative partnership with South Dublin County Council: the installation of a LibCabinet, known affectionately as The Little Library — in the main hospital foyer.

The LibCabinet is the first service of its kind in an Irish hospital. This self service kiosk enables patients, staff and visitors to borrow, return and browse a curated selection of books from the public library system at their convenience. By bringing public library services directly into the hospital environment, the initiative supports comfort, distraction and relaxation, while also promoting wellbeing and lifelong learning.

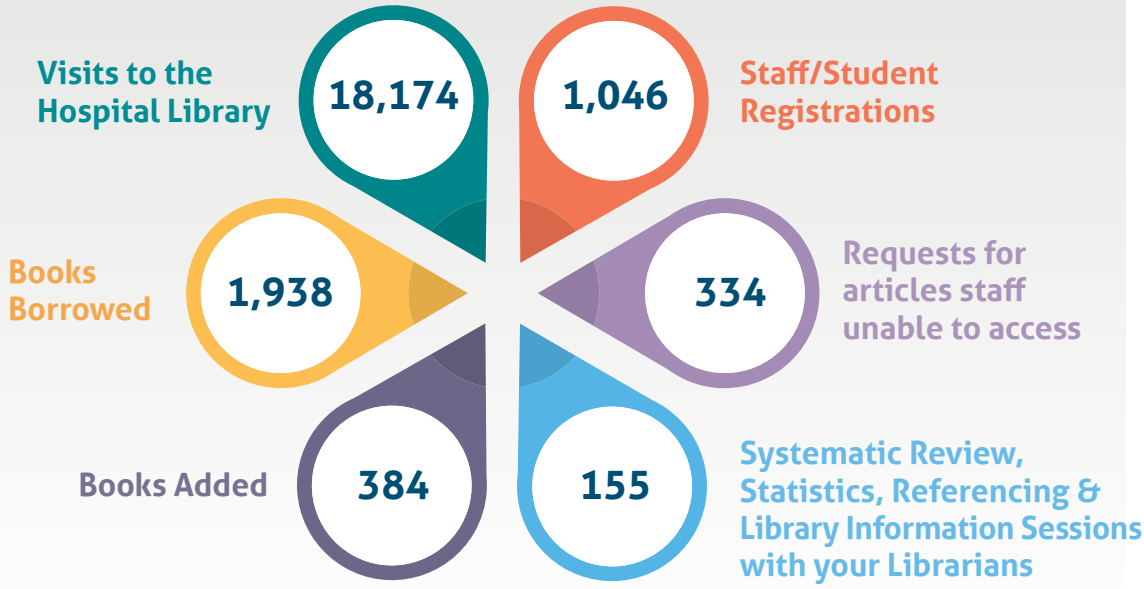
The Little Library has been warmly welcomed across the hospital community. Staff have embraced the convenience of being able to borrow books during breaks, particularly those who work long shifts or have lengthy commutes that make accessing public libraries more challenging. A wide range of genres is available from fiction and non fiction to travel, cookery and children's books. Users can also reserve titles from their local library for collection at the Hospital. The service is actively supported by colleagues in South Dublin Libraries, who ensure the kiosk is well stocked and regularly assist staff and patients in setting up library memberships.

Patients and visitors are also benefitting from the new service, especially those attending the Hospital regularly for treatments such as dialysis or oncology care. Having a book to look forward to has already proven to be a welcome source of comfort and distraction during long or repeated visits. Interest from other hospitals has been strong, reflecting the potential for this model to be replicated more widely.

Alongside this new public facing initiative, the academic library continues to play a central role in supporting clinical excellence, education and research, reinforcing the library's role as a cornerstone of professional development and evidence based practice.

Together, the academic library and The Little Library reflect TUH's commitment to holistic care, continuous learning and the wellbeing of the entire hospital community.

Pictured from left to right at the launch of the Little Library in the main atrium of TUH were Barbara Keogh Dunne, CEU of TUH; Sharon Larkin, Director of HR TUH; Mayor of South Dublin Cllr Pamela Kearns; Lorna Maxwell, Director of Community; Jean McMahon, Head of Library & Information Services TUH; Síle Coleman; County Librarian



WALKways Hospital Programme & Workforce Initiatives

2025 marked another successful year for the WALKways Hospital Programme, which celebrated its seventh Graduation Ceremony on July 16th. The Hospital has proudly supported this programme for eight years, during which 67 participants have graduated, with many progressing to paid employment or further education.

This year's cohort achieved exceptional results. Seven trainees completed placements across 12 departments, including Medical Records, Phlebotomy, Physiotherapy and Materials Management. Their commitment, enthusiasm and strong work ethic were consistently praised by staff and managers. A notable highlight was the involvement of a new department, Cardiac Rehabilitation, which joined the programme for the first time. Several trainees are now in the process of securing paid employment following their placements.

Since its launch, WALKways has partnered with over 25 departments across the TUH campus, reflecting the Hospital's ongoing commitment to inclusion, diversity and meaningful community partnerships.

Pictured from left to right at the recent Graduation were Aoife Canning, Hayley O' Neill, Des Henry, Leanne O' Callaghan, members of WALKs Career & Employment Team; Sharon Larkin, Director of HR; Stacy Butler, Shane O' Neill, Amanda McArdle, Patrick Ennis, Niamh Kane, WALKways Graduates; Elaine Nolan, WALK Director of Day Services; Barbara Keogh Dunne, CEO of TUH and Sadbh Butler, WALKways Graduate

Extended Working Week Implementation

During 2025, the HR Team worked closely with the EMT and senior line managers on the phased implementation of the extended working week. The initial focus was on Consultant work plans for those on public only contracts, enabling rostering across a 5/6 pattern and supporting extended day service delivery. In line with HSE requirements, all Consultant work practice plans were uploaded to the national DIME system.

In addition, a review commenced to assess the feasibility of extending the working week model to other staff groups, including Nursing, Administrative and HSCP grades. This work will continue into 2026, ensuring that any future changes are carefully planned, fully assessed and aligned with service needs.

Health & Wellbeing

2025 was a significant and productive year for the Occupational Health & Wellbeing Department, marked by major digital improvements, strong vaccination performance, continued mental health support, and a wide range of wellbeing initiatives for staff.

Modernising Occupational Health Systems

A major milestone in 2025 was the upgrade of the Occupational Health ICT system from Cohort to Cority, a cloud based platform offering enhanced functionality and improved reporting. As the previous system had not been updated since 2018, this upgrade represents a substantial modernisation of our digital infrastructure. Cority went live on November 24th, following an accelerated implementation completed in just 8.5 weeks, compared with the original 17 week schedule.

Annual Winter Vaccination Campaign

The Winter Vaccination Campaign began on October 6th, with a strategic focus on prioritising influenza vaccination throughout the month, followed by COVID 19 vaccines in November and December. This approach proved highly effective, with TUH achieving the highest staff vaccination uptake across HSE Dublin & Midlands, vaccinating 64% of the staff.

Recognition for Wellbeing Excellence

TUH underwent its second reaccreditation for Ibec's KeepWell Mark in May 2025, achieving excellence in the newly introduced Talent Support and Development pillar. TUH also remained in the Top 100 companies leading in wellbeing in Ireland, reflecting our continued commitment to supporting staff health and wellbeing.

Supporting Mental Health

Mental health remained a key focus throughout the year. Staff were offered a variety of accessible supports, including an Aware lunchtime webinar and the HSE's Minding Your Wellbeing workshop, both of which received excellent feedback.
The annual Green Ribbon Campaign was also promoted across the Hospital in September, with strong staff engagement and visible support for mental health awareness.

Pictured at the Green Ribbon information stand were, from left to right, Cathy Peacock and Wellbeing Champions Joanne Coffey, David Regan and Lisa O'Rourke

Promoting Active Travel

TUH continued to encourage sustainable commuting through a series of initiatives:

- Four fully booked cycle clinics offering free bike servicing
- A bike roadshow during the "Ready, Set, Cycle" campaign, hosted by Wheelworx
- The popular "Bike for Your Breakfast" event, with almost 50 staff cycling to work
- The "Light Up Your Bike" autumn safety campaign
- Participation in Transport for Ireland's pilot "Make the Leap to Public Transport", with over 20 staff trialling public transport for the month of November
- Continued collaboration with Smarter Travel, with strong staff participation in Marchathon and Walktober

