St Vincent's University Hospital Ltd





Annual Review 2001









Visit our Web Site www.st-vincents.ie St Vincent's University Hospital Ltd incorporating St Michael's Hospital

Annual Review

Mission Statement

We strive for excellence in meeting the holistic needs of our patients in a caring and healing environment in which the essential

contribution of each member of staff is valued.

The values of human dignity, compassion, justice, quality and

advocacy, rooted in the mission and philosophy of the Religious

Sisters of Charity, guide us in our work.

We will, within the forgoing context, make every effort to

maintain excellence in clinical care, teaching and research.

Comh mheas, comh bha, comh phártaíocht agus comh oibre

bunsraith ár gcuid saothar uile.

(Mutual respect, empathy, partnership and cooperation

are the foundation of all our work.)



Contents

Mission Statement

Executive Review

soard of Directors	4
eview from the Chairman of the Board of Directors	6
eview from the Group Chief Executive Officer	8
Members of the Executive Council	15
eview from the Chairman of the Medical Board	16
inancial Review for the Year 2001	19
summary Financial Statement	21
inancial Analysis	22
ive Year Analysis of Income and Expenditure	23
Sovernance and Management Structure	24
Organisational (Service) Chart	25
Seneral & Departmental Statistics	26
lealth and Safety Review	33
thics and Medical Research Committee Review	34
fission Committee	34
lospital Development Review	35
eview from St. Michael's Hospital, Dún Laoghaire	37

Board of Directors

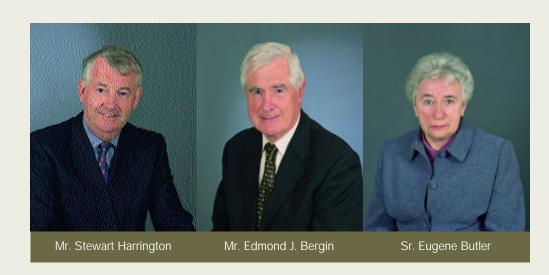
Board of Directors













Review by the Chairman of the Board of Directors

I have pleasure in presenting the annual review of St. Vincent's University Hospital for the year 2001. This is the first annual review from St. Vincent's University Hospital Ltd. The year 2001 was a very busy and challenging one for the

hospital, and much was accomplished. Fundamental development was achieved.

The many strategic issues and initiatives which have shaped the development of St. Vincent's University Hospital Ltd. during 2001 are outlined in the report. I wish to concentrate here on the hospital's governance, finances, and future major development.



Much change in the governance of St. Vincent's University Hospital has

occurred in recent years, and more is on the way. This change is designed to ensure that St. Vincent's University Hospital will be positioned effectively and strategically to deliver efficient health care to meet the holistic needs of its patients in a caring and healing environment in the challenging time ahead. Apart from the many clinical and managerial agreements which St. Vincent's has with various other major hospitals, St. Vincent's and St. Michael's Hospital, Dún Laoghaire, became an integrated entity during the year 2000. During the year 2001, St. Vincent's University Hospital was converted by its shareholders, the Religious Sisters of Charity, to a limited (not for profit) company under the companies acts. It now functions as St. Vincent's University Hospital Ltd. under a Board of Directors. Looking to the future, and in the spirit of increasing the mission, managerial, and clinical effectiveness of the hospital, the shareholders have decided to have shared governance structures for both St. Vincent's University Hospital Ltd. and St. Vincent's Private Hospital Ltd. Work is currently underway on this. The Board of Directors of St. Vincent's University Hospital Ltd. welcomes and supports fully these developments in the hospital's governance, which have been initiated by its shareholders.

Future Physical Development of the Hospital

As I reported in year 2000, the physical development plan for St. Vincent's is currently well underway, and this means that in excess of €216 million will be invested in the

hospital's development and modernisation over the next two years. The up-to-date details of this major development project are contained in the report from the hospital's Group Chief Executive Officer. The magnitude and far reaching importance of the project will be apparent from this addendum. I am particularly pleased to report here that the project has progressed well and on target during the year 2001. It is the intention of the Board of Directors and hospital management that the project should continue and finish on target. A most important issue for the hospital

during the implementation of this major project is that the hospital's clinical, managerial and related services are provided to the highest standards while far reaching construction and re-construction takes place on site. This is most challenging for all the hospital staff and I commend them highly for continuing to meet the highest standards of medical care while this major project is in progress.

Financial Results for year 2001

St. Vincent's University Hospital Ltd. (incorporating St. Michael's Hospital, Dun Laoghaire) received €138.6 million from the Exchequer during 2001. While there is never sufficient resources to enable the hospital to do all that it would wish to do, the financial policy of the Board of Directors of the hospital continues to operate within the funding from the Exchequer by the Department of Health and Children. The hospital's aim is to maximise productivity and to deliver optimum healthcare services in this context. I am happy to report that, for year 2001, the hospital has operated successfully in accordance with its allocated budget.



I extend the warm thanks of the Board of Directors of St. Vincent's University Hospital Ltd. to:

- The shareholders of the hospital, the Religious Sisters of Charity
- The Minister for Health and Children, and the departmental officials of the Department of Health and Children
- The Chief Executive and officials of the Eastern Regional Health Authority
- The governing boards of our many partner hospitals
- Our many supportive friends, and last but certainly not least,
- The staff at St. Vincent's University Hospital Ltd.

I extend my personal thanks to my colleague directors on the Board of Directors of the hospital. In their different ways, each of the above groups ensures that St. Vincent's University Hospital Ltd. continues to meet, excellently, the holistic needs of the hospital's patients in a caring and healing environment; to pursue excellence in clinical care, in teaching, and in medical research; to be guided by the values of human dignity, compassion, and justice; and to value deeply the contribution of each member of staff which is so essential for the current and future development and welfare of St. Vincent's University Hospital Ltd.

Professor Noel Whelan Chairman Board of Directors St Vincent's University Hospital Ltd.

Executive Re

Review by the Chairman of the Board of Directors

Review by the Group Chief Executive

Executive Review

Review by the Group Chief Executive

I am pleased to have this opportunity to present my report on the activities of St. Vincent's University Hospital Ltd. incorporating St. Michael's Hospital, Dun Laoghaire for the year 2001.

I would like to pay tribute to the staff of both hospitals for their support and work in the interest of our patients and their families.

Governance

The process that commenced in the year 2000 in restructuring the hospital's legal structure to a company limited by shares not for profit under the Companies Act 1963 to 1999. This has now been completed and a Board of Directors appointed, having it's inaugural meeting on Monday 25th February 2001. It was

decided at this meeting that the board should seek to introduce best practice in relation to governance and the board agreed to develop structures over the coming months compatible with best practice. Legal advisers to the Religious Sisters of Charity outlined to the directors their legal responsibilities as directors of the new company. The shareholders who attended the meeting, Sr. Eileen Mary Durack and Sr. Frances Ignatius Fahy, wished the Board of Directors every success over the coming years.

The Board of Directors appointed the Group Chief Executive, Mr. Nicholas Jermyn, as Company Secretary. It was agreed to set up the following sub-committees to the Board:

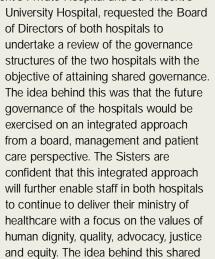
- Audit Committee
- Mission Committee
- c) Medical Board Committee
- **Executive Council Committee**
- Remuneration Committee e)
- Finance Committee

Exchange of trusteeship of St. Michael's Hospital, Dun Laoghaire

The new Board of Directors of St. Vincent's University Hospital took over the management and governance of St. Michael's Hospital in 2001.

St. Vincent's University Hospital & St. Vincent's Private Hospital - Change of Governance

On 18th December 2001 the Religious Sisters of Charity, owners of St. Vincent's Private Hospital and St. Vincent's



governance is to ensure that both hospitals are strengthened and the particular role and unique character of each will be preserved under one Board. A Steering Committee was appointed and charged with the implementation of the Shareholders decision. In line with the recently published Health Strategy "Quality and Fairness a Health System for you", the Steering Committee will have as a focus for its review the following principals, as well as the ones stated above:

- Equity of access
- Quality of care
- · Clinical need
- Best practice
- Accountability

The members of the Steering Committee are representative of the two hospitals and are as follows:

Prof. Noel Whelan, Chairman, St. Vincent's University Hospital incorporating St. Michael's Hospital Dun Laoghaire

Mr. Michael Maher, Chairman, St. Vincent's Private Hospital

Sr. Frances Ignatius Fahy, Religious Sisters of Charity, Shareholder

Sr. Eugene Butler, Religious Sisters of Charity, Shareholder

Mr. Nicholas Jermyn, Group Chief Executive, St. Vincent's University Hospital incorporating St. Michael's Hospital Dun

Ms. Phil Shovlin, Chief Executive, St. Vincent's Private Hospital

Association between St. Luke's Hospital and St. **Vincent's University Hospital**

The association agreement between St. Luke's Hospital and St. Vincent's University Hospital was renewed for a further three years. I, as you know, was asked to take on the role of Chief Executive of St. Luke's Hospital over four years ago as part of the association agreement. It was agreed to release me from the role, and a new Chief Executive, Mr. Lorcan Birthistle, was appointed to St. Luke's Hospital in August. It should however be noted as reported last year that the association agreement and the responsibility for its implementation will be mine. The purpose of the association agreement: "It is the joint wish and aim of the Boards of St. Vincent's University Hospital and St. Luke's Hospital that, while maintaining their respective autonomies, they should continue their association, with a view to creating and enhancing added value in the operations (medical, administrative and managerial) of their respective hospitals, in the interest of patients, their families, and staff".

