



Tallaght Hospital Board Meeting
Robert Graves Postgraduate Centre
Tallaght Hospital
17th February 2016
17:00-19:30

Present:

Non-Executive Members

Mr. Michael Scanlan, Chairman (MS)
 Prof. Richard Reilly (RR)
 Mr. David Seaman (DAS)
 Ms. Anna Lee (AL)
 Archdeacon David Pierpoint (DP)
 Prof. Patricia Barker (PB)
 Mrs. Mairéad Shields (MHS)
 Prof. Kathy Monks (KM)
 Dr. Jim Kiely (JK)

Executives in Attendance

Mr. David Slevin (DS)
 Dr. Daragh Fahey (DF)
 Mr. John O'Connell (JOC)
 Ms. Hilary Daly (HD)
 Dr. Siobhán Ní Bhraín (SNiB)
 Mr. Dermot Carter (DC)

Apologies

Mr. Liam Dowdall (LD)
 Mr. Andreas McConnell (AMcC)
 Ms. Lucy Nugent (LN)
 Dr. Catherine Wall (CW)

In Attendance

Madeline O' Neill (MO'N)
 Mr. John Kelly (JK) D/COO

No.	Agenda Items	Decisions Made	Action By
		Board member only time.	
16.01.01	Apologies	<p>Apologies were noted.</p> <p>MS welcomed the new board members Professor Kathy Monks and Dr. Jim Kiely to the meeting.</p> <p>MS advised the Board that the three members selected by lot to serve initially for one year under the November 2014 bye laws have been reappointed to the board. As one of these is the Chairman, it is necessary to formally re-elect a Board Chairman. Michael Scanlan was proposed by DP, seconded by MHS and re-elected to the office of Chairman of the Hospital Board.</p> <p>MS noted that Ms Hilary Moss, Arts Officer, was leaving on a career break. The board thanked her for all her work and wished her well. It reaffirmed the importance of this function and confirmed that it wished to consider this and related issues (such as values, volunteers and pastoral care) at a future meeting.</p>	
16.01.02	Patient's Story	<p>HD briefed the board on correspondence received from a patient complimenting staff on the excellent care provided on Gogarty Ward. The patient advised that it is very comforting to</p>	

		<p>be associated with such a great hospital.</p> <p>HD also briefed the board about the result of a complaint received from the family of an elderly patient who presented to the hospital with a fracture. The complaint had shown the hidden complications with patient feeding/nutrition that may arise for frail elderly patients. In this case, support was provided to the family to allow them help the patient and the patient is now recovering well in a nursing home. The family appreciate the response to their complaint and are very grateful for the care the patient received.</p> <p>It was noted during the discussion about this case that the care of frail elderly patients (an increasing cohort of patients presenting to the ED) will be covered in the forthcoming Clinical Service Plan and that the Tallaght has been selected as an exemplary site for the Integrated Model of Care in respect of older persons.</p>	
16.01.03	New Declarations of Interest	There were no new declarations of interest for noting.	
16.01.04	Minutes of Previous Meeting and Teleconference	Minutes of the meeting held on 25 th November 2015 having been circulated in advance of this meeting were approved for signing.	
16.01.05	Issues Log	The issues log was reviewed and accepted.	
16.01.06	<p>Regular Updates Chairman's Update</p> <p>Audit Committee Update</p> <p>Staff & Organisation Development Committee Update</p> <p>Quality, Safety & Risk Management Committee Update</p> <p>Governance and Board Development</p>	<p>MS advised the board that he and the CEO had met the Chair and CEO of Peamount Hospital; that he had attended, along with other board members, the recent Patient Survey Project Showcase (he congratulated all the team for organising this very successful event); and that he had met the Minister recently as part of a VHF deputation to discuss hospital group governance and the pay of CEOs of section 38 agencies (it was agreed that SODC have discussed the latter and that that MS will write to the Minister in this regard).</p> <p>Minutes of the meeting held on 9th December 2015 were circulated in advance of the meeting and taken as read. PB referred to the joint Audit and QSRM board committee meeting held on 28th January 2016. This had proved very helpful in clarifying how risks (financial, clinical and other) are managed and another meeting will be scheduled in due course. PB also advised that the external auditors presented to the AC at its meeting on 2nd February 2016.</p> <p>Minutes of the meeting held on 9th December 2015 were circulated in advance of the meeting and taken as read. It was noted that the vacant role of the D/CEO will be discussed at the next meeting of the committee.</p> <p>Minutes of the meeting held on 9th December 2015 were circulated in advance of the meeting and taken as read. MHS congratulated DF and DC on the presentation to the joint QSRM/Audit meeting; it was suggested that a similar presentation should be incorporated into the induction and development programmes for board members.</p> <p>The next meeting of the committee is due to take place in March 2016. MS highlighted the need for the committee to bring a paper to the May board dealing with HSE annual</p>	SL/DP

