



Tallaght University Hospital Board Meeting
Robert Graves Postgraduate Centre
Tallaght University Hospital
23rd September 2019
07:30-10:00

Present:

Board member

Mr. David Seaman (DAS)
Prof. Patricia Barker (PB)
Dr. Darach O' Ciardha (DOC)
Mrs. Mairead Shields (MHS)
Prof. Kathy Monks (KM)
Mr. Mark Varian (MV)
Mr. Edward Fleming (EF)
Archdeacon David Pierpoint (DP)
Dr. Anne-Marie Brady (AMB)

In attendance:

Ms. Lucy Nugent (LN)
Mr. Dermot Carter (DC)
Mr. John Kelly (JK)
Prof. Paul Ridgway (PR)
Ms. Aine Lynch (ALyn)
Mr. Shane Russell (SR)
Prof. Catherine Wall (CW)
Prof. John Quinlan (JQ)
Ms. Madeline O' Neill (MO'N), Board Secretary

Apologies

Mr. Liam Dowdall (LD)
Ms. Anna Lee (AL)
Dr. Peter Lavin (PL)

| No. | Agenda Items | Decisions Made | Action By |
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| | | Board only time | |
| 19.06.01 | Apologies | Apologies were noted. DAS advised the Board that he will Chair this Board meeting in the absence of the Chairman. DAS welcomed Dr. Darach O' Ciardha, Board member, to his first meeting of the Hospital Board. DAS also welcomed Mr. Shane Russell, recently appointed Chief Operations Officer, to his first meeting of the Hospital Board. DAS congratulated Professor Catherine Wall on her new role as Director of Quality Safety and Risk Management and welcomed Professor Wall to her first Hospital Board meeting in this capacity. DAS invited the Hospital Board to introduce themselves. | |

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| 19.06.02 | Patient's Story | <p>ALyn advised the Board in respect of a letter received from a patient of Tallaght University Hospital who wrote to the Patient Advocacy Department in August 2019 outlining her appreciation of the treatment and care she had received following a serious road traffic accident. The lady recounted her journey from the time she was brought to the Emergency Department. She mentioned PACU, Franks Ward, Emergency Department, Pastoral Care and many staff members including nurses, doctors, healthcare assistants, porters, phlebotomists, cleaning staff and catering staff. She included names of many staff members.</p> <p>The patient also mentioned how well her family were treated by staff. The kindness was sometimes the unspoken word or the gentle touch of the hand acknowledging her distress without either party having to say anything.</p> <p>Process: Patient Advocacy acknowledged receipt of the correspondence with a heartfelt thank you to the patient. Patient Advocacy shared the feedback with all disciplines mentioned.</p> <p>Learning: The importance of maintaining a patient's dignity even when they are very ill must not be underestimated. When a patient is unwell the importance of "minding" the family is also of value. The personal touch of staff helps a patient in their recovery i.e. "chats". Small gestures, such as the touch of a hand, send a positive message to patients.</p> <p>ALyn advised the Board in respect of an email addressed to the Patient Advocacy Department with a request to bring to the attention of the Director of Facilities and Estates and the CEO was received on 24th May 2019. The gentleman raised concerns with regard to people smoking on the grounds of TUH. He went on to explain that it is his understanding that the HSE had undertaken that every hospital and institution would be smoke-free by 2015. The gentleman acknowledged that it is a difficult matter to police, but felt if there should be a designated area provided away from the entrances to the hospital for people to smoke. This would ensure that non-smokers are not subjected to inhaling smoke when entering the hospital.</p> <p>Process: Patient Advocacy acknowledged receipt of the correspondence and forwarded to the requested departments and personnel. PAD thanked the gentleman for his suggestions.</p> <p>The Director of Facilities and Estates noted receipt of the correspondence. Patient Advocacy provided a comprehensive response to the issues raised acknowledging that TUH is a smoke free campus and that the hospital strives on a daily basis</p> |
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| | | <p>to enforce this policy.</p> <p>Recommendations/Actions: Acknowledging the complainant promptly and assuring him of our commitment towards a smoke free campus. Healthy Ireland/Occupational Health and Well Being are providing on going smoking cessation opportunities and supports for staff. Further engagement by TUH staff in the education programme Making Every Contact Count which includes a module on smoking cessation. A transition programme to becoming a tobacco free campus with designated smoking areas for staff and the public is being developed as an interim measure towards a tobacco free campus. There is learning to be gained from our colleagues in the Acute Psychiatric unit on site which became tobacco free on September 2nd.</p> | |
| 19.06.03 | New Declarations of Interest | <p>There were no new declarations of interest made.</p> <p>DAS reminded Board members of their obligations under the Ethics in Public Office Acts and asked everyone to return the completed forms to the Board Secretary at the earliest convenience.</p> | |
| 19.06.04 | Minutes of Previous Meeting | <p>Minutes of the meeting held on 22nd July 2019 which were circulated in advance of the meeting were approved for signing.</p> <p>It was noted that a final report from HIQA in respect of the recent unannounced visit is still awaited. A draft report was sent to management to provide feedback in the first instance. The draft report was returned to HIQA and management comments were incorporated and sent back again for further review.</p> <p>PB queried if there is an update in respect of the Memorandum which was circulated to the Hospital Board in July 2019 regarding the Network and Information Systems Directive. PB advised that the Audit committee is concerned with the burden of regulation with which the Hospital has to comply and most significantly for which no additional funding is received.</p> <p>LN advised that this matter has been brought to the attention of the DMHG and a response is awaited. It is noted that no additional funding is available for this matter.</p> | |
| 19.06.05 | Issues Log | <p>The issues log was reviewed and discussed by the Board and will be updated accordingly.</p> | |
| 19.06.06 | Chairman's Update | <p>DAS provided an update to the Board on the following matters:</p> <p>Hospital Charter/Ministerial Order DAS advised that a letter from the Chairman to the Minister for Health, which is copied to the Secretary General of the Department of Health, with an enclosure of a letter from Mr. Richard Knatchbull Chairman of the NCH, was circulated to Board members in advance of the meeting. An email in response was received from the Minister's office on 20th September 2019 advising that Departmental officials are currently reviewing the current draft of the Ministerial Order and are in discussions with the Office of Parliamentary Counsel. It was noted, that an update will issue in due course, once this</p> | |

