Minutes

Tallaght University Hospital | Ospidéal Ollscoile Thamhlachta
An Academic Partner of Trinity College Dublin

Board

Name:	TUH Board Meeting 25th May 2026
Date:	Monday 25 May 2026
Time	09am to 10:30am, Europe/Dublin
Location	Robert Graves Postgraduate Centre, CLD TUH
Board Members	Mr. Mike Beary, Rev. David Bowles, Prof. Anne-Marie Brady, Mr. John Byrne, Mr. Tom Lane, Dr. Martin Lyes, Anne McKenna, Dr. Darach Ó Ciardha, Dr. Grainne Quinn, Mr. Mark Varian, Mr. David Walsh,
Attendees	Mr. Dermot Carter, CEO CEO, Director of Nursing DON (Deleted user), Ms. Bridget Egan, Ms. Barbara Keogh Dunne, Ms. Sharon Larkin, Prof. Peter Lavin Prof. Catherine Wall, Dr. Mary White, Bernadette Corrigan, Yvonne Connaughton

Welcome
Attendance

Author: Anne McKenna

Attendees:

Present:	Rev. David Bowles, Prof. Anne-Marie Brady, Mr. John Byrne, Mr. Tom Lane, Dr. Martin Lyes, Dr. Darach Ó Ciardha, Dr. Grainne Quinn, Mr. Mark Varian, Mr. David Walsh
In Attendance:	Mr. Dermot Carter, Yvonne Connaughton, Bernadette Corrigan, Ms. Bridget Egan, Ms. Barbara Keogh Dunne, Ms. Sharon Larkin, Anne McKenna, Prof. Catherine Wall
Not present (Apologies):	Director of Nursing DON, Prof. Peter Lavin Dr. Mary White

1. Opening Items

1.1. Apologies

Noted.

1.2. Declaration of Interest.

Presenter: Prof. Anne-Marie Brady

None.

1.3. Patient Story

Deferred.

1.4. Minutes of the Meeting held 27th April2026

Presenter: Rev. David Bowles

Seconded: Mr. Mike Beary

Minutes: TUH Board Meeting 27th April 2026 27 Apr 2026, minutes were confirmed without changes.

Supporting Documents:

Minutes: TUH Board Meeting 27th April 2026.pdf

1.5. Issues Log

Having been circulated in advance of the meeting the issues log was taken as read. BKD advised in relation to 25.05.15 that this will be reported on in Q1 2027.

2. Chair's Update

2.1. Chair's Update

AMB briefed members on the following:

- IVHA. It was noted a plenary took place last week whereby members were notified that the IVHA CEO is stepping down. A discussion took place with regards to the function of the role. Members discussed the ongoing challenges in relation to funding. AMB advised TUH had planned to invite IVHA to present at a Board meeting in 2026. It was suggested to invite IVHA to a meeting of the Board once the new CEO has been recruited. It was agreed to seek the principles of operation from IVHA and circulate to members.
- Charter. AMB advised of ongoing engagement with the Charities Regulator in relation to the revised Charter. The Board Secretary advised that the Charities Regulator have accepted the main objects and advised the suggested wording in relation to income & property and the winding up clauses is a matter for the trustees and that the trustees need to ensure they

meet their obligations under the Act. It was noted that section 42A of the Charities (Amendment) Act 2024 is yet to be enacted and will require charities to obtain written consent from the Regulator before updating key parts of their constitution. Members agreed that TUH should proceed with the Department to conclude the revised Charter.

- Vice-Chair. AMB advised the Mr. Mike Beary has been formally appointed as Vice-Chair of the Hospital Board for a period of one year.
- AMB advised Dr. Grainne Quinn has been appointed as Chair of the Staff and Organisation Development Committee from June 2026.

Invite IVHA to TUH Board Meeting

Due Date: 19 Oct 2026

Assignee(s): Anne-Marie Brady

IVHA Principles of Operations

Due Date: 27 Jul 2026

Assignee(s): Barbara Keogh Dunne

3. Committee Updates

3.1. Governance and Nominating Committee

Update

AMB advised since the Committee considered the process and procedures in relation to reporting of Protected Disclosures and noted the work undertaken by the CEO to improve the process. AMB advised oversight in relation to compliance of same remains with the Audit Committee and the process of reporting will included in the remit of the Staff and Organisation Development Committee (SODC). AMB advised the terms of reference of the SODC will be amended to reflect same. AMB advised the Director of HR is now the Designated Officer for reporting of protected disclosures.

