

MINUTES OF MEETING OF RCSI HG BOARD HELD ON 13TH APRIL 2018 AT 8.00 IN THE ROBERT SMITH MEETING ROOM, RCSI

PRESENT: Ms. Anne Maher (Chair, Designate)
Dr Maria Wilson Browne
Prof Anthony Cunningham
Mr Colm McGrattan
Dr Donal de Buitléir
Mr Douglas Keatinge
Prof Cathal Kelly

IN ATTENDANCE: Mr. Ian Carter, Chief Executive
Ms Sheila McGuinness Chief Operations Officer
Mr Rory Farrelly Chief Director of Nursing and Midwifery
Mr Chris Kenny Chief Financial Controller

APOLOGIES: Prof Paddy Broe
Mr Enda Connolly
Prof Helen Roche

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| <i>Opening Remarks</i> | The Chair opened the meeting noting apologies from Prof Paddy Broe, Prof Helen Roche & Mr Enda Connolly. |
| <i>Declarations of Conflicts of Interest Agenda Item 1</i> | The Chair enquired if any Board member wished to declare any conflict of interest in relation to the Agenda. No declarations declared. |
| <i>Approval of Minutes 16.03.18 Item 2</i> | Minutes of the 16 th March 2018 meeting agreed. |
| <i>Matters Arising Item 3</i> | None |
| <i>Chair Update Item 4</i> | <p>RCSI Strategic Plan 2018-2022 Launch The Chair attended the launch of the RCSI Strategic Plan 2018-2022, ‘Transforming Healthcare Education, Research and Service’</p> <p>RCSI HG Board Profile The Chair advised of the need to increase external awareness of the RCSI HG Board.</p> <p>CEO RCSI proposed using a number of platforms available presently as part of the college communication processes to promote the Hospitals Group such as:</p> <ul style="list-style-type: none"> - Board presence at a Townhall meeting - SMT presentation at Grand Rounds - RCSI CEO Memo – dedicated piece to profile RCSI HG - attendance at a dinner with senior facility staff / hospital Consultants <p>Acknowledgement for RCSI HG - Drive Time Radio Show The Chair reported that An Taoiseach acknowledged the progress / improvement specifically a number of hospitals within the RCSI HG Group - Beaumont, Cavan, OLOL.</p> |

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| | <p>Progressing Legislation to move Hospital Groups to a Statutory Basis The Minister has indicated that legislation will not be progressed until agreement has been reached on alignment of Hospital Groups and Community Healthcare Organisations.</p> | | | | | | | | | | | | |
| <p><i>CEO Report Item 5</i></p> | <p>CEO's Report Tabled and Key Points Included:</p> <table border="0"> <tr> <td>ED attendances (new)</td> <td>- 10% increase January YTD</td> <td>(n = 2631)</td> </tr> <tr> <td>Emergency Admissions</td> <td>- 1% decrease January YTD</td> <td>(n = 119)</td> </tr> <tr> <td>Elective Admissions</td> <td>- 4% increase January YTD</td> <td>(n = 66)</td> </tr> <tr> <td>Day Care attendances</td> <td>- 2% increase January YTD</td> <td>(n= 397)</td> </tr> </table> <p>Finance</p> <ul style="list-style-type: none"> - 2017 budget rollover currently set for 2018 subject to 1% savings plan. - overall expenditure limit also identified by Acute Hospital Division (AHD). Cash flow impact on Voluntaries who carry cumulative deficits on their books. Group require clarification from AHD in relationship to application of expenditure limits to Voluntaries. Noted that Group Statutory hospitals accounted for as part of HSE and cash managed centrally. - AHD confirmed that no actions, in terms of clinical curtailment or reduction in expenditure to be taken to address projected income shortfall at this time. - Impact of health insurer's campaign to curtail patient use of private insurance unless guaranteed private service increasing income deficit. - HSE budgetary tactic to reflect budget overruns in AHD and demand led scheme such as PCRS breakeven leads to unrealistic hospital budgets. - 2018 agreed developments funding whilst confirmed, yet to be allocated. <p>Waiting List Initiative:</p> <ul style="list-style-type: none"> - plans still to be finalised with regard to insourcing, specifically Cavan, Louth, Beaumont Hospitals. - 2018 target for Group is to achieve 8/9mth target. <p>Benign gynaecology</p> <ul style="list-style-type: none"> - RCSI HG developing Group approach to benign gynaecology services. Enhanced resources required to develop full service. <p>There was discussion on trying to secure additional budget to support full development of this service.</p> <p>Red Weather Alert (28th February - 2nd March)</p> <ul style="list-style-type: none"> - necessary rebooking of all patients cancelled during red alert period complete. <p>Geographic Alignment of Hospital Groups and Community Healthcare Organisations</p> <ul style="list-style-type: none"> - CEO attended briefing with Minister (09.03.18). - National consultation exercise commencing, clear evident appetite to consider, develop and progress some level of HG / CHO realignment and possible reconfiguration - recommended changes likely to be identified before end of year. - Parallel dialogue / decision making also underway in relationship to exact nature and type of Regional Control Structures as envisaged in Sláintecare. <p>Trauma Network National Trauma Group established (11.04.18)</p> | ED attendances (new) | - 10% increase January YTD | (n = 2631) | Emergency Admissions | - 1% decrease January YTD | (n = 119) | Elective Admissions | - 4% increase January YTD | (n = 66) | Day Care attendances | - 2% increase January YTD | (n= 397) |
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| <p><i>Key Performance</i></p> | <p>Key Performance Metrics – February 2018 tabled and key points included:</p> | | | | | | | | | | | | |

