



Tallaght University Hospital Board Meeting & AGM
Via Teams
24th May 2021
08:00-10:00

Participating:

Board member:

Mr. Liam Dowdall (LD)
Mr. Mark Varian (MV)
Mr. John Hennessy (JH)
Mrs. Mairead Shields (MHS)
Prof. Kathy Monks (KM)
Mr. Edward Fleming (EF)
Dr. Darach O' Ciardha (DO'C)
Prof. Patricia Barker (PB)
Dr. Vivienne Byers (VB)
Archdeacon David Pierpoint (DP)

Also participating:

Executive Management Team:

Ms. Lucy Nugent (LN)
Mr. Dermot Carter (DC)
Mr. John Kelly (JK)
Ms. Sharon Larkin (SL)
Ms. Áine Lynch (ÁLyn)
Mr. Shane Russell (SR)
Prof. John Quinlan (JQ)
Prof. Catherine Wall (CW)
Prof. Paul Ridgway (PR)
Ms. Anne McKenna (AMcK)

Apologies:

Prof. Anne-Marie Brady (AMB)

No.	Agenda Items	Decisions Made	Action By
21.04.01	Apologies	Noted.	
21.04.02	Patient's Story	<p>A briefing paper highlighting two Patient's Stories was circulated in advance of the meeting and taken as read. A piece of music accompanied one of the patient's stories. Each Patient Story and the case book learnings from same were discussed.</p> <p>It was suggested that a presentation from the Arts & Music Department to the Hospital Board take place.</p> <p>Intellectual Disability CNM – a review of the contract following year one was suggested in the context of allocating funding for the post on an ongoing basis.</p>	ÁLyn
21.04.03	New Declarations of Interest	There were no new declarations of interest made.	
21.04.04	Minutes of Previous Meeting	Minutes of the meeting held on 26 th April 2021 which were circulated in advance of the meeting were approved by the Board.	
21.04.05	Issues Log 1.5	The issues log which was circulated in advance of the meeting will be updated accordingly.	
21.04.06	AGM Adoption of the Annual Financial Statement for 2020	<p>Adoption of the Annual Financial Statements 2020</p> <p>A briefing paper in respect of the draft Annual Financial Statements (AFS) for the year ended December 2020 was circulated to the Board</p>	

		<p>in advance and taken as read. Also circulated in advance of the meeting were the following:</p> <ol style="list-style-type: none"> 1. Annual Financial Statements 2020 2. Auditor’s Report to the Audit Committee 3. Representation Letter 4. Analytical Review 5. Annual Financial Monitoring Return 6. Going Concern briefing note from the Audit Committee <p>LD welcomed Ms. Margarita Martin, Deloitte and Ms. Eithne Kearny, TUH Finance Department to the meeting.</p> <p>DC briefed the Hospital Board regarding the review process undertaken by the Audit Committee, having met jointly with the Finance Committee and External Auditors on the 1st April and 28th April subsequently.</p> <p>MM advised that Deloitte undertook the Audit and engaged with the Audit Committee and Finance Department. MM outlined notes regarding the Going Concern, Accruals and Creditors at year end and a subsequent event disclosure relating to the recent cyberattack.</p> <p>PB formally welcomed MM on behalf of the Audit Committee and Hospital Board and advised the Committee have reviewed the AFS on behalf of the Board. PB drew Board members attention the following:</p> <ul style="list-style-type: none"> • Board Members Report within the AFS outlining the responsibility of all Board members in relation to the AFS. • PPE stock and reporting of same. • Covid Costs of €26m included within the AFS. PB acknowledged the work undertaken by the CEO & Director of Finance in securing adequate and appropriate PPE for staff throughout the pandemic. • Going Concern. • Post Balance Sheet note regarding the cyberattack (non-adjusting). <p>PB thanked the CEO, DC, the Finance Team and the external auditors for the work undertaken in order to produce the AFS in a particularly challenging year. PB on behalf of the Audit Committee formally recommended the adoption of the AFS 2020 to the Hospital Board.</p> <p>LD thanked PB and the Audit Committee for their robust review and oversight of the AFS.</p> <p>EF advised at the meeting of the Finance Committee on the 20th May, the Finance Committee endorsed the Audit Committee’s recommendation that the Hospital Board approve the AFS for 2020.</p> <p>LD suggested further inclusion of community services in particular in the AFS going forward and a required amendment to the catchment area figure was noted.</p> <p>The Hospital Board approved the Annual Financial Statements 2020 having been formally proposed by EF and seconded by JH.</p>	
21.04.07	<p>Chairman’s Update</p> <p style="text-align: right;">2.1</p>	<p>LD acknowledged the difficult period resulting from the cyberattack and the work undertaken by IT in this regard.</p>	

