

Board Meeting

Mayo University Hospital, Mayo
10 February 2016

Present

Non Executive Directors

Dr John Killeen, Interim Chair (JK)
Ms Phyllis MacNamara, Non Executive Director (PMN)
Mr Gerry McManus, Non Executive Director (GMM)
Dr Jim Browne, Non Executive Director (JB)
Ms Sharon Moohan, Non Executive Director (SM)
(joined via teleconference)

Apologies

Mr Zubair Javeed, Non Executive Director (ZJ)
Dr Brendan Day, Non Executive Director (BD)

In Attendance

Ms Caitriona Meehan, Communications Manager
Mr Michael Moloney, Communications

Non Attendance

Mr Colam O'Neill, Non Executive Director (CON)

Executive Members

Mr Maurice Power, CEO (MP)
Dr Pat Nash, Group Clinical Director (PN)
Ms Ann Cosgrove, I/ Chief Operational Officer (AC)
Mr Tony Baynes, I/Chief Financial Officer (AB)
Ms Jean Kelly, I/ Group Director of Nursing and Midwifery (JMK)
Ms Fiona McHugh, Outgoing Secretary, (FMH)
Mr Tony O'Gorman, Incoming Secretary, (TOG)

Agenda Item	Discussions / Comments	Action
1.	Apologies/ Minutes of Board Meeting/ Declaration of Interest	
	Minutes of Board meeting of the 9 th December were approved on the proposal of Ms Phyllis MacNamara and seconded by Mr Gerry McManus. Conflict of Interest Declaration: No Declaration of Interest made.	Chair
2.	Matters Arising and Review of Action points	
	The Board acknowledged the outstanding work of Ms Fiona McHugh, Outgoing Board Secretary and Saolta Head of Corporate Development who has played a key role in the formation of the Saolta Hospital Group, and supporting the work of the Saolta Board. Ms McHugh takes up a new post as Deputy General Manager of Mayo University Hospital. Mr Tony O'Gorman takes over the role of Board Secretary and Saolta Head of Corporate Development.	

3.	Chairperson	
	<p>Chairman's Update (verbal)</p> <p>The Minister of Health has written to the Non-Executive Directors, extending their period of appointment by an additional six months, from 31st January 2016.</p> <p>The pre-mobilization phase review of the Board's operation by the Systems Reform Group is underway as part of a national programme. PwC have been appointed to conduct the review and have spoken to several Saolta Non-Executive Directors regarding the operation of the Board, its achievements to date and the impact of the Board on the Organization's culture. Feedback from the review is to be considered at the April 2016 Board meeting. There was discussion amongst Board members regarding the background and objectives of the PwC review. The Chair noted that this activity is not a formal Board self-assessment and that the Saolta Board will need to conduct its own formal governance audit in time.</p> <p>The Chair acknowledged correspondence from Mr John Perry T.D., relating to the status of the tender process for Mammography services in Sligo University Hospital. Dr Killeen advised that the process is being managed by the NCCP and that the HSE would be announcing details of the contract award shortly.</p> <p>The Chair, on behalf of the Board, expressed condolences to the families of recently deceased staff members Doreen Farrell, Harold O'Meara and Syama Saini and acknowledged the contributions they made as employees of Saolta.</p>	Chair
4.	Audit Committee Update.	
	<p>The Audit committee Report (01/2016) circulated prior to the meeting was taken as read.</p> <p>Mr Gerry McManus, Chair of the Audit Committee, advised the Board that there was a meeting of the Committee on January 18th 2016, with a second meeting scheduled in Mayo University Hospital during the week commencing 15th February. The Committee plan to meet four times per year.</p> <p>The revised Audit Committee TOR document (02/2016) was circulated and reviewed. Mr McManus recommended the adoption of same as the revised TOR document is more suited to the current stage of development of Saolta. The revised terms of reference were approved on the proposal of Dr. Jim Browne and seconded by Ms Phyllis MacNamara.</p> <p>Mr Mc Manus noted that the key priority for the Audit Committee was the election of two new members, one of which must be external to Saolta. The Board agreed to forward recommendations to Mr McManus who would meet all potential external candidates. The Board will also nominate an existing Board member to join the Audit Committee.</p>	All Board Members.

