



**Tallaght University Hospital Board Meeting**  
**Via Teams**  
**26<sup>th</sup> July 2021**  
**08:00-10:00**

**Participating:**

**Board member:**

Mr. Liam Dowdall (LD)  
Archdeacon David Pierpoint (DP)  
Mr. John Hennessy (JH)  
Mrs. Mairead Shields (MHS)  
Prof. Kathy Monks (KM)  
Mr. Edward Fleming (EF)  
Prof. Patricia Barker (PB)  
Dr. Vivienne Byers (VB) (*until 9am*)

**Also participating:**

**Executive Management Team:**

Ms. Lucy Nugent (LN)  
Mr. Dermot Carter (DC)  
Mr. John Kelly (JK)  
Mr. Shane Russell (SR)  
Prof. Catherine Wall (CW)  
Ms. Anne McKenna (AMcK)

**Apologies:**

Prof. Anne-Marie Brady (AMB)  
Mr. Mark Varian (MV)  
Dr. Darach O’Ciardha (DO’C)  
Prof. John Quinlan (JQ)  
Dr. Peter Lavin (PL)  
Ms. Áine Lynch (ÁLyn)  
Ms. Sharon Larkin (SL)  
Ms. Bridget Egan (BE)

No.	Agenda Items	Decisions Made	Action By
21.07.01		LD advised of the recent passing of Mr. Dan Smyth, Chair of the Tallaght University Hospital Foundation. LD & LN have expressed condolences on behalf of TUH to Mr. Smyth’s family and TUHF colleagues.	
21.07.02	<b>Apologies</b>	Noted.	
21.07.03	<b>Patient’s Story</b>	A briefing paper highlighting two Patient’s Stories was circulated in advance of the meeting and taken as read.  LN briefed Board members on each Patient Story and the case book learnings from same were discussed.	
21.07.04	<b>New Declarations of Interest</b>	There were no new declarations of interest made.	
21.07.05	<b>Minutes of Previous Meeting</b>	Minutes of the Board & AGM meeting held on May 24 <sup>th</sup> 2021 having been circulated in advance of the meeting were approved by the Board.	
21.07.06	<b>Minutes of Previous Meeting</b>	Minutes of the meeting for obtaining Board approval held on June 2 <sup>nd</sup> 2021 having been circulated in advance of the meeting were approved by the Board.	
21.07.07	<b>Issues Log</b> <b>1.6</b>	The issues log which was circulated in advance of the meeting will be updated accordingly.	

21.07.08	<b>Chairman's Update</b>  2.1	LD updated Board members as follows: <ul style="list-style-type: none"> <li>• TUH Board Away Day took place on July 3<sup>rd</sup>. Mr. David Wall, CIO TUH gave an excellent presentation on digital health and innovation. Mr. Mike Jones, Gartner gave a presentation on digital transformation and Prof. Barry McMahon facilitated a brainstorming session.</li> <li>• Research &amp; Innovation. LD advised that a proposal to establish a Board Sub Committee on Research &amp; Innovation will be submitted to the Governance and Nominating Committee and brought before the September meeting of the Hospital Board for consideration.</li> <li>• LD acknowledged the resignation of Prof. Paul Ridgway from the post of Clinical Director, Peri-Operative Directorate and his contribution and commitment to TUH.</li> <li>• Ms. Bridget Egan, Consultant Vascular Surgeon has been appointed as Clinical Director, Peri-Operative Directorate and will be welcomed to the next Board meeting.</li> </ul> PB acknowledged the benefits and outputs of the TUH Board Away Day and the continued development of digital healthcare and the way in which care is delivered by TUH in the context of ICT and the Hospital's strategic vision.	
21.07.09	<b>VHF</b>  2.2	LD updated Board members in relation to the Voluntary Healthcare Forum as follows: <ul style="list-style-type: none"> <li>• LD was approached to take over the role of Chair of the VHF. LD will act as the Interim Chair until formalised by the VHF Plenary Group.</li> <li>• Ms. Mo Flynn has been appointed as the Director of VHF and will replace Ms. Patricia Doherty.</li> <li>• Engagement has been ongoing nationally with the Dialogue Forum holding a series of workshops. LD will keep members briefed in this regard.</li> </ul>	
21.07.10	<b>CEO Update</b>  2.2	<b>CEO Update</b> The CEO's Update was circulated in advance of the meeting and taken as read. LN briefed Board members as follows:  ICU Construction. LN advised of a site visit that took place and noted the design and patient environment. LN commended Clancy on their responsiveness to changes and the positive working relationship. The build is on time and on budget.  Reeves Surgery Day Centre. It was noted that the RSDC won the 2021 Project Management Institute's Public Sector Project of the Year Award.  Oncology Day Unit. LN advised of the positive feedback received on the new unit from both patients and staff.  6 Storey Build. LN advised of a design build approach and noted the previous tender for the CBA is still valid.  Women's Health Hub. LN advised of challenges in terms of capacity for same within the HSE and options within Tallaght Cross West are being scoped for same in conjunction with IRES Reit.  Sláintecare – Elective Hospital Sites. LN advised it is unlikely that TUH will be considered as the proposed site for same is too small.	

