



Tallaght University Hospital Board Meeting
27th November 2023
The Fitzwilliam Room, Fitzwilliam Hotel, D2
10.15am – 12.15pm

Participating:

Board member:

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

Also participating:

Executive Management Team:

Ms. Lucy Nugent (LN)
 Mr. John Kelly (JK)
 Ms. Sharon Larkin (SL)
 Ms. Áine Lynch (ÁLyn)
 Mr. Shane Russell (SR)
 Mr. Dermot Carter (DC)
 Prof. Catherine Wall (CW)
 Dr. Peter Lavin (PL)

In attendance:

Ms. Anne McKenna (AMcK)

Apologies:

Archdeacon David Pierpoint (DP)
 Prof. Tara Coughlan (TC)
 Ms. Bridget Egan (BE)

No.	Agenda Items	Decisions Made	Action By
23.11.01	Apologies	Noted.	
23.11.02	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>ÁLyn briefed members regarding the compliment regarding a positive patient experience in relation to access and technological efficiencies. The compliment included positive feedback in relation to the services provided by the volunteers.</p> <p>ÁLyn briefed members regarding feedback received regarding the transition of patients from paediatric services to adult services. It was noted PALS managed the feedback in the context of communication regarding an appointment. It was noted that patients receive appointments via correspondence and it is followed up with a text message.</p>	
23.11.03	New Declarations of Interest	There were no new declarations of interest made.	
23.11.04	Minutes of Previous Meeting	Minutes of the meeting held 23 rd October 2023 having been circulated in advance were taken as read and approved.	

23.11.05	Issues Log 1.5.1	<p>The issues log which was circulated in advance of the meeting and the following was noted:</p> <p>22.01.03 & 23.09.02 ED – JK advised that a briefing paper will be presented at the next Board outlining progress re same.</p> <p>23.07.10 Radiology Waiting List Review. JK advised a discussion document regarding radiology follow up with primary care was discussed at the GP local integrated care committee.</p> <p>It was agreed Radiology Waiting List Review be recorded as ongoing in the issues log.</p> <p>Delayed Audits – Audit Committee Correspondence. Having been circulated in advance of the meeting the correspondence from the Audit Committee regarding delayed audits was taken as read.</p> <p>LN tabled a briefing paper regarding the delayed audits and the following was noted: Data Protection GDPR Audit Review.</p> <ul style="list-style-type: none"> • The post of Information Governance manager has remained vacant for 12 months despite a number of recruitment campaigns. • The current Deputy Information Governance manager is undergoing training and it is anticipated that the Deputy will conclude same within a year. External supports are also being put in place. • The Research Manager has undertaken Data Protection training in order to improve research information governance. • Recommendations from 3 previous audits carried out into Data Projection, Information Security and Information Governance remain outstanding as a result of resources and TUH are awaiting HSE funding and investment in order to complete same. • It was agreed the feedback document be amended to note that the Information Governance post remains vacant as no suitable candidate has been identified. <p>Cyber Security.</p> <ul style="list-style-type: none"> • LN advised TUH completed the NIS1 self-assessment which identified areas of non-compliance and TUH received a low score. • It was noted the TUH CIO has submitted numerous cyber security funding requests to the HSE. • TUH completed an external Cyber self-assessment which also sets out recommendations that any further audits will duplicate. • A comprehensive cyber audit, conducted by cyber specialists would cost approximately €100k. The CEO supports the recommendations from the CIO that any funding would be better utilised addressing current cyber recommendations. • LN advised S. 38 agencies received some funding from the HSE in relation to cyber however a national approach to cyber security is required. 	<p>JK</p> <p>AMcK</p> <p>LN</p>
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23.11.06	Chairman's Update 2.1	LD updated Board members as follows: <ul style="list-style-type: none"> • HSE Moratorium. LD advised while this matter is included on the agenda, the VHF CLG have written to the HSE regarding a number of matters including historical deficits, budget allocation and the moratorium. • Board Succession. LD advised that Prof. Anne-Marie Brady was elected as the Chair of TUH at the Board Only Time meeting today and congratulated her on her appointment. LD advised Mr. Mark Varian was elected as Vice-Chair of the Board of TUH at the Board Only Time meeting today and congratulated him on his appointment. It was noted the Board formally ratified the appointment of Mr. David Bowles and Mr. Tom Lane to the Board of TUH. It was agreed to circulate the bios of the newly appointed members to the EMT. 	AMcK
23.11.07	TUH Risks 3.1	LN advised that of one additional risk added to the Corporate Risk Register since the last Board meeting and the following was noted. <ul style="list-style-type: none"> • HSE Moratorium. Risk added to the Corporate Risk Register. • CW briefed members regarding the top risks including finance, IT, infrastructure and resources. • CW advised that the Short Stay Unit will remain open in order to meet current capacity demands. <p>It was suggested that Board members be presented with a briefing paper at each Board regarding the top risks to include mitigating actions in order to improve oversight. It was noted the bi-annual review of the risk register is due in January 2024 and the risk register is reviewed by QSRM Board Committee at each meeting.</p> <p>JH raised concerns regarding the Hospital infrastructure given it is >25 years old and noted the requirement for an overall structural upgrade and suggested TUH seek external assistance to develop a plan in order seek funding for same.</p> <p>JH outlined the requirement to ensure the increasing risks in the context of infrastructure, digital enabled care, recruitment and funding challenges associated with same are documented in order escalate same to the HSE. It was suggested that the increasing risks</p>	CW/ Exec. Lead LN

