



**Tallaght University Hospital Board Meeting**  
**Robert Graves Postgraduate Centre**  
**Tallaght University Hospital**  
**25<sup>th</sup> March 2019**  
**07:30-10:00**

**Present:**

**Board member**

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

**In attendance:**

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

**Apologies**

Ms. Anna Lee (AL)

No.	Agenda Items	Decisions Made	Action By
		<b>Board only time</b>	
19.02.01	<b>Apologies</b>	<p>Apologies were noted.</p> <p>LD congratulated Mr. John Kelly on his appointment to the role of Deputy Chief Executive Officer at the Hospital and welcomed John to his first meeting of the Hospital Board in this new capacity.</p> <p>LD proposed to take agenda items 3.2 and 6.2 together, 3.4 and 6.7 together, 3.5, 5.1, 6.1, 6.3 together and 5.3 and 6.5 together. This was agreed by the Board.</p>	
19.02.02	<b>Patient's Story</b>	<p>Alyn advised the Board that she received a copy of a letter of compliment from a Clinical Nurse Manager with respect to a patient's family expressing heartfelt appreciation for the care and treatment given to a family member, received in Tallaght University Hospital over the past year. The Director responded to the letter and thanked all staff for the care compassion and commitment shown to this patient and family member.</p> <p>The input from the Palliative care team was also acknowledged. While the Palliative Care team work closely with patients and families to facilitate a rapid transfer home or to the hospice if this is a preference, it is not feasible in all cases.</p> <p>Input from the Pastoral Care department was also acknowledged. A resource guidance document exists on all clinical areas regarding pastoral and practical care of all faiths and none.</p>	

		<p><b>Learning:</b></p> <p>It was noted that there is one opportunity to get it right at the end of life. Every effort is made to facilitate the patient and family to be together and in a single room if that is their wish.</p> <p>Alyn advised of a complaint received in respect of Patient X who attended the hospital for an outpatient procedure. When patient arrived at the G.U. Department he was asked to provide a urine sample as it was required before the procedure could be undertaken.</p> <p>Patient X was not made aware of a particular requirement which is needed before the procedure could be undertaken.</p> <p>Patient X suggested that the patient should be informed of this either in the appointment letter or by text.</p> <p>Patient Advocacy made contact made with Administrative Co-ordinator responsible for the G.U area and discussed the patient's suggestion.</p> <p>The patient was responded to on 27<sup>th</sup> November 2018, within the recommended 30 working day period.</p> <p>The letter contained an apology both from the Administrative Co-ordinator and the Patient Advocacy Department on behalf of the hospital.</p> <p>The letter also advised the patient of change to the correspondence as per his suggestion.</p> <p><b>Learning:</b></p> <p>Hospital staff need to listen to feedback from patients and take seriously suggestions that they make in relation to our practices and processes. The suggestion that this information should be contained in the appointment letter should not have been dismissed.</p> <p>It was agreed to update the Board every six months with regard to the system changes which have been implemented as a result of the patient stories and if these changes are embedded in the overall Hospital system.</p>	<b>ALyn</b>
19.02.03	<b>New Declarations of Interest</b>	<p>There were no new declarations of interest made.</p> <p>LD reminded Board members of their obligations under the Ethics in Public Office Acts and encouraged everyone to return the completed forms to the Board Secretary at the earliest convenience.</p>	
19.02.04	<b>Minutes of Previous Meeting</b>	<p>Minutes of the meeting held on 21<sup>st</sup> January 2019 which were circulated in advance of the meeting were approved for signing.</p>	
19.02.05	<b>Issues Log</b>	<p>The issues log was reviewed and noted.</p> <p>LN advised the Board that the IMR will be updated in conjunction with the Business Objective Support Software and will be ready to bring to the Hospital Board at the June meeting.</p>	

		<p>It was agreed that Board members are given the option to be shown around the Hospital over a period of two days. LN and JK will work on this and revert to the Board in due course.</p> <p>A briefing note in respect of Hip Fractures was circulated in advance of the meeting and JK provided a further verbal update in this regard.</p> <p>A briefing paper in respect of effective communication to patients in the waiting area of the Emergency Department was circulated in advance of the meeting and taken as read.</p> <p>Alyn advised the Board that a scoping exercise has been completed locally and nationally to ascertain what other Emergency Departments have put in place in this regard. A number of Emergency Departments have developed a visual display to keep patients informed regarding potential waiting times. These initiatives have not been sustained for several reasons. The main challenge is maintaining accuracy of the data in a constantly evolving and changing ED environment.</p> <p>Alyn advised in respect of the additional enhanced communication processes which have been put in place and advised of a number of other ongoing initiatives which can improve the patient experience.</p> <p>This matter was discussed in detail and it was agreed to update the Board on a regular basis in this regard.</p>	<p><b>LN/JK</b></p> <p><b>ALyn</b></p>
<p><b>19.02.06</b></p>	<p><b>Chairman's Update</b></p>	<p>LD provided an update to the Board on the following matters:</p> <ol style="list-style-type: none"> <li>1. LD and LN met with constituents and stakeholders over the past number of weeks since LN has taken up the role of CEO. A very positive meeting took place with the President of the Hospital Dr. Michael Jackson and Canon Robert Warren on 28<sup>th</sup> February 2019.</li> <li>2. LD provided an update in respect of a meeting with the Secretary General and Officials from the Department of Health which took place on 5<sup>th</sup> March 2019.</li> <li>3. Receipt of the External Review Report for the Nominations committee was noted and will be addressed under agenda item 3.1.</li> <li>4. Progress in respect of the Clinical Governance Framework was also noted.</li> <li>5. Progress in respect of the Corporate Strategy for TUH was noted.</li> <li>6. Board socialisation and a lunch has been organised for Board members and external members of Board committees.</li> <li>7. A meeting of the Voluntary Health Forum is due to take place on 1<sup>st</sup> April, 2019 and Board members are invited to attend.</li> <li>8. Mr. Douglas Collins, CEO of Tallaght University Hospital Foundation will present and provide an update on the Foundation to the Hospital Board at the May Board meeting.</li> </ol>	