Women's Health Initiatives

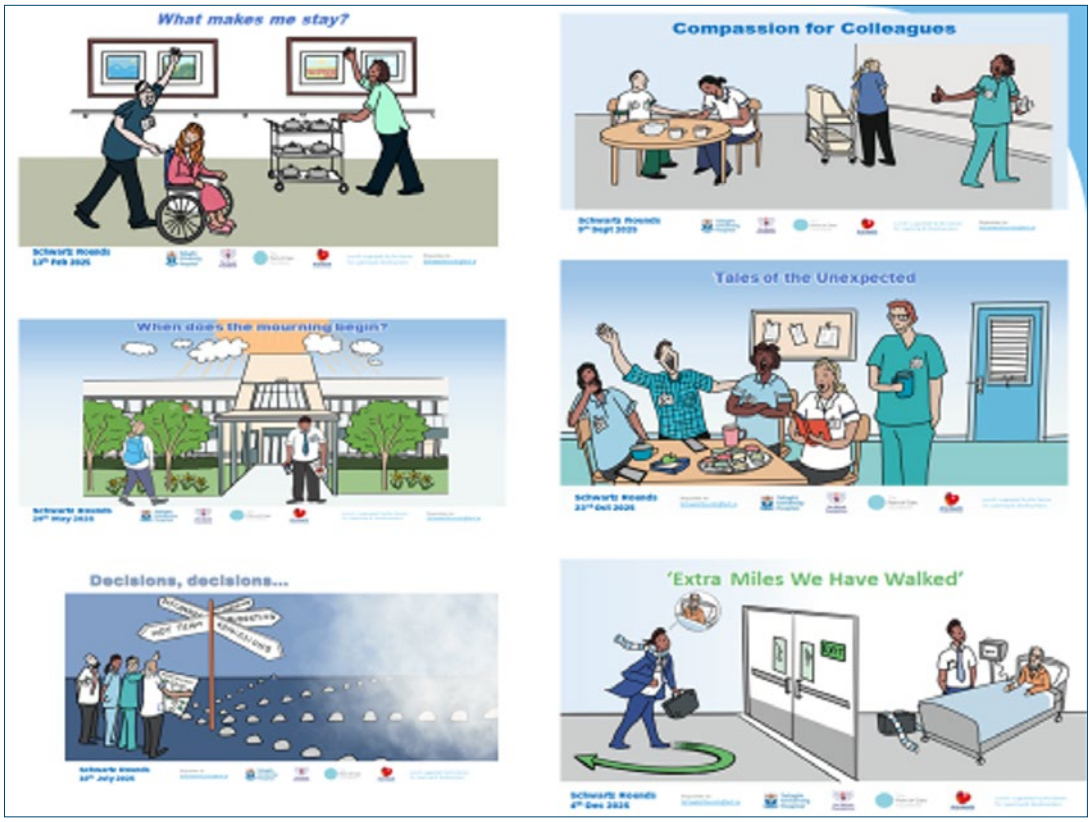
A dedicated menopause awareness campaign took place in October and November, led by members of the Women's Health team. This included the development of a concise, evidence based resource guide covering topics such as pelvic health, irregular bleeding, nutrition, sleep, and cognitive changes. A lunchtime talk was delivered both in person and online, with a recording made available for staff afterwards.

Pictured from left to right at the Menopause Information Stand were Carol Rafferty, Senior Occupational Therapist; Lisa O'Rourke, Staff Health & Wellbeing Officer; Breeda Gorman, Senior Physiotherapist in Pelvic Health; Niamh Murphy, Occupational Therapist; Patrice Kearney Sheehan, Clinical Nurse Specialist Women's Health and Eimear Lee-Mooney, Clinical Specialist Physiotherapist Pelvic Health

Staff Psychology Support

The Staff Support Psychologist role is now fully embedded within hospital operations, contributing to organisational committees, providing reflective spaces for teams, and offering individual support for work related issues. Additional support is provided following staff assaults or critical incidents. In 2025, a new staff booklet, "Working with Grief", was developed to help staff understand grief in the context of hospital work, including guidance for managers and supports following the death of a staff member.

Schwartz Rounds continued to be well attended, with six rounds held during the year. These facilitated sessions offer staff a space to reflect on the emotional impact of healthcare work and remain a valued part of our wellbeing programme. The Schwartz Committee presented a poster at the Point of Care Foundation in December, showcasing TUH's unique in house illustrations. The Staff Support Psychologist also presented on "Trauma in an Acute Healthcare Setting," highlighting the importance of tailored psychological support for staff working in high pressure environments.



10 Awards

National Award for Hip Fracture Care Improvements

The Hospital has been recognised with the inaugural Most Improved Performance Award in relation to the Irish Hip Fracture Standards, presented by the National Office of Clinical Audit.

This award highlights the dedication and collaboration of the hospital's multidisciplinary hip fracture team, which includes colleagues from the Emergency Department team, orthopaedic surgery, orthogeriatrics, nursing, physiotherapy, patient flow, occupational therapy, dietetics and anaesthetics. Together, the team has refined processes to improve the patient journey from admission to recovery.

Key changes introduced include the "Hip Bleep" alert system to notify trauma ward staff of incoming patients, a streamlined admission pathway prioritising early assessment and pain management, and the establishment of a seven day physiotherapy service. The launch of an orthogeriatric service has also ensured patients receive comprehensive assessments covering falls, bone health, and delirium prevention.

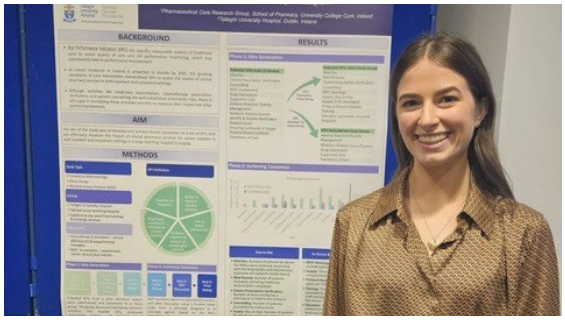
These improvements have addressed one of the major challenges faced by hospitals nationwide, the safe and timely transfer of patients from the Emergency Department to the trauma ward within four hours, the national target.

Winning this award is a significant achievement for TUH and reflects the Hospital's commitment to continuous improvement. By consistently reviewing audit data, the team will continue to identify opportunities to enhance care and ensure that every hip fracture patient receives high quality, timely, and compassionate treatment.

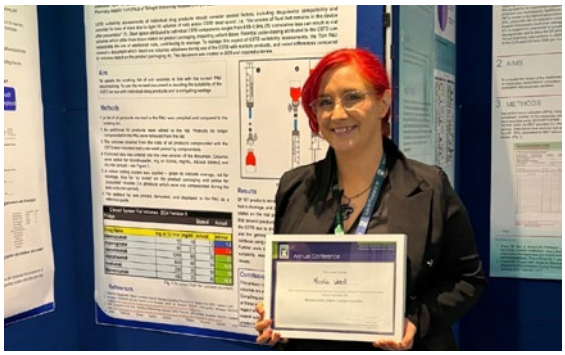
Members of the multidisciplinary team led by Professor Tara Coughlan

Pharmacy Awards

Eve Rodgers, Senior Pharmacist, and Nicola Ward, Pharmaceutical Technician, received awards for their posters at national conferences in March.



Eve Rodgers, Senior Pharmacist with her winning poster entitled 'Identifying and Developing Key Performance Indicators for Cancer Clinical Pharmacy Services' at the Irish Pharmacy Haematology Oncology Society Conference



Nicola Ward, Pharmaceutical Technician with her poster entitled 'Measurement of Vial Volumes when using Closed System Transfer Devices' at the National Association of Hospital Pharmacy Technicians Conference

Congratulations

Sinead Feehan, Nutrition & Dietetics Manager was presented with the Past President's Award at the Irish Nutrition & Dietetic Institute AGM.

The Past Presidents Prize is an award presented by INDI to a member or members who have made an outstanding contribution to the profession. Sinead was presented with the award for her leadership on the Practice Placement Education group which was formed in 2023. She has achieved great things in the last two years through her commitment to expanding access to the Dietetic profession.

There is no doubt that her work resulted in the expansion of access to dietetics training; the TUD undergraduate programme has doubled and UCC and UL have added to their programmes. Thanks to her vision and energy over 50 more students can study dietetics around Ireland. 25 of these coming directly through the CAO.

Sinead Feehan, collecting the award at the annual INDI Conference

Celebrating Excellence at the Irish Healthcare Awards

The annual Irish Healthcare Awards took place on November 4th, recognising innovation, dedication, and excellence across the health sector, with a number of colleagues from across our hospital shortlisted in multiple categories, showcasing the breadth of talent and commitment within our teams.

A special congratulations to Dr Conor Costigan and the team behind the Irish National Capsule Endoscopy Registry, which won NCHD-Led Project of the Year. The judges praised this multi-centre national audit for delivering valuable data on gastrointestinal diseases and improving patient care. They highlighted its strong stakeholder engagement, use of patient feedback, and significant achievements, calling it well positioned for nationwide rollout and future success.

We also celebrate the Neurology team, whose Rapid Access Seizure Pathway was highly commended in the Hospital Project of the Year category. Members of this team included Consultant Neurologists Dr Sinead Murphy and Dr Yerko Ivanovic-Barbeito and Advanced Nurse Practitioner in Neurology Annette Breen.

This recognition reflects the team's dedication to streamlining care and improving outcomes for patients with seizure-related conditions. To everyone who submitted a project, was shortlisted, or supported these initiatives, thank you. Your hard work and innovation continue to make a meaningful impact.

Pictured from left to right at the awards were Jodie Ring from MedConnect, sponsors of the Award; Dr Conor Costigan and Abandoman the MC for the event

Spark Awards

Congratulations to our colleagues who were recognised at the recent HSE's Annual Climate conference, both with a winning and a highly commended project in the Greener Models of Healthcare category. These honours reflect our ongoing commitment to growing our hospital and services in an environmentally responsible way.

