



**Tallaght University Hospital Board Meeting**  
**27<sup>th</sup> March 2023**  
**Robert Graves Postgraduate Centre, CLD, TUH**  
**08.00am – 10.00am**

**Participating:**

**Board member:**

Prof. Anne-Marie Brady (AMB) (*Chairing*)  
Mr. Liam Dowdall (LD)  
Mr. Mark Varian (MV)  
Mr. John Hennessy (JH)  
Dr. Martin Lyes (ML)  
Mr. Edward Fleming (EF)  
Dr. Vivienne Byers (VB)  
Dr. Darach O’Ciardha (DO’C)  
Ms. Darina Barrett (DB)

**Also participating:**

**Executive Management Team:**

Ms. Lucy Nugent (LN)  
Prof. Catherine Wall (CW) (*left 8.30am*)  
Ms. Sharon Larkin (SL)  
Mr. John Kelly (JK)  
Mr. Dermot Carter (DC)  
Ms. Angela Clayton-Lea (ACL)  
Dr. Peter Lavin (PL) (*arrived 8.20am*)  
Ms. Bridget Egan (BE)  
Prof. Tara Coughlan (TC)  
Ms. Sandra McCarthy (SMcC)

**In attendance:**

Ms. Anne McKenna (AMcK)

**Apologies:**

Mr. Mike Beary (MB)  
Archdeacon David Pierpoint (DP)

No.	Agenda Items	Decisions Made	Action By
		AMB welcomed Ms. Darina Barrett to the Board of TUH.	
23.03.01	Apologies	Noted.	
23.03.02	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>SMcC briefed Board members on each Patient Story noting the compliments received in relation the care and dignity in which a patient was cared for and in particular the compliments received for all staff the patient encountered.</p> <p>SMcC briefed Board members on the patient complaint regarding communication with the family of a patient who was moved from a single room to a six bedded room. SMcC advised of the capacity challenges, noting that single rooms are prioritised for infection control purposes and end of life care.</p>	
23.03.03	New Declarations of Interest	There were no new declarations of interest made.	
23.03.04	Minutes of Previous Meeting	Minutes of the Board Meeting held 30 <sup>th</sup> January 2023 having been circulated in advance of the meeting were taken as read and approved.	
23.03.05	Issues Log	The issues log which was circulated in advance of the meeting will be updated accordingly.	AMcK

		<p><i>22.01.03 Patient’s Storey – Wait times and access in ED.</i></p> <p>LN advised that Limerick University Hospital (UHL) have produced a visual wait time for its ED patients. TUH are liaising with UHL re same. SMcC advised of a potential solution via the Symphony system used in TUH ED once it is upgraded. The positive impact of the Patient Liaison role in ED was noted and it was noted that there may be a 7/7 requirement in this regard. It was agreed a further update will be made available to the Board in Q4.</p> <p><b>1.5.1 TUH Gender Pay Report.</b></p> <p>Having been circulated in advance of the meeting the TUH Gender Pay Report was taken as read. SL briefed Board members and the following was noted:</p> <ul style="list-style-type: none"> <li>• TUH in on par with other Hospitals.</li> <li>• TUH has a predominantly female workforce with 75% female and 25% male.</li> <li>• TUH will continue to work on promoting equality and diversity in the workplace.</li> <li>• Develop relevant programmes or changes to encourage greater gender balance and continue to provide support to staff.</li> </ul> <p><b>1.5.2 Assisted Decision Making (Capacity) Act (2015).</b></p> <p>Having been circulated in advance of the meeting a briefing paper regarding the Assisted Decision Making (Capacity) Act (2015) was taken as read. CW briefed the Board members and the following was highlighted:</p> <ul style="list-style-type: none"> <li>• Legislation is to be enacted with a commencement date of April 26<sup>th</sup> 2023.</li> <li>• Statutory functional tests of capacity.</li> <li>• Three tier framework for decision support – decision making assistant, co-decision maker &amp; decision making representative.</li> <li>• New tools for advanced care planning.</li> <li>• At present the Advanced Healthcare Directives are included on the register, therefore this will present challenges if clinicians do not have sight of the healthcare directive at the time of interacting with the patient. This has been included on the TUH risk register.</li> <li>• CW advised that at present information is only available in one language and suggested that information is required in at least another 17 languages.</li> <li>• CW advised TUH will hold a Think Ahead Campaign on April 4<sup>th</sup> and have already distributed leaflets to clinical areas.</li> <li>• It was noted the consent policy will change on commencement of the Act.</li> </ul> <p>AMB thanked CW for the informative briefing.</p>	
23.03.06	<p><b>Chairman’s Update</b></p> <p style="text-align: right;"><b>2.1</b></p>	<p>LD updated Board members as follows:</p> <p>Charter – a meeting with the Foundations to progress same will take place in April.</p>	
23.03.07	<p><b>CEO Update</b></p> <p style="text-align: right;"><b>3.1</b></p>	<p><b>CEO Update</b></p> <p>Having been circulated in advance of the meeting the CEO Report was taken as read. LN highlighted the following:</p> <ul style="list-style-type: none"> <li>• LN advised of the top three challenges for TUH at present including: <ul style="list-style-type: none"> <li>○ Capacity.</li> <li>○ Recruitment</li> </ul> </li> </ul>	