19.02.07	<p><b>Regular updates Nominations Committee update</b></p> <p><b>Finance committee update And Finance committee Annual Report 2017</b></p> <p><b>Staff &amp; Organisation Development committee update</b></p> <p><b>Quality, Safety &amp; Risk Management committee update And QSRM Board committee Annual Report for 2018</b></p> <p><b>Audit committee update</b></p>	<p>Receipt of a draft external evaluation of the Nominations committee was noted. This Report with proposals will come to the Board for discussion at the May meeting.</p> <p>Minutes of the Finance committee meeting which took place on 6<sup>th</sup> February 2019 were circulated in advance of the meeting and taken as read. EF provided an update in respect of matters which were discussed at the meeting as follows:</p> <ol style="list-style-type: none"> <li>1. Beacon Hospital Dialysis Contract.</li> <li>2. HIPE Data Quality Coding and the importance of Clinical leadership in this regard was noted.</li> <li>3. Terms of reference of the committee are being reviewed at present.</li> <li>4. Service Plan for the DMHG was discussed in detail by the committee.</li> <li>5. KPIs for the committee were discussed at the meeting.</li> <li>6. Finalise a workplan for the committee.</li> <li>7. Prepare an Annual Report for the committee for 2018.</li> </ol> <p>The Annual Report for 2017 for the Finance committee was circulated in advance of the meeting and was noted.</p> <p>Minutes of the SODC meeting which took place on 27<sup>th</sup> February 2019 were circulated in advance of the meeting and taken as read. DAS advised the Board that the SODC are dealing with ongoing matters. DAS advised that the HR Strategy has been put on hold until the overall Corporate Strategy has been finalised. DAS advised that the Heroes project and the Walkways project have both been shortlisted for a number of awards. The Hospital Board congratulated everyone involved in these very positive and hugely beneficial projects.</p> <p>MHS advised that the QSRM Board committee met on 14<sup>th</sup> March 2019 and Minutes of the meeting will be circulated to the Board in due course.</p> <p>The QSRM Board committee Annual Report for 2018 was circulated in advance of the meeting and was noted by the Board.</p> <p>Minutes of the Audit committee which took place on 20<sup>th</sup> February 2019 were circulated in advance of the meeting and taken as read. PB welcomed Ms. Anne-Marie Howard to the Internal Audit Department.</p> <p>PB advised that a draft External Review Report of the Audit committee was received at the February meeting and the final Report will be circulated to the Hospital Board in advance of the next meeting.</p> <p>PB advised that the Audit committee is progressing the Fraud Policy at present.</p>	<p><b>LD</b></p> <p><b>PB</b></p>
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	<p><b>Audit committee Terms of Reference</b></p> <p><b>Review and update Terms of Reference of Board committees</b></p> <p><b>Audit committee Annual Report for 2018</b></p>	<p>PB also advised that there were no protected disclosures for 2018 or no reports of Fraud for the same period.</p> <p>LN informed the Board that Ms. Siobhan Lingwood has been appointed to the role of Information Governance Manager at the Hospital.</p> <p>Terms of reference for the Audit committee were circulated in advance of the meeting and taken as read. These terms of reference were proposed by EF and seconded by KM.</p> <p>PB advised the Board that the Terms of Reference of the committee will be reviewed and updated again in line with the external review of the Nominations committee.</p> <p>The importance of all Board committees being aligned closely was noted by the Board. A review and update of the language contained in the terms of reference and to standardise the layout of each was agreed by the Board.</p> <p>The Audit committee Annual Report for 2018 was circulated in advance of the meeting and noted by the Board.</p>	
19.02.08	<p><b>Integrated Management Report</b></p>	<p><b>CEO Report</b></p> <p>An Integrated Management Report was circulated in advance of the meeting and taken as read.</p> <p>LN provided an update to the Board in respect of Capital development plans in line with TH’s Clinical Services Strategy under the following headings:</p> <ol style="list-style-type: none"> <li>1. The SIMMS Building.</li> <li>2. ICU 12 bed extension.</li> <li>3. New Renal Development.</li> <li>4. National Children’s Hospital/CHI.</li> <li>5. Proposed offsite Surgical Daycare unit at Tallaght Cross West (B2/3/15/16)</li> <li>6. Proposed re-location of CRY unit at Tallaght Cross West (B14)</li> <li>7. Development of Primary Care Diagnostic centre at Tallaght Cross.</li> <li>8. Propose six floor development.</li> <li>9. Trinity Centre at TUH. As part of the due diligence exercise in respect to land/building ownership in the context of the establishment of Children’s Health Ireland it transpires that TUH has full ownership of the TCD building at Tallaght on the legal basis of Land Registry Title 07/01/2002- Folio 90917L which has been confirmed with TCD. This has implications for insurance, public liability and any contracts entered into on the basis of ownership. The Director of Facilities will revert with a full briefing in due course.</li> </ol> <p>LN provided an update to the Board in respect of Governance under the following headings:</p> <ol style="list-style-type: none"> <li>1. EMT Recruitment.</li> <li>2. Charter.</li> </ol>	