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| | <p>Quality, Safety & Risk Management committee update</p> <p>Audit committee update</p> | <p>September 2019. The Minister for Health attended the event and presented the Awards.</p> <p>MHS advised that the Minutes of the joint meeting of the QSRM Board committee and the Audit committee which took place on 29th August 2019 will be circulated in due course.</p> <p>MHS advised that an EMT Risk Register Review Report for January to April 2019 was circulated in advance of this meeting for noting.</p> <p>MHS also advised that a Patient Safety Walkaround update Report for June 2019 was circulated in advance of this meeting for noting.</p> <p>MHS thanked Ms. Aine Lynch and Ms. Caitriona Kelly for preparing these two very useful and informative papers.</p> <p>MHS thanked Ms. Aine Lynch for her assistance and commitment during her tenure as Interim Director of QSRM. MHS welcomed Professor Catherine Wall to the role of Director of QSRM.</p> <p>The success of the Patient Safety Walkarounds for this year to date was noted by the Board.</p> <p>CW advised that a plan will be put in place for future Walkarounds and the focus will extend to quality.</p> <p>LN advised that the Executive Management Team are conducting a Spatial view of the entire Hospital at present.</p> <p>PB advised that the next meeting of the Audit committee is planned to take place on 25th September 2019. PB also advised that members of the Audit committee attended the joint meeting of the QSRM Board committee and the Audit committee on 29th August 2019 and thanked the Chair of the QSRM Board committee for the invitation.</p> <p>It was agreed that the Audit committee will received the full Risk Register twice per year.</p> | <p>CW</p> |
| <p>19.06.08</p> | <p>CEO Report</p> | <p>CEO Report</p> <p>A CEO Report was circulated in advance of the meeting and taken as read. LN provided an update on the following:</p> <p>ICU Build</p> <p>Stage 2C Design stage is progressing well and the Hospital will be in the position to go to tender in Q1 2020 subject to HSE capital funding. The CEO and Director of Facilities and Estates (FE) are in negotiations with the HSE in relation to timelines to progress this vital project.</p> <p>Tallaght Cross West Day Surgical Unit</p> <p>LN advised that the final documentation was signed between the Hospital and the Contractor on Thursday 19th September 2019 and construction is due to commence in the coming weeks with a</p> | |