		be considered in the development of the new Hospital Strategy and against the overall risk appetite of the Hospital.	
23.11.08	3.2	<p>CEO Report.</p> <p>Having been circulated in advance of the meeting the CEO Report was taken as read. LN briefed members and the following was noted:</p> <ul style="list-style-type: none"> • Civil Unrest. LN advised of meetings with the HSE in anticipation of further civil unrest on Friday last. LN advised additional security onsite was put in place and additional staff were available if required. LN advised of concerns for staff safety and advised of the supports in place for staff. • LN advised the Minister for Health visited the Hospital last week and LN outlined the urgent need for capacity in the context of the modular build and 6 storey build. • Regional Health Areas. LN advised the recruitment for the RHA Executive Officers is ongoing and it is anticipated that the posts will be in situ before year end. It was noted that there are several configuration options for the health areas being reviewed. LN advised currently TUH would integrate with several Integrated Health areas as it is population based. • CHI. LN advised the draft lease remains with CHI. [REDACTED] • Charter. LN advised the DOH have accepted the majority of TUH's suggested amendments. TUH is currently awaiting legal advice on the response. • Mazars. LN advised the final report has been received and it has been reframed as a review and will be submitted to the Audit Committee for consideration at its next meeting. LN advised there are no major areas for concern within the review. • Estates & Facilities Management. LN advised of the resignation of Mr. Vincent Callan and it was noted Mr. Seamus Foran will act into the position until such time as the position can be replaced. • LN advised a number of derogations were sought in respect of the HSE Moratorium, of which TUH have only received 1 response to date. • Compliance Unit request. It was noted DMHG/HSE have requested access to TUH balance sheet. It was noted a briefing paper will be brought before Board regarding same at the January meeting. EF raised concerns regarding same given TUH provides HSE with the AFS. <p>Integrated Management Report.</p> <p>Having been circulated in advance of the meeting the Integrated Management Report 27th November 2023 was taken as read. JK briefed members and the following was noted:</p> <ul style="list-style-type: none"> • It was noted the ED remains very busy. • Scheduled care is performing well across in-patient areas. The end of year target is noted at 11% and TUH are currently at 12.3%. • JK advised of a reduction in wait times for scheduled care. • DC advised the end of year projected deficit has been revised to €42m and a meeting with DMGH took place last week re same. It was notes an additional funding of €960m by the HSE was announced and TUH will await confirmation of further funding associated with same. • DC advised TUH have submitted a cash acceleration request last week. 	LN

		LN advised TUH met with TUHF regarding Innovate Health and advice is being sought from the Hospital's solicitors in the context of the build.	
23.11.09	3.3	<p>Medical Board Report.</p> <p>In the absence of Prof. Coughlan, Dr. Peter Lavin briefed members and the following was noted:</p> <ul style="list-style-type: none"> • HSE Moratorium. Consultants have raised concerns regarding the current moratorium. PL advised of the supports received from EMT in relation to the delivery of clinical services. • Capacity. PL advised of the increased demand for capacity and the Consultant support for the modular build. 	
23.11.10	For Decision 4.1	<p>Affixing of the Corporate Seal to the Nursing Certificates.</p> <p>Having been circulated in advance of the meeting a briefing paper regarding affixing of the Corporate Seal to the Nursing Certificates was taken as read.</p> <p>The Board formally approved the affixing of the Seal to the Nursing certificates having been proposed by MB and seconded by JH.</p>	
23.11.11	4.2	<p>Contracts.</p> <p>Having been circulated in advance of the meeting a briefing paper regarding the ICU ventilator contract was taken as read.</p> <p>DC briefed members advising that funding was allocated to the replacement of end of life ICU ventilators via the National Equipment Replacement Fund.</p> <p>It was noted that TUH are drawing down from the vendor ranked second in order to retain clinical standardisation and patient safety.</p> <p>MV queried the differential of price with the preferred vendor and DC will revert with same.</p> <p>The Board formally approved the ICU ventilator contract having been proposed by EF and seconded by MV.</p>	
23.11.12	4.3	<p>HSE Moratorium</p> <p>A briefing paper regarding the HSE Moratorium having been circulated in advance of the meeting was taken as read. SL briefed members and the following was noted:</p> <ul style="list-style-type: none"> • The recruitment moratorium has been extended to all staff with the exception of Consultants, NCHD's in training posts, graduate nurses and adaptation nurses. • Unless derogation is received from the HSE no other recruitment can take place. • TUH have received 1 response since June in respect of derogations sought, which declined the derogation request. • All posts are being risk assessed and critical replacement posts are being replaced. New posts with funding approval letters are being put on hold. • All risks associated with the moratorium have been escalated to DMHG. • A directive received from the HSE COO last Friday advises that all posts must now be approved by the Group CEO's. 	