Charter. It was noted that engagement has taken place with the Chair of the NCH Foundation, Chairman and CEO. The Charter remains on track for approval by the two houses of the Oireachtas in the autumn.

CHI. LN outlined concerns regarding the outstanding lease given the handover of the building to CHI is due to take place in September. LN advised that the Board may need to convene in advance of the next meeting if the lease is received and requires approval. LN advised of the recent request from CHI to remain on TUH IT networks and the challenges this would pose for TUH. It was noted the Executive Oversight Committee continue to meet.

TCD Lease. Engagement is ongoing between the party solicitors.

Covid-19. Numbers are increasing in the community and there are currently 5 Covid positive patients in TUH. LN advised of asymptomatic cases being detected. A process is in place for staff who have not been vaccinated.

HSE Cyberattack. An After Action review is being conducted and the HSE are in recovery phase and there are some HSE entities still affected and not back on line.

TUH Annual Report 2020. Launch taking place later this week. Copies have issued to Board members.

Trinity Provost. LN advised of the Provost change and advised of correspondence issued to Prof. Patrick Prendergast thanking him for his support of TUH. LN has extended an invite to the incoming Provost, Prof. Linda Doyle to visit TUH.

**Integrated Management Report.**

Having been circulated in advance of the meeting the report was taken as read.

JK advised Board members the Quality Improvement Plan arising from the HIQA Audit has been published on the Hospital's website. TUH are 80% compliant with the recommendations with the remainder associated with facilities.

TUH Risk Register. JK advised as a result of the HSE cyberattack the risk register system, Filemaker Pro, is unavailable and manual contingencies are in place.

An increase in activity within the Emergency Department was noted, with June 2021 being one of the busiest months in the past 6 years.

Scheduled care activity has increased and day case activity has increased by 20%. The 4<sup>th</sup> Theatre in RDSC will be completed in August.

JK advised of the current allocation of €239.9m versus a projection of €274.9m for 2021. There has been additional costs associated with the HSE cyberattack of approximately €6m. It was noted the Finance departments Document Management System remains offline and the

