### Minutes of the Blended General Board Meeting of <u>Thursday 8<sup>th</sup> February 2024 at 5.00 p.m. in the Boardroom, Rotunda Hospital</u>

### Present

Mr Barry Holmes, Acting Chair M. Cedric Christie Prof Mike Geary via zoom Professor Fred Falkiner Mr Denis Reardon Dr David Abrahamson Mr Ian Roberts Ms Lucinda Woods Mr David Browne Ms Kate Webb Ms Dolores Sullivan Mr Greg Power via zoom Ms Michelle McGarry Prof Fergal Malone Ms Margaret Philbin via zoom Mr Stuart Switzer

### Apologies

Prof Tom Matthews, Chairman Dr Maria Wilson-Browne The Lord Mayor Prof Sam Coulter Smith Ms Jennifer Cullinane Cllr Darcy Lonergan Dr James Gardiner M. John Diviney Mr. Richard Nesbitt – due to zoom technical difficulties Mr Peter Foran, Head of Finance and Procurement

### In Attendance

Prof Sean Daly, Master Mr Jim Hussey, Secretary/General Manager Ms Fiona Hanrahan, Director of Midwifery/Nursing Ms Claire Murphy, Minute Taker

### Non-Attendance

Rev. Michael Jackson Rev. William Wright Morton

### **1** Opening Items

## 1.1 Welcome

Mr. Holmes welcomed everyone to the blended meeting advising he would deputize for the Chairman. A special welcome was given to new Governor, Ms. Michele McGarry. Attendees via zoom were noted.

# **1.2 Apologies**

Apologies as listed were noted.

### **1.3 Conflict of Interest**

The Chair asked if there were any conflicts of interest with any of the items listed on today's Agenda. There were no conflicts reported.

## 1.4 Draft Minutes of the General Board of 7th December 2024

The Chair asked if there were any amendments to the Draft Minutes previously circulated. The Minutes were agreed as an accurate reflection of the December Board and will be signed by Mr. Holmes as acting Chair.

## 1.5 Matters arising from the December Board

Matters arising from the last meeting were reviewed and in order or listed on today's Agenda for further discussion.

## 2 Quality Safety and Risk

### 2.1 CEO Report – Master

The Master took his report as read, asked if there were any questions and reported on relevant issues to the Board.

### **Capital Works**

Update provided on minor capital works to include, medical residence, fire safety works and single room ward renovations /ground floor bathrooms.

### Questions were taken

*Mr. Reardon queried costs on protected parts of the building* Funding provided through HSE Estates for these works-protected nature of building is a driver of costs.

Ms. Woods referred to the Gynae Wait List and recent Quality Walk Round of the Gynaecology Department and recommendations in the report.

Benign Gynaecology Hub – This is being progressed, resourced and planned to commence later in the year. The Hub will provide an opportunity for the North Dublin region with the Rotunda as lead with appropriate patient care pathways developed for benign gynaecology. The RCSI HG CEO is very supportive of the concept. Additional Consultant posts have been approved. Additional capacity has been sourced and is progressed through the national capital plan.

### **Gynecology Waiting Times**

Wait times have been reduced to < 9 months but we continue to see increasing trend in referrals- > 900 per month.

Prof. Malone updated that this was discussed at the recent QSR meeting. Throughput volumes are very high and performance indicators should incorporate and reflect such increased levels of activity.

2.1.1KPIs Year End 2023 Activity Mothers Delivered An increase of 1.62% was advised. The significant differences in deliveries when compared to the Coombe, National Maternity Hospital and Cork University Hospital were reported. The level of complex cases seen in the Rotunda and complexity of patients in the North Dublin Region is not reflected in the HG reporting matrix. The Rotunda perinatal mortality rate of 5:8600 is extremely reassuring as the National average is 1:1000.

## SREs

An update on the 4 cases which pertain to 2 still births, 1 encephalopathy case and 1 HIE was given. The strong reporting culture in the Rotunda of incidents was reiterated.

### **Patient Feedback**

Positive Feedback -positive feedback is circulated to staff.

### **Clinical Reviews**

Prof. Malone updated on Clinical Incident Ratings with over 2,600 patient reviews undertaken in 2023 -25% of patient cases investigated. The multidisciplinary clinical risk system is robust and provides further assurance to the Board with the significant reduction in major incidents reported.

Questions were taken

*Ms.* Woods queried areas of concern and whether additional funding could be received for the significant activity.

# 2.1.1Draft HIQA Report / 1st Draft

## HIQA 1st Draft Report / Rotunda Letter of Response

The Master further updated on the announced HIQA Inspection against the National Standards for Safer Better Healthcare held on 12<sup>th</sup> and 13<sup>th</sup> September 2023 with 11 standards assessed. Significant issues with the 1<sup>st</sup> Draft Report and Rotunda response were reiterated. 1<sup>st</sup> Draft and response letter uploaded for information.

