### MINUTES OF THE EXECUTIVE COMMITTEE MEETING

In the absence of the Archbishop and the Lord Mayor and in accordance with the Charter, Mr Nicholas Kearns, Deputy Chairman, presided at the Executive Committee meeting held in the Boardroom of the Hospital at 5.15pm on Wednesday, 18<sup>th</sup> September 2019.

# 1. Agenda and Attendance

### Present at the meeting:

Mr Nicholas Kearns	Dr Ingrid Browne	Ms Michele Connolly
Prof Shane Higgins Mr William Johnston	Prof Fionnuala McAuliffe Dr Roger McMorrow	Ms Jane McCluskey Ms Eugenée Mulhern
Mr David Barniville	Prof Colm O'Herlihy	Ms Patricia O'Shea
Mr Frank Downey	•	Ms Mairéad Butler
Cllr Naoise Ó Muirí		

### In attendance:

Mr Stephen Vernon

Mr Ronan Gavin	Ms Mary Brosnan	Mr Alistair Holland
Secretary/General Manager	Dir. Nursing & Midwifery	Financial Controller

## Apologies received from:

The Lord Mayor	Prof Declan Keane	Ms Isabel Foley
Mr Aidan Devlin	Dr Michael Robson	Ms Christine Moran
Cllr James Geoghegan		Ms Catherine Stocker

### 2. Declarations of Conflicts of Interest

There was no declaration of a conflict of interest.

## 3. Review and Approval of Minutes of Previous Meeting

The minutes of the meeting held on 21<sup>st</sup> August 2019 were approved subject to some minor changes. It was agreed not to include the names of legal cases in all future minutes.

# 4. The Master's Report

(i) During the month there were 1273 inpatient admissions to the hospital of which 1103 were maternity and 34 were gynaecological. A total of 696 mothers of whom 38% were nulliparous gave birth to 711 babies. There were 5 perinatal deaths giving a perinatal mortality rate of 7.0 per thousand. The corrected perinatal mortality rate was 7.0 per thousand as no baby died from a lethal congenital malformation. There were three antepartum deaths and one normally formed early neonatal deaths.

198 mothers were delivered by caesarean section giving a rate of 28.4%. The vaginal operative rate was 12.5%. The overall epidural rate was 44.6% - 69% for nullips and 29% for multips.

61 major gynaecological operations were performed during the month. There were 264 minor procedures performed of which 49 were for incomplete miscarriage. There were 136 admissions to the neonatal unit during the month.

### (ii) Master's Monthly Risk Report

The Risk report was noted. An additional 30/35 KPIs being collected for future reporting. Noted 3 Serious Reportable Events (SRE).

## Matters arising from the Master's Report

The Master provided an update on 3 reviews:

- (a) MT Review J. Walker will act as Chair and nominees awaited from College.
- (b) TOP Tri 18 Review Team in place 2/3 months. Chair, RCOG recommended. Multiple attempts to involve parents.
- (c) RCOG NCSS Audit Master noted 60/80 NMH patients and 6 NMH consultants agreed to participate.

## 5. The Director of Midwifery & Nursing's Report

**Hospital Activity:-** There were 395 mothers delivered to date this month and the neonatal unit has been busy also with full occupancy. As a point of interest there has been three sets of triplets in the unit this month.

**Midwifery & Nursing:** Recruitment & Retention remains an on-going process. There are currently 28 on maternity leave and long term sick leave. As I mentioned last month we intend to actively recruit theatre nursing candidates, including advertising campaigns in UK, Australia and Middle East region.

**MNCMS:** Final preparations are being made as we draw nearer to our "Go-Live" with Gynae Services on 29th September. In-house training for staff continues. A further meeting of the MN CMS Steering Group is taking place on 16<sup>th</sup> September to complete the review/analysis of Dr. Luke Feeney's Risk Review. A report is being furnished to the Executive Committee.