Caritas Consultative & Advisory Forum

I am pleased to report that the Caritas Advisory Forum continues to grow in strength. The purpose of the Forum is based on mutual respect for each others independence of operations, to consult and, as appropriate, advise the Religious Sisters of Charity on what common endeavours might be pursued with a view to enhancing the common good of the combined hospital/health organisations which operate under the aegis of the Religious Sisters of Charity.

St. Monica's Nursing Home St. Mary's, Merrion Maryville, Donnybrook

Caritas Convalescent Centre, Merrion Road St. Vincent's, Cork

The programme of work in 2001 involved the development of common templates, which are now being used as reference points for the various facilities involved:

- Best practice hospital governance
- Code of practice relating to ethical matters
- Financial management
- Technical services management
- Common legal advice
- Common approach to information technology
- Quality in healthcare
- Human resource management
- Project management
- Strategic planning

The Forum is chaired by Professor Noel Whelan, and I am the co-ordinator.

Mission

The hospital's Mission Committee continues to be an important element of the hospital's governance structure. The Committee is made up of staff representatives and chaired by a member of the hospital Board of Directors,





As you are aware there are now twelve hospitals involved in the Caritas Forum:

St. Vincent's University Hospital Ltd. Cappagh Orthopaedic Hospital Our Lady's Hospice, Harold's Cross St. Patrick's Hospital, Cork

St. Patrick's Centre, Kilkenny

St. Vincent's Private Hospital

St. Mary's, Baldoyle

Sr. Eugene Butler. In 2001 the Mission Committee, with the Board of Directors, reviewed its terms of reference and the Mission Statement.

The aim of the Mission Committee is to ensure that

- The Mission and Philosophy of St. Vincent's University Hospital Ltd is integrated into all its hospital activities.
- · The core values of dignity, compassion, justice, quality and advocacy together with the ethos of the Religious

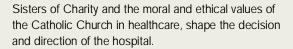
Group Chief Executive

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Review

Executive Review

Review by the Group Chief Executive



- The charisma and heritage of the Religious Sisters of Charity is continued in the hospital, bringing the healing ministry of Christ to all and especially those in greatest need. Within St. Vincent's University Hospital Ltd., the Mission Committee, being accountable to the Board of Directors has as its purpose:
- Assisting and supporting the Group CEO in his responsibility for Mission working on special projects as assigned or approved by him.
- Support the promotion, implementation and review of the Mission Effectiveness Programme within the hospital.
- Presenting a resource and liaison group for hospital personnel regarding clarification and integration of issues relating to the philosophy, mission and values of St. Vincent's University Hospital Ltd.
- Planning and organising para-liturgical and seasonal celebrations, Days of Reflection and other self-enrichment programmes to promote the core values, which are inherent in the hospital's mission.

I would like to take this opportunity of thanking the various members of the Mission Committee and Sr. Angela Kelly, the Mission Co-ordinator for the hospital, for all their hard work and efforts throughout the year 2001.

Human Resources

As I reported last year, the greatest challenge faced by the hospital in 2001 was the retention and recruitment of staff. The hospital has had considerable success with its foreign and local recruitment initiatives. The hospital's recruitment drive has taken staff from as far a field as the Philippines, South Africa, Australia, New Zealand, Europe and the British Isles. Currently we employ in excess of 300 staff from outside Ireland out of a total staff of 2,500. I would like to take this opportunity of welcoming all our new staff to the hospital and also to thank the personnel involved in recruitment who have had to work extremely hard this year in securing staff from abroad and locally. The staff recruited from abroad are in the following areas; Medicine, Nursing, Radiography, Medical Records, Catering, Housekeeping, Ward Attendants.

This year the hospital has spent a lot of time securing housing for staff generally in our area which has been a major bonus in securing staff from abroad and locally. I would like to take this opportunity of thanking the members of staff involved in the procurement and management of this accommodation. This has not been an easy task particularly in the Dublin 4 region, but has now become an essential element of our recruitment strategy.

The hospital has continued to develop its Occupational Health Department in an effort to meet the huge challenges we are faced with from a staff perspective and I would like to thank the members of staff in the department whose work has increased.

The recruitment of an Occupational Psychologist will add to the strength of our Occupational Health Department.

To staff that retired in the year, thank you for your commitment and years of service to the hospital and its patients.

Unfortunately, as you will see from reports within the various departments, some of our colleagues died during the year. On behalf of staff and myself I extend condolences to all of their families.

I would like to pay particular tribute to the staff in the Personnel Department and to Mr. Noel Cassidy, Personnel Officer.

Finance and Activity

As you can see from the other reports attached, the hospital's financial performance was exceptional when one considers the challenges and the demands placed on resources. St. Vincent's University Hospital Ltd. had a deficit of €350,000 at 31st December 2001 out of a total revenue allocation of €121,270,000. St. Michael's Hospital had a deficit of €72,232 out of a total revenue expenditure of €17,688,319. The activity and casemix complexity in both hospitals increased over 2001 and the level of bed occupancy in both hospitals was in excess of 95% occupancy, which is well above the recommended occupancy of 85%.

The hospital's Waiting List Initiative, has resulted in excess of 2,200 patients being removed from the hospital's waiting lists. However, it should be noted that due to the increased number of patients being referred for care at both hospitals the total number of patients on the waiting list remains just under 3,000 patients. I think it is worth considering the number of new patients that go on every three months to the

waiting list is now running at just under 1,000 patients. Three years ago this figure would have been somewhere under 500 cases every three months.

It is of some concern that resources were not provided, as in previous years, for dealing with the replacement of medical and non-medical equipment and maintenance work. I have serious concerns that patient services will be affected if resources are not provided to deal with equipment replacement and maintenance work.

However, we spent €3.2 million on equipment purchase and €1,260,247 on maintenance in 2001.

The year 2001 from a financial and activity control perspective has been very difficult. The Provider Agreement between the hospital and the Eastern Regional Health Authority is a contract to provide levels of service for a certain level of funding. It is going to be necessary to agree funding mechanisms to ensure hospitals are funded based on complexity levels and referral patterns based on agreed criteria.

Information Technology

The hospital continues to develop its information systems and our aim is to have an electronic patient record before we move into the new facilities. This will ensure that the new hospital facilities can be used in the most effective and efficient way possible. The hospital introduced, on a pilot basis, a Picture Archival Communications System (PACS) system this year and the system is working satisfactorily. The PACS will replace our current film system in Radiology and this will be of benefit to the hospital when fully operational. A new Accident & Emergency system has been installed and will be utilised in both hospitals. Financial systems and the I.T. operating network system within the hospital have been upgraded and will be installed in St. Michael's Hospital in the New Year.

It is essential that we develop our information systems from the patient and user's perspective so that we can reduce the level of paper transactions in the hospital and have comprehensive patient records online.

Integration - Networking with other Healthcare Providers

The hospital has continued to develop its links with other healthcare facilities in the region and this is essential to ensure that patient care in the East Coast area is developed on the basis of equity, quality and clinical need. It is worth noting that St. Vincent's University Hospital incorporating St. Michael's Hospital continues to have close working relationships with St. Luke's Hospital, the National Maternity Hospital, The Royal Victoria Eye & Ear Hospital, The City of Dublin Skin & Cancer Hospital, The Royal Hospital, Leopardstown Park Hospital, St. Columcille's Hospital and many other agencies. As part of this integration the government's bed capacity initiative to increase beds to meet the demands on the system is being developed in the region and St. Vincent's University Hospital incorporating St. Michael's Hospital would hope to increase its bed base over the coming years from its current figure of 600 beds to just under 800 beds. Obviously this will depend on the availability of staff and the government's ability to fund the additional cost of the beds proposed in the two hospitals.

At this point it would be useful to mention the transition from the Eastern Health Board to the development of the new Eastern Regional Health Authority and the three Area Boards. From the perspective of St. Vincent's University Hospital incorporating St. Michael's Hospital this has been, to say the least, a major challenge. However, I should make the point that it is going to take time to develop the relationships required to ensure the new structures work. The hospital still has links with the Department of Health and Children and obviously it is essential that all communications between the various funding authorities are developed.

Critical Issues

I think at this stage it would be important to mention critical issues, which continue to be at the forefront of our minds in both hospitals. The main objectives faced by the Board of Directors in 2001 were as follows:

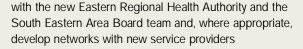
- Manage the growing emergency workload effectively and efficiently
- Deal with the hospital's growing waiting list of patients requiring in-patient and out-patient services
- Implement the new bed plan in order to create speciality home bases to deal with patients in a more effective and efficient manner by creating some protected 1, 5 and 7 day bed's to deal with non-A&E work. It is essential to ensure as part of this new bed plan to maximise income from the reorganisation of the 45 semi-private beds.
- Implement various initiatives to ensure the successful recruitment and retention of staff required to provide services as planned
- Continue the development of our working relationship

Group Chief Executive

Review by the

Executive Review

Review by the Group Chief Executive



- Continue the development of the integration of patient services both at primary and secondary levels through the South East Divisions of Medicines, Surgery, Pathology, Radiology, Anaesthesiology and GP liaison departments.
- Continue to support the National Initiatives i.e. Cancer, Cardiovascular, Liver & Lung Transplantation, Renal etc. having due regard to the particular emphasis on preventative, rehabilitation and ongoing education within the healthcare sector from a patient and staff perspective
- Hospital's €230m development plans, manage effectively and efficiently the implementation of these plans with minimum disruption to patients, services and staff.
- · To manage in the most effective way the transfer of ownership of St. Michael's Hospital to St. Vincent's University Hospital Ltd.