- HSE Leadership. It was noted Bernard Gloster has commenced as the CEO of the HSE and has made access one of the primary objectives. LN advised the RHA CEO posts will be advertised shortly.
- CHI Sub Lease. It was noted a final meeting is to be scheduled to resolve same.



- Finance. TUH are waiting the close out of the 2022 financial year and awaiting final receipt of the 2023 allocation. LN advised it was feared that the 2022 deficits would be applied to the voluntary organisations and the Chair of the VHF CLG wrote to the Chair of the CEO regarding same. DC advised correspondence is anticipated to resolve the issue.
- SLA's. LN advised it is anticipated that SLA's will be available to present to the Board at the next meeting.
- Cookstown. LN advised TUH is making a further submission for one of the elective hospitals and with an architect's visual being completed this week that will be submitted to the HSE. It was noted LD & LN met with a local developer regarding a proposal for step down facility and key worker accommodation. The developer signalled that TUH can have road access from the Fás site.
- Ward Block. LN advised the 72 inpatient ward block has been approved. It was noted a staff competition to name same will be undertaken. ML suggested navigation to the new building be considered in its design. It was noted a way-finding project is currently being undertaken by the new Director of Estates & Facilities Management.
- @InnovateHealth. LN advised TUHF are awaiting the outcome of the submission to the IIP.

**Integrated Management Report**

The Board IMR having been circulated in advance of the meeting was taken as read. JK briefed Board members on the following:

- Two NOCA reports included in the IMR outline TUH's performance in relation to Hip Fractures and Stroke. JK advised TUH is working to improve same and compete for the Golden Hip Award. Challenges regarding designated stroke beds was noted including increased numbers of stroke patients due to current bypassing of NGH. LN advised that patients ready for rehabilitation are returned to NGH under an agreed repatriation process.
- ED. Delays associated with admitted patients within the department noted. JK advised TUH have maximised the use of all off site bed capacity. It was noted there is an increase in >75 year olds presenting to the ED and LOS has increased as a result of the delayed transfer of care.
- Values in Action is progressing.
- Recruitment. Challenges noted in recruiting international nurses as a result of Atypical work visa changes. It was noted TUH's retention rate remains steady.

		<p>EF queried increases in non-pay elements of the management accounts, medicines, medical/surgical supplies and pathology. DC advised non-pay activity has increased and Covid re-testing is now done in-house. Pay costs have increased 27% year on year. LN advised an update on the new Consultant Contract will be provided at the next meeting of the Board.</p> <p><b>3.2</b></p> <p><b>Medical Board Update.</b> TC briefed Board members with an update from the Medical Board and the following was noted:</p> <ul style="list-style-type: none"><li>• Medical Board met on the 20<sup>th</sup> March.</li><li>• Challenges in ED were discussed.</li><li>• Transition of Care Policy is now complete.</li><li>• Reviewing mandatory training at Medical Board.</li><li>• Discussion took place on initiatives to improve public spaces within the Hospital.</li></ul>	<p><b>LN/DC</b></p>
<p><b>23.03.08</b></p>	<p><b>For Decision</b></p> <p><b>4.1</b></p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p><b>4.2</b></p>	<p><b>Heads of Agreement – Women’s Health Hub.</b> Having been circulated in advance of the meeting a briefing paper regarding the Heads of Agreement for the Women’s Health Hub was taken as read. DC briefed Board members and the following was noted:</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>EF queried the financial profile of the project including VAT. DC will circulate same to the Board.</p>	<p><b>DC</b></p>