**HIQA 2<sup>nd</sup> Draft Report**, response letter from the Rotunda and Compliance Plan also uploaded for information. HIQA team and areas visited were outlined, General Antenatal, Delivery Suite, General Postnatal B, Operating Theatre and Neonatal Unit. Compliance Descriptors showed the Rotunda –

- compliant with four national standards assessed (5.8, 1.7, 1.8, 3.3)
- substantially compliant with five national standards assessed (5.2, 5.5, 1.6, 2.8, 3.1)
- partially compliant with one national standard assessed (6.1)
- Non-compliant with one national standard assessed (2.7).

<u>Partially Compliant</u> (1) related to workforce management (midwifery staffing levels). Detailed letters of response were outlined. Technical inaccuracies, rotation of midwives/ADOMs, Midwifery Management and handling of activity on any given day for a demand led service were outlined.

Non-Compliant (1) related to physical environment of the 1757 Hospital. Mitigations, extensive works and interim actions to reduce risks were outlined including the Critical Care Wing. An extensive body of minor capital works to address the physical environment over the last 5 years was outlined. Questions were taken The finding of a partial compliance for the Rotunda was queried

The inspection is a point in time; robust defences will be made.

# 3. For Decision

There were no matters for decision.

# 4. Strategic Matters for discussion

# 4.1 Regional Benign Gynaecology Hub

Referred to under the CEO's Report. It is envisaged GP referrals will be across Rotunda, Beaumont and Connolly. The Rotunda will lead and manage with care pathways outlined. In the short-term referrals will continue to come to the Rotunda for triage.

# **5** For Consideration

# 5.1 Quality Safety Risk Committee Report 29.01.24

Prof. Malone, Vice Chair reported on the following -Draft QSR Committee Minutes are uploaded to Decision Time for review.

# 5.1.1 Clinical Risk Incident Management Report Qtr. 4 2023

Uploaded for information outlines new legal claims, settled legal claims, claims listed for trial and inquest notification.

# 5.1.2 Clinical Risk Legal Report Qtr. 4 2023

Uploaded for information shows 20 internal audits were completed each quarter, with completed actions for Neonatology Medical and Neonatology Nursing highlighted.

# 5.1.3 Report from Quality Walk Round of the Gynaecology Department 29.01.24 Uploaded for information

Prof. Malone updated on the QWR of the Gynaecology Department undertaken by Dr. Wilson Browne with copy report uploaded for information. Areas visited included hysteroscopy, ultrasound, IUI and andrology laboratories.

Actions were outlined -examination of the menopause waiting list, development of a menopause information hub and consideration of lunchtime clinics.

## 5.2 Governance Committee Report 30.01.24

Dr. Abrahamson reported on the recent Governance Committee meeting -

- Draft Minutes 27<sup>th</sup> October 2023 were agreed for sign-off.
- Internal Audit: Draft HR Review without management responses findings, recommendations excluding management responses reported and reviewed. Final Report including management responses uploaded post Governance meeting for Board review.
- IA Non-Financial Audit Plan 2024-2025 reviewed. Gap Analysis on Charities Governance Code will be reviewed at the April meeting.
- ACS 2022 further correspondence to the Chairman of 19.12.23 with response from Prof. Matthews to HSE Compliance Unit uploaded. This concerned HSE Internal Audit National Clinical Guidelines No. 4 with Rotunda compliant with the Guidelines.

- Employee Engagement Forum update from the HR Manager given including schedule of quarterly meetings 2024, Draft Forum TOR, purpose of the Forum, priorities and themes for 2024.
- SIPO-Some returns are still outstanding with a reminder issued.



### **5.2.1 Nomination Proposal**

Dr. Abrahamson reported on a recommendation from the Master.

The CV of Ms. Geraldine Doherty was uploaded for information with Prof. Daly giving an overview of the nominee.

Mr. Holmes, Vice Chair, Governance Committee met with Ms. Doherty, discussed her skill set and role as an extern to a Board Sub Committee.

Dr. Abrahamson recommended the appointment of Ms. Doherty to the Governance Committee as an extern. The Board was in agreement with this.

Action: The Secretary/General Manager to write to Ms. Doherty and advise her of her appointment.



### **6** For Information

### **6.1Estates Campus Development Update**

**Earl Building** – fit-out works tender is due tomorrow. OCMA and the Design Team will assess tenders and make a recommendation to the Project Team. The works will take 8 months to complete. Additional capacity has been procured in the Earl for the Rotunda which will require some design changes and will be a change order for fit-out contractor as this was not included in scope of the tender.