The above objectives have been met overall; however, I have to point out that the new bed plan has been problematic in its implementation. The hospital cannot implement the concept of home bases and specialty protection from A & E admissions without more beds being available in the system. The hospital gives priority to A & E admissions and has reduced, as a result, the level of elective admissions. This has and will continue to have an impact on the hospital's ability to deal with urgent elective admissions that are on waiting lists. This issue is going to be one of our single most challenging issues to deal with in 2002.

I do not intend listing the new clinical and service developments that are mentioned in the various reports that follow my review. However, I do feel it is necessary to indicate there have been many patient service improvements throughout the year.

University College Dublin

I reported last year that the hospital was hoping to finalise and sign a teaching agreement with University College Dublin (UCD). A hospital Task Force was set up under the Chairmanship of Professor Noel Whelan with the Chairman & Honourary Secretary of the Medical Board, the Group Chief Executive and Group Deputy Chief Executive. The President of UCD and representatives of his Corporate Affairs Staff and Professorial Units have been meeting to finalise the teaching agreement between the two institutions. This process has taken some time but progress is being made.

The conferment of honourary Professorships to a number of our hospital consultants, five in all, has been agreed. The hospital has been notified that the following consultants will receive honourary professorships:

Prof. Oliver FitzGerald, Consultant Rheumatologist Prof. Walter McNicholas, Consultant Respiratory Medicine Prof. Diarmuid O'Donoghue, Consultant Gastroenterologist Prof. Michael Hutchinson, Consultant Neurologist Prof. John Hegarty, Consultant Gastroenterologist

It was agreed that hospital research would be developed under three broad headings, which would in general reflect strengths, which are currently available within the hospital. They are:

- a) Inflammation and Infection
- b) Tumour Biology
- c) Physiology and Metabolism

It is recognised that the Education & Research Centre at St. Vincent's University Hospital has played an important role since it opened in 1990. However it is true to say that in some respects it has not reached its full potential. This is not in any way to denigrate the work that has been carried out there to date but over the past few years almost every research centre, be it in a university, a hospital or as a stand alone facility has been forced to reassess its position. This is no different for the St. Vincent's University Hospital Education & Research Centre. For the Education & Research Centre to be a significant player in the area of research there are three key elements that should, in an ideal world, be in place:

- a) There must be strong research interest among the clinical staff.
- b) Sufficient funding needs to be in place.
- c) Positive vibrant links must be sustained with the University.

The Board of Directors has clearly indicated that this matter requires further attention. One of the corner stone objectives of 2002 is to appoint a full time Director to the centre which would be a joint appointment between UCD and the hospital.

St. Vincent's University Hospital's Nursing Department in partnership with UCD continues to play a vital role in the development of the undergraduate and post-graduate nursing programmes and I would like to pay tribute to all

concerned. The hospital was requested by the Department of Health and Children to confirm whom its preferred higher education partner for pre-registration nursing degree education would be. The Board, following considerable discussions and review, indicated to the Department of Health and Children, that the preferred higher education partner is University College Dublin. The hospital continues to develop postgraduate programmes in Nursing with University College Dublin and the following are in place; Critical Care, Cardiovascular, Preoperative, Anaesthesia, Accident & Emergency, Oncology and Renal. Postgraduate programmes are currently being developed in Urology, Gerontology and Gastroenterology.

I would like to take this opportunity to thank the Dean, Professors and Lecturers at UCD for their co-operation and support throughout the year and also to the School of Nursing academic staff.

General Information

Euro Conversion

I am pleased to report that the Euro conversion and implementation plans have worked well at the hospital.

Post Mortem Inquiry

I reported last year that the Post Mortem Inquiry was going to be instigated. The information required from the hospital has been submitted to the Dunne Inquiry and I would like to take this opportunity to thank all staff involved. The terms of reference of the Post Mortem Inquiry were announced and are worth noting: "To review all post mortem examination policy, practice and procedure in this state since 1970 and in particular as it relates to organ removal, retention, storage and disposal by reference to prevailing standards both in and outside of the state".

General Practitioners

I can once again report positively on the development of East Doc out of hours G.P. Service which was officially opened on 7th December 2000. This had continued success with the co-operative of over 50 G.P.s treating over 600 patients per month.

The hospital's G.P. Liaison Committee continues to be an important integral part of our networking system and I would like to thank all concerned who have supported the development of links etc.

Intellectual Property Rights

The hospital will, as part of its overall development, put in place a policy on intellectual property rights. A committee was set up in the hospital to ensure that a review of the draft policy document prepared in relation to intellectual property rights is finalised and brought to the Board of Directors for consideration and approval in 2002.

Accreditation

I had reported the hospital would be seeking accreditation towards the end of 2002 but due to the amalgamation of St. Michael's Hospital and the major project development programme it was decided to defer the accreditation survey until 2003. The following senior hospital executives have been trained as surveyors and will form part of a team of surveyors here in Ireland - Mr. Nicholas C. Jermyn, Mr. Eamonn Fitzgerald, Dr. Lynda Fenelon and Ms. Pauline Doyle. These executives will continue to receive training and participate, when required, with surveyor teams.

Risk Management and Health & Safety

The hospital has paid particular attention to the development of its Risk Management and Health & Safety procedures in the last year and I would like to thank everybody concerned. With the introduction of Enterprise Liability the hospital is taking a particular lead in reviewing what is required. The new system of Enterprise Liability is the name given to the method that is to be used to indemnify health professionals in respect of their medical malpractice exposure in the public health system. The term comes from the idea that it is the Enterprise i.e. the hospital rather than the individual professional who is insured. In the scheme all health boards and publicly funded hospitals will be indemnified directly by the state. This indemnity will extend to cover all healthcare professionals working in those enterprises, in this way it is hoped that there will be greater control of cost and more cooperation with an effective risk management structure established. It will be essential for hospitals to ensure that their risk and quality control systems are developed so that all risks are identified and instances are reported. A key element to this system will be the development of risk management systems in the hospital which I am pleased to say have been to a large extent developed at St. Vincent's University Hospital.

Public Lecturers and School Visits

This has become part of hospital life now to see school children attending day programmes to encourage them to take up careers in the health services and over 1500 school children from 50 schools have participated during 2001.

Review by the Group Chief Executive

The hospital has run a number of public lectures again this year, which have been a great success. The demand for these public lectures and school visits has increased which is a sign of their success. The lectures delivered were the following:

- "Prevention is better than cure" -Heart & Lung Disease
- Asthma
- Common Skin Problems Dermatitis and Psoriasis
- Asthma and Rheumatism
- Pain Management
- The Ageing Process
- · Veins, Arteries and Leg Problems
- Depression & Associated Illnesses
- Diabetes

General Thanks

At this juncture I would like to take the opportunity of thanking the Board of Management which was dissolved on the 31st December 2001. The work of this Board over the last number of years has been, to say the least, phenomenal.

To the Board members who are not new Board of Director members thank you on behalf of the staff, patients and myself for your dedicated service.

I would also like to take the opportunity of thanking the current Board of Directors who took up office in 2001. One can say it has been a particularly challenging year. To Professor Noel Whelan, Chairman of the Board a special thank you on behalf of myself and the management team for all your support. I would like to take the opportunity of thanking Sister Anne MacEneaney (Sister Superior) and the community of Sisters for their support and help over the year and to express my appreciation to Sister Una O'Neill (Superior General, Religious Sisters of Charity) her team and to Sister Eileen Mary Durack (Head of the Provincial

I think this is an appropriate point to note that the Religious Sisters of Charity decided to relocate the various Sisters who lived in the convent on the hospital campus to new accommodation. The Sisters, as part of the hospital incorporation as a limited company, have transferred the convent and provincial house to be used for patient and staff support as well as the land and buildings as assets into the company. They have donated the premises for hospital use. To mark the move from the convent, a celebration mass and function was held on 22nd October 2001 to honour the

Sisters contribution to healthcare at St. Vincent's University Hospital. Professor Whelan presented a Dublin crystal engraved vase to Sister Una O' Neill, Superior of the Sisters of Charity, to mark the occasion.

My thanks to the Eastern Regional Health Authority, East Coast Area Board, Comhairle nOspideal, the Department of Health & Children and the various other healthcare agencies within the region with whom we work. Their ongoing support to the hospital is important and I would like to thank you most sincerely. I should acknowledge at this stage the efforts, commitments and support given to the hospital by our voluntary supporters and also to express my thanks to the Bank of Ireland, Oliver Freeney & Co. (Auditors), Arthur Cox & Co. (Legal Advisers), Marsh Ireland and the Garda Siochana in Donnybrook. I think it is important that I take this opportunity to thank the management team, in particular, Mr. Eamonn Fitzgerald, Group Deputy Chief Executive and all the other senior management and staff in the hospital for their ongoing support. To the Medical Executive, the Chairman and Honourary Secretary of the Medical Board -Prof. Oliver FitzGerald and Dr. Alan Watson and to Ms. Pauline Doyle, Director of Nursing, her team and all the other department heads for their dedicated support throughout the year 2001.

I think a general comment is important here. As you all know the demands of providing healthcare services is not an easy one. Now-a-days the expectations of ourselves and of the patients and the public is unprecedented and the resources to meet these demands and expectations sometimes are not always there and we have to make do with what we have.

I would like to, once again, personally thank staff on behalf of patients and relatives who depend on you and guite often don't get the chance to say thank you for the care, professionalism and dedication that you show in your day to day work.

It is the hospital's wish and I know that of staff to continue to provide the highest level of care possible to our patients and at the end of the day as we consistently say, it is the people who make the organisation. While we know our infrastructure is currently being developed at times we know it is not adequate to meet the needs of patient care today, the staff make up for the difference and I want to thank you most sincerely.

