

**NATIONAL PAEDIATRIC HOSPITAL DEVELOPMENT BOARD  
("NPHDB" or the "Board")**

**Minutes of the NPHDB Board Meeting held on Wednesday, 3 July 2019  
from 16.00 to 17.40  
Herberton Boardroom, St. James Walk, Rialto, Dublin 8**

**Attendance (Board)**

Fred Barry (Chairman)  
Tim Bouchier-Hayes (Vice Chair)  
John Cole  
Karl Kent  
Brian Fitzgerald  
Lorcan Birthistle  
Jonathan Hourihane  
Anne Butler (by telephone)

**Attendance (Other)**

Phelim Devine, Interim Project Director  
Jack Golden, Interim Chief Officer  
Norman Craig\*, Commercial Advisor  
Ed McIntyre\*, Construction Director  
Declan Holmes\*, Commercial Director  
Neil Vaughan\*, Project Controls  
Emma Curtis\*, Medical Director  
Richard Fitzpatrick\*, Director of Project Controls  
Jim Farragher\*, Finance Officer  
Ray Hunt, On behalf of HMP Secretarial Limited – Board Secretary  
Bridget Gallagher, On behalf of HMP Secretarial Limited – Board Secretary

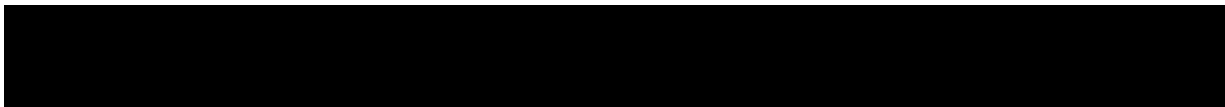
**Apologies**

Paul Quinn  
Liam Woods

*\*For part of the meeting*

<b>1.0</b>	<b>Quorum &amp; Chairman</b>
	The Chairman noted that a quorum, being five Board Members, was present and the meeting proceeded to business.
<b>2.0</b>	<b>Declarations of Interest or Conflicts of Interest</b>
	In accordance with Section 19 of Statutory Instrument 246/2017, the Board members confirmed that there were no new declarations of interest or conflicts of interest to be disclosed.
<b>3.0</b>	<b>Previous Minutes</b>
<b>3.1</b>	<p>The Board reviewed the Minutes of the Board Meeting held on 5 June 2019.</p> <p>It was requested that the Board's concern regarding the high volume of health and safety incidents on site, as expressed at that meeting, be minuted.</p> <p>Following consideration, <b>IT WAS RESOLVED THAT</b> the Minutes were approved for signature by the Chairman.</p>
<b>3.2</b>	<p><b>Action Items arising from Minutes</b></p> <p>The Board received an update in relation to the current actions on the Action List and the Secretary undertook to amend the Action List in accordance with the comments provided.</p>
<b>4.0</b>	<b>Project Status</b>
	<p>[REDACTED] The Board discussed actions necessary in response to BAM's aggressiveness, noting resourcing and costing implications for the Project.</p> <p>A significant increase in the frequency of claim notifications in the preceding month was highlighted, and that BAM were seeking to apportion blame for the current delay with the Employer's Team.</p> <p>It was advised that the issuing of a Memorandum to the Government regarding the implementation of the PwC recommendations was expected during July 2019.</p> <p>Confirmation was provided that Jack Golden had been appointed as Interim Chief Officer and that recruitment of a Chief Officer was expected to complete in July/August 2019.</p> <p>It was noted that the CHP&amp;P Board had ratified the decision on 2 July 2019 for medical equipment for the NCH to be procured using traditional procurement.</p>
<b>4.1</b>	<b>Connolly Update</b>
	<p>The Board was advised that installation of Group 3 and 4 equipment at the Connolly Outpatient and Urgent Care Centre ("OP&amp;UCC") had been completed and that final snagging and post substantial completion works were being finalised to support the opening of the centre by CHI on 31 July 2019.</p> <p>It was confirmed that the level of disappointment with the quality standard of certain finishes at Connolly OP&amp;UCC on handover had been formally communicated to the Design Team. The Board was updated that remedial works had been completed since then and</p>