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| | <p>projected completion timeline of August 2020. The Hospital has submitted a workforce plan to DMHG for the unit, for inclusion in the NSP 2020 estimates.</p> <p>Aseptic Unit LN advised that following a recent meeting with HSE representatives it was agreed that the Hospital's submission to replace the Aseptic Unit will be considered as an urgent item on the HSE Capital Steering Committee on 26th September 2019. It was noted that funding may be received in this regard through Brexit funding.</p> <p>Innovation Hub It was noted that thanks to funding from AWS an Innovation Hub and Health Information Centre is under development in the main atrium. As part of the implementation of the Hospital's Corporate Strategy, innovation will feature strongly and the Executive Management Team are developing a framework for same.</p> <p>HSE update As previously advised to the Board, the Hospital has received notification of its budgetary net financial limit of €231.9m which would see a projected deficit of €800,000. It is the Hospital's understanding that meeting this upper financial limit will be a key determinant of the 2020 budget allocation. There is ongoing focus on the Hospital headcount and overtime spend until year end.</p> <p>Slaintecare LN advised that nationally 477 integration projects were submitted to the DoH's Sláintecare Integration 2019 Fund (€20 million). TUH received approval for four projects and for a fifth National Clinical Programme project. All projects must have a focus on prevention, community care and integration across all health and social care settings which is also in line with the Hospitals corporate strategy. The timeline for the introduction of the Regional Integrated Care Organisations (RICOs) are still as yet undetermined but now thought to be in the region of eighteen months to two years' time.</p> <p>Voluntary Health Forum It was noted that the Hospital is actively participating in the Voluntary Healthcare Forum.</p> <p>Trinity Centre Agreement Trinity College have reverted to advise that they have retrieved documentation in relation to an agreement for the Trinity centre building at TUH. The Director of Facilities and Estates has requested same to be reviewed by the Hospital's legal advisors with the view to drawing up a new Memorandum of Understanding between TUH and TCD.</p> <p>Hackathon LN advised on a successful Hackathon which took place on 7th and 8th June 2019.</p> | LN |
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| | | <p>Operations</p> <p>JK advised that a Hospital wide review of compliance with HIQA National Safer Better Care Standards was completed in August. Following this review a quality improvement programme is in development. The next graduation for participant in the Quality Improvement Project management training will take place on 20th November.</p> <p>JK advised that the new medical rota and speciality decant meetings continue each weekday and are chaired by the Clinical Director. Positive feedback has been received from Consultants, NCHD's, Nursing and Patient flow staff in this regard.</p> <p>The Moratorium and headcount restrictions were discussed by the Board and it was agreed have a whole time equivalent number for the October meeting.</p> <p>Trends for Medical and Surgical average length of stay was discussed in detail by the Board and it was agreed that this matter will feature in the revised Integrated Management Report which is due before the Board at the October meeting.</p> | <p>JK</p> <p>JK</p> |
| 19.06.09 | Medical Board update | JQ advised, that there is no matter of particular note to report to the Board on behalf of the Medical Board at this time. | |
| 19.06.10 | Appointment of external member to the Staff and Organisation Development committee | A briefing paper in respect of the appointment of Mr. Martin Leavy as external member of the Staff and Organisation Development committee was circulated in advance of this meeting and taken as read. This appointment was proposed by KM and seconded by MHS. | |
| 19.06.11 | Appointment of external member to the QSRM Board committee | A briefing paper in respect of the appointment of Mr. Declan Daly as external member of the QSRM Board committee was circulated in advance of this meeting and taken as read. This appointment was proposed by MHS and seconded by DP. | |
| 19.06.12 | Corporate Strategy | <p>The most recent draft of the Corporate Strategy was circulated in advance of the meeting.</p> <p>LN advised that feedback from the sub-group is not included in this draft and will be updated in this regard.</p> <p>DAS advised that the Corporate Strategy was discussed at Board only time and it was agreed that a meeting of the sub-group should be arranged to discuss the next steps of the Corporate Strategy.</p> <p>Board members provided feedback in respect of the Corporate Strategy and this feedback will be incorporated into the document.</p> | <p>LN</p> <p>LN</p> |
| 19.06.13 | Application of the Corporate Seal | <p>A briefing paper in respect of the application of the Corporate Seal was circulated in advance of the meeting and taken as read.</p> <p>LN advised the Board that agreements between the Hospital and the Contractor in respect of Tallaght Cross West Day Surgical Unit have been finalised. In this regard there is a requirement to apply the Corporate Seal to the relevant documentation. This was proposed by PB and seconded by DP.</p> | |