Mr. Nicholas C. Jermyn Group Chief Executive Officer

Executive Review

Members of the Executive Council





Mr. Justin Geoghegan, Mr. N. C. Jermyn



Prof. Oliver FitzGerald

Executive

Members of the



Mr. Seamus Murtagh, Mr. Cormac Maloney, Mr. Eamonn Fitzgerald



Dr. Tom Crotty



Dr. Alan Watson, Ms. Pauline Doyle

Board

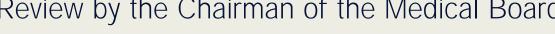
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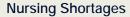
Executive Review

Review by the Chairman of the Medical Board



In this my first report as Chairman of the Medical Board I would like to firstly pay tribute to my predecessor Mr. William Quinlan who was Chairman of the Medical Board for a six-year period up until the end of December 2000. I

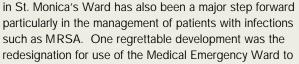
was a member of the Medical Executive throughout the period of Mr. Quinlan's Chairmanship and I can truly say that his dedication to the task, his grasp of often quite complex issues and his balanced and common sense approach were all hallmarks of his period of time as Chairman. I am pleased, therefore, that Mr. Quinlan was asked to become a Director of the new Hospital Board of Directors where we can all gain from his wisdom.



In Mr. Quinlan's report to the Board in 2000 he highlighted a number of concerns including the decrease in nursing numbers and the shortage of hospital beds in South Dublin. In relation to nursing numbers, I am happy to report that the situation has improved largely related to recruitment overseas. These overseas recruits are to be welcomed and are likely to be required for the foreseeable future. Despite the overseas recruitment there is still a dependency on agency nurses to keep nursing numbers adequate. In order to address this issue and so as to encourage more nurses back into the acute hospital system an acute service weighting system should be considered.

Hospital Beds

The shortage of hospital beds in South Dublin remains a critical issue. All hospital beds are now open both here and at St. Michael's Hospital in Dun laoghaire. The government has announced its intention to fund 42 additional beds predominately at St. Michael's Hospital but this will still be insufficient to meet the needs of both acute and elective practice. The medium term plan to increase bed capacity at St. Vincent's University Hospital by building an additional 100 beds is a priority that must be urgently supported. For the present, the Bed Management Committee chaired by Dr. Michael Hutchinson has continued to explore novel measures to allow for an increase in elective activity. These measures have included the creation of a high dependency unit to facilitate both Vascular and Thoracic Surgery. The creation of additional bed capacity



support A & E admissions. As a concept the Medical Emergency Ward deserves support and indeed upon commissioning it was proven successful in improving the co-ordination of patient management. In recent times however, the throughput had reduced largely related to the inability to decant patients following the initial 48 hours. It is hoped that this concept can be reestablished in the autumn of 2002. Finally, the Bed Management Committee now has incorporated representatives from St. Michael's Hospital and a review of the use of facilities there is well underway. The creation of specialist units such as the

Heart Failure Unit and the Chronic Obstructive Pulmonary Disease Units are developments, which will benefit patients on both hospital sites.

Hospital Developments

The year 2001 saw major developments at St. Vincent's University Hospital. The long awaited project development began with the demolition of the nurse's home in January 2001 and the coming on site of the builders McNamara in the early autumn. The consultant staff are delighted with the development and are indeed impressed by the speed at which the development is now proceeding. The Medical Board wishes to acknowledge and thank the members of the project team, Chaired by Mr. Nicholas Jermyn who have worked tirelessly to bring the project development to this stage. While we understand that the hospital site will be very busy from now until the time of the project completion we look forward to the final handing over of the new hospital at the end of 2004, beginning of 2005.

Hospital Governance

The year 2001 also began with major changes in hospital governance. A limited company was formed run by a new Board of Directors. The Board of Directors is ably chaired by Professor Noel Whelan and the Medical Board is represented by its Chairman. The Medical Board would emphasise the importance of strong medical

representation on the Board of Directors, which helps to maintain the good working relationship between the hospital consultants and hospital management. At this point I would like to acknowledge the enthusiasm and leadership skills of Professor Noel Whelan and the dedication of the other members of the board who have contributed substantially during 2001.

In the autumn of 2001 the Religious Sisters of Charity broke with a tradition which has existed since 1834 and moved from the Covent site at the hospital to new accommodation. The Sisters have been most generous in making the old convent available for the use of the hospital as indicated at a ceremony to mark the decision of the Sisters to leave the hospital campus. The Medical Board would acknowledge the long years of association between the Sisters and the consultant staff dating back to 1834 and would also wish for this relationship to grow and to be strengthened over the years ahead.

Finally, in December 2001 the Religious Sisters of Charity announced their intention to attain shared governance between St. Vincent's University Hospital and St. Vincent's Private Hospital. The Medical Board have indicated their support of this concept and look forward to a real and meaningful input into the development of the new hospital governance and management structures.

an Intern and Senior House Officer here at St. Vincent's University Hospital until June 2000 also died tragically. The Medical Board would wish to extend their condolences to all of their families.

Consultant Appointments

There were a number of new consultants who commenced their practice at St. Vincent's University Hospital in 2001. Dr. John Barry commenced his appointment as Consultant Geriatrician between St. Michael's Hospital and St. Vincent's University Hospital. Dr. Linda Collins took up her post as a Consultant Anaesthetist predominately at St. Columcille's Hospital but also with the Breast Screening Programme and St. Vincent's University Hospital. Dr. Mary Crowe took up her post as Consultant Microbiologist between St. Vincent's University Hospital and St. Luke's Hospital. Dr. Seamas Donnelly replaced Dr. Andrew Heffernan as Lecturer in Medicine and Mr. Sean Dudeney became the fifth Orthopaedic Surgeon with sessions at St. Vincent's University Hospital, St. Michael's Hospital and Cappagh Orthopaedic Hospital. Mr. John Russell took up his post as Consultant ENT Surgeon shared between Our Lady's Hospital, Crumlin and St. Vincent's University Hospital and Dr. Nicola Ryall began her appointment as Consultant in Rehabilitation Medicine between the National Rehabilitation Hospital in Dunlaoghiare, St. Vincent's University Hospital and the Central Remedial Clinic. I am particularly pleased to welcome my new colleague in Rheumatology, Dr. Douglas Veale whose post







Condolences

While there were no consultant retirements in 2001 there were indeed times of sadness. Dr. Leanne Stafford who had worked in the Rheumatology Department both as Registrar and Locum Consultant died following a road traffic accident just after she had returned to Australia. Dr. Sam Sassi, who for a number of years, had provided Registrar ENT services at this hospital also died at the end of the year. Finally, Dr. Brian Stuart who has recently been

is divided between St. Vincent's University Hospital, Our Lady's Hospice Harrolds Cross and Cappagh Orthopaedic Hospital.

Additional appointments made with appointees due to take up their posts in 2002 include Ms. Mary Barry, Consultant Vascular Surgeon, Mr. Gerald Lennon, Consultant Urologist, Dr. Eoin Tiernan, Consultant in Palliative Medicine, Dr. Joan Fitzgerald, Consultant Haematologist and Dr. Charles

Department

Review by the Chairman of the Medical Board

McCreery, Consultant Cardiologist. The Medical Board welcomes all of our new colleagues hoping that they will be happy and fulfilled in their professional careers at St. Vincent's University Hospital.

Thanks

Finally, I would like to recognise and thank a large number of consultant colleagues who have been most generous in giving freely of their time and who have been most supportive over the post year. In particular I would like to thank the members of the Executive Committee of the Medical Board and most especially Dr. Alan Watson who has worked tirelessly on behalf of the Consultant Staff. I would also like to thank Mr. Nicholas Jermyn, Group Chief Executive Officer, Mr. Eamonn Fitzgerald, Group Deputy Chief Executive Officer and all the senior hospital management team who all combine professionalism with courtesy and kindness. Lastly, my role as Chairman and the business of the Medical Board are wholly dependent on the excellent support provided by Iris Cranley and her team in the Medical Board Office.

Looking forward to 2002 there are many issues, which we will need to address. These issues will include Shared Governance between the Public and Private Hospitals but will also include Enterprise Liability and Hospital Accreditation. The work on the main hospital development will also begin in the summer of 2002. Finally, we expect 2002 to see new beginnings in our relationship with University College Dublin, in particular with progress on conferment of title, the signing of a new teaching agreement and the further development of plans for a new teaching facility. The role played by Professor M.X. FitzGerald as the new Dean of the Medical School at University College Dublin has been central to the progress now being made. I look forward to the challenges presented by working in an ever-changing healthcare environment.

Oliver FitzGerald Chairman, Medical Board.

Executive Review

Finance Department

The audited Financial Statements for the year ended 31st December 2001 show a deficit of €325,147, out of a total revenue allocation of €120,965,105. The initial Allocation for 2001 was €107,000,000.

Additions to the allocation during the year included:

- National wage agreement etc. €8,681,210
- Waiting list €1,930,009
- Minor Capital €1,015,790
- Breast Screening Programme €634,869
- Cancer Services €549,162
- Cardiovascular Strategy €1,158,065

The result was satisfactory, considering the increased activity and the service developments that occurred during the year.

Income & Expenditure Account

Total expenditure has increased by €23.6 million (21%) to €137.8 million from €114 million. The main variances were in Salaries and Wages €16.85 million (24%) and Surgery and Dispensary €2.70 million (11%) increase.

The following main changes in Income & Expenditure were recorded.

