

# **Public Board Meeting**

# Letterkenny University Hospital, Galway 11<sup>th</sup> May 2016

#### Present

# **Non Executive Directors**

Dr John Killeen, Interim Chair (JK)
Ms Phyllis MacNamara, Director (PMN)
Mr Gerry McManus, Director (GMM)
Dr Jim Browne, Director (JB)
Ms Sharon Moohan, Director (SM)
Dr Brendan Day, Director (BD)

# **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)
Mr Tony O'Gorman, Secretary, (TOG)

# **Apologies**

Mr Zubair Javeed, Director (ZJ)

#### In Attendance

Mr Michael Moloney , Communications Ms Caitriona Meehan, Communications

#### Non Attendance

Mr Colam O Neill, Director (CON)

Agenda	Discussions / Comments	Action	
Item			
1.	Apologies/ Minutes of Board Meeting/ Declaration of Interest		
	Minutes of Board meeting of the 13 <sup>th</sup> April were approved on the proposal of Ms Phyllis MacNamara and seconded by Dr Jim Browne.		
	Conflict of Interest Declaration: No Declaration of Interest made.		
	Matters Arising and Review of Action points		
	None.		
2.	Chairperson		
	Chairman's Update (verbal)		
	The Chairman, Dr John Killeen, welcomed members of the public and staff		
	of Letterkenny University Hospital (LUH) to the first Saolta Public Board		
	Meeting of 2016 and acknowledged the interest shown by individuals and		
	local interest groups in attending the board meeting.		

Dr Killeen advised all present that a service level agreement for the provision of emergency cardiology services between the Group and the Western Health and Social Care Trust in Northern Ireland has been signed and the service is now operational, whereby Altnagelvin Hospital Derry will provide emergency pPCI treatment to patients resident in Co. Donegal. It will greatly enhance patient access to emergency cardiology services in the Northwest region where patients will no longer need to travel 4 hours by road for emergency treatment. Sixty patients per year are expected to avail of the service. As part of this new development, A Consultant Interventional Cardiologist, employed by Saolta, has been appointed to Letterkenny University Hospital and will contribute to the delivery of the pPCI service from Altnagelvin.

The Chair also noted the development of the new cross-border radiotherapy service which will launch in Q4 2016. Dr Killeen acknowledged the work of all those involved in delivering both projects for the benefit of our patients.

The Chair congratulated the staff of Sligo University Hospital who, in conjunction with their colleagues in Community Health Organization Area 1, have won the Overall Best Project at the Health Service Excellence Awards which took place recently in Farmleigh. The winning project, from an original entry of 426 projects submitted nationally, delivers an improved model of care in Ophthalmology Service for our patients and has resulted in 1,400 additional outpatients seen in 2015 alone, reducing the numbers of patients waiting by 45 per cent. It demonstrates the on-going commitment of all staff within the Saolta Group to deliver improved models of care for our patients along with our colleagues in the community.

Dr Killeen, on behalf of the Board, offered condolences to the relatives of the following recently deceased staff members;

Mr Kevin McNamara, Chaplaincy Team, Letterkenny University Hospital. Ms Jane Whiriskey, Assistant Director of Nursing, Galway University Hospitals.

Ms Noreen Hanlon, Healthcare Assistant, Galway University Hospitals.

# 3. Chief Executive Officer

The Chief Executive Officer report (21/2016) circulated prior to meeting was taken as read.

The CEO, Mr Maurice Power, outlined three significant developments underway within the Group to improve the way Saolta provide care for our patients as part of the health reform programme and the journey from a "Group" to a "Trust";

- 1) Saolta Group Governance is well established with our Board and relevant sub-committees in place (i.e. Audit, Finance, Board Quality and Patient Safety Committee).
- 2) The Executive Team is fully in place and Mr Power also announced that Saolta will imminently commence the recruitment process for an E-Health Director.
- 3) The Group Executive Council, which is the Saolta executive Governing

Body, has updated its operational arrangements. The Group Executive Council has recently approved two major reform programmes, namely the Group Integration Project and the Clinical Strategy Project. These projects will be led by Saolta Chief Clinical Director, Dr Pat Nash. Mr Power also outlined multiple developments which will benefit patients in the North West such as;

# The Symptomatic Breast Service, LUH.

Saolta recently met the National Cancer Control Programme (NCCP) regarding the Symptomatic Breast Service in LUH and outlined our proposal to assign a second consultant to LUH in order to support the existing Breast Surgeon.