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| <p><i>Metrics Item 6</i></p> | <p>Beaumont Hospital - Emergency Hip Fracture Surgeries undertaken within 48 Hours of Admission</p> <ul style="list-style-type: none"> - Beaumont Hospital performance was below national target for period measured (January 2018 56.3%) - Measurement has changed to only include the cohort of patients who are medically fit and requiring an emergency hip fracture – re-audit being undertaken <p>Diagnostic Imaging Waiting Times:</p> <ul style="list-style-type: none"> - US 62.74% waiting < 3 months - Group did not achieve target - MRI 92.14% waiting < 6 months - Group did not achieve target - CT 84.90% waiting < 6 months - Group did not achieve target <p>Wait times high due to:</p> <ul style="list-style-type: none"> - demand exceeding capacity - necessary prioritisation for in-house patients <p>Solutions to address same underway such as:</p> <ul style="list-style-type: none"> - extended working hours (8am - 8pm) - Saturday service - proposal for additional CT scanner <p>Human Resources: Recruitment:</p> <p>National HR Leadership & Management Awards 2018</p> <ul style="list-style-type: none"> - Beaumont Hospital secured two awards: <ul style="list-style-type: none"> - “Most effective recruitment and retention strategy” - “Best Public Sector HR Initiative” <p>Staff Absenteeism - Improvements noted in Cavan / Monaghan / OLOL</p> <ul style="list-style-type: none"> - engagement with management across all sites ongoing. - necessary robust management of absenteeism not consistent across Hospital Group. - absence rates within Voluntaries lower than statutory hospitals. - shift in culture / local accountability required. High absenteeism has been an issue in HSE generally prior to Group formation. |
| <p><i>Finance Report Agenda Item</i></p> | <p>The Finance Report for February 2018 was tabled and key points included:</p> <p>Funding outstanding for a number of items including HR circulars, pay scale increments and PRSI budget change. Estimated impact €4m.</p> <p>Noted VHI “clawback” of already received income will impact adversely on deficit. Estimated impact €2.5m</p> <p>Discussion took place regarding</p> <ul style="list-style-type: none"> - Medical pay expenditure and the usage of agency on sites such as Cavan. <ul style="list-style-type: none"> - difficult to challenge as limited workforce available. Noted reduction in agency costs from €57m 2014 to €38m current. - recruitment in Level 3 hospitals has proven difficult, however with the introduction of cross site posts, it has made recruitment in Level 3 hospitals more appealing to potential staff. <p>Noted potential Consultants contract 2008 arrears not included in finance projections and assumed funding would be provided Nationally.</p> |
| <p><i>RCSI Academic Partner Presentation</i></p> | <p>The Chair welcomed Dr Siobhan Gormley, Clinical Director, RCSI HG and Ms Suzanne Maloney, Quality and Safety Manager, RCSI HG to the meeting. They provided an</p> |

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| | <p>overview of the Quality and Safety Department.</p> <p>Data Analysis:</p> <ul style="list-style-type: none"> - What mechanism are in place to ensure data is reported and validated - data is reviewed and analysed by SMT in advance of it being brought to monthly performance meetings with sites for further discussion. - data used for focused improvement e.g. Pressure Sores - no blame culture encouraged <p>Data Management Senior Incident Management Forum Model (SIMF)</p> <ul style="list-style-type: none"> - regarding the quantity of time required by sites to prepare data / attend meetings - attendance at monthly meeting - 2 hours - data submitted to SIMFs utilised for analysis and review, e.g. decision making process, review timelines, recommendations from reviews - WAC SIMF Benchmark data against national standards from the National Perinatal Epidemiology Centre (NPEC) <p>European Working Time Directive (EWTD)- Consultants:</p> <p>A discussion took place on</p> <ul style="list-style-type: none"> - Consultants working excessive hours and the risk of errors due to same - evidence based data was requested related to hours of work for clinicians and EWTD. <p>Quantification Of Risk</p> <p>The Chair requested a review of Group Risk Register at June meeting.</p> <p>The Chair thanked SG & SM for their presentation and acknowledged the significant work being done by the department.</p> |
| <p><i>Appointment of Board Sub Committees Item 9</i></p> | <p>Appointment of Board Sub Committees:</p> <p>Membership of Quality and Safety Committee</p> <ul style="list-style-type: none"> - Prof Helen Roche - Dr Maria Wilson Browne - Prof Anthony Cunningham - Mr Enda Connolly - Dr Siobhan Gormally - Ms Susan Maloney <p>Membership of Finance Committee</p> <ul style="list-style-type: none"> - Mr Colm McGrattan - Dr Donal de Buitleir - Mr Douglas Keatinge - Mr Chris Kenny <p>Meeting dates to be progressed.</p> |
| <p><i>Board Membership Recompense Item 10</i></p> | <p>Board Membership Recompense:</p> <p>Currently in process.</p> |

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| <p><i>AOB Item 11</i></p> | <p>Board Strategy Day: Half day session to be confirmed.</p> <p>Purpose of Strategy Day: To determine how the Board can</p> <ul style="list-style-type: none"> - contribute / support HG - what can be done to progress the HG - influence external system i.e. Department of Health / HSE / Political System |
| <p><i>Date of next meeting</i></p> | <p>It was agreed that the next meeting would take place on Friday, 11th May 2018 at 8am.</p> |

Signed: _____

Date: _____