



**Tallaght Hospital Board Meeting**  
**Robert Graves Postgraduate Centre**  
**Tallaght Hospital**  
**20 June 2016**  
**07:30-10:00**

**Present:**

**Non-Executive Members**

Mr. Michael Scanlan, Chairman (MS)  
 Mr. Andreas McConnell (AMcC)  
 Mr. David Seaman (DAS)  
 Ms. Anna Lee (AL)  
 Mr. Liam Dowdall (LD)  
 Prof. Patricia Barker (PB)  
 Mrs. Mairéad Shields (MHS)  
 Prof. Kathy Monks (KM)  
 Dr. Jim Kiely (JK)

**Executives in Attendance**

Ms. Lucy Nugent (LN)  
 Dr. Daragh Fahey (DF)  
 Dr. Catherine Wall (CW)  
 Ms. Hilary Daly (HD)  
 Mr. John O'Connell (JOC)  
 Mr. Dermot Carter (DC)

**Apologies**

Prof. Richard Reilly (RR)  
 Archdeacon David Pierpoint (DP)  
 Dr. Siobhán Ní Bhraín (SNiB)  
 Mr. David Slevin (DS)  
 Dr. Eleanor O' Leary (EOL)

**In Attendance**

Madeline O' Neill (MO'N)

No.	Agenda Items	Decisions Made	Action By
		<b>Board member only time.</b>	
16.05.01	<b>Apologies</b>	<p>Apologies were noted.</p> <p>MS on behalf of the board congratulated Lucy Nugent on her recent appointment to the role of Deputy CEO.</p> <p>It was agreed that a board member would serve on the interview panel for the COO role; the CEO would contact one or more members individually in this regard.</p> <p>MS advised the board of the recent bereavement of two staff members and HD advised the board of the recent passing of a former nurse at Tallaght Hospital. The board expressed condolences to the families concerned.</p> <p>MS advised that he will raise the matter of governance at the CHG and the Board Away day under AOB.</p>	<b>DS</b>
16.05.02	<b>Patient's Story</b>	<p>HD briefed the board on correspondence received from a patient who was on Lynn Ward for one week. The patient was highly complementary of the great care she received and the professionalism of all the team.</p>	

		HD also briefed the board in respect of a patient who having reached an agreement with the hospital to settle her invoice over a certain period of time had later received a letter from Interim Justica, the hospital's debt collector, advising her of an outstanding amount due on her account. Following an intervention by the hospital, the matter had been resolved and the patient was very thankful to the hospital for how she had been treated.	
16.05.03	<b>New Declarations of Interest</b>	There were no declarations of interest for noting.	
16.05.04	<b>Minutes of Previous Meeting and Teleconference</b>	Minutes of the meeting held on 23 May 2016 having been circulated in advance of this meeting were approved for signing.	
16.05.05	<b>Issues Log</b>	The issues log was reviewed and accepted.	
16.05.06	<b>Regular Updates</b>  <b>Chairman's Update</b>  <b>Quality, Safety &amp; Risk Management Committee Update</b>  <b>Finance Committee</b>	<p>MS briefed the board on a meeting in Trinity on 23 May 2016 which discussed (i) how best to use THI to facilitate interaction between the three voluntary hospitals &amp; TCD and DMHG and (ii) the need to wind up the Haughton Institute. He noted that he had attended (i) an "Annual Healthcare Session" hosted by Deloitte on 8 June 2016 and (ii) an event hosted by the HSE to showcase an initiative in relation to Patient Safety Walkabouts during which the HSE had acknowledged that such walkabouts already took place in Tallaght.</p> <p>The committee has not met since the last board meeting.</p> <p>LD advised that the committee met on 19 May 2016. It received a presentation from David Addie of the finance department about management accounting and budget control processes which provided assurance in this regard to the committee. The committee also received a presentation from Mr. Jacob Johnson of the DMHG about activity based funding. LD highlighted the importance of this issue and the need for the board to support the executive in dealing with this new funding model. It was agreed that Mr. Johnson would be invited to present to the board about activity based funding in the Autumn. LD also complimented the finance team on the very good relationship they had developed with Mr. Johnson.</p>	<b>DC</b>
	<b>Audit Committee</b>	The next meeting is scheduled to take place on 22 <sup>nd</sup> June 2016.	
16.05.07	<b>Integrated Management Report and other papers for noting</b>	<p>The Integrated Management Report was circulated in advance of the meeting and taken as read. A communications update was circulated at the meeting.</p> <p>The DCEO advised the board that a draft of the annual report will be circulated shortly with a view to it being adopted at the July board meeting. She also confirmed that the CSS is being printed at present and there had been no update from the DMHG in respect of its strategic plan for adult services following the hospital's presentation to the group in October 2015 (but it was understood that a draft 'action plan for the configuration of midlands clinical services' was being developed by the DMHG).</p>	<b>LN</b>

