



**Tallaght University Hospital Board Meeting**  
**Robert Graves Postgraduate Centre**  
**Tallaght Hospital**  
**21<sup>st</sup> May 2018**  
**08:30-10:00**

**Present:**

**Board member**

Mr. Liam Dowdall (LD)  
 Dr. Jim Kiely (JK)  
 Ms. Anna Lee (AL)  
 Mrs. Mairead Shields (MHS)  
 Prof. Patricia Barker (PB)  
 Mr. David Seaman (DAS)  
 Dr. Anne-Marie Brady (AMB)

**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. Lucy Nugent (LN)  
 Prof. Paul Ridgway (PR)  
 Mr. Ciaran Faughnan (CF)  
 Ms. Sharon Larkin (SL)  
 Mr. Dermot Carter (DC)  
 Ms. Madeline O' Neill (MO'N), Board Secretary

**Apologies**

Mr. Mark Varian (MV)  
 Prof. Kathy Monks (KM)  
 Archdeacon David Pierpoint (DP)

No.	Agenda Items	Decisions Made	Action By
		<b>Board only time</b>	
18.04.01	<b>Apologies</b>	Apologies were noted.	
18.04.02	<b>Patient's Story</b>	<p>A Lyn advised of a letter of compliment which was received from the wife of a patient who was on holiday in Ireland from Spain. Patient X felt unwell and dizzy whilst driving on the M50. Patient X pulled over and collapsed.</p> <p>The wife of the patient advised that the doctors and nurses had amazing patience with them and were always friendly. To the nurse who gave her a hug when it was most needed. To that special room the doctor brought them to when they were given the difficult diagnoses.</p> <p>Alyn advised the Board in respect of a patient who wrote to hospital disputing an invoice for a ten night stay in the hospital on the basis he suffered an infection following a procedure. The patient stated that he had a biopsy which had to be repeated as the area of abnormality was missed in the first biopsy. The patient developed an infection following the second biopsy and was admitted to hospital. The patient stated that there was a higher risk of infection when the procedure is done twice. The patient requested that his letter of complaint be shared with the hospital Quality department in order to aim for improvement in hospital practices and processes.</p>	

		<p>PB raised the matter of how the family of a patient of the Cervical Screening programme was treated when they were invited to meet with the patient's treating Consultant and Tallaght University Hospital staff, and also how this matter played out in the Media.</p> <p>LN provided an update to the Board in relation to this matter.</p> <p>This matter was discussed by the Board. PB advised that Board members have an oversight of responsibility role, and in this regard, and to provide assurance to the Board, it was agreed that the Executive will carry out a quality review of the process and procedures in place to deal with such cases and revert to the Board with its findings and proposed recommendations.</p>	<b>DF</b>
<b>18.04.03</b>	<b>New Declarations of Interest</b>	There were no declarations of interest made.	
<b>18.04.04</b>	<b>Minutes of Previous Meeting</b>	Minutes of the meeting held on 23 <sup>rd</sup> April 2018 were approved for signing.	
<b>18.04.05</b>	<b>Issues Log</b>	The issues log was reviewed and noted.	
<b>18.04.06</b>	<b>Presentation by the EMT regarding internal controls</b>	<p>A presentation in respect of Internal Controls at the Hospital was circulated in advance of the meeting and taken as read.</p> <p>The purpose of the presentation is to demonstrate internal and external controls to the Hospital Board in line with the Annual Compliance Statement for 2018.</p> <p>The following headings were covered by the Executive in the presentation:</p> <ul style="list-style-type: none"> <li>• Organisational Compliance Controls</li> <li>• Clinical Controls <ul style="list-style-type: none"> <li>- QSRM, Nursing, Clinical Directorates, Other</li> </ul> </li> <li>• Corporate Controls <ul style="list-style-type: none"> <li>- Finance, Facilities and Estates Management, ICT, HR</li> </ul> </li> </ul> <p>LD thanked the Executive for a very useful and informative presentation.</p> <p>An Internal Controls presentation was sought regarding Clinical Governance for outsourced clinical activity.</p>	<b>DF</b>