		<p>VHF. LD advised the VHF are in the process of recruiting a new Director/CEO.</p>	
21.04.08	<p>CEO Update 2.2</p>	<p>CEO Update The CEO's Update was circulated in advance of the meeting and taken as read. LN briefed Board members as follows:</p> <ul style="list-style-type: none"> • Minister for Health, Mr. Stephen Donnelly launched the Sláintecare Action Plan from the Reeves Surgery Day Centre. The Minister also formally opened the Reeves Surgery Day Centre and positive feedback was received regarding the facility and impact on waiting lists. TUH showcased the 5 Sláintecare projects and confirmation of funding being extended was recently received. • Elective Hospital Sites. Formally submissions are required however TUH is still reviewing the potential site with regards to the criteria required for same. • Charter. LN advised of communication received from the Minister advising of the potential timeline for approval of the revised Charter, noting it is to be submitted to both Houses of the Oireachtas and it is anticipated that this will take place in the autumn. • CHI. Oversight meetings ongoing with regards to the Satellite unit and shared services and the space reverting to TUH. It was noted the Sub-Lease remains outstanding. • Covid. LN advised this day last week TUH had 8 positive inpatient. Today TUH has 14 positive inpatients noting given the easing of restrictions Hospitals can expect to see a moderate increase in positive inpatient cases. LN advised that by Friday of this week all TUH staff will have received their second vaccine. • Canopy. LN briefed Board Members regarding the tender for a canopy at the back of the canteen noting it will assist with social distancing going forward and will be utilised in winter months. DC confirmed funding received for same. LN advised the tender process has been completed and in order to progress signing of contracts the Chairman, will as per the procedure for obtaining Board approval between Board meetings, will consult with two Board members and the matter shall be reported at the next meeting of the Board for formal ratification. 	
21.04.09	<p>For Discussion. 3.1</p>	<p>HSE Cyberattack LD welcomed DW to the Board meeting. LN reiterated the Board's thanks to DW and his team.</p> <p>LN briefed the Hospital Board regarding the attack and the activating of the Hospital's Internal Incident Plan. LN advised DW had previously installed host intrusion protection software and this detected some suspicious activity on the TUH network but quarantined same. LN advised contingency plans, usually designed for periods of 72hrs have been maintained some 8 days on. The cancellation of Radiology appointments, the de-activation of external emails was noted and manual contingencies were noted. LN acknowledged the commitment and dedication of the IT team and the Executive Management Team in maintaining a level of service for patients.</p> <p>DW acknowledged and thanked each member of the IT department, commending their dedication, expertise and competence in managing the cyberattack.</p>	