The cost of Agency Nursing has risen to €7.1 million from €5.9 in the year 2000. The additional agency costs include the cover for nurses on leave or courses

Non Pay

Non pay inflation in the hospital was much higher than the national rate of inflation. The main increase in Surgery and Dispensary area is in the cost of Medicines. Drug cost increases include the cost of new Rheumatoid Arthritis medicine and Cystic Fibrosis drugs. The increased usage in both the Liver and the Intensive Care Units were due to additional activity and new medicines. The increased costs in X-Ray expenses include the cost of revenue funded equipment items. Clinical support costs include additional training costs for the University College Dublin (UCD) degree course for nursing and the training of non-national nurses. Computer costs include a new server and network software, as well of the implementation cost of the Euro and a contribution to the new system in place in A&E.

Income

The main change in income was due to a reduction in semi-private income. On the recommendation of the bed management committee and the medical executive a decision was made to reorganise the bed distribution to ensure a better quality of clinical care and more efficient service being provided. This redistribution has resulted in a fall in the level of semi-private income in 2001. It is anticipated that semi-private income will improve in 2002.

Pay

The main reasons for the increase in Salaries and Wages were the National Wage Agreement (P.P.F) €5.5 million and Special Pay awards €8.314 million.

Pay costs also increased due to the filling of the considerable number of vacancies that had arisen in the previous two years.

Control/Budgeting

Speciality budgets continued to be monitored during the year. Most specialities lived within their allocation. While the break even situation for the year was satisfactory, there are significant concerns in relation to expenditures on agency nursing, non-consultant hospital doctors (NCHD) overtime and the cost of technology developments e.g. new medicines, surgical implants etc. The hospital's base funding is not sufficient to meet the current demands in these areas.

Finance Department



An allocation of €1.7 million was received in 2001. This was allocated to cost of developing clinical specialties, the Liver Transplant Programme and the Rheumatology Service.

Activity

- Admissions increased by 108 (0.4%) to a total of 30,381.
- Operations increased by 380 (2.4%) to a total of 15,856.
- 35 Liver Transplants were performed in 2001.
- The inpatient waiting lists at the year end totalled 2,897 (Year 2000 was 2,991).

The number of patients removed from the waiting list in 2001 was 2, 384.

Occupancy levels were 100.2% - an increase of 2.4% on last year.

Capital Expenditure

Construction of the main hospital development programme (€203 million) commenced in September 2001. Expenditure on the main project development during 2001 amounted to €6,250,718. €4,197,718 was spent on construction costs and €2,053,000 on professional fees and other costs.

Additional funding was negotiated for the construction of the car park. The total cost of the car park is €23.5 million. The Department of Health and Children (DOHC) are contributing €5.1 million towards this project. A minor equipment expenditure grant of €1,015,790 was received in the Revenue allocation.

An IT grant of €425,362 was received covering network upgrades and systems integration.

Euro

Preparation during the year included the upgrade and testing of all software systems. The changeover at the year-end proceeded without any difficulty.

A revenue and capital grant amounting to €190,460 was received to cover the costs involved.

Casemix

The hospital received a positive adjustment of €135,862 in its allocation in 2001 and the 2002 allocation shows a positive increase of €365,000. This reinforces the fact that the complexity of the activity within the hospital continues to increase and that the hospital is providing a cost effective and efficient service.

This complexity is measured by a case-mix index. The index for the hospital has increased from 1.26 in year 1998 to 1.33 in the year 2001.

Future Developments

The recent links established with St. Michael's Hospital, open opportunities to develop joint services. Financial software systems are to be upgraded in the near future and it's hoped to install similar systems throughout the group.

Cormac Maloney
Financial Controller.

Executive Review

Summary Financial Statement

For the year ended 31st December 2001

Income & Expenditure a/c	2001	2000
Income	€	€
Patients Income	4,868,229	6,462,549
Other Income	4,012,347	3,495,022
	8,880,576	9,957,571
Grants Amortised		
Building & Equipment	7,706,467	4,878,461
Expenditure		
Salaries & Wages	86,742,728	69,896,115
Surgery & Dispensary	26,772,029	24,073,775
Provisions	1,349,527	1,156,602
Domestic	4,464,321	4,306,911
Administration	3,629,108	2,236,596
Maintenance of Buildings etc	1,280,762	1,423,980
Bank Interest & Finance Charges Miscellaneous	(153,727) 6,090,080	(60,607) 6,050,878
Amortisation - Buildings & Equipment	7,706,467	4,878,461
Total Expenditure	137,881,295	113,962,711
Total Experiance	137,001,273	110,702,711
Excess of Expenditure over Income	(121,294,252	(99,126,677)
Refundable from the ERHA	120,969,105	98,545,642
Income & Expenditure (Deficit) / Surplus	(325,147)	(581,035)
Accumulated (Deficit) / Surplus as at 31/12/01		
(Deficit) / Surplus for the Year	(325,147)	(581,035)
Surplus carried forward from previous years	(88,035)	493,000
Accumulated (Deficit)	(413,182)	(88,035)
Balance Sheet as at Year End		
Assets		
Fixed Assets	216,884,297	213,488,522
Current Assets	25,250,439	22,416,429
Total Assets	242,134,736	235,904,951
Liabilities / Reserves / Capital		
Creditors	24,114,496	22,626,449
Capital - Sisters of Charity	173,968,554	178,896,331
Capitalisation Accounts	44,416,162	34,421,500
Accumulated (Deficit) / Surplus	413,182	88,035
	242,912,394	236,032,315

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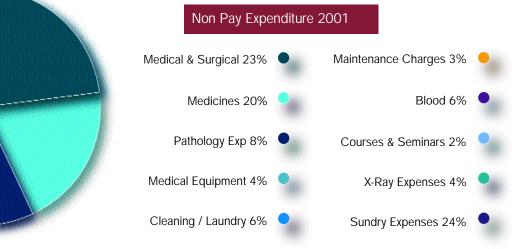
Summary Financial Statement

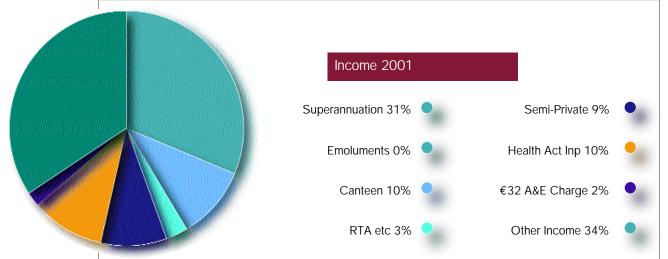
Financial Analysis

Financial Analysis





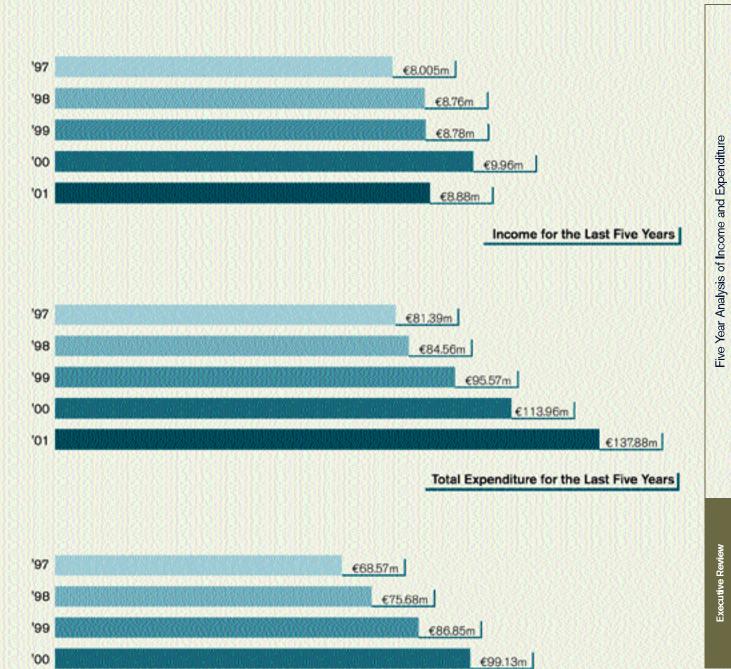




Executive Review

Five Year Analysis of Income and Expenditure





Net Expenditure for the Last Five Years

€121.29m

Patients and Relatives

Organisational (Service) Chart



Administration

Departmental Managers

Group Deputy Chief Executive

Group Chief Executive Officer

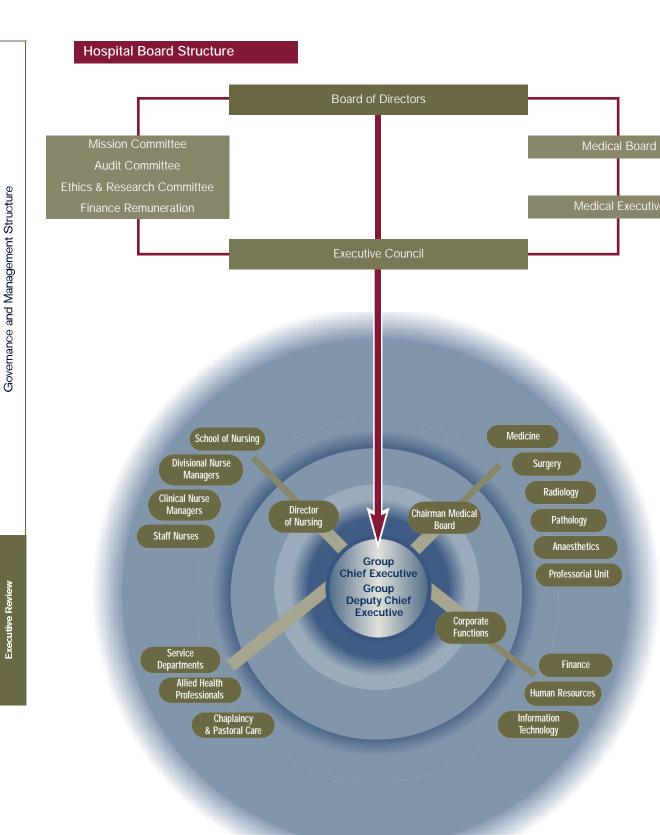
Hospital Management Executive Council

Board of Directors

Religious Sisters of Charity (shareholders)