	<p>that the quality had significantly improved. The Board emphasised the need for lessons learned to be applied to the remaining sites. It was highlighted that the OP&amp;UCC Design Team had acknowledged the feedback of the Board and were applying these lessons learnt to Tallaght OP&amp;UCC. It was advised that the NCH Architectural Team had visited Connolly with the Executive to experience first-hand the lessons learnt to ensure these were implemented for the NCH.</p> <p>The Board noted that the Connolly OP&amp;UCC would run on limited hours to begin with for Urgent Care, but the Outpatient department would operate full hours.</p>
<b>4.2</b>	<b>Tallaght Update</b>
	<p>The Board was provided with an update in relation to ongoing and completed works on the Tallaght site.</p> 
<b>4.3</b>	<b>NCH Update</b>
	<p>The Board was updated on completed and ongoing works on the NCH site by reference to excavation, floor plate and programme status.</p> <p>It was advised that BAM had submitted a monthly update of their programme comprising a realigned critical path and substantial completion update and that this was being reviewed by the Programme experts. The Board clarified that the current contractual date for the completion of the works should be used in all communications with the Contractor. The date inclusive of Employer's contingency may be used elsewhere.</p> <p>The Board referred to the concern it had expressed previously regarding the high number of health and safety incidents occurring on site. By way of update, it was advised that there were no incidents to report in respect of June 2019. It was confirmed that Safety Leadership Team meetings, with representation from all key stakeholders, were taking place and Senior Health &amp; Safety Manager meetings were taking place each week, along with on-site walk throughs. It was advised that in the previous month, presentations had taken place with all contractors and foremen reiterating the importance of Health and Safety.</p>
<b>4.4</b>	<b>Commercial Update</b>
	<p>The Board was provided with a summary of the Project Budget Report.</p> <p>The position with respect to contingencies and opportunities was noted. It was confirmed that close engagement with the Design Team was taking place to avoid Change Orders similar to those for Connolly being required. It was confirmed that discussions were ongoing with the Design Team with respect to Connolly Change Orders. The Board emphasised the importance of exercising close oversight of the OP&amp;UCC Design Team.</p> <p>It was explained that, whilst there was a reduction to the number of Early Warnings recorded, 10.3 notices were now instead being issued by BAM. It was confirmed that the contractual process in relation to these was being followed.</p> <p>The Board was advised that a final revised baseline programme was awaited from BAM in order for a detailed cashflow programme to be prepared by the Executive and submitted to the HSE. It was noted it had been recommended that a best estimate be used by the</p>

	Executive to produce this, in the absence of details from BAM, and a range be provided to the HSE.
<b>4.5</b>	<b>Equipment Update</b>
	<p>A strategy paper for the procurement of medical and non-medical equipment for the NCH was presented.</p> <p>The Board was briefed in relation to the equipping execution strategy; governance arrangements; equipment planning; the procurement approach; the tender procedure; equipping risks, and; managing the equipping procurement process.</p> <p>[REDACTED]</p> <p>A discussion with respect to the equipping schedule ensued and it was confirmed that the Executive would revert with further explanation regarding the procurement and delivery dates of the various groupings of equipment.</p> <p>Following further discussion, <b>IT WAS RESOLVED</b> to approve the Equipping Execution Strategy, subject to any comments arising from the further explanation of procurement and delivery dates of the various groupings of equipment (<b>AP110</b>).</p> <p>In response to a query, it was clarified that it was common practice and a requirement of the NCH Design Brief to have available, on site, a limited number of private rooms for Consultants to operate a private practice. It was confirmed that the fit out of these private rooms was no different to the public consultation rooms. It was confirmed that these rooms accounted for less than 1% of the overall footprint of the hospital. Clarification was provided that there was no separate entrance for these rooms, either planned or reflected on the planning or current drawings, only a Fire Escape to meet statutory obligations.</p>
<b>6.0</b>	<b>Finance</b>
<b>6.1</b>	<b>Financial Results</b>
	<p><b>Financial Results</b></p> <p>An update was provided to the Board in relation to costs, payments, POs, HSE funding receipts and cashflow.</p> <p>The Board noted the Financial Results for May 2019.</p> <p><i>Mr Craig, Mr McIntyre, Mr Holmes, Mr Vaughan, Ms Curtis, Mr Fitzpatrick and Mr Farragher left the meeting.</i></p>
<b>7.0</b>	<b>Joint Construction &amp; Finance Sub-Committee</b>
	<p>The Board noted the proceedings of the Joint Finance and Construction Sub-Committee meeting held on 26 June 2019, together with the Design Team Presentation provided.</p> <p>Change Order 302 was put to the Board for approval, and an outline provided to the Board in relation to same.</p> <p>Following consideration and discussion, and following recommendation for Board approval by the Sub-Committee, <b>IT WAS RESOLVED THAT</b> Change Order 302 be approved.</p>

