

## **Tallaght Hospital Board Meeting**

## Robert Graves Postgraduate Centre Tallaght Hospital 25<sup>th</sup> September 2017

07:30-10:00

## **Present:**

**Board member** 

Mr. Liam Dowdall (LD) Mr. Eddie Brown (EB) Ms. Anna Lee (AL)

Mr. Andreas McConnell (AMcC) Mrs. Mairéad Shields (MHS) Prof. Kathy Monks (KM) Prof. Patricia Barker (PB)

Archdeacon David Pierpoint (DP)

In attendance:

Mr. David Slevin (DS)
Dr. Catherine Wall (CW)
Ms. Aine Lynch (ALyn)
Dr. Daragh Fahey (DF)
Mr. John Kelly(JK)

Dr. Siobhán Ní Bhrain (SNiB)

Ms. Madeline O' Neill, Board Secretary

## **Apologies**

Mr. David Seaman (DAS)
Dr. Jim Kiely (JK)
Ms. Lucy Nugent (LN)
Dr. Eleanor O' Leary (EO'L)

No.	Agenda Items	Decisions Made	Action By
		Board only time	
17.07.01	Apologies	Apologies were noted.	
		LD on behalf of Board members thanked DS and CF for the very informative and helpful Hospital walkaround which was organised over recent weeks.	
17.07.02	Patient's Story	Alyn advised the Board that in accordance with a recommendation proposed by the Ombudsman in relation to a case book presentation, it is proposed to review the way the Patient Story is presented at Board meetings. Alyn will revert to the Board in this regard in due course.	
		Alyn advised in respect of a letter of compliment received in relation to the Surgical Service and the Team on Ormsby Ward. The patient complimented staff on their efficiency and positive attitude.	
		Alyn also advised in respect of correspondence received from a relative of a frail elderly patient who had difficulty regarding the check in self-service process and the duration of their wait times.	
		The letter of complaint was brought to the attention of the treating Consultant who responded to the patient directly and apologised for the unfortunate circumstances and will try to do	

	hottor novt time	
	The Board discussed the learnings from both patient stories and it was agreed that management will review signposting in respect of frail elderly patients and patients with dementia.	DF
New Declarations of Interest	No new declarations of interest were made.	
Minutes of Previous Meeting	Minutes of the meeting held on 24 <sup>th</sup> July 2017 were approved for signing subject to two changes.	
Issues Log	The issues log was reviewed and noted.	
Regular updates Chairman's update	A Press Release in respect of the role of Voluntary Organisations in publicly funded health services was circulated in advance of the meeting and taken as read. LD advised that himself and the CEO are considering the Hospital's engagement with the Voluntary Healthcare Forum and agreed to come back to the Board with an update at an appropriate time.  LD advised that JK is the Chair of the Hospital CHG Subgroup and LD is a member in attendance at meetings. This will avoid any perceived potential conflict of interest as the	
	Chairman is a Board member of TH and CHG.  Minutes of a recent meeting of the CHG Sub-group were circulated in advance of the meeting and taken as read. One of the outputs from this meeting is that the Hospital Board is requested to give delegated authority to the CHG Sub-group to engage with the Foundations, LEC, DoH and HSE to bring the process to a point where a formal decision is required by the Hospital Board in due course. This was approved by the Board. Proposed by DP and seconded by PB.	
Audit committee update	PB advised that a meeting of the AC took place on 12 <sup>th</sup> September 2017. The Minutes of this meeting will issue in due course.  PB advised that the following matters were discussed at the meeting:  1. PB acknowledged the efforts of the EMT in respect of the removal of the Hospital from Black Escalation by the HSE.  2. The Risk management process between the AC and QSRM Board committee are clearer now.  3. The Internal Audit Plan is being prepared and a joint meeting of the AC and QSRM Board committee will be scheduled.  4. Self-Evaluation Summary of results for 2016 was distributed to AC members at the last meeting. An external evaluation was discussed.  5. Update on meeting with the Director of ICT.  6. Exposure for the Hospital regarding cyber security.  7. Results of recent procurement process for Internal and External Auditors.  8. Update to the Terms of reference of the committee.  The Hospital Board is asked to:  1. Adopt the Report in respect of the Internal Audit	
	Minutes of Previous Meeting  Issues Log  Regular updates Chairman's update  Audit committee	it was agreed that management will review signposting in respect of frail elderly patients and patients with dementia.  No new declarations of interest were made.  Minutes of Previous Meeting  Issues Log  The issues log was reviewed and noted.  A Press Release in respect of the role of Voluntary Organisations in publicly funded health services was circulated in advance of the meeting and taken as read. LD advised that himself and the CEO are considering the Hospital's engagement with the Voluntary Healthcare Forum and agreed to come back to the Board with an update at an appropriate time.  LD advised that JK is the Chair of the Hospital CHG Subgroup and LD is a member in attendance at meetings. This will avoid any perceived potential conflict of interest as the Chairman is a Board member of TH and CHG.  Minutes of a recent meeting of the CHG Sub-group were circulated in advance of the meeting is that the Hospital Board is requested to give delegated authority to the CHG Sub-group to engage with the Foundations, LEC, DoH and HSE to bring the process to a point where a formal decision is required by the Hospital Board in due course. This was approved by the Board. Proposed by DP and seconded by PB.  PB advised that a meeting of the AC took place on 12th Hospital Board in the Hospital From Black Escalation by the HSE.  2. The Risk management process between the AC and QSRM Board committee will be scheduled.  4. Self-Evaluation Summary of results for 2016 was distributed to AC members at the last meeting. An external evaluation was discussed.  5. Update on meeting with the Director of ICT.  6. Exposure for the Hospital regarding cyber security.  7. Results of recent procurement process for Internal and External Auditors.  8. Update to the Terms of reference of the committee. The Hospital Board is asked to:

