

**RCSI HOSPITALS GROUP**  
**BOARD MEETING**  
 MONDAY 21<sup>ST</sup> NOVEMBER 2016 AT 12.30PM  
 MCT BOARDROOM, 123 ST STEPHENS GREEN

Present		
Anne Maher (Chair)	Chair RCSI Hospitals Group Board	AM
Ian Carter	Group Chief Executive Officer	IC
Patrick Broe	Group Clinical Director	PB
Sheila McGuinness	Acting Group Chief Operations Office / Group Chief Nursing Officer	SMcG
Eric Brady	Group Director of Human Resources	EB
Chris Kenny	Group Chief Finance Officer	CK
Susan Moloney	Group Quality, Safety & Risk Manager	SM
Cathal Kelly	Chief Executive Officer, RCSI	CaK
Michael Quirey	Group Director of Estates	MQ
Linda Kennedy	PA to the Executive Team (Minute Taker)	LK
Apologies		
Trevor Duffy	Group Chief Academic Officer	TD

Item	Discussion	Action
<b>1. Minutes of previous meeting 26<sup>th</sup> September 2016</b>	<p><b>Previous Minutes</b>            Previous minutes agreed with no amendment.</p> <p><b>Matters Arising</b>            Minister Harris visited Beaumont on the 15<sup>th</sup> September 2016. ED / HDU project endorsed by Acute's. Capital support required.</p> <p><b>Update from Chair:</b></p> <ul style="list-style-type: none"> <li>- <b>RCSI Hospital Group Board Vacancies</b> – slow progression made to date. Awaiting advertisement. Nominees required.</li> <li>- A number of applications received for Limerick Board. No appointee's to date.</li> <li>- <b>DMHG Board</b> - Dr Frank Dolphin's has stepped down as Chairperson of the Board of the Dublin Midlands Hospital Group (DMHG), and no appointee to-date.</li> <li>- <b>Meetings with TD'S</b> –AM has written to a number of TD's requesting meetings to discuss the Group's progress and plans.</li> <li>- <b>Future Health Care Committee</b> –IC &amp; PB presented at the Future Healthcare Committee on the 16th November 2016. AM attended same.</li> <li>- <b>Rotunda Visit</b> – The Minister visited the Rotunda. Fergal Malone provided a presentation which was well received.</li> </ul>	
<b>2. Activity Report</b>	<p>Sustained growth in ED New attendances and resultant ED admissions.</p> <p><b>ED new attendances</b></p> <ul style="list-style-type: none"> <li>- Cavan – 3.7% Increase in attendances demonstrated Sep 2016 v Sep 2015</li> <li>- OLOL –6.7% Increase in attendances demonstrated Sep 2016 v Sep 2015</li> <li>- Connolly –4% increase in attendances demonstrated Sep 2016 v Sep 2015</li> <li>- Beaumont –0.7% Increase in attendances demonstrated Sep 2016 v Sep 2015</li> </ul>	

Item	Discussion	Action
	<p>2015</p> <p><b>PET's – 9 hours target</b></p> <ul style="list-style-type: none"> <li>- Cavan – Jan-Sept 2016 cumulative 94.1% compliant with PET non admitted / 72 % compliant with PET admitted.</li> <li>- OLOL – Jan-Sept 2016 cumulative 89.7% compliant with PET non admitted / 58.0% compliant with PET admitted.</li> <li>- Connolly – Jan-Sept 2016 cumulative 80.3% compliant with PET non admitted / 43.2% compliant with PET admitted.</li> <li>- Beaumont – Jan-Sept 2016 cumulative 85.6% compliant with PET non admitted / 34.4% compliant with PET admitted.</li> </ul> <p><b>Trolleygar</b></p> <ul style="list-style-type: none"> <li>- Connolly - 82% performance improvement demonstrated</li> <li>- Cavan – 20% performance deterioration demonstrated</li> <li>- OLOL – 46% performance improvement demonstrated</li> <li>- Beaumont - 22% performance improvement demonstrated</li> </ul> <p><b>In patient activity</b></p> <ul style="list-style-type: none"> <li>- Group admission value increase (7.2%) predominantly as a result of increased ED activity.</li> </ul> <p><b>Day Case Attendances</b></p> <ul style="list-style-type: none"> <li>- Overall Day case activity increase with the exception of Cavan. Causal factors for significant decrease in Cavan to be explored.</li> </ul> <p><b>OPD Attendances</b></p> <ul style="list-style-type: none"> <li>- Group OPD activity values 2016 maintaining 2015 values. Causal factors for significant decrease in Louth (26%) to be explored.</li> </ul> <p><b>Waiting List – In patient / day case</b></p> <ul style="list-style-type: none"> <li>- limited reductions in number of patients waiting &gt;9 months demonstrated</li> <li>- 83.5% of all patients waiting &lt; 12 months (n = 7882)</li> </ul> <p><b>Waiting List – Out-patient</b></p> <ul style="list-style-type: none"> <li>- 20.5 % patients waiting &gt; than 1 year</li> <li>- Cavan demonstrating performance deterioration in relation to &gt; 12months patients value increase 35%</li> <li>- Beaumont demonstrating performance deterioration in relation to &gt;12 months patients value increase – 51%</li> <li>- Connolly demonstrating performance deterioration in relation to &gt;12 months patients value increase – 133%</li> <li>- OLOL demonstrating performance deterioration in relation to &gt;12 months patients value increase – 20%</li> <li>- Louth demonstrating performance deterioration in relation to &gt;12 months patients value increase – 241%</li> <li>- The aim is to have single shared waiting lists for Neurology, Dermatology, Rheumatology / Endoscopy.</li> <li>- Application for Consultant in General Otolaryngology HNS submitted to CAAC. This post will be split across the sites.</li> </ul>	
<p><b>3. Quality &amp; Risk Management</b></p>	<p>SM provided an update to the Group. Work is ongoing to develop a suite of Quality &amp; Safety Metrics which can be utilised at Hospital and Directorate</p>	