**NMH@SVUH Update:** Operational Readiness workstreams are on-going. The final Accenture Workshop was held on 4<sup>th</sup> September, this workshop focused on alignment and our strategic plan for 2019-2023.

**NMH Strategic Plan 2019-2023** –Multidisciplinary working groups have been established to develop the action plans with a view to implementing the objectives over the next four years.

**Quality Initiatives:** The first National Maternity Experience Survey will be carried out in early 2020. Its aim is to learn from the experiences of women to improve the safety and quality of care that they and their babies receive. There will be a number of information sessions held around the country and the first one was held here in the National Maternity Hospital on Tuesday, 10<sup>th</sup> September.

**NMH 125 years:** Final plans are being put in place for Culture Night on 20<sup>th</sup> September when the hospital boardroom will be opened to the public for the first time. There is also a staff celebration being held that night.

**Patient Experience:** We received 174 completed patient satisfaction surveys for the month of August. 167 felt their overall care and treatment was excellent and 171 patients who returned the survey said they would consider returning to the hospital or recommending us to family or friends. To date, we have received 2 written complaints this month (no verbal complaints documented) and we are currently working to resolve all issues raised.

I am very pleased to inform the Board that on 5<sup>th</sup> September I graduated as a foreign Florence Nightingale Scholar at a ceremony in the Law Society in London. I wish to thank the Board and the EMT for their support during my scholarship year.

## Matters arising from the Director of Midwifery & Nursing's Report

MN-CMS – noted review of initial 81 risks, 9 remain.

The Executive Committee congratulated the DOMN on her recent award as a Florence Nightingale Scholar.

## 6. Report of Finance Committee

(i) The monthly report and management accounts as circulated were noted.

## (ii) Draft Minutes of the September Finance Committee Meeting

## **Matters Arising / Action Items**

- 1) Delegated list of authority levels for Capital works and Contracts was discussed
- 2) Progress on policies and procedures work will be a standing item on the agenda
- 3) A paper will be circulated on 270 aged debt items totalling €0.38m requiring action where all courses of action have been exhausted.
- 4) The reduction on canteen income was reviewed
- 5) A new format of Finance report to include in the Executive Committee papers was agreed.

### **Revenue Account**

Year to date surplus against NMH Budget	<u>€349,275</u>	
NMH Forecast Net Expenditure HSE Allocation NMH Forecast Deficit vs. HSE Allocation	€67,110,248 €62,140,787 € 4,969,460	

Pay €21,965 Favourable (YTD €226,217 Favourable) Non Pay €27,215 Unfavourable (YTD €105,860 Favourable) Income €13,202 Favourable (YTD €17,198 Favourable)

Funding for the TOP service is to be confirmed by NWIHP in September so the allocation for 2019 at €62.1m gives a forecast deficit for the year of €5.0m. Some other items are also expected to be added to the allocation in September, however, confirmation is still awaited on funding for the Elm Park project and the on-going capital building works.

#### **Debtors**

Debtors at the end of August were €3.147m. The actions requested in the paper on the €0.38m aged debt items were approved by the Committee.

### **Approval of WTE and Staffing Requirements**

14.5WTE were approved of which 7.0WTE related to the internal building team agreed in August, 4.0WTE TOP service funded by NWIHP, 2.0WTE funded by IEHG and 1.0WTE maternity leave and 0.5WTE consultant in Neonatology.

It was agreed to discuss with the other two Dublin Maternity hospitals concerns around the potential impact on staffing cover of a new nursing agency.

#### NMH at Elm Park

Funding for the project resourcing in 2019 is a concern. Agreement shall be sought as soon as possible.

It was confirmed that unless Sláintecare is implemented there would be private accommodation

in the new building.

The HSE have indicated the original Red Line map (not including the Mount Street houses) agreed in 2017 between the Hospital and HSE Estates should be reopened; the Finance Committee do not recommend any change to the agreed position.