# Capital projects for the North West.

The Group is continually pursuing funding nationally, in conjunction with our HSE Estates partners, to provide new building infrastructure and equipment as well as upgrading our existing infrastructure. In Letterkenny University Hospital, work continues on the post-flood restoration programme. In Sligo and Letterkenny, the new Medical Academies have recently opened and the design process for the new surgical block in Sligo University Hospital has commenced. Funding has also been secured for the development of the new diabetic centre in Sligo.

## **Emergency Department Performance Improvement.**

Saolta continually strive to achieve improvements in the waiting list and ED targets, and while it is right that there is a focus on shortfalls in meeting our performance figures, we must also acknowledge our achievements. Of particular note is that, in EDs across the Group, there has been 30% reduction on trolley waits compared to the same period last year, whilst numbers attending EDs have gone up 8%.

### Tele-Medicine service for LUH and SUH.

A consultant-led new technology, supplied using EU funding and facilitated through the CAWT cross-border cooperation group, will be used to link Letterkenny, Sligo and Galway University Hospitals, facilitating remote consultations between patients and consultants. This new service will commence with Urology consultations from July 2016.

### Saolta Group Patient Council:

The Saolta Patient Council, containing representation from members of the public across the West and Northwest, is actively engaged in Group activities and is currently working with the CEO to address potential communication issues that arise within our hospitals between the patients and the staff. Saolta will shortly roll out new developments in this area, including the launch of the 'Hello my Name is' campaign.

# Medical Academies in Sligo and Letterkenny University Hospitals.

Mr Power acknowledged the work of Dr Jim Browne, NUIG in providing € 9.5 million funding for the provision of medical academies across hospitals in the Saolta Group, most recently in Sligo and Letterkenny University

	Hospitals. Dr Browne noted that teaching and research activity within hospitals help to attract the best staff. The Board acknowledged the contribution of NUIG and academic teams in developing the learning and research capability in hospitals across the Group, noting that NUIG are the first University in Ireland to invest in Hospital Academies.	
4.	Chief Clinical Director	
	The Chief Clinical Director report (22/2016) circulated prior to meeting was taken as read.	
	Clinical Directorate and Group Integration Updates.  Dr Nash advised those present that a subgroup formed to develop a proposal on Group Governance Structure, has now examined various clinical leadership and governance models and has reported its findings and recommendations to the Group Executive Council on this important development. Dr Nash will shortly bring a proposal on Group Governance Structure to the Board for review and approval.	Dr Pat Nash
	Dr Nash also advised the Board that the Group will shortly commission a new 5-year clinical strategy and noted that hospitals in the Group, particularly were historically not configured to cope with the high volume of complex cases that are now presenting. The implementation of a clear, integrated plan for the delivery of services across the Group was of critical importance.	
	Portiuncula Maternity Services Review.  The status and progress of this review was outlined by Dr Nash who noted the complexity of the review process. The process of sending draft chronologies to families and draft reports to staff for accuracy checking is continuing, with the intent to have the review completed in Q3-4 2016. Dr Nash underlined the commitment of Saolta to complete a full and comprehensive review at the earliest possible time.	
	Patient Access and Emergency Department Capacity.  Lack of ED capacity, in Mayo, Sligo and particularly Galway, remain a key area of risk and concern for the Group. The development of a new Emergency Department in Galway remains the capital priority for the Group. Plans for Consultant structured weekend working across the Group, thereby accelerating patient discharge, are being reviewed currently.	
	Quality and Patient Safety.  Dr Nash observed that the revised Group Risk Register is now in use. The register is aligned with national guidelines and all hospitals within the Group feed into the continual updating of this document.	

Dr Nash noted that 7 senior Safety and Quality posts for Saolta have been

approved nationally with 4 posts being advertised imminently.