**Dominick Street** – purchased by the HSE for the Rotunda. The HSE has approved the business case and schedule of accommodation for Dominick Street and allocated funding from the capital budget to progress planning application and stage 1 design.

Questions were taken

Dr. Abrahamson queried DCC's decision to turn down the railings application by the Ambassador Theatre and whether there were any repercussions for the Hospital. The Ambassador has appealed the decision. Lease in place with the Hospital was outlined.



# **6.3Transport Infrastructure Ireland (TII) Metrolink Oral Hearing**

Mr. Hussey updated on the 2 modules -

1. Tunneling and excavation issues, noise and vibration, settlement and property damage

2. Land, property and acquisition issues.

The Rotunda has made a submission under both modules. The Rotunda team of advisors engaged was outlined.

A second recent meeting with TII discussed issues raised at the last meeting including proposed mitigations before commencement of the Oral Hearing.

The Oral Hearing will commence on the  $19^{\text{th}}$  February 2024 and conclude on the  $6^{\text{th}}$  March.

Key for the Rotunda is future development on the campus and to ensure the Metro does not impact or restrict.

Timeframe – Metro Link is due to commence circa 2027 and take 10 years to complete. The Rotunda, Ambassador and Gate Theatres have all made separate submission to An Bord Pleanala.

TII will monitor the works for a 12 month period and will address any issues raised by the Hospital which would require a claim to be made. The matter was discussed.

Questions were taken

*Mr.* Christie queried professional team advisory costs and who would be responsible for costs.

Mr. Power whilst agreeing the Rotunda should support the National Infrastructure Programme which will benefit the Hospital and its patients said support should be conditional on early intervention and appropriate mitigations for the Rotunda as a priority.

### 6.4 Ethics in Public Office Act 1995 & 2001/Annual Statement of Interest

The Chair reminded Governors who had not submitted their Annual Statement of Interest for YE 2023 to submit as a matter of urgency.

## 6.5. Induction Session – Friday 9th February at 9.30 a.m.

Tomorrow's morning Induction Session is for new Governors, external Sub Committee members and any existing member wishing The programme will conclude with Lunch in the Boardroom at 1.00 p.m. The Agenda is uploaded for information.

#### 6.6 Updated Rotunda Organisation Structure

The updated organisation structure and chart is uploaded for information and outlines Committees and reporting structures.



## 7.2 Dates for the Diary

### 7.2.1 Event to mark the work of the late Dr. Moira Woods

The presentation to mark the work of the late Dr. Moira Woods a great advocate of Women's health and the Sexual Assault Treatment Unit (SATU) will be held on 5<sup>th</sup> April 2024 at 1.00 p.m. in the Dalrymple Theatre. Dr. Maeve Eogan, Consultant Obstetrician and Gynecologist and National Clinical Lead SATU (HSE) and Dr. Mary Henry, retired Governor will facilitate the event.

#### 7.2.2Board Annual Away / Education Day – Friday 10th May 2024

The annual event will be held in the Radisson Blu, Stillorgan with session theme and Agenda to be circulated nearer the date.

#### 7.3 Board and Sub Committees Attendance 2023

Board and Sub Committees attendance for 2023 will be circulated shortly for verification and will be an Agenda subsequent Sub Committees & Board.

#### 7.4 Schedule Board Meetings 2024

The Schedule of Board Meetings 2024 is uploaded to Decision Time for information.

### 8 Summary Finance Report to the Board regarding 2023 Financial Outturn

Mr. Hussey gave a high level overview of the Rotunda Hospital and Ancillary Fund 2023 financial outturn -

**Rotunda Hospital YTD 2023** shows a shortfall of  $\notin$ 4.314m against budget received. Pay costs exceeded budget and increased on prior year, primarily driven by unfunded pay awards, increased headcount and activity pressures.

Non-Pay – exceeded budget by €2.7m with major increase in lab costs, medical and surgical consumables, utilities and pharmaceutical costs. Inflationary pressures is a major driver in non-pay increases

Income- ahead of budget due to increased activity in insured income.

A supplemental budget expected in March should see a breakeven position similar to 2022. The external audit underway for 2023 is premised on the final allocation.

#### **Initial Hospital Budget 2024**

Initial Budget allocation €86.6m.

Pay, non-pay and income outlined which shows a shortfall in budget of €7.2m in gross expenditure.

There is also a 2024 shortfall in funding for FEMPI, pay awards and the POCC.

### 9. Date of Next Meeting

The next meeting of the General Board is scheduled for Thursday 9<sup>th</sup> May 2024 at 5.00 p.m.

N. g. hatte

8<sup>th</sup> May 2024

Signed \_\_\_\_\_