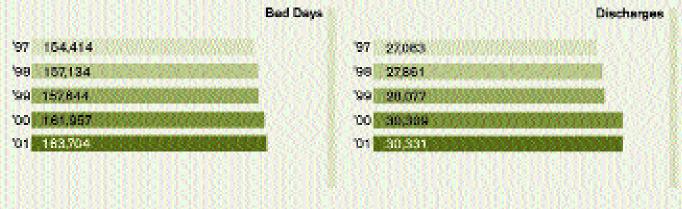
Eastern Regional Health Authority

Department of Health and Children



Patient Focused Care Primary Service Providers Hospital Management/Executive Council Department Managers Board of Directors Group Chief Executive Officer Superior General Sisters of Charity Group Deputy Chief Executive Eastern Regional Health Authority Department of Health and Children

Statistics



		issions Average atay ways.
97	27,036	97 (5.7) (1000) (1000)
98	27,903	28 5.6
199	28,106	99 5.6
00	30,273	00 53
01	30,361	\(\text{\tin}\text{\texi\text{\texi}\text{\text{\text{\texi}\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex

	% Occupancy		OPD Attendances
97 98.4%	1000000 P	97	05,861
98 100.7%		98	90,792
'99 28.9%	MARKAGA .	99	80,830
100 97.914	NECESSARY	00	90,287
01 100.2%		01	90,201

Cost per Patient (per week)
97 €2,325
'98 <u>€2,513</u>
'99 €2,840
'00 e3.157
'01 G4,731

Executive Review

Department Statistics



Department			1999	2000	2001
CARDIOLOGY	Inpatients (incl. Day-care)	Admissions Discharges	1,513 1,696	1,400 1,560	1,327 1,471
	Outpatients	New patients Total attendances	891 4,381	854 4,411	829 4,370
NEPHROLOGY	Inpatients (incl. Day-care)	Admissions Discharges	715 609	688z 582	729 574
	Outpatients	New patients Total attendances	178 1,272	163 1,262	148 1,287
ONCOLOGY	Inpatients	Admissions Discharges	1,080 1,122	1,283 1,301	1,026 1,034
	Outpatients	New patients Total attendances	171 1,946	152 1,784	191 1,735
RADIOTHERAPY	Outpatients	New patients Total attendances	108 218	105 249	124 294
HAEMATOLOGY	Inpatients	Admissions Discharges	134 200	179 239	255 282
	Outpatients	New patients Total attendances	146 965	163 1,247	137 1,206
ST ANNE'S DAY CENTRE (ONCOLOGY/HAEMATOLOGY)		Admissions Discharges	3,173 3,173	3,645 3,645	4,329 4,329
	PLUS ward patients treated	in centre	114	48	17
GENERAL MEDICAL		New patients	19		
OLIVERAL WILDIGAL		Total attendances	75		

Department Statistics

Department			1999	2000	2001
DOVOLHATOV					
PSYCHIATRY	Inpatients	Admissions	223	292	237
		Discharges	271	313	259
	Outpatients	New patients Total attendances	324 2,602	337 2,514	324 2,514
	Day Centre	Attendances	2,478	2,302	2,023
NEUROLOGY	Inpatients(incl. Day-care)	Admissions	143	201	171
	inputionis(inol. Day dare)	Discharges	217	280	212
	Outpatients	New patients	986	856	842
		Total attendances	3,607	3,478	3,298
DERMATOLOGY	Inpatients (incl. Day-care)	Admissions	944	1,152	1,110
		Discharges	949	1,157	1,116
	Outpatients	New patients	792	826	820
		Total attendances	2,358	2,655	2,532
	ı				
RHEUMATOLOGY	Inpatients (incl. Day-care)	Admissions	409	554	745
		Discharges	367	477	707
	Outpatients	New patients Total attendances	827 5,932	919 5,971	953 6,086
		iotal attendances	3,732	3,771	0,000
RESPIRATORY &					
GENERAL MEDICINE	Inpatients (incl. Day-care	Admissions Discharges	2,259 2,097	2,323 2,292	2,381 2,323
	Outpatients	New patients Total attendances	692 4,420	605 4,742	613 5,179
ENDOCRINOLOGY					
	Inpatients (incl. Day-care)	Admissions Discharges	434 383	501 425	537 506
	Outpatients	New patients	346	337	340
	Outpatients	Total attendances	2,405	2,416	2,439

Department			1999	2000	2001
DIABETES CLINIC		New patients Total attendances	284 3,370	288 3,352	270 3,370
DIABETES CENTRE		Attendances	2,586	3,273	3,130
GERIATRIC MEDICINE	Inpatients	Admissions Discharges	451 470	455 488	426 457
	Outpatients	New patients Total attendances	228 936	269 860	261 793
GASTROENTEROLOGY & GENERAL MED	Inpatients (incl. Day-care)	Admissions Discharges	2,228 2,142	2,342 2,289	2,438 2,409
	Outpatients	New patients Total attendances	985 3,600	932 3,575	923 3,608
GENERAL SURGERY	Inpatients (incl. Day-care)	Admissions Discharges	5,538 5,474	5,765 5,728	5,213 5,149
	Outpatients	New patients Total attendances	3,418 15,223	3,495 15,063	3,606 14,672
LIVER CLINIC		New patients Total attendances	140 1,351	130 1,570	128 1,590
HEPATITIS C CLINIC		New patients Total attendances	68 871	53 777	50 869
COLORECTAL CLINIC		New patients Total attendances	44 507	47 569	67 684

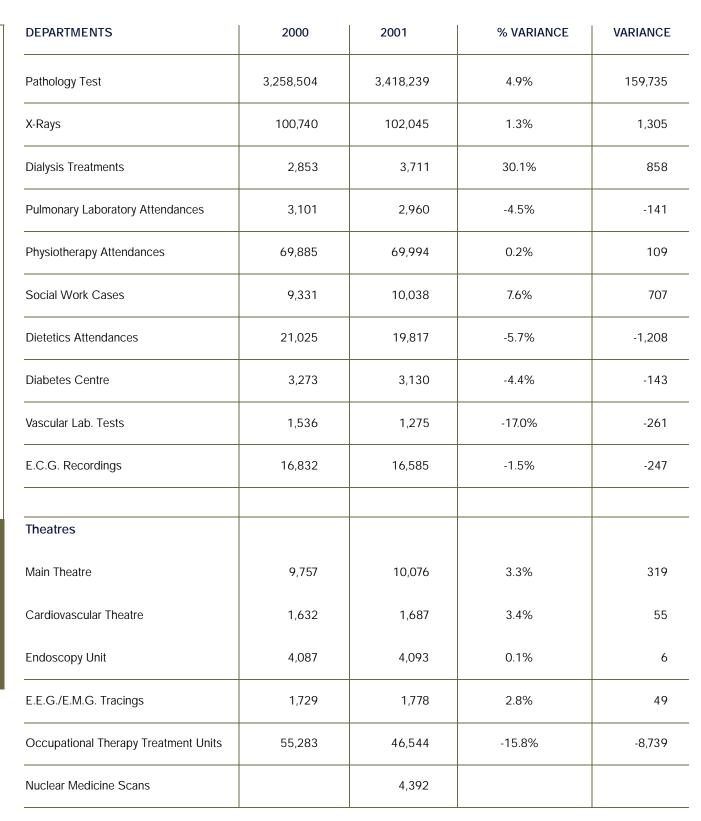
Department Statistics

Department			1999	2000	2001
PAIN R ELIEF	Inpatients (incl. Day-care)	Admissions Discharges	363 371	404 406	412 413
	Outpatients	New patients Total attendances	170 2,380	169 2,301	148 2,520
VASCULAR SURGERY	Inpatients (incl. Day-care)	Admissions Discharges	530 548	637 661	540 563
	Outpatients	New patients Total attendances	608 3,086	580 3,272	549 3,028
ODTHODAEDIC CUDCEDV					
ORTHOPAEDIC SURGERY	Inpatients (incl. Day-care)	Admissions Discharges	1,769 1,762	1,844 1,834	1,911 1,901
	Outpatients	New patients Total attendances	3,030 11,023	3,169 11,478	3,167 11,821
HD01 0 0V					
UROLOGY	Inpatients (incl. Day-care)	Admissions Discharges	2,357 2,355	2,445 2,451	2,401 2,405
	Outpatients	New patients Total attendances	1,542 5,754	1,425 5,477	1,250 5,251
PLASTIC/MAXILLOFACIAL					
SURGERY	Inpatients (incl. Day-care)	Admissions Discharges	919 924	931 939	880 888
	Outpatients	New patients Total attendances	932 3,244	1,004 3,550	1,052 3,668
THORACIC SURGERY	Inpatients (incl. Day-care)	Admissions Discharges	86 109	147 159	176 183
	Outpatients	New patients Total attendances	153 514	255 640	266 706