	<p>Director of Finance is working with the IT department to resolve same.</p> <p>Face to face teaching is resuming in the CLD. JK advised of the support received from the Meath Foundation to award three Fellowships.</p> <p>It was noted that TUH is being included in the IBEC Leading in Wellbeing – Top 100 Companies 2021 index.</p> <p>Absenteeism. Improvement noted. JK advised of a typo in the figure for same however overall there has been an improvement in same.</p> <p>PB queried the increases in the number of complaints and the number of slips, trips and falls.</p> <p>CW advised that the increase in complaints is aligned to the increase in activity resulting from the resumption of services. It was noted some complaints relate to visiting however CW advised of an outbreak and the requirement to continue to restrict visiting.</p> <p>CW advised that slips, trips and falls are the most common clinical incident occurrence in Hospitals and there had been a delay in report same on NIMS as a result of the cyberattack. CW noted the increased frailty in some of the older patients as a result of the pandemic and outlined a Zero Harm campaign will focus on slips, trips and falls and the appointment of safer mobility champions at ward level.</p> <p>PB queried ventilation and heating, particularly with the recent good weather. SR advised that work is ongoing with Microbiology in terms of Hep Filter air conditioning units.</p> <p>PB queried the financial projection for 2021 and DC advised of assurances received from DMHG in terms of funding for the RDSC, Covid, Winter Initiatives and the cyberattack. The HSE has yet to update the allocation.</p> <p>EF queried psychiatric services cover following his attendance at a recent Patient Safety Walkaround and the provision of clerical services. LN advised that a meeting is scheduled with the Psychiatry On-call service in the coming weeks and that a full clerical review is currently being conducted by the Chief Operations Officer. Psychotherapy services were discussed in brief and it was noted that the Psychology Department has provided support throughout the pandemic to both staff and patients.</p> <p>A brief discussion took place regarding the current waiting list and in particular waiting lists in the top 5 specialities. It was noted that validation of waiting lists is ongoing despite the suspension of the NTPF validation and clearing of long waiters is a priority for the Hospital. It was agreed that the Board be presented with a capacity plan for the RDSC and waiting lists at its meeting in September.</p> <p>JK advised Board members that the service planning 2022 is currently being worked on with the Group and TUH will be submitting estimates focusing on the acute floor model and endoscopy capacity.</p>	<p><b>JK/SR</b></p>
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21.07.11	<b>Medical Board Report</b> 3.2	Deferred	
21.07.12	<b>For Decision</b> 4.1	<b>Bank Overdraft Facility</b> Having been circulated in advance of the meeting a briefing paper regarding the bank overdraft facility was taken as read.  DC advised the current cash balance of €3.6m and advised of the impact of the cyberattack on cash. It was noted that the HSE has provided correspondence outlining the maximum overdraft amount for the fourth quarter of 2021 is €10.4m and DC requested Board approval for same.  The Hospital Board approved the overdraft having been proposed by PB and seconded by EF.	
21.07.13	<b>For Discussion</b> 5.1	<b>Risk Management Overview TUH.</b> LN advised Board members that engagement had taken place with an external Consultant regarding the Hospital's Risk Appetite and unfortunately the Consultant withdrew from the process but the QSRM presentation is a starting point for how risk is managed.  LD welcomed Frances Ní Fhlannchadha, Safety & Risk Lead, QSRM Directorate to the meeting and it was noted that the presentation titled ' <i>Risk Management Overview Hospital Board</i> ' would provide members with an overview of how risk is managed in TUH. The following was noted: <ul style="list-style-type: none"> <li>• Risk management is the systemic identification, evaluation and management of risk.</li> <li>• It is a continuous process with the aim of reducing risk.</li> <li>• TUH Manages using 4 steps, identify, assess, treat, monitor and review.</li> <li>• Risk Notification Process.</li> <li>• EMT Risk Register. TUH top 6 Risk areas include, Critical Care Capacity, Cyber Attack / end of Life Servers, Bed Capacity, Access, infrastructure &amp; Financial Deficit.</li> <li>• Top 5 incidents reported in TUH in 2020 were noted with an overall 4074 incidents reported.</li> <li>• It was noted that 64% of all reported incidents were rated as negligible.</li> <li>• Serious Incidents are managed by SIMT (Serious Incident Management Team).</li> <li>• HIQA Review of NIMS (May 2021) recommends governance leadership &amp; management of NIMS within the HSE Strategy for information management and compliance with legislation and privacy risk assessments.</li> </ul> LD thanked FNF for a very informative presentation.  A brief discussion took place regarding the rise in the cost of settlements for Hospital Claims nationally and data provided by the State Claims Agency. It was noted that there is no disclosure of same within the accounting framework and therefore TUH are not liable to publish same.	

