



Tallaght University Hospital Board Meeting
25th July 2022
MS Teams
08:00am-10:30am

Participating:

Board member:

Mr. Liam Dowdall (LD)
Archdeacon David Pierpoint (DP)
Mr. Mike Beary (MB)
Mr. John Hennessy (JH)
Mrs. Mairead Shields (MHS)
Mr. Edward Fleming (EF)
Prof. Patricia Barker (PB)
Prof. Anne-Marie Brady (AMB)
Dr. Vivienne Byers (VB)

Also participating:

Executive Management Team:

Ms. Lucy Nugent (LN)
Mr. John Kelly (JK)
Mr. Dermot Carter (DC)
Prof. Catherine Wall (CW)
Ms. Sharon Larkin (SL)
Dr. Peter Lavin (PL)
Ms. Áine Lynch (Alyn)
Prof. Tara Coughlan (TC)
Mr. Shane Russell (SR)

In attendance:

Ms. Anne McKenna (AMcK)

Apologies:

Dr. Darach O’Ciardha (DO’C)
Mr. Mark Varian (MV)

No.	Agenda Items	Decisions Made	Action By
22.07.01	Apologies	Noted.	
22.07.02	Patient’s Story	<p>A briefing paper highlighting two Patient’s Stories was circulated in advance of the meeting and taken as read.</p> <p>ÁLyn briefed Board members on each Patient Story noting the compliments received in relation to a recent inpatient stay and complimented staff involved in the patient’s care and ongoing outreach supports. ÁLyn advised the feedback received was communicated with the various staff members.</p> <p>ÁLyn briefing Board members on a complaint noting the complexity of the particular clinic the patient was attending and the delay in PALS accessing the complaint for onward management. ÁLyn highlighted staffing challenges in PALS noting a Deputy PALS Manager will be in post by the end of the month and further staffing issues will be resolved in August. Board members highlighted the importance of communication with patients regarding delays and it was agreed ÁLyn to give a verbal update on same at the next meeting.</p>	ÁLyn
22.07.03	New Declarations of Interest	<p>There were no new declarations of interest made.</p> <p>LD reminded Board Members of their requirements to ensure the annual Designated Directorships Statement of Interest details are</p>	

		kept up to date and the requirement to notify any status change in terms of interests/directorships to the Board.	
22.07.04	Minutes of Previous Meeting	Minutes of the Board meeting held 23 rd May 2022 having been circulated in advance of the meeting were taken as read and approved by Board Members. Minutes of the AGM meeting held 23 rd May 2022 having been circulated in advance of the meeting were taken as read and approved by Board Members.	
22.07.05	Issues Log	The issues log which was circulated in advance of the meeting will be updated accordingly.	AMcK
22.07.06	Chairman's Update 2.1	LD updated Board members as follows: <ul style="list-style-type: none"> • TUH Charter – progress noted. Further update noted in CEO Report. • VHF. LD briefed the Board regarding continued engagement with the HSE Dialogue Forum and the appointment of Prospectus to review the SLA. LD & MF have requested to meet with Prospectus in this regard. 	
22.07.07	CEO Update 3.1	CEO Update Having been circulated in advance of the meeting the CEO Report was taken as read. LN highlighted the following: <ul style="list-style-type: none"> • CHI Sub-lease. LN advised MHC reverted with further amendments and CHI CEO to revert with last agreed draft for finalisation this week. • TUH Charter. It was noted that the Department have advised that the draft order is back for review with the Office of Parliamentary Affairs and TUH await a copy of the amended Charter. • SLA's. LN advised TUH received the signed SLA's with no further commentary regarding the caveats included by the Hospital. • ICU. LN advised the Minister of Health's office has confirmed his willingness to open the new ICU and a date is awaited. • Women's Health Hub (WHH). LN advised confirmation received from the Interim National Director of Estates to submit same to the next Capital Committee. LN advised of a new process that will commence with HSE, Estates, the Department and DEPR to progress capital projects in a timely fashion whilst adhering to legislation. • Covid. LN advised at present there are 23 patients admitted with Covid. It was noted over half of said cohort of patients were detected on routine screening. Patient flow is challenging as a result. • Recruitment. LN advised TUH continues to work on same. • Cybersecurity. LN advised the HSE compliance audit outcome was received and TUH are moderately compliant. HSE CIO has recommended that organisations have a 24hr Security Operations Centre (at a cost of €483K per year). The TUH CIO has written to the HSE CIO regarding funding of same and a system wide approach. MB offered support to the CIO in the context of Cybersecurity expertise. • Innovation Centre. LN advised of the positive engagement with a possible partner and TUHF regarding the development of the centre. A branding exercise with TUHF was noted and LN thanked JK, Natalie Cole & Hannah O'Keefe for the work undertaken to progress the Innovation Centre. 	