The winning project, the 'Greener Inhaler' initiative started by Dr Ana Rakovac and led by Dr Deirdre Fitzgerald, Consultant Respiratory Physician and Iarlaith Doherty, Respiratory Pharmacist focused on reducing greenhouse gas emissions by switching to low-impact inhalers and embedding green prescribing into hospital policy. This involved educating both prescribers and patients about the environmental impact of inhalers, updating the Hospital's Medicines Guide, and transitioning to a greener version of our most commonly prescribed inhaler.

This work is a powerful example of how clinical excellence and sustainability can go hand in hand. At TUH, we believe that delivering the highest standard of care also means protecting the future of our patients and our planet. The success of this initiative was made possible by the dedication of our clinical pharmacists and the collaboration across departments.

Although a national project the highly commended 'Green Labs' has been led out by our colleague Dr Ana Rakovac, Consultant Chemical Pathologist. It started in 2023 in TUH with certification of the Clinical Chemistry Laboratory and it is being rolled out through the whole Laboratory Department as part of the SPARK funded Green Labs Projects. My Green Lab is the world's leading lab sustainability certification, endorsed by the UN's Race to Zero campaign. Its robust methodology includes an engagement survey, a comprehensive staff questionnaire, an assessment tool, and an impact estimator that calculates carbon savings. This project will quantify the carbon footprint of Irish clinical laboratories and expands the Irish Clinical Green Labs Network, creating opportunities for lab-based green teams to seed broader hospital sustainability efforts.

As we continue to expand our services, we remain focused on innovation that supports both health and environmental stewardship. These recognitions affirm TUH's leadership in climate-conscious healthcare and our dedication to building a resilient, sustainable health system for the future.

Impact of Green Inhaler Project

- The project helped cut overall emissions by **over 15.6 tonnes of CO2** - that is the same as driving 136,000km in an average care or 3.4 times the circumference of the earth.
- The amount of pollution per inhaler dispensed dropped by **nearly a quarter (22.8%),** showing a major shift toward more eco-friendly options.
- Emissions from salbutamol inhalers alone fell by **almost 20 tonnes of CO2,** which is equivalent to the emissions from **burning 8,500 litres of petrol.**

Pictured from left to right with their Greener Model of Healthcare Award are Iarlaith Doherty, Senior Pharmacist and Dr Ankit Yadav, Registrar who both worked on the Respiratory team with Dr Deirdre Fitzgerald, Consultant in Respiratory & Plural Medicine (absent from picture)

Pictured from left to right Dr Philip Crowley, National Director of Wellbeing, Equality, Climate & Global Health HSE; Dr Ana Rakovac, Consultant Chemical Pathologist and Siobhan Power, National HSCP Innovation Fellow

Multidisciplinary Award

The HSE Spark Awards celebrate frontline healthcare professionals across the country who develop innovative solutions to improve patient care and service delivery.

A team led by Dr McCabe won the best Multidisplinary Team Award for a cross-disciplinary initiative to tackle Acute Urinary Retention (AUR) in older men at TUH. This ambulatory care pathway streamlined treatment, reduced ED pressure, and empowered patients with better support and education.

AUR is a growing urological emergency, and the team identified significant inefficiencies in its management particularly complex referral pathways, poor discharge communication, lack of equipment, and limited integration with community services. Patients were spending over eight hours in the ED and waiting an average of 40 days for follow-up care.

In response, the team developed a streamlined ambulatory care pathway that simplified ED discharge, with improve support in the community for emergencies such as a leaking or blocked catheter, thereby preventing an ED attendance.

Over three evaluation cycles, the initiative reduced ED experience times to 5.7 hours and shortened the time to Trial Without Catheter to 25 days. These improvements led to safer discharges, better continuity of care, and improved patient education and support.

This project is an example of how teamwork and structured innovation can transform emergency care. It offers a scalable model to reduce ED pressure and improve outcomes for older men with AUR, an outstanding achievement that reflects the team's dedication to patient-centred care.

Pictured from left to right at the presentation of the Best Multidisciplinary Team Award were Dr Eve Stanley, HSE Spark National NCHD Innovation Fellow; Dr Aileen McCabe, Consultant in Emergency Medicine; Ms Daphne Gould, CNM2, Department of Urology; Mr James Power, GP Liaison Nurse and Ms Ciara Parthiban, CNM2 Community Intervention Team Liaison, TUH

Trinity Winners

This annual Dean Awards at Trinity College Dublin recognise contributions from TCD staff who have demonstrate excellence and a commitment to the mission of the college. The TUH staff named on this prestigious list are Sylvia Leahy and Professor Vincent Maher.

Sylvia Leahy is a Clinical Nurse Manager 2 in our Peri-Operative Directorate, and has 23 years of nursing experience with extensive clinical and managerial expertise in acute care services.

Sylvia has a special interest in clinical education and is a graduate of Nursing from Trinity College Dublin. She also holds a Bsc in Nursing Leadership and Management from the Royal College of Surgeons in Ireland.

Professor Vincent Maher's is a Consultant Cardiologist and regularly teaches medical students, nursing and medical staff. He also develops projects to involve staff in research. His teaching extended nationally as medical director of the Irish Heart Foundation, where he helped to develop their website and wrote many booklets about heart health. He has had a long-term interest in cholesterol's cardiovascular impact and has raised awareness about cholesterol on national media. He developed the abbreviated lipid guidelines now being rolled out to all GPs. His main philosophy in education is to "teach people for life" rather than for the short term.

Pictured from left to right Sylvia Leahy, CNM II with Professor Brian O Connell, Dean of the Faculty of Health Sciences at TCD

Pictured at the presentation were from left to right Professor Colm Doherty, Head of School of Medicine, TCD; Professor Vincent Maher, Consultant Cardiologist at TUH with Professor Brian O Connell, Dean of the Faculty of Health Sciences, TCD

Professor Kevin Conlon Clinical Skills Award

Launched at the inaugural Last Lecture, the Professor Kevin Conlon Clinical Skills Award will be granted to the medical student who demonstrates exceptional proficiency in assessments, procedures and communication. The Award is granted based on criteria such as accuracy, efficiency, professionalism and patient centered care demonstrated by the student. Winning the Award is a significant achievement as it reflects their dedication to honing their clinical abilities and providing high quality patient care. The medal will be awarded each year for the student demonstrating the best clinical skills.

Pictured from left to right were Professor Kevin Conlon presenting the inaugural Clinical Skills medal in his name to Mr Karlo Vidovic

Dietitian Wins Prestigious Award

Congratulations to Eimear Mullen, Senior Dietitian (Memory Service & GEDI) won the IrSPEN/INDI Innovation Award at the Irish National Society for Clinical Nutrition & Metabolism Conference. Her poster profiled the work of the Brain Health Clinic and a Nutritional Profile of Service Users.

Pictured from left to right at the presentation of the award are Jennifer Feighan, INDI CEO, Eimear Mullen, Senior Dietitian at TUH and Carmel O'Hanlon, Board Member of IrSPEN

Emerging Leader in Simulation' Award

Cathy Mullen, Simulation Nurse Lead in the Centre for Learning & Development was presented with the 'Emerging Leader in Simulation' Award by the National Simulation Office in December 2025. This award was presented for Cathy's significant contribution to expanding the scope of Simulation Based Inter-professional Education in TUH and the Dublin Midlands Region. Cathy has achieved great things since her appointment as Simulation Nurse Instructor in 2022 and more recently as Simulation Nurse Lead, the first post of its kind in an acute Hospital in Ireland.

There is no doubt that Cathy's leadership in the field of Simulation Based Education will continue to positively impact on students, staff and quality patient care in the future.

Cathy Mullen receiving her award from Professor Dara Byrne National Clinical Lead for Simulation

Presentation Award

The Occupational Health Nursing team received the Best Scientific Poster Award for its submission titled "Mental Health & Emotional Wellbeing in an Acute Hospital." The poster was presented at the Federation of Occupational Health Nurses within the European Union (FOHNEU) Conference, held in Cork. This recognition reflects the team's ongoing commitment to advancing occupational health practice and promoting staff wellbeing within the acute hospital environment.

11 Arts & Health

Mission Statement

'To provide a creative arts & health programme specific to patient, staff and healthcare department needs, that aims to improve the Hospital experience by making arts accessible to all.'

Sincere thanks to all our funders and stakeholders for their continued support.

