



St. John's Square, Limerick
www.stjohnshospital.ie



An Information Guide to the Services and Schemes provided by St. John's Hospital

Prepared in Accordance with Section 15 & Section 16 of
The Freedom of Information Act 1997 and (Amendment) Act 2003

Mission Statement

"Faithful to our tradition, we provide the highest possible standard of care and treatment in a professional and compassionate manner to every person who avails of our services".

INTRODUCTION AND FOREWORD

The **Freedom of Information Act, 1997** came into effect for Government Departments on 21 April, 1998, for Health Boards and Local Authorities on 21 October, 1998 and came into effect for Public Voluntary Hospitals (including St. John's Hospital) on 21 October, 1999. The Freedom of Information (Amendment) Act 2003 came into effect on 3rd July 2003.

The implementation of the Acts is part of a process of greater openness with regard to decision making by public bodies and access by the public, to personal and general information held by these bodies.

The services provided by the Hospital are detailed in Section 5.0 and the legislative background to these services is listed in Section 6.0. The Strategies, Policies, Procedures, Protocols and Guidelines used by the Hospital in making decisions with regard to each service are detailed in Section 7.0. The eligibility criteria for availing of the services is set out in Section 8.0 and details relating to accessing information either routinely or administratively about these services are shown in Section 9.0. Procedures for seeking access to information under the **Freedom of Information (FOI) Acts, 1997 & 2003** are detailed in Section 10.0.

This reference manual has been prepared and published in accordance with the requirements of Section 15 and Section 16 of the **Freedom of Information Acts, 1997 & 2003**. Its purpose is to facilitate access to official information held by **St. John's Hospital** by outlining:-

- Mission Statement, Vision & Values, Goals
- The Structure and Functions of the Hospital
- Services which the Hospital provides
- Classes of Records the Hospital holds
- Legislative Background
- Strategies, Policies, Procedures, Protocols & Guidelines (Precedents)
- Eligibility Criteria
- How to make a Request for Access to Records
- Appeals Procedure

It contains an overview and guide to the administration of services and schemes provided by the Hospital. Any comments on this reference manual should be addressed to:-

The Freedom of Information Officer
St. John's Hospital
St. John's Square
Limerick
Tel : (061) 462253

Tim Kennelly,
Chief Executive.

CONTENTS

	PAGE
1.0 Preamble	5
1.1 Freedom of Information (FOI) Act	5
1.2 Information Routinely Available	5
1.3 Overview of Section 15 of the Act	5
1.4 Overview of Section 16 of the Act	5
2.0 Mission Statement, Vision & Values, Goals	7
3.0 The Hospital, its Members & Committees (Section 15)	8
3.1 Board of Governors	8
3.2 Management Committee	9
3.3 Medical Board	9
3.4 Special Committees	9
4.0 Structure and Organisation (Section 15)	10
4.1 Chief Executive	10
4.2 Strategy Group	10
4.3 Focus Group	10
4.4 Service Heads	10
4.5 Department Heads	10
Integrated Management Structures (I.M.S.)	11
5.0 Service Directory (Section 16)	12
5.1 Medical	12
5.2 Nursing	16
5.3 Allied Health Professionals	18
5.3.1 Pathology	18
5.3.2 Pharmacy	19
5.3.3 Physiotherapy	20
5.3.4 Radiography	21
5.3.5 Dietetics	22
5.4 Support Services	23
5.5 Administration	24
5.6 Maintenance	26

6.0	Legislative Background (Section 16)	27
7.0	Strategies, Policies, Procedures, Protocols and Guidelines (Section 16)	29
8.0	Eligibility Criteria (Section 16)	35
8.1	Public Patient	35
8.2	Private Patient	35
8.3	Exemptions from Hospital In-Patient Charge	35
9.0	Access to Records (Section 15)	36
9.1	How to Obtain Information	36
9.1.1	Routine Access	36
9.1.2	Administrative Access	36
9.1.3	Form of Access	36
9.1.4	Exemptions of Administrative Access	36
9.1.5	Other Mechanisms for Access to Records	37
10.0	Accessing Information under the Freedom of Information Act 1997 & Amendment Act 2003 (Section 15)	38
10.1	Making an Application under the Freedom of Information Act	38
10.2	How Freedom of Information Applications are dealt with	39
10.3.	Rights of Appeal and Review	40
10.3.1	Internal Review	40
10.3.2	Review by the Information Commissioner	41
10.3.3	Appeals to the High Court	41
10.4	Fees	42