	<p>Committee</p> <p>Finance Committee</p>	<p>compliance statement. The committee is also considering an ethics code.</p> <p>Minutes of the meeting held on 19th November 2015 were circulated in advance of the meeting and taken as read. The next meeting of the committee will take place on 24th February 2016. DC provided a further update in respect of projections, allocation and activity based funding. MS referred to recent positive media coverage about the Hospital's success in collecting private health insurance income.</p>	
16.01.07	Contracts	A briefing paper with accompanying documentation for information was circulated in advance of the meeting and taken as read. DC provided a further update and briefed the board further in respect of the Linen and Laundry tender. The board approved the four contracts concerned for security services and the provision of diagnostic imaging services.	
16.01.08	QSRM board committee	Two proposed changes to the terms of reference of the QSRM board committee were circulated in advance of the meeting and approved by the board. The board also considered and approved a proposal from the committee for the appointment of Mr. Ciaran Young as an additional extern member.	
16.01.09	Tallaght Hospital nomination to NPHDB	A briefing note in respect of the nomination of Mr. Brian Fitzgerald to the National Paediatric Hospital Development Board was circulated in advance of the meeting; the nomination was formally approved by the board.	
16.01.10	<p>Integrated Management Report</p> <p>CEO</p>	<p>An Integrated Management Report was circulated in advance of the meeting and taken as read.</p> <p>The CEO briefed the board on developments in relation to the new children's hospital project; for Tallaght, the latest timelines issued by the NPHDB mean the crèche will be commissioned in Q2 2017 and the decant building in Q4 2017 or Q1 2018. It was agreed that the interim DCEO/COO will brief the board at its March meeting on progress in relation to the CHG's clinical integration strategy.</p> <p>The CEO advised that following approval from the S&OD committee at its meeting in November 2015 the substantive post of Deputy CEO will be filled through a suitable recruitment process to commence in March. As an immediate step and on an interim basis, the duties and responsibilities of the role of Deputy CEO have been assigned to the COO following an expression of interest process.</p> <p>The CEO updated the board on the developmental programme for the five Clinical Directorate Teams. Progress will be reported through the S&OD committee as part of its organisational development plan work stream.</p> <p>The board was updated on the roll out of a WIFI service at the hospital and complimented DW and his team for the positive outcome of this project which will enhance patient experience at the hospital.</p> <p>DS explained that a business case is being developed by the hospital in collaboration with HSE and the DMHG for</p>	LN