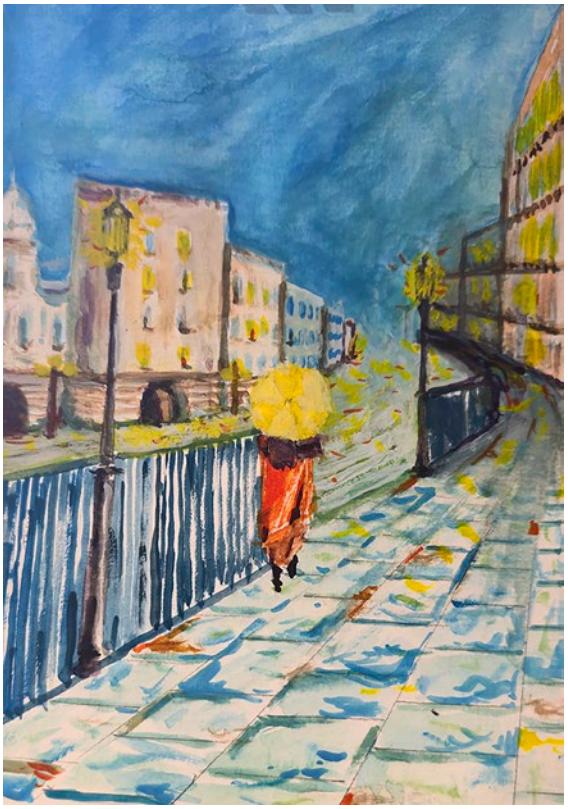
Integrated Care

Art at the Bedside Programme

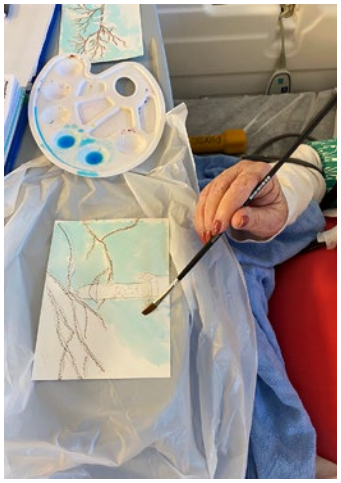
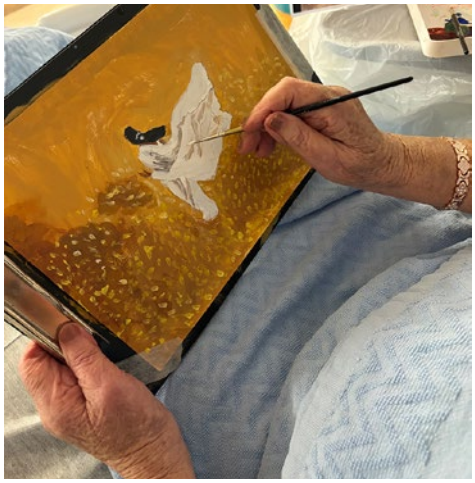
Art at the Bedside Programme in TUH and Tymon North delivered by professional artists Olivia Hassett, Lucia Barnes and Paola Invernizzi. Patients engage through lively conversations while also being offered guidance on a range of creative activities from watercolour to acrylic painting, clay making, card making and paper crafting. With something available to inspire every skill level through our Art4All Art Packs which include Zen colouring, sewing, weaving and cross-stich. Our patient and artist feedback informs us how creativity enriches our patient care by supporting wellbeing and fostering connections during a hospital stay.

Lucia Barnes, Artist in Residence reflects...

'I find it very rewarding to work among the patients and staff in the Vartry Renal Dialysis Unit. It is a joy to have the opportunity to introduce colour and creativity to patients while they have their ongoing treatment.'



Various patient artworks and quotes from the Art at the Bedside Programme

Various patient artworks and quotes from the Art at the Bedside Programme

'I loved learning something new that kept my mind off my pain and made myself and the women on my ward smile.'

Andrea, Gogarty Ward.

'I am so proud to show off my art to my family and friends when they visit me.'

Margaret, Burkitt Ward

2,971

Patients enjoyed a one to one art at the bedside engagement

Soothing Sounds Live Music Programme

Soothing Sounds Live Music Programme is delivered at ward level for patients, often while receiving treatment and also enjoyed by staff and visitors. 'The music lifted my spirits after some very difficult news. It meant more to me than I can put into words.' Oncology Patient. Facilitated by musicians in residence Dr Sophie Lee, Justin McCann: Pianists and Dr Mary Louise O Donnell: Harpist. The programme aims to improve mood, reduce stress and promote wellbeing in primary locations of Vartry Renal Dialysis, Amber Oncology, William Stokes Age Related and when scheduling is possible, on general wards. The project is co funded by The Meath Foundation, The State Man Arts Programme in association with Punchestown Kidney Research Fund and the HSE co-ordinated by the Arts & Health Department.

1,129

Patients experienced a live music session through Soothing Sounds

Mary Louise O Donnell on Harp in Renal Dialysis

Music Therapy Service (MT)

Music Therapy Service (MT) is an evidence based, allied health profession that supports persons across their lifespan. The two day referral based service delivered by Ciana McGarrigle, Senior Music Therapist, Arts & Health Department. Supporting patient care with the following aims: reduction of anxious behaviour, motivation to engage in care, foster meaningful engagements that combat loneliness and isolation. MT also supports patients to process traumatic health events and end of life experiences. The MT service delivers 1:1 bedside sessions for patients in ICU, Intellectual Disabilities and across a number of wards in TUH. A long stay patient responded to her on-going Music Therapy Sessions *'It's even better than the last day. I feel like myself again after so long.'* Group Music Therapy sessions include: a weekly MDT Music & Exercise class in Charlie O'Toole Day Hospital with Physiotherapists, and fortnightly session for patients in Tymon North Community Unit. Also in 2025, former TUH Music Therapist, Clara Monahan was short listed in the Davis Coakley Award for Creativity in Aging and Medicine with Salt in my Blood, a co-written song, by patient Kevin and Clara during the patients' final days. Enjoy listening by scanning the QR code.

*TUH Arts and Health Department sincerely thank Kevin's family who have kindly given full permission for this song to be shared as sung by Clara Monahan.

Salt in My Blood

Live Music Performance Programme

Live Music Performance Programme continues to animate the hospital environment, bringing high-quality music to the atrium, Tymon North Community Unit, the staff canteen and occasional spaces. Patients, staff and visitors receive regular opportunities to enjoy a varied programme of music spanning classical, folk, instrumental, choral, and jazz. 2025 highlights included the performance of an original song cycle In Cloak and Womb and a piano recital by staff member Dr Yerko Ivanovic Barbeito 'A beautiful performance. When I closed my eyes it brought me miles away from the hospital'. New volunteer performers included the uplifting Scoil Dara Secondary School Choir from Kilcock, The RUGs (Rathfarnham Ukulele Group) alongside continued support from our dedicated volunteer groups: The RAMS, CÓRus and Milis. With special thanks to our professional musicians whose musical contributions continue to enrich the hospital aesthetic for all through the power music.

Collage of professional and volunteer musicians, singers & choir performing for patients, staff and visitors

Collage of professional and volunteer musicians, singers & choir performing for patients, staff and visitors

10,150

Audience reach of live music performances (figures estimated on intermittent audits)

Enhanced Infrastructure

Diaphony

Diaphony a sculptural installation commissioned by The Meath Foundation and installed on Hospital Street and launched in May with a live performance by creator Olivia Hassett.

> 'The unveiling was eye-catching, evocative and interesting. It brought to mind the skin we embody, how rarely we take the time to marvel at it - how it protects, shields and keeps us safe.'
>
> **TUH Staff Member.**

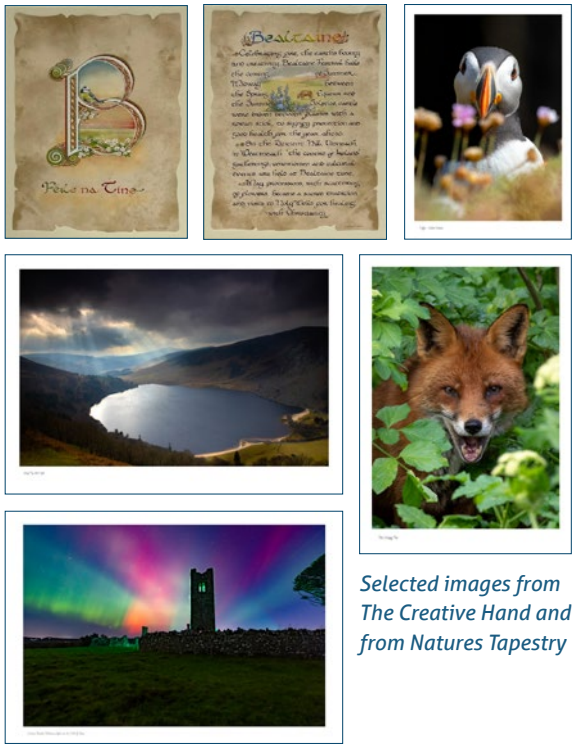
The artwork represents the culmination of a two year residency comprising of sustained research and development, an ongoing dialogue with the Dermatology Department underpinned by the artists practice. An exploration of skin as a threshold between inside and outside, the seen and the unseen. Diaphony comprises over 250 blue perspex discs arranged in overlapping translucent layers. Each disc echoes the dimensions of a petri dish with fine lines of text and imagery hand-etched into them. Orange paint is embedded into the markings with the discs stitched together. The work integrates multiple languages, including English, medical terminology, Ogham and the language of colour as Hassett's primary expressive medium. Please scan the QR code to access a featured project case study on ArtandHealth.ie