	<p>Mr McManus recommended Group membership of the Institute of Public Administration (IPA) and observed that governance seminars would be available to the Group's Hospital Managers.</p> <p>Mr McManus advised that both the 2015 Audit Committee report and the 2016 Audit Plan will be presented at the March 2016 Board meeting. He also commended Hospitals in the Group for their prompt responses to queries made by the Audit Committee.</p> <p>Mr Tony Baynes informed the Board that a commitment has been made by Saolta to the HSE that, by the end of February 2016, all remaining issues highlighted by HSE audits will be resolved.</p> <p>The Chair thanked Mr McManus and the Audit Committee for their valuable work on behalf of the Board.</p>	<p>TB</p> <p>GMcM</p> <p>TB</p>
5.	Chief Executive Officer	
	<p>The Chief Executive Officer report (03/2016) circulated prior to meeting was taken as read.</p> <p>Mr Maurice Power advised the Board that the Group's 2015 accounts have been finalized. The Group Operational Plan has been prepared to align with the HSE Operational Plan. The HSE has acknowledged that activity-based costing will allocate increased funding to the Group. However, this gain will be offset by an increased income target.</p> <p>Mr Power advised the Board that an additional 17 beds have opened in UHG with an additional 13 beds to open shortly.</p> <p>In response to Ms Sharon Moohan's queries regarding the status of both the Group Urology Review and Breast Care Services in the Northwest, Dr Pat Nash responded that it will take several months to finalize the Urology Review. In the interim, a consultant will travel to both Letterkenny and Sligo University Hospitals to provide outreach Urology services.</p> <p>In relation to Breast Care services in Letterkenny University Hospital, there are 450 non-urgent cases awaiting consultation. 80 of these patients have been offered clinical appointments in University Hospital Galway (UHG). A clinician, based in UHG, has also been identified to travel to Letterkenny for outpatient clinics.</p> <p>Ms Ann Cosgrove advised the Board that it will take 8-10 weeks to recruit staff to open the Roscommon Endoscopy Unit and that the Unit is expected to be operational in Q2 2016. Ms Jean Kelly noted that specialist staff are required to operate the Endoscopy Unit and that there is an ongoing effort to recruit suitable staff as soon as possible. The Board will be kept updated on developments.</p>	

6	<p>Chief Clinical Director</p> <p>The Chief Clinical Director report (04/2016) was circulated at the meeting and reviewed.</p> <p>Portiuncula Maternity Services Review.</p> <p>Due to the complexity of the review process and the number of cases involved, there have been delays in the completion of the review. The process of sending draft chronologies to families for accuracy checking has commenced. Dr Nash informed the Board that the Hospital Group is pushing to have the review completed as soon as possible. Since commencement in April 2015, approximately 250 staff interviews have taken place.</p> <p>The Board acknowledged the approach being taken by the Hospital Group executives to expedite the satisfactory completion of the review and also acknowledged PUH staff for their ongoing contribution to the process.</p> <p>Clinician Recruitment Process.</p> <p>There was a detailed discussion amongst Board members regarding the recruitment, referencing and screening processes used by the Hospital Group. Mr Maurice Power informed the Board that the Group will carry out a review of recruitment processes to ensure best practice in the recruitment of clinicians going forward. The Board will be kept updated on developments.</p> <p>Clinical Directorate Updates.</p> <p>The Chair acknowledged Dr Nash's work in developing clinical directorates with the following appointments:</p> <ul style="list-style-type: none"> • Dr Ethel Ryan (Consultant Neonatologist – GUH) as Group Clinical Director for the Women's and Children's directorate. • Dr Kevin Clarkson (Consultant Anaesthetist – GUH) has been appointed as Group Clinical Director for the Perioperative directorate. • Dr Donal Reddan will remain as Group Clinical Director for the Medicine directorate for a further 2 years. <p>Other cost-neutral developments include the splitting of the Diagnostics directorate into Radiology and Laboratory directorates and the appointment of a Clinical Director with group responsibility for Quality and Risk, which received support by the Saolta Board.</p>	MP