		<p>The Board approved the signing of the Heads of Agreement with a landlord for a new Women’s Health unit at Tallaght Cross West and sign a planning and design agreement to enable relevant works for the Women’s Health Unit having been proposed by JH and seconded by EF.</p>	
<p><b>23.03.09</b></p>	<p><b>For Discussion</b></p> <p><b>5.1</b></p> <p><b>5.2</b></p>	<p><b>HIQA Report.</b>          Having been circulated in advance of the meeting the HIQA report was taken as read. CW briefed members and the following was noted:</p> <ul style="list-style-type: none"> <li>• HIQA unannounced visit took place 27<sup>th</sup> October 2022 in the ED.</li> <li>• TUH were reviewed against 4 themes: Leadership, Governance and Management; Workforce; Person-Centred Care and Support &amp; Safe Care and Support.</li> <li>• CW reported the findings were fair and TUH were able to report back on inaccuracies in the draft report that were reflected in the final report.</li> <li>• Of 29 short term recommendations TUH have completed 59% of same with 40% ongoing.</li> <li>• 14 long term recommendations require external support for enhanced physical capacity.</li> <li>• HIQ reported TUH ED compliance against 3 standards and non-compliance in relation to 1 standard (admitted patients in the department).</li> </ul> <p>JH &amp; ML expressed concerns regarding TUH’s non- compliance in relation to moving of admitted patients from the Emergency Department and queried actions that can be undertaken by TUH to achieve compliance.</p> <p>LN advised that TUH has engaged with the DMHG and CHO7 regarding delayed transfer of care and noted the staffing challenges in the community. TUH is currently working on a new patient project ‘Tallaght In the Home’ whereby TUH staff care for patients in their own homes.</p> <p>JK advised that at present TUH would require 30/40 home care packages in order to reduce the delayed transfer of care and some patients can be waiting up to 6 months for a package. Delayed Transfer of Care has been included on the TUH Risk Register and escalated to DMHG. TUH escalate regularly to DMHG and the issue was also raised with the Minister.</p> <p>MV suggested that the Board members receive a more detailed update on the implementation of recommendations in order to clarify the matters that remain within the control of TUH. It was agreed to include the Quality Improvement Plan for discussion at the next meeting.</p> <p>EF queried staffing standards vs rostering plans. It was noted TUH have recently recruited 8 NCHD’s from South Africa. SMcC advised there are currently 10 WTE nursing vacancies vs. a compliment of 90 WTE. It was noted vacancies are backfilled via agency and overtime where possible. PL advised the ED has full complement of medical staff. LN advised of TUH are to receive an additional 2 WTE ED Consultants and interviews for same are taking place this week.</p> <p><b>Strategic Implementation Plan Update.</b></p>	<p><b>CW</b></p>