## **Update on Hospital Managing Activity Levels**

Deliveries are up 1.7% YTD with deliveries for the year expected to be approximately 8,000.

#### **Update on Facilities**

LDU and Theatre projects continue and expected to complete Q2, 2020.

It was agreed to engage in relation to a vacant premises on Holles Row in line with a proposal paper brought to the Committee. In the short term this extra space could accommodate the upcoming RCOG NCSS review, decant for OPD, Elm Park project team and some others.

#### **Review of Periodic Reporting Items**

The Strategic Plan goal leads have been appointed and will report on KPI and initiatives by the end of the year/year 2020 and subsequently on a regular basis. Finance KPI's will also be included. The IT Business continuity strategy was reviewed and will be revisited with the IT Dept. Overall Business Continuity Plan to be formulated.

The month's accounts in the amount of €6,984,904.46 were passed and approved for payment.

### Any Other Business at the Finance Meeting

The on-going dispute with a staff member will be brought to the WRC next week. An IR issue in another area is currently under negotiation and will be resolved in the coming weeks.

Concerns were raised over a 40 day protest to be held in the vicinity of the hospital.

## Matters arising from the Finance Report

Prof. Colm O'Herlihy queried the issue with nursing agency and it was noted, along with other hospitals, the NMH would continue to use HSE framework.

The Master noted the correspondence from HSE Estates regarding the site and the Executive's position as set out in correspondence over the years was re-affirmed.

## 7. Other Committees' Reports

#### (a) **QRPS** Committee

Ms Patricia O'Shea gave an update on QRPS Committee noting that the minutes had been circulated. The Brexit update from Pharmacy was noted and the Committee requested an update on medical equipment. The RCOG NCSS Review was noted and the Master confirmed that resources had been allocated centrally. GDPR update provided and noted that would be provided on an exception basis in the future.

### (b) Audit Committee

The Chair of the Audit Committee, Mr Frank Downey, noted that 2 internal audit reports from BDO had been reviewed (HR & Payroll and Internal Controls). It was noted that there are no major issues and a few minor issues to be addressed. It was noted that this was the second internal control report in 3 years and significant improvements noted. It was also noted that PWC provided a briefing on Charities SORP and some significant work to be done on funds and analysis. Noted 2 further audits by year end. Also, noted Committee self-assessment completed and satisfactory.

## (c) Ethics Committee

No meeting this month.

#### (d) House Committee

The report as circulated was taken as read.

## (e) Co-Location Committee

Mr Stephen Vernon, Chair of the Co-Location Committee provided an update. The tender and SAQ due to issue Q2, 2020.

Operation Readiness is going well with Accenture on board and final business plan expected end Q1, 2020. Drafts will issue and be reviewed as they become available. It was noted that all NMH/SVUH/Pillar Leads in place for Operation Readiness.

The jointly agreed operating license (NMH & SVUH) has been with DOH for a number of weeks.

### 8. Communications

The press clippings circulated were noted.

## 9. Review of Outstanding Actions related to Previous Meetings

This item was noted.

## 10. Review of Board 2019 Reporting Calendar

The Board Reporting Calendar was noted.

# 11. Application of Seal to Documents

It was noted that the seal was applied during the month to the LDU Contract (signed in May).

## 12. Any Other Business

#### The Nominations Committee

Following recommendations from the Nominations Committee, the Executive Committee approved the election / appointment of the following:

- Ms Mairéad Butler and Dr Roger McMorrow to the QRPS Committee.
- Mr Frank Downey to the Medical Council.

### Writer in Residence

It was noted that Ms Emily Pine is onsite a number of days each week.

## **Consultant Appointments**

The following appointments were noted and approved:

Dr Siobhan Corcoran, Consultant Obstetrician/Gynaecologist (Fetal Medicine Specialist)

Dr Zara Fonseca-Kelly, Consultant Obstetrician/Gynaecologist (Gynae)

Dr Saidhbh McGuinness, Consultant Anaesthetist.