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| 19.06.14 | Activity Based Funding presentation | <p>A presentation in respect of Activity Based funding (ABF) was circulated in advance of the meeting and taken as read.</p> <p>DC presented an over view of ABF performance for 2018 and the first six months of 2019. ABF is currently a shadow funding model, with an element of adjustment to actual funding levels. In the model, 60% of a hospital's funding is determined by in patient and day-case activity and the balance of 40% is provided as a block grant. Each in-patient and day case patient is assigned a DRG value on which patient funding is based . Higher DRG values based on increased complexity levels result in higher funding levels.</p> <p>In-patient and day-case activity levels declined during 2018 relative to 2017 and, more importantly the case complexity reduced over the same period due to increased admissions of medical patients via ED at the expense of elective surgical patients. In general, medical patients have a lower complexity value than surgical patients. In the ABF model higher patient complexity results in higher funding values for the hospital. The underperformance in 2018 resulted in an actual funding reduction in 2019 of €0.5m while a positive performance trend was noted for the first half of 2019.</p> <p>The board noted the significance of the ABF model.</p> | |
| 19.06.15 | Communications Department presentation | <p>A presentation in respect of Communications was circulated in advance of the meeting.</p> <p>DAS welcomed Ms. Joanne Coffey, Communications Manager to the meeting.</p> <p>JC provided an update in respect of activity and highlights since the last presentation to the Hospital Board.</p> <p>JC gave an update under the following headings:</p> <ol style="list-style-type: none"> 1. Engagement with the Media 2. Media Relations 3. Events support and campaign direction 4. Coverage secured through proactive activity 5. TUH Community Events Media Coverage 6. Press coverage 2015-2019 7. Community Engagement 8. Plan between September and December 2019 <p>DAS thanked JC for a very informative presentation and for all her work throughout the year.</p> | |
| 19.06.16 | Clinical Audit Committee Report | <p>A Clinical Audit committee report was circulated in advance of the meeting.</p> <p>JQ provided a further update at the meeting and acknowledged his colleagues in the Risk Management Department who prepared the report.</p> <p>JQ advised the Board that one of the main challenges in respect of Clinical Audit at present is GDPR.</p> | |

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| 19.06.17 | EMT Risk Register Review Report Jan-Apr 2019 | An EMT Risk Register Review Report for the period January to April 2019 was circulated in advance of the meeting for noting by the Board. | |
| 19.06.18 | Patient Safety Walkaround update Report June 2019 | A Patient Safety Walkaround update Report for June 2019 was circulated in advance of the meeting for noting by the Board. | |
| 19.06.19 | Updated Board Workplan 2019 | An updated Board Workplan for 2019 was circulated in advance of the meeting for noting by the Board. DAS advised that it is planned to have a Board Away Day in early 2020. | |
| 19.06.20 | AOB | DC informed the Board with regard to an incident of fraud at the Hospital in relation to a payroll transaction. DC assured the Board that the matter is being managed appropriately and control systems are under review. DC is to look at further enhancing the controls in this area. There was no further business to conduct and this concluded the business of the meeting. | DC |
| 19.06.21 | Next Meeting | 21 st October 2019 at the Robert Graves Postgraduate Centre. | |

Apologies to Ms. Madeline O'Neill, Board Secretary on 4143845/ Madeline.oneill@tuh.ie