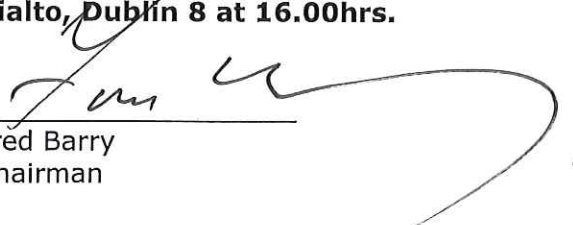


8.0	<b>Audit &amp; Risk Sub Committee ("ARSC") Update</b>
	<p>The Board received a summary of proceedings from the previous ARSC meeting.</p> <p>It was advised that fieldwork for the 31 December 2018 audit was nearing completion. It was advised that Statements of Compliance would issue shortly to the Board Members.</p> <p>The Board noted that it was required to undertake an annual review of the effectiveness of internal control systems, in order to ensure that it had considered all aspects of risk management and internal control for the year under review and up to the date of the approval of the Financial Statements.</p> <p>Confirmation was provided to the Board that the following had been performed:-</p> <ol style="list-style-type: none"> <li>1. The approach to the management of project risk during the Phase A works of the NCH and Satellite centres was reviewed and the Risk Management Policy and procedure updated to reflect the requirements of the 2016 Code of Governance and the adoption of the principles of Enterprise Risk Management.</li> <li>2. The Minutes of the six ARSC meetings held during 2018 had been circulated to the Board, which included the reporting on controls, risk and compliance with the Code of Governance, together with all other Board Sub-committees minutes, with the Sub-Committee Chairs providing updates to the Board on committee meetings.</li> <li>3. The Mazars internal audit of 1) Disaster Recovery and 2) GMP Process had been reviewed, with corrective actions being addressed by the Executive.</li> <li>4. The reporting of monthly activity and progress to the Board had been supplemented by detailed commercial reports which were circulated to the Finance Committee and the Board. Consideration was being given to additional reporting requirements outlined in the PwC Report.</li> <li>5. The NPHDB continued to adhere to the processes and procedures it had in place, including the reporting to Board and other stakeholders, as set out in the Code of Governance Manual.</li> </ol> <p>The Board noted the update provided and confirmed its satisfaction with the effectiveness of internal control systems for the relevant period.</p>
9.0	<b>PwC Report Committee Update</b>
	<p>The Board received a summary of the proceedings of the PwC Report Committee meeting held on 18 June 2019.</p> <p>A progress update was provided on recruitment of a Chief Officer, Project Director and Construction Director.</p> <p>Following discussion, <b>IT WAS RESOLVED THAT</b> the Board was satisfied to proceed with the appointment of a candidate as Chief Officer, who was deemed most appropriate for the position by the Public Appointments Service, and that the Chairman was authorised to agree and enter an employment contract with that individual on behalf of the NPHDB.</p> <p>It was advised that a meeting had taken place with Mazars in order to have the project execution plan updated in accordance with a PwC recommendation. It was noted that this included bedding down the organisational structure of the Executive and it was agreed that the Board would be kept updated.</p>

<b>10.0</b>	<b>Board Effectiveness Review</b>
	Confirmation was provided to the Board that the portal for Members to access and complete the Board Effectiveness review had closed and results were being presented to the ARSC on 18 July 2019 and thereafter to the Board.
<b>11.0</b>	<b>Any Other Business</b>
	<i>Mr Farragher was present for the Lease Renewal section of the meeting.</i>
<b>11.1</b>	<b>Lease Renewal</b>
	<p>The Board noted documentation in relation to the proposed renewal of a lease of office space and related car parking spaces at Block A, Herberton, Rialto, Dublin 8.</p> <p>The Board was provided with confirmation of the commercial terms and that its financing was within budget.</p> <p>Following consideration, <b>IT WAS RESOLVED THAT</b> the proposal to renew the Lease of office space and related car parking spaces at Block A, Herberton, Rialto, Dublin 8 be approved. <b>IT WAS FURTHER RESOLVED THAT</b> the relevant parties be authorised to execute all documentation giving effect to this and apply the seal as appropriate.</p>
<b>11.2</b>	<b>Dissolution of Committees</b>
	<p>It was noted that a decision had been taken at the previous Board meeting to dissolve a number of the Board's Committees.</p> <p>The Board wished to take the opportunity to formally extend its gratitude to all former members of these Committees, particularly those external to the NPHDB, for their contribution.</p>
<b>11.3</b>	

**Next Meeting:**

**Wednesday 7 August 2019 in the Boardroom, Herberton, St. James Walk, Rialto, Dublin 8 at 16.00hrs.**

  
Fred Barry  
Chairman