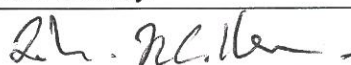
	<p>Quality and Patient Safety.</p> <p>Dr Nash also advised the Board that approval has been granted for additional Quality and Risk posts to be filled within the Group (Leads for National Standards for Safer, Better healthcare, Clinical/Compliance audit and Policy, procedures and protocols) and will be recruited in coming months. This will hugely help the implementation of the quality improvement programme across the group.</p> <p>Furthermore, 30 employees across the Hospital Group have successfully completed the on-line Quality Improvement course sponsored by HIQA with further training sessions planned across the Group.</p> <p>A discussion in relation to the location of Group posts took place. It was agreed that the posts were not restricted to Galway.</p>	
7.	<p>Chief Financial Officer Report</p>	
	<p>The Chief Financial Officer report (05/2016) circulated prior to meeting was taken as read and the following updates were provided:</p> <ul style="list-style-type: none"> • The financial position for 2015 shows a deficit of €23m for the year. The group received a supplementary budget of €29m at the end of 2015. Increased numbers of patient attending as inpatients, day-cases, ED and our requirements to address our waiting list numbers impacted on our finances. Associated patient costs both in pay and non-pay increased accordingly. • The Saolta University Health Care Group has received €656m funding for 2016. The 2016 budget is framed somewhat differently to the block Group funding received in the past. Funding in 2016 is calculated on Activity Based Funding (ABF). The projected activity for 2016, on which the funding is based, has been calculated using the 12 months to the 31st October 2015 with minor adjustments for some services changes. • The increase in funding of €30m due to ABF is accompanied by an increased income target of €16m. • Direction from the National Acute Hospitals Division (AHD) is that no further increases in WTE's will be acceptable and agency must be curtailed and reduced where possible. • Ms Jean Kelly informed the Board that Agency Health Care Assistants are a significant cost to the Hospital Group due to an increasing volume of 24 hour 1:1 care requirements. Every opportunity will be taken to convert agency posts into direct employee contracts with a planned completion date of May 2016. <p>Mr Baynes also informed the Board that a Memorandum of Understanding has been signed between Saolta and VHI and future Board finance reports will contain a report segment on private health insurance income and claims performance.</p> <p>Mr McManus expressed concern that potential hospital income from privately insured patients may be lost if the patient is not identified as having private health insurance (PHI) and identified the need for staff to become more aware of the importance of PHI as an essential source of</p>	

	<p>hospital income. Mr Baynes responded that improved business processes are being developed across the Hospital Group to identify and maximize income streams from PHI.</p> <p>Mr Baynes informed the Board that 3 senior accountant positions have been recently filled, which will greatly assist more accurate and timely financial reporting within the Group. Mr Baynes also stated that he will meet Mr Zubair Javeed, Non Executive Director and present a paper on progress with the Group finance strategy.</p> <p>Approval has been given for the appointment of a Group Chief Information Officer (CIO). This strategic role will have a reporting relationship into both the Saolta CEO and the HSE Chief Information Officer. The Chair concurred with Mr Maurice Power's position that it would be preferable, from a governance perspective, for the Group CIO's primary reporting relationship to be with the Saolta CEO.</p>	
8.	<p>Chief Operating Officer</p> <p>The Chief Operating Officer (COO) report (07/2016) circulated prior to meeting was taken as read and the following updates were provided:</p> <ul style="list-style-type: none"> • The Group's 2015 year-end compliance with both Out-patient and In-patient waiting list targets was discussed. There is limited opportunity to outsource medical treatment to private sector providers due primarily to their limited ability to treat complex medical cases. • A key focus in 2016 is addressing the > 18 month and the >15 month breaches in the first instance, and then addressing the subset targets for inpatients/outpatients/children/scopes. • Diagnostic waiting lists/times across the group remain a concern and work has to be undertaken in 2016 to review and identify improvement measures. • In summary, a long-term approach, across the Group, is required to improve performance requiring increased clinical integration. <p>Patient Experience.</p> <p>The Chair stated the importance of valuing and learning from the patient's perception of their treatment in the hospital setting and how that process might be further developed within Saolta. In particular, the hospital "Friends" support groups are an invaluable interface between the hospital physicians and the community they serve and it should be a priority to further develop this relationship.</p> <p>Ms Cosgrove also acknowledged the importance and value of information regarding patient perception and referenced the success to date of the PALS (Patient Advice and Liaison Service) and CBAS (Caring Behaviour Assurance System) programmes within the Saolta Hospital Group in valuing the patient's experience.</p> <p>Dr Nash also referenced observations made during a recent visit by</p>	AC