Item	Discussion	Action
	<p>Level which will be published by year end.</p> <p>A discussion regarding the incidents of pressure sores took place. Metrics are useful in that they are allowing us to focus our quality improvement efforts on clinical care.</p> <p><b>Complaints</b> A proposal for Staff training is under development.</p> <p><b>RCSI Incident Management Model</b> The Quality and Safety Directorate have developed an RCSI Hospital Group Incident Management Model to standardise and streamline the review process across the Hospital Group. Training is in place to support the model.</p> <p><b>Hospital Incident Reviews (End August 2016)</b> Open incident reviews per Hospital are now logged and this data is reviewed at the RCSI Group Quality and Safety Meeting and the Executive Council</p> <ul style="list-style-type: none"> <li>- Beaumont (Review timeframes) n= 6</li> <li>- Cavan (Review timeframes) n= 14</li> <li>- Connolly (Review timeframes) n=4</li> <li>- OLOL (Review timeframes) n= 14</li> <li>- Rotunda (Review timeframes) n= 8</li> </ul> <p><b>REVIEWS AT HOSPITAL GROUP LEVEL</b></p> <ul style="list-style-type: none"> <li>- 4 reviews have been commissioned at RCSI Hospital Group Level. (End October 2016)</li> <li>- Appendix 1 –Hospital Performance Metrics to be supplied in A3 format at the next meeting.</li> <li>- 4 Consultant Obstetrician-Gynaecologist, with special interest in Maternal Foetal Medicine have been agreed. Each will have weekly commitments of 29 hours per week at the Rotunda Hospital, 7 hours per week at Our Lady of Lourdes Hospital, Drogheda and 3 hours per week at Cavan General Hospital.</li> </ul>	<b>LK</b>
<b>4. Financial Report</b>	<p>CK provided an update</p> <ul style="list-style-type: none"> <li>- Based on YTD October outturn, projected deficit 2016 is €2.657m v Expenditure Cap.</li> <li>- Pension costs exceed cap by €509k – additional funding required. WRC ED agreement - funding €552k is being sought. Receipt of this funding will reduce Expenditure deficit 2016 to €1.6m (0.2%).</li> <li>- There is an Income deficit of €3.1m in 2016 which is less than the stretch target set by HSE. We have been advised that this is not a performance issue for the Group but we await clarity on whether it will constitute a first charge in 2017.</li> <li>- Forecast 2017 gross expenditure is €866.2m to deliver existing level of service (ELS) including known cost pressures.</li> </ul>	
<b>5. HR Report</b>	<p>EB provided an update regarding HR in RCSI Hospitals Group.</p> <p><b>IR update</b></p> <ul style="list-style-type: none"> <li>- Industrial action in OLOL – meeting held 17<sup>th</sup> November. Going to WRC on the 24<sup>th</sup> November</li> </ul>	

Item	Discussion	Action
	<ul style="list-style-type: none"> <li>- Laundry in Cavan –withdrawal from Labour Court discussions. Further discussions at local level required.</li> </ul> <p><b>RCSI HG Leadership Development Programmes</b></p> <ul style="list-style-type: none"> <li>- RCSI HG - Leadership Development Programme – started 2nd November 2016. 25 people currently on course. Next module to take place in December. Meeting to be held on the 7<sup>th</sup> December to finalise projects.</li> <li>- RCSI HG/ CHO - Leadership Development Programme - February 2017</li> </ul> <p><b>Starters and Leavers – Report tabled</b></p> <ul style="list-style-type: none"> <li>- Cumulative variance increased in October to 251 as 6/7 hospitals report more starters than leavers.</li> <li>- October increases in starters strongly influenced by replacement posts in Nursing coming on stream (44 WTE's {35% of all starters in the month}).</li> </ul> <p><b>EWTD Compliance (24 &amp; 48 Hour ) Roster</b></p> <ul style="list-style-type: none"> <li>- Most rosters compliant.</li> <li>- IC advised that there are still concerns in Beaumont in relation to areas such as transplant retrieval, neuro etc.</li> </ul> <p><b>Absence.</b></p> <ul style="list-style-type: none"> <li>- Note figures presented require calculation</li> </ul>	<b>EB</b>
<b>6. Communications Update</b>	<ul style="list-style-type: none"> <li>- Q4's contract up at the end of the year</li> </ul>	
<b>7. AOB</b>	<p><b>Community</b></p> <ul style="list-style-type: none"> <li>- CHO3 serving Group. CHO's not integrated.</li> <li>- Closer collaboration / engagement with GP's required.</li> </ul> <p><b>Trauma Centre</b></p> <ul style="list-style-type: none"> <li>- No National movement on Trauma Centre. Report due. Tender required.</li> </ul> <p><b>RCSI new academic and education building</b></p> <ul style="list-style-type: none"> <li>- CaK provided an update to the Board in relation to the RCSI new academic and education building which will open in autumn 2017, in time for the new academic year.</li> </ul>	
<b>Date &amp; Time Next Meeting</b>	Wednesday 1st February 2017 at 2.00pm, Robert Smith Room, 123 St Stephens Green.	