		<p>LN advised Board members that this is SR's last meeting before he departs TUH and acknowledged his significant contribution to TUH and the Executive Management Team.</p> <p>Integrated Management Report</p> <p>The Board IMR having been circulated in advance of the meeting was taken as read. JK briefed Board members on the following:</p> <ul style="list-style-type: none"> • QSRM Strategy was launched at the Clinical Audit & Quality Improvement Symposium in June. JK thanked the Meath Foundation for their support. • HIQA. JK advised TUH are preparing for a HIQA inspection against the National Standards for Safer Better Healthcare. JK outlined the inspection will be very detailed and pre-inspection documentation will be required. • Unscheduled care activity remains high with increased ED attendances. JK advised Covid is having an impact and the complexity and acuity of presentations remains very high. • Patient Flow. JK outlined the significant challenges with patient flow, particularly with home care packages and nursing home availability. JK advised that a Patient Throughput review will be undertaken again in order to identify challenges in detail. It was noted that TUH has one of the lowest allocations for Home Care Package from the HSE and continues to have to advocate services for patients. • Scheduled Care. JK advised of the targets reached in the Reeves Day Surgery Centre whereby no patient is waiting > 3 months for a day case surgical procedure, with the exception of Orthopaedic Hand procedures. The other 3 waiting lists are improving. • Finance. It was noted the report should read 'projected deficit of €17.3m'. DC advised that the Hospital continues to work with DMH to close the deficit and anticipates a revised projection at the end of the month. • HR. JK advised HR continue to work on the reversal of the Haddington Road hours which have resulted in a requirement for an additional 100 WTE across the Hospital. TUH are working with DMHG re same. SL advised of short term contingencies put in place to address the deficit in hours however it will be challenging to maintain same. • ANP's. JK commended ÁLyn for the work undertaken to secure additional ANP's. • Covid. In response to a query from PB it was noted TUH was the first hospital in the Country to run a Covid clinic headed up by Prof. S Donnelly. The clinic involves multidisciplinary team and is now resourced. <p>PB acknowledged SR contribution to the Hospital and wished him well in his future career.</p> <p>LD thanked SR on behalf of the Board for his dedication and commitment and expressed his deep appreciation for his work during his tenure at TUH.</p>	
22.07.08	Medical Board 3.2	<p>Medical Board Update</p> <p>TC briefed Board members as follows:</p> <ul style="list-style-type: none"> • The Medical Board met on June 27th and focused on the Assisted Decision Making Capacity Act. 	

		<ul style="list-style-type: none"> • NCHD Inaugural awards were held in conjunction with the Medical Board, Head of Innovation and EMT. • The Medical Board will meet again in September. <p>TC thanked SR on behalf of the Medical Board for his contribution to TUH and wished him well in his future endeavours.</p>	
22.07.09	For Decision	<p>TUH Board Risk Appetite Statement</p> <p>4.1 Having been circulated in advance of the meeting the draft TUH Board Risk Appetite Statement was taken as read. LD advised having been approved by the Hospital Board at its meeting in October 2021 TUH undertook a Risk Appetite Review on which the statement is based.</p> <p>The draft Risk Appetite Statement was reviewed by the Governance and Nominating Committee who agreed to recommend the approval of same by the Hospital Board. The Governance and Nominating Committee agreed to review the statement annually and include on the Governance Checklist. The statement will also be published on the Hospital’s website.</p> <p>The TUH Board Risk Appetite Statement was approved by Board members having been proposed by DP and seconded by MHS.</p> <p>4.2 [REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>4.3 [REDACTED]</p> <p>[REDACTED]</p> <p>4.4 Contracts for Board Approval Having been circulated in advance of the meeting the briefing paper regarding contracts for Board approval was taken as read.</p> <p>DC briefed members and the following was noted:</p> <ul style="list-style-type: none"> • Radiology Digital X-Ray Room for Adult ED. Mini competition held and funded via NERP. • Anaesthetic Machines x 6. Mini competition held and funded via NERP. <p>The Board approved the contracts having been proposed by PB and seconded by EF.</p> <p>4.5 Bank Overdraft Facility. Having been circulated in advance of the meeting the Bank Overdraft Facility briefing paper was taken as read. DC advised in line with</p>	