Olivia Hassett performs 'I Am Diaphony' launch event

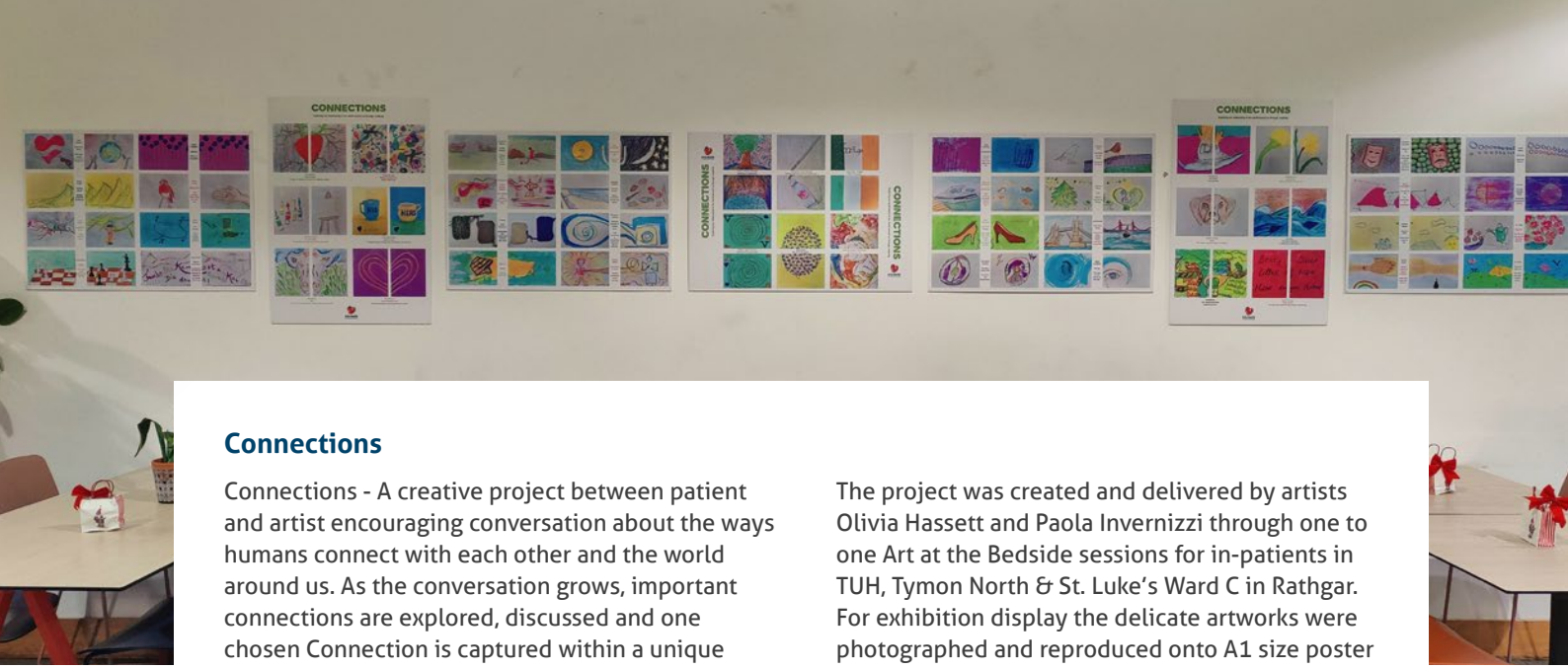
Diaphony Case Study aka The Curiosity Project

Hospital Street Art Exhibitions

Hospital Street Art Exhibitions included The Creative Hand and Natures Tapestry a joint exhibition showcasing the delicate skill and intricate handcraft of calligraphy by renowned illustrator Josephine Hardiman. TUH enjoyed the honour of exhibiting six stunningly beautiful original calligraphy artworks from 'The Book of Kildare' together with a small collection of watercolour botanicals and landscapes Giclee prints as part of the Creative Hand. Also exhibited, a stunning series of photographic prints capturing the broad tapestry of lush valleys, rolling hills and Irish coastlines punctuated by the wildlife within. Created by TUH colleagues Tommy Walsh and Ray Mullen each image tells a story of resilience and tranquillity. Thanks to the popularity of the exhibition it will tour to Galway University Hospital in exchange for the loan of Poems for Patience a diverse collection of reflective and inspiring poems featuring Irish and international poets through Saolta Arts.



Selected images from The Creative Hand and from Natures Tapestry



Connections

Connections - A creative project between patient and artist encouraging conversation about the ways humans connect with each other and the world around us. As the conversation grows, important connections are explored, discussed and one chosen Connection is captured within a unique two piece artwork through co-creation. Having an opportunity to be creative during a hospital stay offers patients a positive engagement and nonclinical point of focus. These bright, bold and beautiful artworks represent patients (and small number of staff) responses to their own personal relationship to the world.

The project was created and delivered by artists Olivia Hassett and Paola Invernizzi through one to one Art at the Bedside sessions for in-patients in TUH, Tymon North & St. Luke's Ward C in Rathgar. For exhibition display the delicate artworks were photographed and reproduced onto A1 size poster boards by the Arts Team adding in the creator's name, title of their artwork and a brief description between each of the art pieces to provide the viewer with a greater insight into what is being shared with them.

Connections – Exhibition installed on six metre Café Wall Rua Red South Dublin Arts Centre Dec 2025

People

Heartbeats - TUH Choir

Heartbeats-TUH Choir directed by renowned conductor Michael Fay, strives to provide a warm and supportive environment for staff members to relax, have fun and challenge themselves through song while contributing to the cultural fabric of the hospital community. New members are always welcomed as Tracey Brady Clarke a CNS, Community Mental Health who joined in 2025 notes... *'I'm so delighted to be part of the choir. It's a great way to lighten the load after a day's work. It helps externalise all the stress creating positivity, I just love it!'*

Join Now: Rehearsals are on Tuesday evenings 5:30pm-7pm, Robert Graves Post Grad Room. Email us: heartbeats@tuh.ie

Series of events as Heartbeats perform: AIMS Choral Festival in Wexford, Carols at Christmas and the TUH Nursing Graduation

Volunteers Creative Workshop & Summer Tea Party

Volunteers Creative Workshop & Summer Tea Party celebration took place in August 2025. The aim was to deliver a creative workshop, summer Tea Party and social sing-along for our wonderful hard working volunteers by Arts & Health Department, Patient Advice & Liaison Service, and Pastoral Care; all of whom are under the Nursing Directorate. With over 40 participants the Artists demonstrated multiple flower making techniques before moving from table to table guiding, assisting and encouraging all levels of creativity to enjoy and have fun! Laughter and camaraderie filled the air as an extravaganza of colourful flowers were produced. Barbara Keogh Dunne, CEO and Áine Lynch, Director of Nursing and Integrated Care stopped by to admire the handiwork and personally thank our Volunteers for their continued dedication to TUH. As the Tea Party got underway delicious refreshments were served, with the Firhouse Ukulele Group (FUGs, also volunteers) entertained us and led the sing-along. A song was specially written and performed for the occasion by FUG's member, Jim McMahon was in gratitude for the wonderful care he received under the TUH Stroke Team as a previous patient. His song provided a truly uplifting moment with everyone joining in the chorus.

Montage from the TUH Volunteer celebrations in the Hospital Atrium

12 Financial Management Performance

HSE allocation in year €447.1m

NET outturn €446.2m

Surplus €0.9m

PAY €361.7m
70% of gross costs

NON-PAY €154.3m
30% of gross costs

Income €69.8m

Patient income €19.8m

€32.9m
Medical & surgical supplies

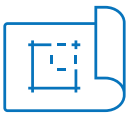
€43.3m
Medication

€3.6m

Equipment replacement

€6.3m **Infrastructure developments**

Includes:
- Aseptic Unit
- Lift replacement



HIPE charts reviewed and coded

80,975

SCAN4SAFETY

27,966
Patients scanned

268,600
Products scanned

Value
€14.9m

Financial Review 2024

The below table summarises the financial outturn for 2025

Total	2025 Total €'000	2024 Total €'000	Movement €'000	%
HSE Allocation notified	447,127	422,928	24,199	5.7%
Net expenditure in year	446,157	422,901	23,256	5.5%
HSE Allocation	(447,127)	(422,928)	(24,199)	5.7%
Net (surplus)/deficit in year	**(970)**	**(27)**		
Cummulative deficit	**24,415**	**25,385**		

The financial performance of the Hospital in 2025 showed a surplus of €0.9m against the comparable HSE allocation, leading to an accumulated deficit of €24.4m at 31 December 2025. In 2025, the Hospital received an allocation of €447.1m which was an increase of €24.2m (5.7%) on the final allocation for 2024 (€422.9m). In 2025 the Hospital saw the net expenditure increase by €23.3m (5.5%) when compared with 2024.

The Hospital remains dependent on the ongoing support of the HSE to provide adequate funding to cover the cost of HSE approved funded service developments. As at 25th May 2026, the Hospital is projecting a €39.4m shortfall in funding for the financial year ending 31 December 2026. The Hospital is awaiting clarity from the HSE in relation to how patient services will be funded in 2026. Once clarity around funding has been provided by the HSE the Hospital Board expects to be in a position to sign the annual Service Level Agreement (SLA).