		<p>3. Communications.</p> <p>JK provided a Performance overview to the Board in line with TH's Clinical Services Strategy under the following headings:</p> <ol style="list-style-type: none"> <li>1. Operations.</li> <li>2. Quality Safety and Risk Management.</li> <li>3. Human Resources.</li> </ol>	
19.02.09	<b>Medical Board update</b>	JQ provided the Board with an update in respect of interviews which have been organised for upcoming Clinical roles at the Hospital.	
19.02.10	<b>HSE SLA 2019 DMHG &amp; CHI</b>	<p>Documentation in respect of Service Level Agreements (SLA) for the CHI and DMHG was circulated in advance of the meeting and taken as read.</p> <p>Following a review process led by LN, which incorporated feedback from the relevant Executives, the attached SLAs have been drafted between the Hospital, the CHI and DMHG. Substantive issues are covered in the covering letters to the CEOs of the Groups.</p> <p>Board members discussed this matter and agreed that both SLAs should be signed and returned. Proposed by MHS and seconded by DP.</p>	
19.02.11	<b>Clinical Governance Framework</b>	<p>AMBr advised the Board that a meeting of the Clinical Governance Framework Group took place on 4<sup>th</sup> March 2019 and a follow up meeting is scheduled to take place on 27<sup>th</sup> March 2019.</p> <p>The Group agreed to initiate a high level gap analysis of what is already in existence in the Hospital against the HSE Clinical Framework. It is proposed to report to the Board in this regard at the May Board meeting.</p>	<b>AMBr</b>
19.02.12	<b>Corporate Strategy</b>	<p>LN provided an update of progress made to date in respect of the establishment of a Corporate Strategy and advised that a close out exercise was carried out on the Clinical Services Strategy 2016-2018 and this will assist to inform the Corporate Strategy. LN also advised that the EMT will have a Corporate Strategy Planning afternoon on 27<sup>th</sup> March 2019.</p> <p>A draft Corporate Strategy will be brought before the Board at the June 2019 Board meeting.</p>	<b>LN/KM</b>
19.02.13	<b>ICT Digital Enable Care presentation</b>	<p>LD welcomed Mr. David Wall, Director of ICT to the meeting.</p> <p>A presentation in respect of this matter was circulated in advance of the meeting.</p> <p>DW updated the Board in respect of progress made to date regarding Digital Enabled Care to enhance the Patient Experience. DW provided an update on the current status in this regard Nationally, at DMGH, at CHI and at TUH. Digital enabled care supporting an integrated patient centred experience was discussed by the Board.</p> <p>LD thanked DW for a very informative presentation.</p>	

	<b>End of Life Systems</b>	<p>A briefing paper entitled TUH Proposal Risk Mitigation – Replace end of life systems was circulated in advance of the meeting and taken as read.</p> <p>This briefing paper details the TUH proposal to address the clinical, patient safety and operational risks posed by the three end of life systems following approval from the October 2018 Board of Directors to proceed to address same.</p> <p>Proceeding to award contracts will mitigate the risks, ensure compliance with legislation, and support the delivery of safe patient care. This project would be an exemplar of how eHealth in Ireland’s public hospital system could be leveraged to digitally support patient care.</p> <p>The Hospital Board discussed this matter in detail. It was agreed that the Hospital Board will receive regular updates in relation to this matter.</p> <p>The Board is asked to approve contract award to the preferred vendors, in a manner compliant with public procurement in the best interests of patient safety and in keeping with the financial plan detailed at the October Board 2018 meeting. This was proposed by DAS and seconded by MHS.</p> <p>LD thanked DW again for his work and commitment to this project and DW left the meeting at this time.</p>	<b>LN/DW</b>
<b>19.02.14</b>	<b>AOB</b>	There was no further business to conduct and this concluded the business of the meeting.	
<b>19.02.15</b>	<b>Next Meeting</b>	15 <sup>th</sup> April 2019 at the Robert Graves Postgraduate Centre.	

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