		<p>previous years, the Hospital has received approval from the HSE for the overdraft facility.</p> <p>DC advised the overdraft facility for 2022 is €10.7m a slight increase on 2021 (€10.4m).</p> <p>The Board approved the signature of the Director of Finance and Deputy Director of Finance to the overdraft facility having been proposed by EF and seconded by JH.</p>	
22.07.10	<p>For Discussion</p> <p>5.1</p> <p>5.2</p> <p>5.3</p>	<p>TUHF 2022 Update Presentation</p> <p>LD welcomed Ms. Margaret Considine, Chair TUHF & Mr. Douglas Collins, CEO TUHF to the meeting.</p> <p>MC outlined the work undertaken to strengthen governance by the Board and the Board’s area of focus:</p> <ul style="list-style-type: none"> • Growth Strategy to Autonomy. • Governance. Board members have an assigned portfolio of work and TUHF have established a sub-committee structure which will assist in succession planning. • Partnership with TUH. TUHF is working in harmony with TUH with regular meetings between the CEO’s and Director of Finance. <p>DC proceeded to give the presentation outlining the following:</p> <ul style="list-style-type: none"> • 2022 Focus of the Executive • 3 Year Business Plan <p>LD thanked MC & DC for the presentation noting the progression in governance structures and philanthropy. LD on behalf of the Board expressed his thanks to TUHF and MC as Chair for their continued engagement and support to the Hospital.</p> <p>NGH Due Diligence</p> <p>JK briefed Board members regarding progress made in this regard and advised the outputs of the Steering Group Meeting is currently with attendees. It is planned to establish working groups to progress the outputs.</p> <p>Strategic Implementation Plan.</p> <p>Having been circulated in advance of the meeting the Strategic Implementation Plan briefing paper was taken as read. JK briefed Board Members and the following was noted:</p> <ul style="list-style-type: none"> • Access. Achieved waiting list target RDSC. Good progress on scheduled care targets noted. • Integrated Care. JK advised of Sláintecare projects funded within the community. • Infrastructure. ICU on target to open in September. • Digital. Phase 2 of the EPR has commenced. The new Theatre system was launched in June. • People. Recruitment is ongoing. It was noted the NCHD vacancies in ED have been filled. <p>It was suggested that given the internal control of the implementation plan takes place monthly with the Executive that report of same to the Board revert to quarterly. The Board agreed to same providing any exceptional items are raised as appropriate.</p>	

	5.4	<p>TUH Board Away Day Outputs The minutes of the Board Away Day 14th May & Outputs having been circulated in advance of the meeting were taken as read.</p> <p>LD requested input from members regarding the outputs and advised members that the outputs in the context of research and innovation will be assigned to the Research & Innovation Board Committee.</p> <p>PB commended the presentation by Mr. T Willoughby and the focus on solutions, diversity and stakeholders.</p> <p>VB advised the Research & Innovation Board Committee will meet on August 18th and will report to the Board are progress in due course.</p>	
22.07.11	<p>Regular Updates</p> <p>6.1</p> <p>6.1.1</p> <p>6.2</p> <p>6.2.1</p> <p>6.3</p> <p>6.4</p> <p>6.5</p>	<p>Governance and Nominating Committee Update. LD advised the Committee are scheduled to meet in September.</p> <p>Governance and Nominating Committee Annual Report 2021. Having been circulated in advance of the meeting the Governance and Nominating Committee Annual Report 2021 was taken as read.</p> <p>Finance Committee Update. EF reported to the Board at its May meeting on the items for the AGM. The Committee at its meeting in May reviewed it's annul programme of work, budget preparation and assigned budgets. A review of the Robotic Surgery project and impact on waiting lists and costings were also reviewed.</p> <p>Finance Committee Annual Report 2021. Having been circulated in advance of the meeting the Finance Committee Annual Report 2021 was taken as read. EF advised the report sets out the achievements of the Committee in 2021. EF thanked DC for his continued leadership and support, despite the pandemic and cyberattack and his Executive Lead role on two Board Committees.</p> <p>LN acknowledged the work of the Finance Team and Human Resources Team in progressing the recent Covid Recognition Payment to staff outside of normal payroll to ensure no delay in staff receiving same.</p> <p>Staff and Organisational Development Committee Update. In the absence of MV, the Chairman invited SL to update the Board on the Committee's work. SL advised the Committee met on June 15th and received a presentation on the Centre for Learning and Development and Health and Wellbeing. SL advised the risk associated with the health and wellbeing of staff has been included on the EMT risk register and will be escalated to the DMHG.</p> <p>QSRM Board Committee Update. In the absence of AMBr (who left the meeting early), CW advised of the launch of the VTE Prevention programme today advising this is the culmination of 2.5yrs of work and will result in TUH being the second Hospital in the country to have such a programme. Electronic notice boards have been purchased to use for patient messaging in this regard.</p> <p>Audit Committee Update. DP advised of the update provided at the May Board meeting noting the Committee have not met since. The Committee are due to meet with the QSRM Board Committee in September.</p>	
22.07.12	7.1	<p>Closing Items VHARMF Annual Report. EF following circulation of the VHARMF Annual Report commended the CEO and Executive</p>	

		Management Team for the work they undertake outside of the organisation as part of their Executive remit.	
22.07.13	Next Meeting	26 th September 2022	

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