Marcoda
Mater Misericordiae University Hospital
Board of Directors Meeting (the "Board")

DATE Tuesday 24 January 2023	TIME 4pm	VENUE Pillar Room/Facilitated Via Zoom	
Chair	Mr. David Begg (Chair)		
Minute taker	Ms. Anna Broderick (Company Secretary)		

## Members / Attendees

- ☑ Mr. David Begg (Chair) DB
- ☑ Ms. Brid Cosgrove (Director of Finance, Executive Director) BC
- ☑ Ms. Anne Vaughan (Non-Executive Director) AV
- ☑ Mr. Rod Ensor (Non-Executive Director) RE (via Zoom) (4pm)
- ☑ Mr. David O'Kelly (Non-Executive Director) DOK
- ☑ Professor. Mary McMenamin (Non-Executive Director) MMcM (via Zoom) (4pm)
- ☑ Dr. Brian Marsh (Chair Medical Executive, Executive Director) BM (via zoom) (4pm)
- ☑ Mr Pat O'Doherty (Non-Executive Director) (POD)
- ☑ Ms. Suzanne Dempsey (Director of Nursing and Deputy CEO) SD
- ☑ Professor. Cecily Kelleher (Non-Executive Director) CK
- ☑ Professor. Jim Egan (Executive Clinical Director, Executive Director ) JE
- ☑ Ms. Eilis O'Brien (Non-Executive Director) EOB
- ☑ Ms. Anna Broderick (Company Secretary) AB

#### In Attendance

☑ Ms. Mary Raftery (Interim Director of Nursing) MR

#### **Apologies**

☑ Mr. Alan Sharp (Chief Executive Officer MMUH) AS

## **MINUTES**

TOPICS		Action By	Due Date		
1.0	Apologies				
	Apologies noted from the CEO of MMUH.				
	The Chair declared that there was a quorum present and that the meeting could proceed. It was acknowledged that this was a hybrid meeting which was being facilitated in person and via Zoom and each attendee confirmed that they could see an hear each other via the video-conference platform (times of entry of attendees on Zoom confirmed above).				
2.0	Declarations of Interest  The Chair asked whether any Director has any interest to declare in relation to any item on the Agenda for this meeting if any issue arises during the meeting, that such a declaration be made then. Nothing was declared.				
	No declarations of interest were raised.				
3.0	Presentation from Dr Catherine McGorrian				
	Dr McGorrian, Clinical Director of ED for MMUH, gave an update to the Board on the current challe	enges in ED.			
	Dr McGorrian explained that patients attend for unscheduled care when they have nowhere else triaged in ED which means they are assessed to understand how serious the patient is. The panurse followed by a Doctor and then the MDT before a final assessment is carried to determine we should be seen by in the hospital.	tient then gets	s seen by a		
	In summary, ED is a critical area of the hospital but it is one centre which has to manage a huge v	olume of patie	ents.		

The Chair thanked CMcG and all her colleagues for the work done. The Chair said from his own experience of the ED that he has spoken to the Executive Management Team (EMT) and measures are being taken to put in place more toilets; more food, softer seating for the elderly. The Chair noted that the reception and treatment received from staff was exceptional.

It was noted that anti-social behavior is a real difficulty both for staff and other patients waiting to be seen. It was agreed that contact would be made with the local Garda community officers as they need to be seen on site especially at weekends.

The Chair's request to the EMT is to ask if any other actions can be taken to make it a better experience for patients.

It was noted that the ED accommodation will change with the new build and patient comfort has to be factored into the design of the new build.

RE noted one issue is the lack of funding provided for this vital service. EOB added that all unscheduled care being funneled from the ED into the hospital is a challenge. AV said that clear communication with our patients is very important as well as early engagement with the HSE and DOH. DOK said that the VHF should also be raising these concerns.

JE confirmed that the data highlights that capacity is the biggest challenge. The Board agrees that it has to be pro-active in this area. BC said that the opening of the EWB will assist with next Winter's surge.

The Chair asked CMcG to come to the Board later in the year with an update.

#### 4.0 Declarations of Interest

The minutes of the last meeting held on 6 December 2023 were unanimously approved for signing by the Chair.

From Matters Arising, the following was noted:

- AS will have an update on the Advanced Cancer Project for the next Board meeting.
- The update on Peter O'Gorman's accreditation was provided to the Board.
- The signed Service Level Arrangement (SLA) was sent to the HSE in December 2022.
- An update was provided on accommodation.
- It was confirmed that the risk and quality department were notified that a review will be carried out.
- AS raised all relevant matters with the VHF this month.
- The final review has not yet been completed on the transplant service.

# 5.0 CEO Report

# Operational Update

AS's report was taken as read.

The demand in all streams is increasing at all levels. However, significant drop in waiting list of 18% which is welcome. Major Trauma Centre – supply chain issues but no delays notified as yet.

EWB – there is a delay to end of March due to supply chain issues concerning supply of fire doors.

## MMUH Strategic Plan

AS report noted the key areas that will be focused on as outlined in the 2022 to 2025 Strategic Plan.