Department			1999	2000	2001
GYNAECOLOGY	Inpatients (incl. Day-care)	Admissions Discharges	341 355	431 444	314 336
	Outpatients	New patients Total attendances	692 2,149	708 2,176	699 2,099
OPHTHALMOLOGY	Inpatients	Admissions Discharges	487 482	443 436	461 457
	Day-care	Admissions Discharges	1,473 1,473	1,526 1,526	1,611 1,611
	Outpatients	New patients Total attendances	897 3,121	702 2,651	745 2,372
ORTHOPTICS		Total attendances	551	573	607
A & E					
71 L	Patients treated in Ophthalmology Dept.	Total attendances	1,229	1,066	1,153
ENT CUROERY					
E.N.T. SURGERY	Inpatients (incl. Day-care)	Admissions Discharges	512 505	670 667	727 726
	Outpatients	New patients Total attendances	1,101 2,574	903 2,238	884 2,134
AUDIOMETRICS		Tests	504	516	415
DENTAL SURGERY					
JEHNIE GOKGEKI	Inpatients	Admissions Discharges	24 23	15 10	24 20
	Outpatients	New patients Total attendances	14 21	5 9	0
OUROPORY					
CHIROPODY		Total attendances	717	690	637

Diagnostic / Treatment

Diagnostic / Treatment



(New format being used to collate Scans:figure given is actual number of scans, previous years figures related to units)

Executive Review

Health and Safety Review

St. Vincent's University Hospital is committed to providing a safe and secure environment for patients, visitors and staff. The strategy of the hospital is to ensure that the management of health and safety within the workplace becomes a priority at all levels within the organization. Our aim is not only to meet but exceed our statutory obligations, through our working partnerships with internal and external specialists in the relevant areas.

To this end the hospital is committed to a Health and Safety management and communication structure which combines the inputs of local "Satellite" Safety Groups in key areas with a central Health & Safety Committee. The Health & Safety Committee includes co-ordinators of Satellite Groups supported by key hospital personnel and external specialists.

In line with the ongoing development and review of the structure a new Satellite Safety Group was established to include representation from administrative areas within the hospital. This addition to the structure reflects the contribution that this sizeable group of employees can make. The Physiotherapy Satellite Group was broadened to include participation from all Allied Health Professionals including Occupational Therapy, Speech and Language Therapy, Pharmacy, EEG, ECG, and the Department of Nutrition and Dietetics.

The Health and Safety Committee works closely with the Hospital Risk Management Committee in identifying opportunities for risk improvement. In 2001 the agreed focus was on Back Care, Prevention of Needlestick injuries,

areas by engaging in an ongoing process of risk assessment and review.

Also in April hospital staff exercised their entitlement under section 13 of the Safety Health and Welfare at Work Act, 1989, to elect a staff safety representative. The hospital fully supports and encourages participation and co-operation in this way and looks forward to working closely with Ms. Annette Geraghty during her 2nd term of office.

In September, the hospital appointed Ms. Nuala Gannon, Occupational Psychologist. The recruitment of a dedicated Occupational Psychologist reflects management's commitment to developing appropriate systems of work to ensure that the psychological needs and welfare of employees are appropriately catered for.

In October, the hospital was delighted to participate in European Safety Week. The hospital used the week to highlight internal safety management and communication structures. The hospital published "Safety is...", a Health and Safety newsletter to complement this event. We look forward to further issues of this newsletter in the future.

Finally, the hospital recognises that the proper management of Health and Safety in any workplace relies on the cooperation and efforts of both management and staff. In this regard the hospital acknowledges, with thanks, the input and contribution from staff during 2001.

Pauline Dempsey Health & Safety Co-ordinator.









the Management of Challenging Behaviour in the Workplace, Fire Safety and Health and Safety issues relating to the Hospital Redevelopment Programme. The hospital is happy to report that significant progress was made in each area and the hospital is committed to progressing further toward better and best practice in 2002.

In April 2001 the hospital launched the revised Health and Safety Statement. It is the intention of the hospital to maintain the relevance of Safety Statements to functional

It was with regret that the Hospital accepted the resignation of Pauline Dempsey, Health and Safety Co-ordinator, in November of 2001. During her term of office Pauline made a significant contribution to the Health and Safety Programme at the hospital and we wish her well in her new position. The hospital recognises the significant contribution that a designated Health and Safety Co-ordinator can make and will continue to resource the Safety Programme in this regard.

Mission Committee

With the formation of the Limited Company early in 2001 the Mission Committee became a committee of the Board of Directors. Its purpose remains as before, which is to assist in fostering an environment where staff bring focus to the expression and implementation of the Mission, Philosophy and Core Values of the Sisters of Charity

Terms of Reference

Health Service within the hospital.

The terms of reference of the Committee were re-drafted to ensure that they continue to be appropriate for St Vincent's University Hospital, both in the changing times and in the current development of the hospital. The terms of reference were accepted by the Board.



On 23rd January the Foundation Day of the hospital was celebrated with a Service of Thanksgiving which was greatly enhanced by our excellent Choir under the direction of Ms Marie Culliton. Mr Gerry McGuirk provided the music.

Mission Effectiveness Programmes

Staff are completing the programmes on a regular basis. This forms one of our most important objectives so that ultimately everyone is fully aware of Mission and Values integration.

Golf outings

The Committee in association with Hospital Management organised a number of free places for staff in two of the annual events.

Commemorative Service

On September 27th the Feast of St Vincent de Paul a Commemorative Service took place for the staff members who died during the past year and for those who were bereaved.

Committee Members

The Committee welcomed Sr Eugene Butler from the Board of Directors as new chairperson and Ms Gemma McCrohan, also from the Board, as a member.

The Committee expressed thanks to Mr Cathal McAllister our outgoing Chairman, for his committed service to the committee for the last six years and wish him well in the

As we move forward in Mission we remain focused on the needs of our patients and staff. Together we can keep the spirit of Mary Aikenhead alive as we integrate our Core Values of Human Dignity, Compassion, Justice, Quality and Advocacy into all our activities. To this end we shall be reviewing our Mission Statement to ensure that it continues to be meaningful at the present time and into the future.

Ethics and Medical Research Committee



The Ethics and Medical Research Committee review all clinical and non-clinical trials to safeguard the rights and safety and well being of all trial subjects. The committee includes representatives from Pathology, Surgery, Medicine, Nursing, Pharmacy, Radiology, Anaesthetics, Legal, General Practice, Administration and the Board of Directors. During 2001 the Committee met on 11 occasions and reviewed 99 protocol submissions. These included; 32 Pharmaceutical Company-sponsored Clinical Trials and 67 non-sponsored studies. Following the review and incorporation of suggested revisions, all studies were approved. The

Committee is now reviewing protocols originating from St. Michael's Hospital. As part of his role as Clinical Risk Facilitator, Dr. Richard Assaf has taken on the task of coordinating the review of all adverse events arising during clinical trials.

Copies of the Standard Operating Procedures and protocol submission forms are available on disk/hard copy from Ms Joan Mc Donnell, Ethics Office, ext: 4117

(joan.mcdonnell@ucd.ie).

Executive Review

Hospital Development Review

Following on from last year's report, it gives me great pleasure to be able to indicate that the hospitals development programme has progressed well in 200. The main contractors came on site on 3rd September 2001 and construction work on various elements of the programme have gone exceptionally well to-date. This has been helped by good weather and the efforts of the Project Managers and the Design Team in developing more efficient programmes for the works. There is no reason to believe that the project will not be delivered on time as proposed indeed, if the current trend continues the initial works of Psychiatry, Car park and the Access Roads will be completed ahead of contract.

I think it is important to remind ourselves of the various stages of the project and what is included in Phase 1, as well as the programme of work:

Stage 1:

Development Brief	completed
Stage 2:	
Development Control Plan	completed
Stage 3:	
Outline Design Stage	completed
Stage 4:	
Detailed Design	completed
Stage 5:	
Tender & Contract	completed
Stage 6:	
Construction (Main contract)	started 3rd Sept 2001
Stage 7:	
Commissioning process	started

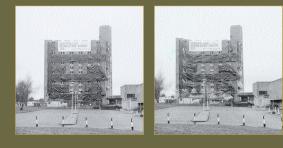
- Diagnostic Imaging (PACS)
- Psychiatric Unit (54 beds Acute assessment unit)
- Car Park (Multi-storey + underground)
- Pharmacy
- Mortuary
- Catering
- · Fire Safety (includes replacement of all hospital lifts, 7 in total)
- · New roads and links and other infra-structure
- · Breast Check Clinic

Priority Programme

The following dates are those contracted with the main contractor. It is worth noting that our consultants are actively pursuing with the contractor the opportunities that exist to improve upon these dates wherever possible. This is being done with great care to ensure that the development works are delivered to the optimum programme without jeopardising our contractual position or incurring additional cost.

The following project work has either been completed or is ongoing:

- Temporary car-parks
- Oncology/Haematology in-patient and Day Care Unit
- Renovation work in the Intensive Care Unit (installed Air conditioning and Aspergillus protection)
- · Demolition of Nurses Home completed
- Plans for the transfer and decanting of Medical Records









Hospital Development Review

What is in Phase 1?

- Intensive Care / High Dependency Unit 18 beds
- Accident & Emergency
- · Ambulatory Day Care Outpatient Department Day care 8 Theatres & 2 Day Theatres Specialised Units (to include i.e. Breast Unit, Hepatitis C Unit, Cystic Fibrosis Unit, Liver Transplant, Lung Transplant Units etc.
- Pathology

to a new portacabin facility on St. Anthony's campus

- · Dermatology Day facilities
- Plans for the expansion of St. Anthony's facilities to accommodate Speech & Language Therapy and Rehabilitation Offices
- Re-organisation of the Supplies department decant to allow the commencement of construction on the new
- Pharmacy facility

Hospital Development Review

The above are just a few of the projects that have been completed and undertaken in 2001. The expenditure todate on the project development is in excess of €6m in 2001. It should be noted that the proposed cost of the

multi-storey and underground car parks will be €23.5m, of which the Department of Health & Children are contributing €5.1. The balance is being funded through bank borrowing. It should not go unnoticed that the implosion of the Nurses Home which occurred in 2001 was to create space to allow for the multi-storey car park development, to facilitate the main contractors compound and to provide space for the re-routing of the road so that the main building could be started in 2002. The implosion took place on 21st January 2001 and following the initial unsuccessful implosion, the longstanding nurses home fell to the ground with the introduction of a ball and chain.