5.	Chief Financial Officer Report	
	The Chief Financial Officer report (23/2016) circulated prior to meeting was taken as read and the following updates were provided:	
	<ul> <li>2016 will continue to be a challenging year financially with an on- going national focus on spending, particularly in the areas of basic pay, drugs and medicines and income. There will be a pause in recruitment with no continuation of unfunded developments or services.</li> </ul>	
	<ul> <li>Saolta will meet with the National Ambulance Service (NAS) to determine how patient transport costs can be reduced.</li> </ul>	
	Timely processing of income claims to insurers for private patients is also a focus area for the Group.	
	• The Group is €13.2 million overspent so far this year and the forecast for year-end 2016 indicate that Saolta Group will be €55m over budget. Mr Baynes stated that the Group's base budget was not sufficient to fund the level of activity undertaken currently by the Group. This was compounded by a drop of income from private patients as a result of lack in capacity across the Hospital Group due to unscheduled winter demand.	
	<ul> <li>Mr Power stated that Saolta was a strong advocate of activity-based funding (ABF), which would more accurately reflect the costs incurred in providing the number and complexity of services across the Group, and estimated that Saolta could potentially receive an additional €20-30 million of Government funding under this system. The Chair, on behalf of the Board, supported the prompt adoption of ABF as it drives efficient and effective delivery of services to our patients.</li> </ul>	
	<ul> <li>Mr Baynes stated that the increase in headcount of approximately 201 staff was largely due to the recruitment of student nurses and staffing for winter bed demand. Saolta's headcount numbers compare favourably against other Hospital Groups and administrative costs for the group are second lowest nationally. The CFO will present a breakdown of headcount across the Group at the next Board meeting.</li> </ul>	T Baynes
6.	Chief Operating Officer	
	<ul> <li>The Chief Operating Officer (COO) report (24/2016) circulated prior to meeting was taken as read and the following updates were provided:</li> <li>Ms Cosgrove noted the increase in Q1 2016 activity across the Group when compared to 2015.</li> <li>The impact of the Norovirus and increased Emergency Department</li> </ul>	

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presentations were reviewed in the context of the negative impact this had on elective activity. On-going increased Emergency activity across the winter had a very significant impact on scheduled care activity. Ms Cosgrove stated that the Group has prepared and submitted a costed waiting list clearance plan proposal to the HSE and await a response.

- In order to optimize Group capacity, cross-site initiatives have been introduced, including moving some plastic services from Galway to Roscommon and less complex surgery to Portiuncula as well as some Nephrology and Dermatology services from Galway to Mayo. Furthermore, a new Endoscopy service in Roscommon will commence in June 2016, adding to Group capacity.
- Specification has started on a list of replacement medical equipment across the group, with an estimated value of €4.09 million.
- Work has commenced on the 2017 Service Plan, with submission nationally in early Q3. The 2015 Annual Report is currently being prepared for review.

# 7. Chief Director of Nursing

The Chief Director of Nursing (CDON) report (25/2016) circulated prior to meeting was taken as read and the following updates were provided:

- The roll-out of the sepsis policy and early warning score across the group is ongoing.
- The valued contribution of the Saolta Patient Council is continually increasing, with Patient Council members active on a variety of Hospital sub-committees, including Hygiene, Nutrition, Procurement, and Estates. Feedback from the Patient Council has led to the commencement of key patient communication project entitled "Hello my name is" which will involve the supply of new name badges for staff members, funded by the Friends of GUH.
- Saolta wish to undertake a Board Quality Improvement Project, with support and facilitation from HSE Quality Improvement Division. This project involves the development of the Group Board quality of clinical care dashboard to enable Board discussion and to use this for the board of directors to individually and collectively act to hold the Group accountable for the quality of clinical care delivered. Ms Phyllis MacNamara proposed the motion to proceed, seconded by Ms Sharon Moohan. The Board approved this project for immediate commencement.
- Other patient communication initiatives underway include the focus on plain language use to make OPD appointment letters more user-friendly. The Arts Trust also plays a vital role in patient communication.
- Development of the patient advice and liaison service (PALS) role within the Group will remain a key area of focus for the CDON.
- The second successful Schwartz Round took place at GUH with 158 attendees.
- A report (28/2016) on the recent visit from a Zambian hospital delegation to the Saolta Group, from Dr Diarmuid O Donovan,

	Director of Public Health was provided to the Board.				
8.	Any other Business				
	At the request of the Chair, Mr Gerry McManus provided an update on the work of the Saolta Group Audit Sub-Committee over the last 24 months, outlining the audit expertise brought to the sub-				
	committee by its members. Mr McManus acknowledged the contribution and commitment of the Group Hospital Managers to the audit process which has resulted in improved hospital performance.				
	<ul> <li>Mr Sean Murphy, General Manager, Letterkenny University Hospital, provided a comprehensive presentation on the rebuild programme of the Hospital post flooding. The Chair, on behalf of the Board, acknowledged the work of the many individuals and teams involved in supporting the operation of the hospital post the flooding and during the rebuild process. Dr Killeen also noted the efforts and support of former Saolta Chair Mr Noel Daly during the commencement phase of the rebuild programme.</li> </ul>				
	Dr Killeen commended the success of the "Hospital Friends" committees who support Sligo and Letterkenny University Hospitals and provide an essential link into their neighbouring communities and encouraged the formation of similar groups to support other hospitals in the Group.				
9.	Date of Next Board Meeting				
	Wednesday 8 <sup>th</sup> June 2016 Board meeting 16.00 – 18.00, Board Room, Galway University Hospital.				
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Interim Chair of Board