Expenditure

	2025 €'000	2024 €'000	Movement €'000	%
Pay	361,732	338,248	23,484	6.9%
Non-pay	154,257	152,783	1,474	1.0%
Gross expenditure	515,989	491,031	24,958	5.1%
Income	(69,832)	(68,130)	(1,702)	2.5%
Net expenditure	446,157	422,901	23,256	5.5%

Total pay expenditure increased by €23.5m, representing a 6.9% rise compared to 2024. This increase occurred despite a reduction of 24 whole-time equivalent staff associated with HSE-approved service developments. The upward movement in pay costs is primarily attributable to the impact of a 3% incremental pay award and the ongoing transition of private consultants to public-only contracts.

Non-pay expenditure rose by €1.5m (1%), year on year. Largely due to €5.4m increase in drug expenditure, these increases were partially mitigated by reductions in other areas, including a €1.5m decrease in overseas recruitment costs and a €2.6m reduction in external procedures. More broadly, inflationary pressures of 2.2% across all non-pay categories have had a significant impact in 2025 and remain a key driver of expenditure growth.

Overall income increased by €1.7m in 2025, patient income decreased by €6.5m due to reduction in Private Health Insurance income pertaining to POCC. Other movements include a €3.9m increase in drug reimbursement income under the HSE Primary Care Reimbursement Service (PCRS), in line with the corresponding rise in drug costs, as well as a €1.6m increase in other income, largely attributable to National Treatment Purchase Fund (NTPF) activity.

Income

	2025 €'000	2024 €'000	Movement €'000	%
Patient income	19,848	26,361	(6,513)	-24.7%
Superannuation and Pension Levy	15,001	13,674	1,327	9.7%
Income from external agencies	11,298	10,335	963	9.3%
Miscellaneous Income	23,684	17,760	5,924	33.4%
	69,832	68,130	1,702	2.5%

Financial Statements

Income and Expenditure Account

For the reporting period January 1st to December 31st 2025

	2025 €'000	2024 €'000
Pay Expenditure	361,487	338,016
Non Pay Expenditure	154,502	153,015
Gross Expenditure	515,989	491,031
Income	(69,832)	(68,130)
Net Expenditure for the year	446,157	422,901
Allocation in year before once-off allocation	(447,127)	(422,928)
Deficit in year before once-off allocation	(970)	(27)
Retrospective once-off allocation		
Deficit in year after once-off allocation	(970)	(27)
Cumulative deficit brought forward from previous year	25,386	25,412
Cumulative deficit carried forward to following year	**24,415**	**25,388**

Balance Sheet

as at December 31st

	2025 €'000	2024 €'000
Fixed Assets		
Tangible Assets	**123,419**	**114,692**
Current Assets		
Debtors	58,884	70,621
Stocks	8,462	5,954
Bank and Cash balances	19,055	17,275
	86,401	93,850
Creditors – less than one year		
Creditors	(99,079)	(98,600)
Bank Overdraft	(531)	(10,899)
Obligations under finance leases	(1,356)	(2,389)
	(100,966)	**(111,889)**
Net Current Liabilities	**(14,565)**	**(18,039)**
Total Assets less current liabilities	**108,854**	**96,654**
Creditors – more than one year		
Obligations under finance leases	(1,722)	(2,978)
	107,132	**93,676**
Capital and Reserves		
Non Capital Income & Expenditure Account Deficit	(24,414)	(25,384)
Capital Income & Expenditure Account	8,127	4,368
Capitalisation Account	123,419	114,692
	107,132	**93,676**

13 Foundations

Tallaght University Hospital Foundation

Mission and Impact

Established in 2018 as an independent registered charity, TUHF's mission is to drive innovation, enhance patient care, and shape the future of healthcare.

To date, the Foundation has raised and invested over €13M to improve patient outcomes and experiences.

Through community generosity, grants, lotto, and the Immigrant Investor Programme, TUHF has funded cutting-edge equipment for operating theatres and clinics, introduced advanced diagnostic methods, upgraded hospital rooms and wards, and supported staff-led projects.

Over the 2025 reporting period, TUHF-funded programs directly benefited over 6,500 patients and supported more than 100 healthcare professionals.

Beyond direct programs, the Foundation successfully managed major capital projects, secured significant funding streams, and optimised operational overheads.

Major Capital Projects & Stewardship

- **Clondalkin Convent:** The Foundation successfully secured the complete €7.6M in funding for the Clondalkin Convent with continued investment from the community to ensure this project was delivered within budget. The new handover for this project is slated for the end of April 2026.
- **High-Tech Clinical Acquisitions:** TUHF raised a further funding directed toward technical additions to the already funded Da Vinci Surgical Robot.
- **Innovate Health Project:** We completed our submission to the INIS programme for our Innovation Centre with a focus on Brain Health & Innovation and await a decision on its approval.

2025 Impact Investments

- **Clinical Care & Equipment (€400,000):** This included a €400k major capital investment for an additional arm for the Da Vinci Robot Console, expanding minimally invasive surgical capacity.
- **Research & Innovation (€67,000):** Funding addressed post-pandemic challenges by supporting Long Covid RNA research and Neurology Biobanks.
- **Patient & Family Experience (€34,000):** Crucial environmental upgrades were made to the William Stokes Ward and family rooms to create more private, comfortable spaces.
- **Rehabilitation Services (€28,000):** The Foundation deployed the MindMotion™ GO system, bringing gamified stroke rehabilitation exercises to an expected 700 patients.
- **Staff Support & Wellbeing (€14,000):** Initiatives boosted morale for 2,000 healthcare workers and upgraded infrastructure for Occupational Therapy remote learning.

Targeted Specialty Advancements

- **Neurology:** TUHF received €325.5k from a High-Net-Worth donor, which aligns with their broader €375,000 commitment to research on neurodegenerative diseases.
- **Oncology:** The Foundation successfully secured €100k dedicated to advancing Oncology services.
- **Urology:** A donation of €35,000 was made to support the HoLEP Service, with the equipment having arrived in December 2025.

Fundraising & Operational Highlights

- The Easter Chicks community campaign raised over €16,000 in late 2025.
- The Staff Lotto generated a total income of €330,684 to date.
- TUHF demonstrated operational efficiency by leveraging over €75K in tax rebates to support and offset operational overheads.

Board Leadership Updates

- TUHF is delighted to welcome Malcolm Hughes as the new Chair of the Board. A founding partner and former CEO of Sedgwick in Ireland, Malcolm brings extensive expertise in organisational transformation, strategic management, and corporate leadership.
- We also extend our deepest gratitude to Margaret Considine, acknowledging her significant work, dedication, and impactful leadership during her tenure.
- The Board of Directors - which includes leaders across corporate recovery, engineering, public service, and medical research such as Liam Dowdall, Eileen Lee, John Collins, Rev Canon Tom O'Brien, Prof. Seamas Donnelly, and Tony Carey - continues to carry full governance responsibility, ensuring the Foundation's continued strategic growth and robust compliance

Adelaide Health Foundation (AHF)

The focus of the Adelaide Health Foundation is to support Tallaght University Hospital's patients, healthcare staff and students. We provide funding for projects and educational opportunities to enhance the patient experience and to empower healthcare professionals. We also invest in projects in the local community to promote wellbeing and foster connection.

Community

TUH Projects Supported In 2025

New Initiatives Fund

- 10 projects totalling €83k were funded under AHF New Initiatives Scheme.

Virtual Tour of ICU to Support Recovery

- Each year, hundreds of patients are admitted to TUH Critical Care Service with many experiencing fragmented memories or distressing hallucinations due to ICU delirium.
- The Virtual ICU Tour (available on TUH YouTube channel) offers survivors of critical illness and their families a guided walkthrough of the unit, explaining the sights, sounds, and equipment patients may have encountered.
- The resource aims to support psychological recovery and reduce anxiety for families, especially those unable to be present during a loved one's ICU stay.
- The patient voice played a central role in shaping the content, with ICU survivors providing valuable feedback throughout development.
- The tour can be accessed by scanning the QR code below.

Pictured from left to right at the official launch of the education resource were Lisa Dunne, CNMIII ICU; Emma Forde & Mark Vergara, CNMII's ICU; Niamh Gavin, CEO of the Adelaide Health Foundation; Dr Melanie Ryberg, Clinical Psychologist, Critical Care; Dr Arabella Fahy, ICU Consultant. Absent from picture Joanne Coffey, Head of Communications

Renal Denervation Project Team

Renal Denervation @TUH

- Hypertension affects over 1.28 billion adults globally, yet only one in five achieve adequate control. AHF New Initiative funding supported the initial set-up of the pilot phase of Dr Armstrongs Renal Denervation (RDN) project at TUH.
- RDN focus on reducing systolic blood pressure and thus reducing the damaging risks to patients suffering from this condition. For those who struggle despite medication and lifestyle changes, RDN offers a promising alternative. The blood pressure procedure is a minimally invasive treatment that targets overactive nerves near the kidneys, which contribute to high blood pressure.
- The first of the pilot treatments were carried out successfully in September 2025, marking a major milestone for patients with uncontrolled hypertension.