McNamara. I would also like to say thank you to Dunwoody & Dobson and to the other sub-contractors involved in various works on the campus. I would like to thank all the staff involved in the project office for their

support, help and commitment. A particular thank you to the Project Management Consultants, Cyril Sweet Boyd & Creed who, as you know, commenced work on the project in September 2000.

Mr. Nicholas C. Jermyn Chairman Project Team

The hospital has spent a considerable amount of time, before the contractors came on site, reviewing of the hospitals design plans with the various users. I am confident this will be time well spent and will stand to us in good stead. The success of the project will depend on the continued input and co-operation of user groups.

A key issue for the hospital and its development is the ability of the hospital to try and continue to provide services while construction takes place on site which is a challenge in itself and will require staff to be flexible and tolerant, as well as patient. I do think we will have to face many issues in the coming year particularly when the main hospital building programme starts.

The main challenges facing the hospital now in relation to the development programme will be keeping the overall project within budget and to ensure that the project stays on schedule.

I would like to take this opportunity to thank the members of the Design Team:-

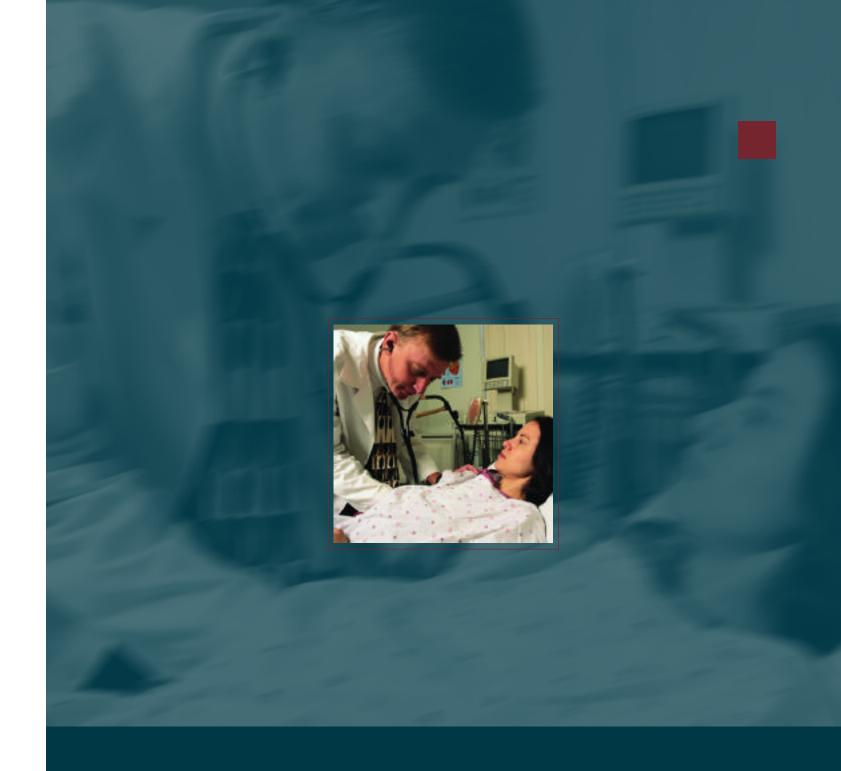
Scott Tallon Walker / YRM (Architects), J. V. Tierney & Co., (Mechanical & Electrical Engineers), ARUP (Civil & Structural Engineers) and Bruce Shaw Partnership (Quantity Surveyors) and the main building contractors,

Project Plan

,		
	Start	Estimate Finish
Site possession	03/09/01	
Site Set-up -		
Main compound	20/08/01	
Psychiatric Building	03/09/01	Completion 12/02
Temporary Car Parks	03/09/01	Completion 11/01
Boundary Treatment	03/09/01	Completion 11/02
Multi-storey	26/11/01	Completion 12/02
Pharmacy	10/12/01	Completion 12/02
Mortuary	20/05/02	Completion 11/02
Breast Check Clinic	02/09/02	Completion 10/03
New roads and links	26/11/01	Completion 01/03
Temporary		
Hospital Entrance	16/09/02	Completion 11/02
Main Hospital		
Building	04/11/02	Completion 04/05
Waste Marshalling		
Yard	06/01/03	Completion 10/03

Hand over:

Phase 1 - Project new building	Autumn 2004
Phase 1 - Refurbishment	March 2005



St. Michael's Hospital Dún Laoghaire

Nicholas Jermyn.

JI.

Executive Review

St. Michael's Hospital Dún Laoghaire

Following the announcement by the Sisters of Mercy and the Sisters of Charity to review and change the governance arrangements of public hospitals under their control, St. Michael's Hospital was transferred to the

Sisters of Charity in March 2001. The Board of Management of St. Michael's Hospital was dissolved in March 2001. At its final meeting, Sr. Helena, Provincial Leader of the Sisters of Mercy, acknowledged the enormous contribution and commitment of the Members of the Board of Management to the Sisters of Mercy and St. Michael's Hospital since the Board was established. Responsibility for the governance of the hospital was assumed by the Board of Directors of St. Vincent's University Hospital Limited. Mr. Nicholas Jermyn was appointed to the post of Group Chief Executive Officer.



Following the transfer of trusteeship, the Chief Executive Officer of St. Michael's Hospital, Mr. Kevin O'Connor, announced his decision to take early retirement to explore other aspects of the health service. At a function to mark his retirement from St. Michael's Hospital in November 2001, Mr. O'Connor's contribution and dedication to St. Michael's Hospital since his appointment in 1978 was acknowledged. Mr. Seamus Murtagh, former Financial Controller and Deputy CEO was appointed as General Manager to the hospital, reporting to the Group CEO, Mr.

Senior management changes in St. Michael's Hospital during 2001 included the appointment of Mr. Ken Bale who replaced myself as Financial Controller, and Mr. Ian Maguire as Personnel Manager. Mr. David Mulvin replaced Mr. Tom Owens on the Executive Council. The contribution of Mr. Owens on the Executive Council was noted

During 2001, the hospital maintained revenue expenditure within its approved allocation from the ERHA. No funding was received in respect of capital requirements and this is now placing a major strain on hospital resources. In relation to information technology, the hospital continues to upgrade and plan for future developments. In 2001, the hospital's Radiology information system was upgraded and the hospital was wired for a hospital information system. The Eastern Regional Health Authority has approved the

installation of a Patient Administration and Financial System. The installation of these systems will commence in 2002.

Consultant appointments during the year included Dr Seán Dudeney, Consultant Orthopaedic Surgeon, Dr J. J. Barry, Consultant in Geriatric Medicine and Dr Mary Crowe, Consultant Microbiologist.

In 2001, beds were opened in the former St. Michael's Private Hospital under the St. Vincent's Hospital Waiting List Initiative Programme. Discussions are continuing with the Eastern Regional Health Authority to open 40 additional public beds in the former St. Michael's Private Hospital under the recently announced increased bed capacity development 2002.

The Department of Nursing is dedicated to the provision of high quality nursing care to the patients in St. Michael's Hospital and to the provision of under-graduate nurse education. It is a difficult time for nursing at present with particular difficulties in the recruitment and retention of staff. Although we did encounter difficulties with recruitment and retention during 2001, currently there are no nursing vacancies in St. Michael's Hospital. In 2002, nursing strategy will continue and develop in the following areas: nurse management, education, practice development, quality and audit, with the overall aim of improving nursing care to patients.

While activity for the year 2001 was broadly in line with the Hospital Provider Plan, demand for health services continues to increase. This is reflected in increased admissions and demand for diagnostic services.

In 2001, the key challenges for St. Michael's Hospital were the need for investment in the hospitals infrastructure, services and equipment. The hospital, like so many other healthcare agencies, has outgrown its current facilities, and this is one of the key issues that requires urgent attention.

The hospital continues to raise money through its voluntary fundraisers. I would like to thank the members of the Fundraising Committee, and all those who attended functions and donated resources to St. Michael's Hospital.

A special thanks must go to the Chair of the St. Michael's Fundraising Committee, Mrs. A. O' Reardan

I would like to extend my sincere thanks on behalf of the Executive Council and the Board of Directors to all the staff in the hospital who have demonstrated such tremendous commitment and professionalism in their efforts to meet the needs and demands of management and patients.

On my own behalf, as General Manager, I would like to express my gratitude to all the staff for their commitment to the organisation and to the delivery of care to patients and their relatives, and for their support during the year in St. Michael's Hospital.

Mr. Seamus Murtagh General Manager St. Michael's Hospital Dún Laoghaire

	2000	2001
Admissions	5,594	6,007
Day Cases	2,615	2,596
Other	2,979	3,411
O.P.D.	17,096	16,749
A&E	24,570	24,214
Pathology Tests	902,873	1,001,758
Radiology	26,999	30,525
Bed Days	23,401	26,910
Theatre Operations	1817	1996
% Occupancy	80.5	81.1
Average Length of Stay (days)	4.2	4.3









Michael's Hospital Dún Laoghaire

Organisational Chart St. Michael's Hospital