	<p><b>Operations</b></p> <p><b>QSRM</b></p> <p><b>HR</b></p> <p><b>Finance</b></p>	<p>LN updated the board in respect of scheduled and unscheduled care performance. For now, the target remains to limit average trolleys to 12 a day at 8am and maintain trolley peaks below 30 every day. It was noted that ED attendances in May represent the highest monthly attendance on record. It was agreed that the way data in the IMR is presented should be improved to highlight key issues/risks and the mitigating actions being taken.</p> <p>The board discussed a number of the indicators in the QSRM part of the report, including medical re-admission rates, the national emergency hip fracture target and the rate of hospital acquired MRSA bloodstream infections. It was agreed that these matters should be monitored in conjunction with the Clinical Services Strategy.</p> <p>HD provided an update and analysis in respect of complaints received at the hospital. The Patient Advocacy Department will make a formal presentation to the board in November 2016.</p> <p>JO’C updated the board in respect of correspondence from the HSE about pay cost management/growth in employee numbers. The HSE had accepted that the increase in numbers early this year was appropriate and the hospital will be meeting the HSE about the subsequent growth in numbers and highlighting the need to look at overall pay costs including agency spend which is low in Tallaght. Concern was expressed about the significant increase in absenteeism and JO’C will revert to board about this.</p> <p>DC updated the board in respect of the hospital’s financial situation. The hospital has made its position clear to the HSE, viz. that the opening allocation is nearly €19m less than projected expenditure for the year. It was noted that there had been recent developments at national level in relation to a revised allocation for the health sector and it was agreed that this issue would be discussed again at the July board meeting.</p>	<p><b>LN</b></p> <p><b>JO’C</b></p> <p><b>DC</b></p>
<p><b>16.05.08</b></p>	<p><b>Medical On Call Rota</b></p>	<p>A briefing paper was circulated in advance of the meeting and taken as read. It was noted that this issue had been brought to board following the presentation about service/operational challenges last October.</p> <p>The DCEO and the Clinical Director briefed the board on the current arrangements in relation to the general internal medicine (GIM) consultant on-call rota which is designed to provide 24/7 general medical consultant expertise either on site or off site with medical NCHDs on site operating under the governance of a named on call medical consultant. It was noted that the low number of GIM consultants in Tallaght relative to other comparable hospitals meant the existing rota imposes a much greater burden on them than colleagues in other hospitals. In addition, the existing arrangements were sub-optimal in terms of best patient care and efficiency. It was agreed that the scope for improving the existing system would be explored further by CW and the Medical Directorate and the matter would be brought back to board.</p>	<p><b>CW</b></p>

16.05.09	<b>Presentation by Mr. David Wall, Director of ICT</b>	<p>MS welcomed Mr. David Wall to the meeting.</p> <p>DW provided an update to the board in relation to challenges and achievements within the ICT Directorate since the beginning of his tenure 11 months ago. He highlighted the key findings from various reviews and the future strategy for the Directorate. It was noted that cyber security is one of the biggest threats facing healthcare at present. DW confirmed that the ICT Department is managing this threat to the best of its capability.</p> <p>It was agreed that the clinical portal (to provide clinicians with a single view of patient information) was the highest priority development. MS stressed that DW and his team had the full support of the board in that regard and in terms of his overall approach. It was agreed that the board would be updated on progress after an appropriate interval.</p> <p>DW left the meeting at this time.</p>	DW
16.05.10	<b>AOB</b>	<p>MS provided a brief update on developments in relation to a legal governance structure for the Children's Hospital Group.</p> <p>It was agreed that the board away day would proceed in September (exact date to be confirmed) on the basis outlined in a note which had been circulated by the Chairman in advance of the meeting.</p> <p>It was decided to defer discussion on the Governance &amp; Board Development Committee and the Staff &amp; Organisation Development Committee to a later meeting.</p> <p>There was no further business to conduct and this concluded the business of the meeting.</p>	
16.05.11	<b>Next Meeting</b>	18 July 2016 at the Robert Graves Postgraduate Centre, Centre for Learning and Development, TH.	

**Apologies** to Ms. Madeline O'Neill, Board Secretary on 4143845/ [Madeline.oneill@amnch.ie](mailto:Madeline.oneill@amnch.ie)