	<p>5.2</p>	<p>LD advised that the Board Risk Appetite and EMT Risk Appetite need to be aligned and external support regarding the Risk Appetite is being pursued.</p> <p>LN advised that work is ongoing in terms of Risk Appetite and it is anticipated that the TUH Risk Appetite Statement will be produced by year end.</p> <p><b>NGH Due Diligence Update</b> JK briefed Board Members on the status of the NGH Due Diligence process and advised of challenges in the context of DMHG engagement. It was noted that the Steering Group has not met yet as the Operational Group needs to progress the workplan and report back on same.</p> <p>JK advised a meeting with the Group and NGH General Manager is scheduled for next week to progress proposed workshops in September. It was agreed that TUH should drive the process however communications need to be managed effectively.</p> <p>LN advised she has sought a meeting with the CEO, DMHG regarding the progressing matters.</p>	<p>LN</p>
<p>21.07.14</p>	<p><b>Regular Updates</b></p> <p>6.1</p> <p>6.2</p> <p>6.2.1</p> <p>6.3</p>	<p><b>Governance and Nominating Committee</b> LD advised the Governance and Nominating Committee met on May 6<sup>th</sup> and the draft minutes were circulated to Board members. LD advised the Committee is working on a number of Governance items and the next meeting is scheduled to take place on September 23<sup>rd</sup>.</p> <p><b>Finance Committee</b> EF advised the Finance Committee met on May 20<sup>th</sup> 2021 and dealt with business matters for the AGM. The Committee reviewed the State Claims Agency quarterly report and approved the updated terms of reference, which were submitted to the Governance and Nominating Committee.</p> <p><b>Finance Committee Annual Report 2020</b> The Finance Committee Annual Report 2020 having been circulated in advance of the meeting was taken as read. EF advised the Committee participated in a joint meeting with the Audit Committee. LD commended EF on the report noting the priorities for 2021 were also included.</p> <p><b>Staff and Organisation Development Committee</b> KM advised the Committee are scheduled to meet this week. KM noted the reduction in absenteeism and advised the Committee are focused on same. KM acknowledged the work of SL and the HR team in managing absenteeism.</p> <p>KM advised as a result of the Board Away Day and the focus on digital healthcare and innovation the Staff and Organisation Development Committee will invite Mr. David Wall to present at the Committee and the Committee will also focus on the human implications of progressing digital health.</p> <p><b>Quality, Safety and Risk Management Committee</b></p>	

		<p><b>6.4</b> Deferred.</p> <p><b>6.5</b> <b>Audit Committee</b> PB advised the Audit Committee have not met since the last Board meeting. The draft minutes have been circulated to Board members. PB advised the next meeting of the Audit Committee with be a joint meeting with the Quality, Safety &amp; Risk Management Committee on August 26<sup>th</sup>.</p>	
<b>21.07.15</b>	<b>AOB</b>	<p><b>Closing Items</b></p> <p><b>7.1</b> LN showed a nursing recruitment video, produced by the Hospital's Clinical Photography department. The video will be made available on YouTube shortly.</p>	
<b>21.04.13</b>	<b>Next Meeting</b>	<p><b>7.2</b> LD advised Board members that there will be a scheduled Board Only Time Meeting at 7.30am followed by the Hospital Board Meeting at 8am on the 27<sup>th</sup> September 2021.</p>	

**Apologies** to Ms. Anne McKenna, Interim Board Secretary on 4143845/ [anne.mckenna@tuh.ie](mailto:anne.mckenna@tuh.ie).