		<p>DW briefed Board Members regarding events advising that the HSE have mandated that FireEye Ransom ware Detection Software is installed on all Hospital PC's. FireEye will detect if the ransom ware is present, and if so isolate that PC and alert our ICT dept. FireEye will then provide assurance to the HSE that TUH is ransom ware free and allow TUH to connect back to the HSE ICT systems once they become available. DW advised all PC's and laptops have been cleared and the Hospital currently has a security rating of 2. The deployment of Fire Eye will impact some legacy applications.</p> <p>It was noted iPMS (patient information management system) was restored yesterday and work to update same is expected to be completed this week. NIMIS access was restored for TUH yesterday with full access to same expected today or tomorrow. There are currently 14 HSE systems off line that TUH use. It was noted that there is no timeline for the restoration of Healthlink.</p> <p>DW advised that the Hospital needs to consider that some TUH data may be leaked via the HSE Cyberattack however it was noted that an injunction was obtained by the HSE to block the publication of data in this regard.</p> <p>It was noted that the Hospital underwent a mini launch of the EPR as a result of the situation and positive feedback was received re same.</p> <p>PB congratulated DW and his team on the work done in order to protect TUH. It was noted that Fire Eye was procured by the HSE for this incident only. If Hospital's wish to procure specific protection the normal procurement process would have to be undertaken.</p> <p>DC gave assurances to the Hospital Board that contingencies have been put in place to ensure payroll proceeds.</p> <p>It was recommended that DW be invited back to the Hospital Board to provide an update on the matter in due course.</p> <p>JQ thanked DW and his team on behalf of the Consultant body in the work undertaken to ensure patient services were still provided with safe and timely care.</p>	AMcK
21.04.10	For Decision 4.1	<p>Annual Compliance Statement for decision and signing. Having been circulated prior to the meeting the briefing paper and Annual Compliance Statement was taken as read.</p> <p>DC briefed members regarding the annual process, noting the Audit Committee reviewed the Annual Compliance Statement at its meeting on April 1st 2021. DC outlined the Hospital's compliance with the Charities Governance Code as of 24th May 2021.</p> <p>PB drew members attention to particular items of compliance within the Charities Governance Code as follows: 4.2 Find out the laws and regulatory requirements that are relevant to your charity and comply with them. Compliance with same was confirmed.</p>	

		<p>5.7 Make sure all of trustees understand; their role as charity trustees; the charity’s governing document and this code. PB advised the Code was circulated to Board members in advance of the meeting, therefore compliance with same was confirmed.</p> <p>5.8 Commit to resolving problems and emerging issues as quickly as possible and in the best interest of the Charity. Compliance with same was confirmed.</p> <p>6.1 Make sure that the name and Registered Charity Number (RCN) of your charity is displayed on all written materials, including, website, social media platforms, and email communications. Compliance with same was confirmed.</p> <p>PB outlined the volume of work undertaken in order to review compliance and noted the increased regulation in which the Hospital must comply with.</p> <p>The Hospital Board approved the Annual Compliance Statement and AFMR having been proposed by EF and seconded by KM.</p> <p>4.2 Annual Report Having been circulated in advance of the meeting, the draft Annual Report 2020 was taken as read.</p> <p>JK outlined that the AFS within the report remains in draft format and will be updated following Board approval. JK advised that the report has been produced in line with last year’s format.</p> <p>KM suggested that the Strategic Priorities be outlined at the beginning of the report. JK to update.</p> <p>JK acknowledge the work undertaken by J Coffey, Communications Manager in producing the report. The Board thanked JK for the excellent production and report.</p> <p>The Hospital Board approved the Annual Report 202 having been proposed by PB and seconded by KM.</p> <p>4.3 DMHG TUH SLA Having been circulated in advance of the meeting Part 1 & Part 2 of the Service Level Arrangement 2021 was taken as read.</p> <p>JK briefed Board members regarding Part 1 SLA 2021 noting the last time TUH signed Part 1 was for the period 2019/2020 however the updated SLA has an addition that TUH are not comfortable signing. This addition relates to clause 9. JK advised discussions have taken place with DMHG and it has been agreed that TUH will sign the 2019 SLA to cover the period 2021.</p> <p>The Hospital Board approved the signing of the 2019 SLA to cover the period 2020 having been proposed by PB and seconded by KM.</p> <p>JK briefed Board members regarding Part 2 SLA 2021 noting it follows the same format at last year, however JK outlined the caveats TUH have included.</p>	
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21.04.11	<p>For Noting.</p> <p>5.1</p>	<p>Energy Performance Contract Signing.</p> <p>Having been circulated in advance of the meeting the briefing paper regarding the formal signing of Energy Performance Contract was noted.</p>	
21.03.11	<p>AOB</p> <p>6.1</p>	<p>Closing Items</p> <p>There were no further items for discussion.</p>	
21.03.12	<p>Next Meeting</p> <p>6.2</p>	26 th July 2021	

Apologies to Ms. Anne McKenna, Interim Board Secretary on 4143845/ anne.mckenna@tuh.ie.