Patient Centred Equipment Fund

- 22 projects were approved for funding of €135k.
- Project amounts ranged from €400 to €20k, with several TUH Departments benefitting from the call. These included a blood warmer for Haematology Day Ward and Equipment for Emergency Department Phlebotomy Room.

HANA#3

- As co-funder of TCD Health Assets & Needs Assessment of Tallaght (with HSE) we are to determine where we can meaningfully support the implementation of selected recommendations

Dublin 2024 Projects Supported in 2025

Tallaght Community Health Project

One of the projects funded under the AHF Community Health and Well Being Scheme was for a local community group, who used the funds to support Seniors living in the Tallaght area.

The **Tea-party Project** helped strengthen social inclusion and promote wellbeing among older residents.

In total 415 seniors attended one of three lively tea parties held throughout the year, where they enjoyed singing, dancing, and sharing refreshments together. These events created a warm and welcoming space for connection, especially for those who no longer have family nearby or other social outlets in the area. The project not only brought joy and companionship but also helped reduce isolation and foster a strong sense of belonging within the community. *"Participants have shared that attending the tea parties has helped them reconnect with old neighbours, build meaningful relationships, and feel more included in their community. They describe the events as a joyful way to reduce isolation while having fun together."* Samantha Griffin, Local Coordinator, Tallaght Community Health Project.

Community members enjoying the Kingswood Tea party in June of this year

Education

In conjunction with TCD we oversee the application process for TR093/AHF Nursing Degree. There are 38 places, 27 allocated to school leavers and 11 to QQI/mature applicants. We also provide bursaries to TUH Nursing Students, and Awards/Scholarships to TUH Nursing Students and Staff, and we fund Dementia Champions training.

Nursing Bursaries

- In 2025, 96 bursaries totalling €259,345 were awarded to TUH Nursing Students.
- The total number of bursaries awarded since the scheme commenced in 1996 is 1,079 with total expenditure of €2,532,040.

Nursing Scholarships and Awards

Five schemes were delivered in 2025 - two providing funds to TUH for staff training, and three awarded directly to individuals.

- **TUH - The Mansfield Scholarship** - €10,000 was made available to TUH frontline nurses to attend conference and specialist short courses.
- **TUH - Health and Social Care Professionals [HSCP] Scholarship** - €5,000 was made available to fund TUH HSCP Staff to attend courses/conferences.
- **Individual - The Hannah McDowell Scholarship** - To promote excellence in nursing studies and is awarded to the student nurse who achieves the highest mark at distinction level in the first-year annual examinations conducted by Trinity College Dublin. **Winner Rojelle Rodriguez.**
- **Individual - The Seville Award** - To recognise that the role of nursing is at the heart of Patient Care and awarded to a 4th Year General Nursing Internship student at Tallaght University Hospital (TUH). **Winner – Elena Prendergast.**

- **Individual – The Mitchell Award** - To recognise that the role of nursing is at the heart of Patient Care and awarded to eligible Staff Nurses at TUH. Winners: Caroline Windsor, Darina McCarthy, Larry Untoy and Sean Lynch.

High Fidelity Simulation Suite

- The AHF has allocated funding of €2m for equipment for Tallaght University Hospital Sim Education. As members of the Steering Group, we are actively engaged in project development.

Research

Changes in the Research Landscape

- Healthcare research is becoming increasingly collaborative. The patient voice is now recognised as an essential part of shaping meaningful studies and academic teams are engaging more widely than ever to ensure research reflects real-world needs and leads to outcomes that matter.
- Patient and Public involvement (PPI) is now so embedded in AHF thinking that we have adapted some of what we do under our Education and Community pillars to include the voice of the student, patient or user who will ultimately benefit from our program

Update on AHF Genetics Education Program

- We are collaborating with the School of Medicine at Trinity College Dublin (TCD) to develop a two-phase education program. Phase 1 (in development) is an accredited "Introduction to Genetics" program for healthcare staff. Scoping exercise has been agreed, and we are currently gathering information on training needs from target audiences which will contribute to the development of the material and the structure of the course.
- The program is being piloted to TUH staff and following evaluation will be made available nationwide.
- The most recent publication arising from AHF Study of Genetic Testing and Counselling Services in Ireland is on the topic of Risk in Clinical Genetics – which can be accessed by scanning this QR code:

The Meath Foundation

The Meath Foundation was established in 1998 following the merger of the Meath Hospital with the Adelaide Hospital and The National Children's Hospital, creating Tallaght University Hospital (TUH).

Today, the Foundation operates as an independent charitable organisation, with its own Board and executive team, working in close partnership with TUH to support better patient care.

Our mission is simple: to support research, innovation and quality improvement in TUH, while also contributing to education and the arts within the hospital community.

Meet our Chairperson and Operations Team.

Sibeal Carolan, Chairperson

Ger Prendergast, CEO

Ann Marie O'Neill, Operations Officer

Supporting Medical Research

A central focus of the Foundation's work is supporting early-stage clinical research in TUH.

We provide targeted funding - typically awards of up to €75,000 - to established clinicians and researchers and also those at the early stages of their careers. This funding enables them to develop ideas, undertake pilot studies and generate the initial evidence needed to secure larger national and international grants.

Research projects currently being undertaken include:

- How best to investigate for an underlying sinister cause of Hyponatremia (low blood sodium levels) which affects up to one in three hospitalised patients. Preliminary findings were presented at a November 2025 meeting of the Irish Endocrine Society;
- Examining whether TIA (Transient Ischaemic Attack)/ischaemic stroke patients with HTPR (High on-Treatment Platelet Reactivity) are at a higher risk of experiencing recurrent vascular events on their prescribed antiplatelet medications than those without HTPR;
- Exploring how stimulating the anti-cholinergic pathway through non-invasive focused splenic ultrasound can reduce lung inflammation in patients with sarcoidosis;
- Investigating the role of immune cells called monocytes in the development of the severe autoimmune condition ANCA-associated vasculitis (AAV) which could pave the way for new therapies for this disease.

These projects reflect the breadth and ambition of research activity in TUH, with its strong focus on improving patient outcomes.

Improving Quality of Care

Alongside research, the Foundation supports practical, frontline-led quality improvement initiatives across the hospital.

Our focus is on projects that make a tangible difference to patient care - enhancing safety, improving efficiency and supporting innovation in how services are delivered.

A key priority is helping to translate research and evidence into everyday practice, ensuring that improvements are not only identified but embedded and sustained across the health system.

The Meath Foundation Research Laboratory

The Meath Foundation Research Laboratory (MFRL) is an important component of the research and innovation ecosystem at TUH. It provides a dedicated space where clinical questions arising in TUH can be translated into high-quality, patient-focused research. The laboratory represents a unique partnership between the Meath Foundation, TUH and Trinity College Dublin School of Medicine.

Through this collaboration, the Foundation supports research that is directly relevant to patient care and grounded in real clinical need.

Educating Future Healthcare Leaders

Since 2013, the Meath Foundation has invested approximately €600,000 in education and leadership development at TUH, helping to build a strong culture of healthcare leadership and innovation.

We co-fund a number of TUH staff members each year to complete the MSc in Leadership and Innovation in Healthcare at the Royal College of Surgeons Ireland. This Level 9 programme equips healthcare professionals with the skills to lead change in complex environments.

Importantly, each participant undertakes a project aligned with TUH priorities, ensuring real and immediate impact within the hospital. Most graduates progress to senior leadership roles within the hospital, strengthening TUH's leadership capacity for the future.

In 2025 MSc Fellowships were awarded to:

- Rhonda Mooney
- Karl Doran
- Hannah Lyons
- Jiby Joy

We congratulate all recipients and wish them well in their studies.

Meath Foundation Fellowships 2025: From left to right: Shauna Ennis, Head of the Centre of Learning & Development; Sharon Larkin, Director of HR; Rhonda Mooney; Karl Doran; Ger Prendergast, CEO of the Meath Foundation; Hannah Lyons and Jiby Joy

Arts & Health

The Meath Foundation also recognises the important role that the arts play in healthcare.

We are proud to support the TUH Arts & Health Programme, which enhances the hospital environment for patients, families, staff and visitors. These initiatives contribute to wellbeing, create a more welcoming atmosphere and reflect a more holistic approach to care.

Through all of these initiatives, the Meath Foundation continues to play a vital role in supporting innovation, leadership and better patient care at the Hospital.

> **Through all of these initiatives, the Meath Foundation continues to play a vital role in supporting innovation, leadership and better patient care at the Hospital.**

14 Research & Publications

ANAESTHESIOLOGY

- **Ulnar Nerve Decompression in a Patient with Myotonia Congenita under Regional Anaesthesia in a Daycase Setting: A Case Report.** A Miglani , L.M. Hughes , C. Bossut , C.C Nestor. Ambulatory surgery. March 2025; 31(1):11-12.

