



## Public Board Meeting

4 December, Time 14.00

Staff Restaurant, University Hospital Galway

### Present:

Dr John Killeen, Interim Chair (JK)  
 Dr Pat Nash, Group Clinical Director (PN)  
 Ms Phyllis MacNamara, Non Executive Director (PMN)  
 Ms Sharon Moohan, Non Executive Director (SM)  
 Dr Brendan Day, Non Executive Director (BD)  
 Mr Bill Maher, Group CEO (WEM)  
 Mr Tony Canavan, Group Chief Operating Officer (COO)  
 Mr Tony Baynes, Acting /Chief Financial Officer (AB)  
 Ms Jean Kelly, Acting / Group Director of Nursing and Midwifery (JK)

### Apologies:

Mr Colam O Neill, Non Executive Director (CON)  
 Mr Zubair Javeed, Non Executive Director (ZJ)  
 Dr Jim Browne, Non Executive Director (JB)  
 Mr Gerry McManus, Non Executive Director (GMM)  
 Mr Maurice Power, Acting CEO/Chief Financial Officer (MP)  
 Ms Fiona McHugh, Secretary, (FMH)

### In Attendance:

Maria Fleming, Ernst & Young  
 Ross Tudor, Ernst & Young  
 Richard Guest, Ernst & Young  
 Ms Anne Conroy, SEO, Chief Operating Office

Agenda Item	Discussions / Comments	Action
	The Chairman extended sincere condolences to Gerry McManus and family on the loss of his mother. May she R.I.P	
<b>1.</b>	<b>Minutes of Board Meeting/ Declaration of Interest</b>	
	Minutes of Board meeting of the 19/11/2014 were approved on the proposal of Sharon Moohan and seconded by Ms Phyllis MacNamara.	

	<b>Conflict of interest Declaration</b> : No Declaration of Interest made	
<b>2.</b>	<b>Matters Arising and Review of Action Points</b>	
	<p>Dr John Killeen Chairman welcomed all Board Members, Public Representatives, Media, Staff and members of the public attending the 2<sup>nd</sup> Public Board Meeting held by the Group in 2014.</p> <p>The Chairman reiterated the apology issued by GUH to Praveen Halappanavar and Family for the events related to her tragic death two years ago and he took the opportunity to again offer them our sincere sympathies.</p> <p>(Chairman Welcome address attached)</p>	
<b>3.</b>	<b>Report on implementation of recommendations into the Maternal death at UHG on the 28 October 2012 delivered by Dr Pat Nash, Group Clinical Director &amp; EY</b>	
	<p>Dr Pat Nash provided a detailed report (presentation attached) on progress of the implementation of the recommendations of the 3 reviews;</p> <ul style="list-style-type: none"> <li>• 15 local recommendations for action from the HIQA Report</li> <li>• HSE Internal Review recommendations for action (50278)</li> <li>• 9 Coroners recommendations for action (17 April 2013)</li> </ul> <p>HSE /Coroners Recommendations attached</p> <p>Copies of Ernst and Young Report (65/2014 &amp; attached)</p> <p>Three members of Ernst and Young attended the Public Meeting.</p> <p>Ross Tudor EY summarised the report</p> <p>Key actions identified from review</p> <ul style="list-style-type: none"> <li>• Making actions SMART</li> <li>• A further review needs to be planned so that embed edness, effectiveness and efficiency of the new arrangements can be assessed.</li> <li>• Clinical Audit</li> <li>• Use of Q Pulse</li> </ul> <p>Key areas for 2015 - EY</p> <ul style="list-style-type: none"> <li>• Integrating Key Policies and Procedures / Guidelines across the Group</li> <li>• Roll out of training programme policy and audit - Put QIP in place to address issues</li> <li>• Self assess against National Standards – action plan to be implemented</li> <li>• Clinical Audit programme</li> </ul> <p>Key Areas of Focus for 2015 – Dr Pat Nash</p> <ul style="list-style-type: none"> <li>• Reviewing/updating/integrating policies, procedures and guidelines</li> <li>• Implementing action plans to address areas of improvement identified from the self assessment against the National Standards for Safer Better Healthcare</li> <li>• Improve clinical audit and develop audit programme</li> <li>• Addressing the infrastructure deficits</li> </ul>	

	<p>Following Dr Nash's / EY update a number of questions were raised relating to the following areas;</p> <ul style="list-style-type: none"> <li>• The development and rollout of Group Wide Policies and procedures</li> <li>• Accountability for the implementation of the recommendations at hospital and departmental levels.</li> </ul> <p>Specific questions were asked regarding whether or not the services were now safer following the implementation of the various recommendations. The Board were advised that measures relating to the handover of care and communication of abnormal test results had a direct impact on the quality of patient care.</p> <p>In addition, presenters were asked if there were a number of areas of greater importance within the recommendations. The Board members were advised that while all areas of the reports were important at this time the need to develop an audit function within the Group was key.</p> <p>The Chairman of the Board called for the prioritisation of a clinical audit process during 2015 and that there be a further report provided to the Board during the year outlining progress.</p> <p>Report on the implementation of recommendations especially in regard to the EY report by November 2015.</p> <p>The CEO thanked Dr Pat Nash &amp; EY for their report and he also thanked the staff for their hard work in implementing the recommendations</p>	<p>PN</p> <p>PN</p>
<p><b>4.</b></p>	<p><b>Chief Executive Officer Report</b></p>	
	<p>WEM spoke to his report (64/2014) as circulated and taken as read. Group CEO Report includes performance report.</p> <p><b><u>Areas of note</u></b></p> <p><u>Transition arrangements</u> – A/CEO Maurice Power. A/ CFO Tony Baynes. Colette Cowan has left to take up her role as CEO of ULH Group. Best wishes were extended to Colette Cowan in her new role and A/CDONM Jean Kelly was welcomed. WEM to take up role of CEO RCSI Group in January and to continue his national role one day per week. In this role WEM has established the first Group CEO forum.</p> <p><u>Absenteeism</u> – A significant improvement was reported with regard to absenteeism. The national target for absenteeism is 3.5% and for the first time the Group achieved an absenteeism rate of 3.37% which is one of the best in the country. This significant improvement in performance was acknowledged by the Board.</p> <p><u>Priorities for 2015</u> – (65/2014) deferred to January</p> <p><u>Letterkenny Rebuild</u> – CEO reported that the replacement culvert works are nearing completion. The investigation into the flood which occurred on the 5<sup>th</sup> of August was ongoing and once complete a briefing on its content will be provided to RHF members and Oireachtas members.</p> <p><u>CEO Awards</u> – The CEO thanked all staff for the work they do and expressed the hope that the CEO awards ceremony would be an annual event.</p> <p>The Board acknowledged the success of CEO awards ceremony. The</p>	<p>MP</p>