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		<ol> <li>Note the Report.</li> <li>Agree to the Terms of Reference.</li> </ol>	
		4. Note all other items.	
		1. Prote all other items.	
		It was agreed that the Executive Management Team will review	
		the structure of the Internal Audit function and the DOF will	DC
	G. 00 0	revert to the Board in due course.	
	Staff &		
	Organisation Development	This item was deferred to the next meeting.	
	committee update		
	Quality, Safety &		
	Risk Management	MHS advised that a meeting of the QSRM Board committee	
	committee update	took place on 17 <sup>th</sup> August 2017 and Minutes of that meeting were circulated with Board Papers.	
		were encurated with Board I apers.	
	Finance committee		
	update	This item was deferred to the next meeting.	
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	Nominations	Minutes and issues los of the meeting of the Naming Com-	
	committee update	Minutes and issues log of the meeting of the Nominations committee which took place on 16 <sup>th</sup> August 2017 were	
		circulated in advance of the meeting. LD asked the Board to	
		review same and feedback is welcomed.	
17.07.07	Integrated	CEO Report	
	Management		
	Report	DS provided an update to the Board in respect of Capital	
		development plans in line with TH's Clinical Services Strategy	
		under the following headings:	
		1. The SIMMS Building.	
		2. ICU.	
		3. Renal.	
		4. National Children's Hospital.	
		5. Redevelopment of front entrance of site and building.	
		<ul><li>6. Land acquisition.</li><li>7. Proposed six floor development.</li></ul>	
		8. Proposed offsite daycare unit.	
		5. Troposed orisine dayone unit.	
		DS provided an update to the Board in respect of Policy	
		developments in line with TH's Clinical Services Strategy	
		under the following headings:	
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		DoH Health Service Capacity Review.      DoH Indopendent review of the role of voluntary.	
		2. DoH Independent review of the role of voluntary organisations.	
		organisations.	
		DS provided an update with regard to the following operational	
		matters:	
		1. Key OCS Risk.	
		<ul><li>2. Operational Winter Plan.</li><li>3. EMT.</li></ul>	
		J. 1411.	
		DS provided an update with regard to the following	
		Governance issues as follows:	

		1. DMHG Board.	
		2. CHG Legal Entity.	
		3. Haughton Institute.	
		4. Friends of Tallaght Hospital.	
		Medical Board Report	
		There was nothing to report at this Board meeting.	
17.07.08	Ratification of	Terms of reference of the SODC were circulated in advance of	
	Terms of	the meeting and taken as read.	
	Reference of the		
	SODC	Approval of the terms of reference is sought and granted.	
		Proposed by AMcC seconded by AL.	
17.07.09	Output from the	A briefing paper providing details on the output of the recent	
	Nominations	meeting of the Nominations committee was circulated in	
	committee	advance of the meeting and taken as read. The Board is	
		requested to approve the recommendations provided in the	
		briefing. Proposed by KM and seconded by MHS.	
		It was agreed that DS and MO'N will progress matters	DS/MO'N
		identified as outlined in the briefing paper.	
		ID thanked Mr. Andreas McConnell for his releaseming	
		LD thanked Mr. Andreas McConnell for his role serving as	
		Board member on the SODC over the years and for his	
17.07.10	Contracts	professional expertise in this regard.  A briefing paper in respect of Contracts for approval by the	
17.07.10	Contracts	Board was circulated in advance of the meeting and taken as	
		read. Following discussion the Board approved the relevant	
		contracts (proposed by DP and seconded by PB).	
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17.07.11	Winter Plan for	Briefing papers in respect of scheduled and unscheduled care	
	scheduled and unscheduled care	were circulated in advance of the meeting and taken as read.	
	unscheduled care	JK provided an update as follows in respect of the following	
		scheduled care plan:	
		scheduled care plan.	
		1. Review of scheduled care plan up to the end March	
		2017.	
		2. OPD review, update on waiting list workshops.	
		3. Assumptions associated with the scheduled care plan.	
		4. Performance Targets.	
		JK also provided an update as follows in respect of the	
		following unscheduled care plan:	
		Tonowing unscheduled care plan.	
		1. Review of learnings from winter 2016/2017.	
		2. Assumptions for winter 2017/2018.	
		3. Performance targets 2017/2018.	
		The Board discussed this matter in detail and thanked JK for a	
		comprehensive update.	
		It was agreed that the matter of End of Life care will be an	
		It was agreed that the matter of End of Life care will be an agenda item for discussion at a future Board meeting. The End	CW
		of Life Co-ordinator and the Palliative Care department will	CVV
		have input into this discussion.	
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		It was agreed that management will revert to Board with regard to opportunities for quality improvement regarding medication safety initiatives.	DF
17.07.12	AOB	DS provided an update with regard to a letter received from the CEO of the DMHG regarding the establishment of the Board of the DMHG.  There was no further business to conduct and this concluded the business of the meeting.	
17.07.13	Next Meeting	23rd October 2017 at the Robert Graves Postgraduate Centre.	

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