CARDIOLOGY

- **Low awareness of lipid disorders amongst individuals despite their high prevalence.** Walsh, A., Agar, R., Offiah, G., Maher V. Ir J Med Sci **194,** 867–872 (2025). https://doi.org/10.1007/s11845-025-03973-w
- **Lipoprotein(a) levels in Irish subjects from a specialised lipid centre** Iulia Tustiu1 · Dilara Ensar · Ailish O'Keeffe · Eoin Begley · Gerard Boran · Richard Armstrong · Vincent Maher Irish Journal of Medical Science (2025 -) https://doi.org/10.1007/s11845-025-04003-5
- **EU-Wide Cross-Sectional Observational Study of Lipid-Modifying Therapy Use in Secondary and Primary Care: the DA VINCI study April 2025** Kausik K Ray, Bart Molemans, W Marieke,Schoonen ... Vincent Maher ..Monika Lukaszewicz, European Journal of Preventive Cardiology 28(11):1279–1289
- **Overweight, obesity, and cardiovascular disease in heterozygous familial hypercholesterolaemia: the EAS FH Studies Collaboration registry** Frederick J Raal, Amany Elshorbagy, Antonio J Vallejo-Vaz ... Vincent Maher.. Kausik Ray. January 2025 European Heart Journal 46(12)DOI: 10.1093/eurheartj/ehae791

DERMATOLOGY

- **Robbing peter to pay paul—an exploration of the cost to the state of melanoma attributable to sunbed use in Ireland and a comparison to the potential for profitability of Sunbed premises.** Quigley C, Murray G, Hackett C, Tobin A. JEADV Clinical Practice. 2025 May 23;4(5):1221–2. doi:10.1002/jvc2.70070
- **Frailty in hidradenitis suppurativa: A case–control study. Clinical and Experimental Dermatology.** Howard-James C, Murray G, Al Hosni F, Maguire M, Lai F, Yoo H, et al. 2025 Nov 22;51(3):498–500. doi:10.1093/ced/llaf519
- **Hyperpigmented plantar rash in a confused patient with new HIV diagnosis: Syphilis or Kaposi sarcoma?** Howard-James, C. Lai F, Crowther S, Connolly M. (2025), JEADV Clinical Practice, 5(1), pp. 290–291. doi:10.1002/jvc2.70192.
- **Expect the unexpected: a saying to bear in mind.** Yong JF, Quigley C, Yoo LJ, Connolly M, Tobin AM. Melanoma Research. 2025 Feb 1;35(1):75-6.
- **My battle with psoriasis: from struggle to advocacy–a life transformed by new treatments.** Irwin C, Yong JF, Dolan M, Greenwood M, McMahon D, Tobin AM. Clinical and Experimental Dermatology. 2025 Jun;50(6):1258-9.
- **A benign mimic in the world of melanocytic lesions.** Yong JF, Crowther S, Tobin AM. J Clin Images Med Case Rep. 2025; 6(1): 3449
- **When itch becomes unbearable.** Yong JF, Lai F, Hackett C, Tobin AM. Clinical and Experimental Dermatology. 2025 Jul;50(7):1480-2.

- **When Classic Signs Deceive: A Widespread Papulosquamous Eruption in Skin of Colour.** Yong JF, Howard-James C, Crowther S, Tobin AM, Hackett C. Dermatopathology. 2025 Jul 21;12(3):21.
- **A Survey on Methotrexate Prescribing and Monitoring Practices in Ireland.** Yong JF, Lai F, Quigley C, Yoo LJ, Howard-James C, Hosni FA, Murray G, Tobin AM. JEADV Clinical Practice. 2025 Sep;4(4):774-82.
- **Closer Care, Cleaner Air: The Greening in Dermatology.** Yong JF, Tobin AM. Dermatology. 2025 Oct 6;241(4):344-7.
- **A single-centre, prospective, qualitative analysis of knowledge, attitudes and behaviour of sunbed use among patients attending a pigmented lesion clinic in a tertiary referral centre.** Lai FY, Quigley C, Murray G, Gordon A, Yong JF, Yoo H, et al. Skin Health and Disease. 2025 May 6;5(3):210–3. doi:10.1093/skinhd/vzaf014
- **Lost in the scales: Alcohol-induced zinc deficiency.** Lai FY, O'Hare K, Crowther S, Hackett C, Molloy K. JAAD Case Reports. 2025 Nov;65:10–1. doi:10.1016/j.jdcr.2025.06.062
- **Skin oncology. Clinical and Experimental Dermatology.** Al Hosni F, Lai FY, Molloy K. 2025 Sept 29;51(1):172–3. doi:10.1093/ced/llaf405
- **A large mass on the thigh.** Howard-James C, Brennan C, Murray G, Gillis A, Crowther S, Molloy K. JEADV Clinical Practice. 2025 Oct 28;5(1):337–9. doi:10.1002/jvc2.70212
- **A long-awaited diagnosis: Atypical presentation of *mycobacterium marinum*. A patient's perspective.** Howard-James C, Molloy K. Clinical and Experimental Dermatology. 2025 Sept 20;51(1):163–5. doi:10.1093/ced/llaf430
- **Atypical waves: Nonsporotrichoid mycobacterium marinum skin infection in an immunocompromised scuba diver.** Howard-James C, Brennan C, Prior A-R, Crowther S, Allen J, McLaughlin A-M, et al. Skin Health and Disease. 2025 Oct 1;5(6):470–3. doi:10.1093/skinhd/vzaf072
- **A waxy wonder: unveiling a rare dermatological mystery.** Yong JF, Yoo LJ, Crowther S, Tobin AM, Connolly M. British Journal of Dermatology. 2025 Jun 27;193(Supplement_1).
- **Expect the unexpected.** Yong JF, Quigley C, Yoo LJ, Connolly M, Tobin AM. British Journal of Dermatology. 2025 Jun 27;193(Supplement_1).
- **A to F think MF! A memory aid for early recognition of mycosis fungoides/sézary syndrome.** Molloy K, Wachsmuth R, Murphy R, Farquharson N, Scarisbrick J. British Journal of Dermatology. 2025 Sept 15;193(6):1235–1235. doi:10.1093/bjd/ljaf367
- **The diagnosis of early-stage mycosis fungoides: Views held by experts and non-experts in cutaneous lymphoma.** Beatty P, Molloy K, Porkert S, Foley MP, Tobin A, Trautinger F, et al. JDDG: Journal der Deutschen Dermatologischen Gesellschaft. 2025 Jun 29;23(9):1094–102. doi:10.1111/ddg.15799
- **A case of nonscarring alopecia with follicular accentuation on the limbs of a paediatric patient.** Kearney N, Stefanovic N, Murray G, Stacey C, Kilgallen C, Molloy K, et al. Clinical and Experimental Dermatology. 2025 Jan 17;50(6):1291–3. doi:10.1093/ced/llaf033

EMERGENCY MEDICINE

- **Primary survey: highlights from this issue.** McCabe A. Emergency Medicine Journal 2025;42:147.
- **Clinical outcomes for emergency department patients diagnosed with proximal humeral fractures.** B Mohammed, K Connolly, N Li Green, D Molony, T Coughlan, A McCabe. Ir Med J; May 2025; Vol 118; No. 5; P78. May 29th, 2025.
- **Assessment and management of acute epididymo-orchitis in the emergency department.** Cooper P, Keogh S, Flynn R, Prior AR, McCabe A. Ir Med J. 2025 Aug 21;118(7):107. PMID: 40864150.
- **Implementation of an acute abdominal pain diagnostic pathway in the emergency department.** Blomerus S, Splinter TL, Gillis A, Buckley O, Turner H, McCabe A. BMJ Open Qual. 2025 Aug 19;14(3):e003505. doi: 10.1136/bmjoq-2025-003505. PMID: 40835268; PMCID: PMC12366589.

- **Evaluation of an advanced nurse practitioner led emergency rapid assessment and treatment service.** Deay D, O'Keefe O, Byrne M, McBrien B, McCabe A. Int Emerg Nurs. 2025 Sep 26;83:101684. doi: 10.1016/j.ienj.2025.101684. Epub ahead of print. PMID: 41014775.
- **Impact of a trauma bypass protocol on a receiving Emergency Department: a 4-year review.** Daly D, Lacey C, Yeung A, Mooney S, Irwin D, Masterson S, McCabe A. Ir Med J. 2025 Dec 10;118(10):175. PMID: 41379080.
- **Evaluation of an out-of-catchment ambulance hyperacute FAST+ (stroke) bypass pathway.** Perry L, Riordon R, Mooney S, Irwin D, Masterson S, McCabe A. Ir Med J. 2025 Dec 10;118(10):173. PMID: 41379037.
- **Advancing Open-Access Education for the Surgical Team Worldwide: The Development and Rollout of the United Nations Global Surgery Learning Hub (SURGhub).** O'Flynn E, Tolani MA, Joos E, O'Sullivan J, Sharma D, Wren SM, Chavarri AC, Wake PB, Parker AS, Rowles J, Khan L. World Journal of Surgery. 2025.
- **Implementation of a multidisciplinary hospital and community acute urinary retention pathway for emergency department patients.** Suliman H et al, 2025 International Journal of Integrated Care. 25(S1):461 DOI: doi.org/10.5334/ijic.ICIC24461
- **Evaluation of a pathway redirecting low acuity patients from an emergency department to a local GP clinic.** McCabe A et al, 2025 International Journal of Integrated Care. 25(S1):460 DOI: doi.org/10.5334/ijic.ICIC24460
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