	<p>Board also acknowledged the work of the CEO over the previous three years, complimented him on his achievements and wished him well in his new role.</p> <p>Members received the report and noted the key areas of progress and ongoing issues</p>	
<b>5.</b>	<b>Chief Financial Officer</b>	
	<p><b>Chief Financial Officer Report</b></p> <p>Mr Anthony Baynes (AB) spoke to his report (66/2014) as circulated and taken as read</p> <p><b><u>Areas of note</u></b></p> <p><u>Financial Performance October 2014</u> – At the end of October the Group was over budget by €45.6m. This reflects a negative variance against the same period in 2013 of €17.4m.</p> <p><u>Agency</u> – YTD agency costs were reported as €21.8m. This represents an increase of €12.3m on 2013. It was reported that medical agency costs of €10.4m are attributable to difficulties in recruiting NCHD's and Consultants. AB advised that there were still significant agency costs associated with HCA's / Lab scientists and Radiation therapists.</p> <p><u>Budget Forecast</u> – AB advised that an end of year over spend against budget of €51.7 m was being forecasted.</p> <p><u>Bad Debts</u> – increase in debt since beginning of year of €12.1m and increasing bad debt provision</p> <p><u>Challenges</u> – The Board were advised that while it was expected to get additional funding in 2015 it was also anticipated that considerable challenges would be faced in the form of agency costs, drug costs (oncology) and medical/ surgical supplies (Ortho; Cardiac). There has been a significant increase in patient activity during 2014 which is expected to continue into 2015.</p> <p>Internal Audit update not available. Report to be available for future Board meeting</p> <p>The Board reiterated its concerns regarding agency costs, numbers of agency staff and increased activity across the Group. The Board also noted the new HSE policy for agency staff having to be offered fixed contracts and the associated service continuity risks.</p> <p>Members received the report and noted the key areas of progress and ongoing issues.</p>	AB
<b>6.</b>	<b>Chief Clinical Directors Report</b>	
	<p>Dr Pat Nash (PN) spoke to his report (67/2014) as circulated and taken as read</p> <p><b><u>Areas of note</u></b></p> <p><u>Organisational Reconfiguration</u> – Noted as a key priority for 2015. A more detailed report to be presented in early 2015</p>	PN

	<p><u>EY Report</u> - As above</p> <p><u>SIMT</u> – Meet monthly/ Robust structure / Monthly report and incidents reviewed.</p> <p><u>Diabetic Retinal Screening Programme</u> – Significant numbers are now being referred to UHG.</p> <p><u>Unscheduled Care</u> – Managing the demand for unscheduled care and patient flow through the Emergency Departments (ED) remained a very significant challenge, particularly in GUH, MGH and LGH. The Board were advised that this will remain a key priority for the Group. A concern for GUH is the closure of 17 beds in Feb 2015 to facilitate the new Ward Block development. 14 additional rehab beds are being developed on the Merlin Park site to manage the risk associated with this temporary reduction in bed complement.</p> <p><u>NCHD Recruitment</u> Board members were advised that filling vacancies at NCHD level remained very challenging across the Group.</p> <p>Members received the report and noted the key areas of progress and ongoing issues.</p>	
<b>7.</b>	<b>Any other Business</b>	
	<p>Schedule of Events for 2015 deferred to January Board Meeting</p> <p>EY Report and Board Minutes will be available on Website</p>	<p>JK/MP</p> <p>MP</p>
<b>8.</b>	<b>Date of Next Meeting</b>	
	<p>January 13<sup>th</sup> 2015 2- 4 pm Boardroom Roscommon Hospital. The Chairman wished all a Happy Christmas and extended his thanks on behalf of the Board to those who had attended the meeting.</p>	

SIGNED DIRECTOR: \_\_\_\_\_

DATE: \_\_\_\_\_

**Interim Chair of Board**

### **Chairman's Welcome Address**

As interim chairman of Saolta University Health Care Group, I would like to welcome you all here this afternoon to the public board meeting of the Group to observe the proceedings. I would particularly like to welcome public representatives, representatives from the media and, of course, members of our own staff.

In the Saolta University Health Care Group, we have been putting strong board and governance structures in place in line with our stated objective of being the first Group to evolve into a

Hospital Trust. We will do this through leadership of change in the delivery of a patient-centred health service.

We feel that we are accountable to all our stakeholders, our patients, our staff, and the taxpayers [through the political system] and that we represent the interests of the patients in a new and different way. For example, we have a Patient Safety Committee chaired by non-executive board member Ms Sharon Moohan who reports in detail to the board on a regular basis.