3.2. Finance Committee

TL advised there is no further update from the Finance Committee [redacted]

3.3. Staff and Organisation Development Committee

MV advised there there is no update from the Committee since the last meeting of the Board.

3.4. Quality, Safety & Risk Management Committee

DB advised there is no update from the Committee since the last meeting of the Board.

3.5. Audit Committee

JB advised of numerous meetings held in advance of the AGM and thanked members of the Finance Committee for their contributions.

3.6. Research & Innovation Committee

ML advised the Committee are scheduled to meet next week and the CIO will be in attendance in the absence of a DCEO.

4. Executive Updates

4.1. CEO Report.

Having been circulated in advance of the meeting the CEO report was taken as read. BKD briefed members and the following was noted:

- Ward Block. Approval received for same. It was noted the approvals process has been circulated to members. BKD advised of the requirement for redesign in line with the exemplar ward policy and this will take place over the coming months. If approved it is anticipated TUH will be in a position to seek planning permission in Q1 2024.. BKD advised only one block can be progressed at a time. MB noted the cost implications for progressing the second block in separation from the first block. MV highlighted the strategic importance for the Hospital in relation to the ward block in relation to capacity and clinical requirements of the population served by TUH. DW suggested engaging with HSE Acute division and the Department in relation to their views on the blocks being progressed as one. BKD advised TUH have been requested to confirm that they can run the block without supports service. BKD advised TUH will require support services to run the ward block. It was agreed that BKD prepare a briefing paper with key messages in relation to the project.
- PAC response issued and was circulated to members for information.
- Executive Recruitment. It was noted the DCEO & Director of Nursing & Integrated Care posts remain vacant following the recent recruitment campaign.
- Unscheduled Care. BKD advised of improved performance however highlighted Citywest is set to become a processing sight for all refugees/asylum seekers and this may impact on ED. Members queried if there will be a material impact on TUH. It was noted individuals will be assessed within seven days and TUH is the nearest Hospital. It was noted that this cohort of patients can present with very complex healthcare needs with some requiring longer inpatient stays. YC outline challenges in follow up of patients presenting as some are moved and TUH is not advised of same. DÓC highlighted the lack of access to the Chronic Disease Management process and lack of planning for this cohort of patients.
- BKD advised the OPD Value Based Funding (VBF) which sets targeted reductions to reduce the number of new patients awaiting an OPD appointment to >12 months. If breached this will result in fines of €1k per

patient. TUH have been set a target of 715patients. BKD advised of the challenges in same given that TUH has 5,500 patients waiting >12 months. It was noted TUH will be seeking resources from the Region to address same.

- BKD briefed members in relation to access to dialysis risk advising the TUH capacity is at its highest. BKD advised a regional satellite unit is required and TUH have exhausted all available capacity. CW advised TUH provides outreach to Naas and the goal was to have a satellite unit at Naas. It was noted the matter has been with the National Renal Office for the last number of years. CW advised the other satellite units are all full.
- Radiology. It was noted TUH have escalated same to the Region and is seeking funding from the Region for same.
- Protected Disclosures. BKD briefed members re same and advised it has been escalated to the Region. SL advised given the different elements included within same expertise will be required.

Ward Block

Due Date: 27 Jul 2026

Assignee(s): CEO CEO, Barbara Keogh Dunne

4.1.1 Scheduled Care.

Presenter: CEO CEO

Having been circulated in advance of the meeting the Scheduled Care Presentation was taken as read. BKD briefed members and the following was noted:

- Elective surgical waiting lists are beginning to decrease.
- Elective surgical inpatient admissions have increased in April & bed days used per month also increasing.
- Unscheduled surgical inpatient activity has increased year on year
- Surgical day case activity has increased in April 2026 with activity increasing month on month.
- Elective orthopaedics inpatient admissions continue to increase and scheduled DOSA has increased to 3 patient cases per consultant list. A planned Saturday waiting list pilot initiative is due to commence in early June.
- Endoscopy. All beds have been returned. It is forecasted that the waiting list will reduce further due to increase access and the continuation of Sunday initiatives.
- Urology waiting list has not decreased however elective urology admissions have increased.
- ENT. It was noted increased throughput is required to manage same and a meeting with the productive theatre proramme re usage is scheduled. Non-specialist work is being reallocated.
- It was noted ongoing discussions are taking place with all affected

specialties.