AV asked in terms of recruitment how many nurses are expected to be retained after graduation. MR said MMUH had a 42% retention of nurse graduates. However, there were only 66 nurse graduates this year which is less than any other year. Cost of living is now the primary concern for nurses.

For Infection Prevention Control, the Board would like to know how feedback is given. MF said that real time outcomes are given to employees. This is picked up with all employees.

A donation of €2m was recognised by the Board for this most generous contribution to the Mater Foundation.

The donor was thanked

# 5.1 MMUH Committee Updates

The Chair together with the Company Secretary is carrying out a detailed review of MMUH's committees. An update will be provided at the next Board meeting.

- **F&GP Committee** –a verbal update was given by the Chair to the Board.
- Mission Effectiveness Committee This Committee is scheduled to meet on 7 February 2023.
- Executive Committee An update was given in the Board report.

	Quality and Patient Safety Committee – Ms Anne Vaughan has agreed to Chair this committee and meetings will be scheduled shortly.		
6	Matters Reserved for the Board		
	All CVs and letters of recommendation were taken as read. The Chair went through each appointment and each appointment was unanimously approved by the Board:		
	<ul> <li>Post 1 Consultant Nephrologist</li> <li>Post 2 Consultant Nephrologist</li> <li>Post 3 Consultant in Emergency Medicine (MTC)</li> <li>Post 4 Secondment Request: National Clinical Lead</li> </ul>		
	-Licence for Ashgrove – The Board unanimously ratified this licence entered into by MMUH. PD asked if a summary of the main terms in these legal documents could be provided to the Board. It was noted that this falls under matters reserved for the board which are reviewed annually and this will be noted for this review.		
	-The Board unanimously approved the Chair and Brid Cosgrove to act on behalf of MMUH as MMUH's authorised representatives in all matters relating to the wind-up of Portview and to execute all related documentation to effect this wind-up.		
	Master Capital Plan and Procurement Plan		
7.0	Both plans were reviewed by the Board and accepted for the year 2023 as required under matters reserved to the Board.  Director of Finance Report		
7.0	The Director of Finance presented the hospital's financial position to end of 31 December 2022. Report was taken as read.		
	<b>Financial Position – MMUH</b> is in month 13 now but on current information MMUH will break even for year ended 2022. MMUH has not received its 2023 budget allocation as yet.		
	It was noted that inflation has had the greatest impact on the organisation.		
	BC gave an update on the C&AG audit. The auditors are sampling procurement, payroll and minutes etc.		
	The announcement in the reduction of the statutory charge to €80 will translate to a loss of approximately €1.9m on an annualised basis in income to MMUH. Although this reduction is not yet in place, it is hoped that this will be factored into the HSE budget allocation to MMUH this year.		
8.0	Quality Assurance Report and Other Reports		
8.1	The reports were taken as read.		
8.2	<ul> <li>Chair of Medical Executive Report</li> <li>The Medical Executive Report was taken as read and no concerns were raised. The majority of posts listed relate to the MTC and the progression of academic posts have increased and it is building strength in terms of patient quality.</li> </ul>		
8.3	Executive Clinical Director Report including Mortality Data - The Executive Clinical Director report was taken as read.		
8.4	Nursing Report		
9.0	The report was taken as read.  Corporate Governance and Compliance		
	Board Governance OBGD Tracker		
	Recommendations have been drawn out of the report and a Board discussion ensued in relation to the recommendations.		
	Return of Directors' Self-Assessment Forms Discussion ensued on the overall evaluation results. As noted the Committee review is underway by the Chair and CoSec and the Chair will speak to non-executive directors to see their capacity to chair board sub-committees.		
	It was agreed that PD would join the remuneration committee.		
	Given the challenges of Covid over the last number of years, it was further agreed that the Chair and CoSec would liaise with directors (especially new joiners) to receive an in-person experience of the hospital.		
	A review of the current Board Report format will also be carried out with some reports being rotated. The Board agreed that it would be good to have the key challenges from the CEO/CFO/Chair of Medical Executive and Executive Clinical Director at the beginning of the Report. Identified challenges should also be addressed and how these relate to strategic		

aims. The Board will receive EMT's 5 to 10 highest impact steps that will be undertaken to address concerns raised and the policies or procedures that are required to bring about these actions. In addition to the 5 to 10 internal high impact steps/actions to be taken, the external concerns that will or are impeding these actions from being carried out.

A discussion ensued regarding executive directors. It was noted that the HSE's annual compliance statement requires an explanation as to why executives are directors. It was noted that the presence of a minority of executive directors is important to the running of a level 4 hospital.

#### **Director Attendance**

be in person.

The Constitution allows three absences per year which was complied with in 2022.

Annual Planner - sets out what the Board can expect over the year. Reviewed and accepted by the Board.

#### 10 0 AO

It was noted that the next Board meeting in March will be held over Zoom. However, the following two Board meetings will

As there was no other business, the meeting concluded.

## **NEXT MEETING**

Tuesday, 21 March 2023 @4pm via Zoom

## SIGNED (by Chair)

Actions

- Update on the Advanced Cancer Project for the next Board meeting
- CMcG to present later in the year to the Board.
- Finalise review of committees
- Review of Matters Reserved to the Board
- Review of Board Report