		<p>submission to DEPR in Q2 2016 to allow Tallaght be an early adopter for the introduction of an electronic patient portal for the hospital group. The importance of this from a patient safety/quality was noted. It was agreed to invite DW to a future meeting of the board to present in respect of operational risks and strategic investment.</p>	<p>DS</p>
		<p>DS also updated the board on certain capital projects. It was agreed to invite CF, Director of Estates and Facilities, to present to the board at a future meeting.</p>	<p>DS</p>
		<p>The board noted and welcomed the improvements in the hospital's communications function and agreed to invite JC, Communications Officer, to a future meeting.</p>	<p>DS</p>
	<p>Operations</p>	<p>MS welcomed the Deputy COO Mr. John Kelly to the meeting to speak in relation to activity and operational performance. JK briefed the board on elective and emergency care including Patient Experience Time, Trolleygar, length of stay, and delayed discharges.</p>	
		<p>On elective care, JK advised that the hospital had met and surpassed its end year forecasts and had performed particularly well in relation to outpatient waiting numbers/times. There were still difficulties with some specialties because of capacity constraints and outsourcing would have to continue to be used for certain specialties such as endoscopy and radiology (there were over 12,500 patients on radiology waiting lists at end of January and an outsourcing project is commencing in February aimed at reducing waiting times to 6 months by July 2016). It was noted that notwithstanding these successes, elective activity would inevitably deteriorate during the early part of this year because of pressures from emergency admissions.</p>	
		<p>On emergency care, JK advised that the hospital has had to cope with the highest January ED attendances on record: the scale of the increase (an 8% increase relative to last year) was entirely unexpected. Despite this, the forward planning undertaken last year meant Tallaght Hospital managed to achieve the best recorded improvement in trolley numbers in the DMHG and among comparable other major academic teaching hospitals nationally. The ED PETs for 6 hour and 9 hour have improved by 7% and 6% respectively. A further 4 major bays were recently opened in the newly developed ED and all bays are expected to be open by mid-April 2016. The ED is a much controlled area even when trolley numbers are high because of the escalation measures. However, continuous escalation is not a sustainable option and clearly has a negative impact access to inpatient beds in the AMAU and to the day ward.</p>	
		<p>The board complimented all concerned for the proactive management and the results achieved. They noted, however, the clear imperative for extra capacity and, in particular, for HSE investment in extra critical care beds in the hospital.</p>	
	<p>QSRM</p>	<p>On quality, safety and risk management, DF briefed the board on complaints received/completed; performance against the medical and surgical readmission targets; the report of and</p>	

		<p>response to the HIQA inspection on 23rd September 2015; the results of the October/November 2015 hand hygiene audit; the patient survey showcase event on 20th January 2016 which was well received with got positive coverage in medical and local media and the 2016 clinical audit programme of work. It was noted that a draft protected disclosure policy for the hospital was being reviewed by HR and would be brought to the EMT for approval following further consultation and legal advice.</p> <p>It was agreed that, reflecting its focus on quality, the hospital should produce a separate a quality improvement report this year in addition to the standard annual report.</p> <p>On finance, DC explained that based on provisional figures the hospital was likely to be at or near breakeven in 2015 but that, as was the case last year, there was a substantial gap between the HSE's initial allocation for 2016 and the hospital's projected expenditure. The final allocation for 2015 was €190.5m; the initial allocation for 2016 was €183.7m and the projected expenditure was c€203m having regard to HSE approved service developments and unavoidable cost increases. The board congratulated DC and hospital staff generally for the success achieved in 2015. It was noted that the 2016 position will be discussed at the forthcoming meeting of the Finance Committee and the hospital will be meeting the DMHG to discuss the funding shortfall.</p>	DF
	Finance		
	HR	<p>JO'C confirmed that the new management arrangements for the crèche had taken effect from 1st January and change had gone well (the results of a parent survey were shared with DP and MHS). MHS thanked JO'C for the smooth transfer. It was noted that steps would now be taken to wind up the hospital subsidiary company: DC will bring a paper in this regard to the March board meeting.</p> <p>JO'C also briefed the board about the Dr. Hassen case which had been widely reported in the media. A review of the hospital's recruitment and validation processes has been initiated and the results will be reported to the SODC.</p>	DC
16.01.11	Next Meeting	14 th March 2016 at the Robert Graves Postgraduate Centre, Centre for Learning and Development, TH.	

Apologies to Ms. Madeline O'Neill, Board Secretary on 4143845/ Madeline.oneill@amnch.ie