	<p><b>5.3 Radiology Waiting List Review. Dr. John Feeney, Clinical Director</b></p> <p>AMB welcomed Dr. John Feeney (JF) to the meeting who gave a presentation on the Radiology Waiting Lists. JF briefed the Board and the following was noted:</p> <ul style="list-style-type: none"> <li>• JF outlined the main campus equipment, services provided by the Primary Care Centre, TUH Workforce and developments in 2022.</li> <li>• Medical Physics have been transferred to Radiology Directorate.</li> <li>• 160,000 studies were in 2022 inclusive of insourced and outsourced studies.</li> <li>• Activity by modality vs 2019 saw an increase in CT's imaged by 15%, CT's requested by 16%, 11% increase in MRIs imaged and 8% increase in MRIs requested. There was a decrease in plain x-rays by 13%.</li> <li>• JF advised of the NIMIS Metrix that was developed in 2022 which is a reporting platform that enables real time visualisation of waiting lists. JF advised of a discrepancy between waiting list figures being reported via business objects and Metrix data.</li> <li>• JK briefed Board members on waiting list by vetting category.</li> <li>• Ongoing measures to reduce the waiting lists including validation of waiting lists, outpatient lists run on CT Prime and ongoing insourcing and outsourcing.</li> <li>• It was noted TUH is getting a 3<sup>rd</sup> CT Scanner. JF advised it is likely a fourth CT scanner will be required to deliver on all scheduled and unscheduled care and would require a department restructuring and reconfiguration.</li> <li>• JF advised of challenges with Metrix noting that reports on data related to completed studies is not readily accessible and TUH are working to produce a dashboard to aid with demand management.</li> </ul> <p>Board members thanked JF for the presentation. It was suggested that more resources would be required to notify GP's of when images have been reported on. The Board raised concerns regarding the delays in urgent scans and requested a detailed action plan in order to improve patient outcomes and an implementation plan for same. It was agreed JF will revert to the Board in 3 months with same.</p> <p><b>5.4 Access</b></p> <p>It was agreed to defer the Access presentation to the next meeting of the Board.</p>	<p>Having been circulated in advance of the meeting the Strategic Implementation Plan update was taken as read.</p>	<p><b>JF</b></p> <p><b>ACL</b></p>
<p><b>23.03.10</b></p>	<p><b>Regular Updates</b></p> <p><b>6.1</b></p> <p><b>6.1.1</b></p> <p><b>6.2</b></p>	<p><b>Governance and Nominating Committee Update.</b></p> <p>LD advised the Committee met on February 23<sup>rd</sup> and reviewed Board Succession. The Committee are scheduled to meet on the 18<sup>th</sup> May.</p> <p><b>Governance and Nominating Committee Annual Report.</b></p> <p>Having been circulated in advance of the meeting the Governance and Nominating Committee Annual Report was taken as read. AMcK advised of a typo within same that will be updated.</p> <p><b>Finance Committee Update.</b></p>	

		<p>EF advised the Committee met on February 21<sup>st</sup> and frustration was noted as a result of not being in a position to review the financial year end position due to a delay by the HSE in finalising the overall year end position. The Committee were advised of €2m minor capital funding received which is a reduction on the previous year. The Committee received assurances that there was no issues with cashflow noted correspondence from the Chair of the VHF CLG to the HSE regarding the 2022 outturn.</p> <p><b>6.3 Staff and Organisational Development Committee Update.</b> SL advised the Committee are scheduled to meet on April 5<sup>th</sup> and will focus on attendance management.</p> <p><b>6.4 QSRM Board Committee Update.</b> AMB advised the Committee met in March and discussion the aspiration of TUH to become a Golden Hip winner. Access to appropriate beds for hip fractures could be optimised by a dedicated hip fracture ward. The Committee were advised of the VTE strategy being impacted by lack of Haematology Consultant staffing. LN advised of a temporary appointment and specialist wards is being reviewed.</p> <p><b>6.4.1 QSRM Board Committee Annual Report.</b> Having been circulated in advance of the meeting the QSRM Board Committee Annual Report was taken as read.</p> <p><b>6.5 Audit Committee Update.</b> DC advised the Committee are scheduled to meet on April 13<sup>th</sup> to review the draft Annual Financial Statement and Annual Compliance Statement. DC advised the HSE Governance Review of S. 38 agencies is ongoing and correspondence was received from the HSE regarding TUH's proposal in the context of providing third party data. LN advised the correspondence did not address TUH's concerns and will respond advising of same.</p> <p><b>6.6 Research &amp; Innovation Committee.</b> VB advised the Committee met on February 10<sup>th</sup> and discussed a number of items including InnovateHealth building, noting the Board has established a sub-group to review the governance of the joint proposal with TUHF. The Committee received presentations from Dr. Cole and Dr. O'Neill. The Committee noted the work being undertaken to implement a triparty agreement with TCD &amp; SJH in the context of research. The Committee are scheduled to meet in June and will hold a joint meeting with the QSRM Board Committee in November.</p>	
23.03.11	7.1	<p><b>Closing Items</b></p> <p><b>AOB</b> There were no further matters for discussion.</p>	
23.03.12	Next Meeting	24 <sup>th</sup> April 2023	

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