- Work continues to evaluate the efficiency of the productive theatre programme which has led to improved theatre access and improved productivity. It was noted there a five weeks left of the programme and a report on the outcome of same will be circulated to members on conclusion of the programme.

Members discussed the improvements in scheduled care however queried if this was seasonal. It was noted that some Saturday initiatives are resource dependent and there are some vacancies in Theatre. Members discussed delayed transfer of care. YC highlighted the complexity of some patients and the requirement for the expansion of integrated care and hospital in the home initiative.

Members acknowledged the challenge in maintaining the current progress and requested that the Executive risk assess the situation in the context of winter. It was agreed to retain scheduled care as a standing item agenda.

Productive Theatre Programme
Due Date: 28 Sept 2026
Assignee(s): CEO CEO, Barbara Keogh Dunne

Risk Assess Scheduled Care
Due Date: 27 Jul 2026
Assignee(s): Jerome Powell

4.2. Finance Update

Presenter: Mr. Dermot Carter

Having been circulated in advance of the meeting the Finance Update was taken as read. DC briefed members and the following was noted:

- The Region are currently in tier 3 financial escalation.
- TUH has submitted a cash acceleration request however this has been rejected by the Region on the basis that TUH has not signed the SLA.
- It was noted TUH have submitted a revised projection at the request of the Region.
- IFMS. DC advised testing is ongoing and TUH have outlined to HSE that TUH will not go live until testing has been completed to TUH satisfaction.

4.2.1 Deed of Transfer (RDSC) Equipment.

Presenter: Mr. Dermot Carter

Having been circulated in advance of the meeting the Deed of Transfer was taken

as read. DC advised members that further to the Board's approval in December 2025, TUH have now entered into a deed of transfer to take ownership of the equipment in RDSC.

4.3. TUH Risks

CW briefed members in relation to risk and the following was noted:

- Dialysis and access to same remains on the risk register.
- One risk has been closed on the risk register relating to the central referral office. CW advised turnaround times have been reduced to the KPI and will be monitored by the COO.

5. For Decision

5.1. HSE Annual Compliance Statement & AFMR.

Presenter: CEO CEO

Having been circulated in advance of the meeting the Annual Compliance Statement 2025 & Annual Financial Monitoring Return were taken as read.

Members considered the declarations under non-compliance and requested amendments to same. It was noted the mitigating actions for three of the matters pertains to recruitment.

Approval of the ACS & AFMR 2025
The Board formally approved the Annual Compliance Statement 2025 & AFMR subject to amendment of the wording included in the Annual Compliance Statement.

Decision Date: 25 May 2026 **Outcome:** Approved

Mover: Mr. David Walsh **Seconder:** Mr. Tom Lane

5.2. Charities Governance Compliance.

Presenter: Prof. Anne-Marie Brady

Deferred.

6. For Discussion

6.1. TUH Strategic Implementation Plan

AMB advised that the reporting of the Strategic Implementation plan requires further consideration. BKD advised the six pillars could be designated to specific Board Committees with the Executive providing a quarterly report to the Hospital Board. If reporting within the Committee structure the terms of reference of the

respective Committees will need to be reviewed.

Members agreed a focused discussion is required in relation to the reporting. AMB suggested a small sub-group of the Board be convened to progress a plan for presentation at the July meeting of the Hospital Board.

Strategic Implementation Plan Reporting

Due Date: 27 Jul 2026

Assignee(s): Anne-Marie Brady

7. Closing Items

7.1. AOB

8. Board Only Time

Prof. Anne-Marie Brady

Signature:_____ **Date:** _____