	<p>Saolta executives to Northumbria Hospital Trust, where the patient experience rating is valued as a key performance metric.</p> <p><u>Operational Plan.</u></p> <p>The Operational Plan (06/2016) was circulated to the Board and was approved. The Group Plan reflects the National Acute Hospitals Division Operational Plan.</p> <p>The Operational Plan is based on a budget allocation of €656m to the Group and on the provision of an equivalent level of service as in 2015. If the Group is to maintain 2015 service levels, an over run of circa €60m is estimated.</p> <p>The Board acknowledged the work of Ms Anne Conroy, SEO to the office of Chief Operating Officer, who coordinated the 2016 Operational Plan.</p>	
7.	Chief Director of Nursing and Midwifery	
	<p>The Chief Director of Nursing and Midwifery report (08/2016) circulated prior to meeting was taken as read and the following updates were provided:</p> <ul style="list-style-type: none"> • The Patient Advice and Liaison Service (PALS) report for 2015 highlights the valuable and proactive work that PALS are involved in. They are also involved at a national level in advising on the role of PALS nationally. An area of focus across the Hospital Group for 2016 will be proliferation of learning from the patient experience. NUIG colleagues are assisting with the development of KPI's to measure patient experience. • The Group Patient Council is another key area of focus and has provided an end of year report for 2015. Their main focus for 2016 is communication between clinical staff and patients and the visiting policies on each site. • The first Schwartz round, sponsored by the HSE, will take place on February 23rd in the Clinical Sciences Building. The theme is 'Behind Closed Doors' and the multidisciplinary team taking part all work in ICU. This is a joint initiative with our academic partner NUIG. • HCA agency cost is the main area of focus for the Directors of Nursing. There are robust controls in place but the winter surge and demand for one to one care has necessitated the use of extra agency HCAs • The Irish Hospice Foundation supported a facilitated workshop in Sligo on January 28th. Representatives from all 6 hospitals attended and there was full engagement regarding End of Life Care and the needs of Saolta. Of the patients who died in Ireland in 2014, 43% died in a hospital setting. All staff strive to ensure that all patients die with the care and dignity they deserve. There are EOL committees in all Saolta hospitals. However, one of the recommended requirements is the appointment of an EOL co-ordinator for the group. This position is already in place in other 	

	hospital groups and has assisted in the standardising of EOL care across sites. The Chair has now invited Ms Kelly to prepare a proposal for the Board in relation to an EOL co-ordinator.	JKelly.
10.	Any other Business	
	<p>The following additional updates were provided:</p> <ul style="list-style-type: none"> • Re QAV014/2015 Audit of compliance with the implementation of recommendations listed in the HIQA (2015) report <i>Linking Learning to National Standards</i>, the Board Secretary Ms Fiona Mc Hugh, advised that the results of this audit are due in April 2014. • Mr Gerry McManus has requested that the Board be issued with IT equipment, with a suitable information portal, to facilitate the secure transmission, review and storage of Board papers. • Proposals for a revised Board reporting format will be brought to the next Board meeting • Mr Gerry McManus complemented the Plastics and Reconstructive Service located at Roscommon University Hospital. The service, which was established in Roscommon Hospital in July 2011, enables a patient to have their consultation and procedure on the same day where possible. 	<p>TOG</p> <p>MP /TOG</p>
11.	Date of Next Board Meeting	
	Wednesday – 9 th March 2016 4-6pm, Board Room, Nurses Home, University Hospital Galway.	

SIGNED DIRECTOR:


Interim Chair of Board

DATE: _____