18.04.07	<b>AGM Adoption of the Annual Financial Statement for 2017</b>	<p><b>Adoption of Annual Financial Statements 2017</b></p> <p>The draft Annual Financial Statements (AFS) for the year ended December 2017 were circulated to the Board in advance of the meeting and taken as read.</p> <p>DC provided a further update to the Board and advised of the Financial position of the Hospital.</p> <p>DC confirmed that there are no significant issues to report to the Board in relation to the AFS.</p> <p>DC advised that the Audit committee met on 5<sup>th</sup> April to discuss the AFS and met again 26<sup>th</sup> April to discuss the AFS together with the external auditors.</p> <p>LD welcomed Mr. Kevin Sheehan and Mr. Thomas Fedigan from Deloitte and Ms. Elaine Duggan and Ms. Eithne Kearney from the Finance Department to the meeting.</p> <p>The matter of Going Concern was discussed by the Board.</p> <p>It was agreed that the application of the Going Concern assumption is the appropriate concept to recommend to the Board. The External Auditors expressed their agreement with this conclusion.</p> <p>Concern was raised in respect of the growing cumulative deficit at the Hospital.</p> <p>PB advised that the AFS have been rigorously screened by the Audit committee, the Finance team and the Auditors.</p> <p>PB informed board members of their responsibility as individuals to satisfy themselves with the AFS.</p> <p>DC advised that the Audit committee recommend the AFS for 2017 to the Board for approval.</p> <p>Following discussion, the Board adopted the Annual Financial Statements for the year ended December 2017 (proposed by PB and seconded by DAS). LD thanked DC and the Finance team, and Deloitte for all their work in this regard. Mr. Sheehan, Mr. Fedigan, Ms. Duggan and Ms. Kearney left the meeting at this time.</p> <p>It was noted that the AFS will be posted to the Hospital website in due course and will be sent to the HSE along with the Annual Compliance Statement.</p>	
18.04.08	<b>Annual Compliance Statement for decision and signing</b>	<p>A report from the Audit Committee and further documentation in respect of the Annual Compliance Statement (ACS) was circulated in advance of the meeting and taken as read.</p> <p>PB, on behalf of the Audit committee has reviewed the ACS and looked at the supporting documentation and evidence prepared by the CEO and DOF.</p>	

		<p>The board discussed this matter in detail.</p> <p>PB advised that the Audit Committee recommends approval of the Annual Compliance Statement by the Hospital Board. This was proposed by AL and seconded by JKie.</p>	
<b>18.04.09</b>	<b>Draft Annual Corporate Report</b>	LN advised that the Annual Report will be available to Board members at the July meeting of the Board.	
<b>18.04.10</b>	<b>Tallaght Cross West Proposal</b>	<p>DC circulated a briefing note in advance of the meeting, in respect of the Tallaght Cross West proposal.</p> <p>DC advised that the Finance Committee met on the 2<sup>nd</sup> May 2018. The following proposal was discussed at that meeting.</p> <p>(i) Relocation of the CRY unit to an offsite location Unit 14B (Tallaght Cross West).</p> <p>It was noted that subject to Board approval and CRY formally confirming that they will fund the capital element of relocating the service to Unit 14B that the Management Team at the Hospital move forward with executing the CRY relocation proposal. This was proposed by DAS and seconded by MHS.</p>	
<b>18.04.12</b>	<b>AOB</b>	<p>LD reminded the Board that the Hospital Board meeting due to take place in June is rescheduled to take place on 22<sup>nd</sup> October 2018.</p> <p>There was no further business to conduct and this concluded the business of the meeting.</p>	
<b>18.04.13</b>	<b>Next Meeting</b>	23 <sup>rd</sup> July 2018 at the Robert Graves Postgraduate Centre.	

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