		<ul style="list-style-type: none"> • LD advised that the VHF CLG have written to the HSE CEO to advise that given the structure of the independent Boards, where patient safety is deemed to be at risk, posts will be progressed. • LD assured Board members that the risk is aligned to the Hospital’s risk appetite statement reiterated that where there is a risk to patient safety, the Hospital will mitigate same by means of recruitment. • It was noted that the FORSA industrial action is escalating from week of December 4th which will further impact services. • SL advised in conjunction with the HSE Moratorium, the HSE have issued correspondence highlighting that agencies must not breach the European Working Time Directive. • It was noted that 90% of the posts in TUH are replacement posts. • The Board were asked to support the EMT approach to risk assessing all posts and proceeding with recruitment if a risk to patient safety has been identified. <p>The Board formally approved the approach being taken by the EMT having been proposed by DO’C and seconded by VB.</p>	
23.11.13	<p>For Discussion</p> <p>5.1</p>	<p>HR Strategy Update.</p> <p>SL gave a brief presentation on the HR Strategy and the following was noted:</p> <ul style="list-style-type: none"> • It was noted the HR Strategy is aligned to the Hospital Strategy and reported on via the Staff and Organisation Development Committee at each meeting. • In reviewing the effectiveness of the HR Strategy the focus included attracting talent, the development of talent and the retention of talent. • SL advised TUH has increased its staff census by 671 WTE in the last three years. In 2023 TUH increased the staff census by 24% vs. October 2020. Whilst there has been an increase in administrative staff SL advised this is as a result of new service developments and Consultant posts. • The increase in staff census increases the workload for IT, HR and finance. • TUH attended two job fairs recently and has partnered with an overseas recruitment agency in order to recruit various clinical disciplines. • A reduction of 1% in absenteeism was noted. SL outlined the work undertaken by HR with line managers and reviewing those on long term sick leave. HR Masterclasses will continue in 2024 for line managers. • The Health & Wellbeing Strategy was launched in 2023 and TUH have retained its accreditation with the KeepWell Mark having achieved excellence in a number of categories. • TUH now features in Ibec’s top 100 companies for wellbeing. • TUH was the recipient of a Menopause Workplace award, the only healthcare organisation to receive same. • SL outlined the success of the Staff Psychology service since its implementation. SL advised that a submission for funding for the post has been submitted to DMHG in order to retain the post permanently. • The Learning & Development Strategy was launched in 2023 and the priorities of same include simulation based education, 	

	<p>5.2</p>	<p>support for TUH researchers and the development of technology enhanced learning.</p> <ul style="list-style-type: none"> • SL advised the TUH Phlebotomy Training programme has been hugely successful with the HSE requesting the programme to be delivered nationally. • SL identified the challenges being faced in 2024 particularly in the context of the moratorium, digitalising HR processes to reduce workload and streamline processes and funding for the staff Psychologist post. <p>Draft Research & Innovation Strategy. Having been circulated in advance of the meeting a briefing paper regarding the Research & Innovation Strategy was taken as read. JK briefed members and the following was noted:</p> <ul style="list-style-type: none"> • The Committee agreed to review the approach to how the strategy would be presented. • The strategy will now include a high level document underpinned by a strategy framework and implementation plan. • Visuals will be developed for inclusion in the high level document by the end of January 2024. • VB advised the Committee met 6 times during the year one of which was dedicated to the strategy. VB outlined the robust engagement by members in developing the proposed strategy. <p>JH suggested the vision requires expansion to include the uniqueness of TUH.</p> <p>The Board formally approved the approach being proposed by the Research & Innovation Committee having been proposed by JH and seconded by DO’C.</p>	
<p>23.11.14</p>	<p>Regular Updates</p> <p>6.2</p>	<p>It was agreed to defer the regular updates unless members wished to highlight any matters arising from the Board Committees.</p> <p>Finance Committee Update.</p> <p>[REDACTED]</p> <p>[REDACTED]</p>	
<p>23.11.15</p>	<p>6.1</p>	<p>Closing Items</p> <p>AOB</p> <p>LD noted Archdeacon David Pierpoint’s apologies and advised members of his departure from the Board. LD acknowledged that Archdeacon David Pierpoint has served TUH since 2008 and was a member of various Board Committees over the years. LD wished to formally recognise Archdeacon David Pierpoint for his dedication and service to the Hospital and expressed gratitude on behalf of all the Board and EMT.</p> <p>LN advised members of the event being held on December 19th to mark the tenure of Mr. Liam Dowdall as Chair of the Board of TUH and his service to the Hospital before his appointment as Chair. LN thanked LD for his personal support and leadership.</p>	

		LD thanked LN, the EMT and the Board for their continued support, leadership and dedication to the Hospital.	
	Next Meeting	29 th January 2024.	

Apologies to Ms. Anne McKenna, Board Secretary on 4143845/ anne.mckenna@tuh.ie.