1.0 PREAMBLE

1.1 Freedom of Information (FOI) Act

The Freedom of Information (FOI) Acts established three statutory rights:

- A legal right for each person to access information held by Public Bodies.
- A legal right for each person to have official information relating to himself/herself amended where it is incomplete, incorrect or misleading
- A legal right to obtain reasons for decisions affecting himself/herself.

The FOI Act has applied to St. John's Hospital since 21st October 1999 and is designed to allow public access to information held by Public Bodies, which is **NOT** routinely available through other sources. Access to information under the terms of the Act is subject to certain exemptions and involves specific procedures and time limits.

The Act asserts the right of members of the public to obtain access to official information to the greatest extent possible, consistent with the public interest and the right to privacy of individuals

1.2 Information Routinely Available

St. John's Hospital currently makes information routinely available to the public in relation to its functions and services. This information will continue to be available informally without the need to use the **Freedom of Information Act**. This manual highlights, in relation to each of the Hospital's services, where information of this nature is available.

1.3 Overview of Section 15 of the Act

Publication of Information about Public Bodies

Section 15 requires each Public Body to provide information on its structure and organisation, its functions, powers and duties, the services it provides, its classes of records and the procedures by which these services may be availed of by the public. It also provides information on how to obtain information routinely, administratively and how to make a request under the **Freedom of Information Act**.

1.4 Overview of Section 16 of the Act

Publication of Information regarding Rules and Practices in relation to certain decisions by Public Bodies.

Under Section 16 of the Act, St. John's Hospital is required to make its internal rules, guidelines and procedures available to the public for the purposes of decisions, determinations or recommendations in respect of services provided to the public.

In accordance with Sections 15 and 16, St. John's Hospital has prepared this reference manual which contains:

- Structure & Organisation
- Access to Services/Records
- Classes of Records
- Details of Services provided by the Hospital
- Legislative Background including Regulations
- Details of Strategies, Policies, Procedures, Guidelines, Circulars and Protocols in use
- Eligibility Criteria for Services and Schemes
- Right of Review and Appeal

Copies of this manual are available from the Freedom of Information Officer, Administration Department.

It is also available from the following:-

St. John's Hospital Website www.stjohnshospital.ie
St. John's Hospital Intranet Site
City Library, The Granary, Limerick.
County Library, Dooradoyle, Limerick.
Citizen's Information Centre, 54 Catherine Street, Limerick.

2. MISSION, VISION AND VALUES, GOALS

2.1 Mission Statement

“Faithful to our tradition we provide the highest quality of care and treatment in a professional and compassionate manner to every person who avails of our service”,

2.2 Vision and Values

Based on our Mission Statement, our vision and values are:

- To build a first-class patient focused service based on high quality and evidence based practice throughout the organisation.
- To provide this service as close to the patient as possible, in a well managed and appropriate environment.
- To promote a culture that will:
 - Ensure high quality care/service is provided.
 - Ensure that decisions regarding delivery of care/service are patient focused and evidence based.
 - Support and invest in education and training, thereby promoting the continuous development of the workforce in order to maximise the potential of staff at all levels.

2.3 Goals

Our goals are to:

- Continuously improve all our services through quality management
- Focus on our patients and deliver high quality service
- Involve all our partners in our quality improvement activities
- Empower employees to make appropriate decisions
- Have the highest degree of respect for one another and value diversity
- Use training, teamwork and open communication to enable all employees to achieve their full potential
- Recognise and reward employees’ contributions
- Take all reasonable steps to ensure that patients, visitors, staff and all others in contact with the Hospital are afforded the safest possible environment.
- Maintain the highest ethical standards in protecting the public and the environment
- Measure the effectiveness of our activities and monitor progress towards achieving our Vision

3.0 THE HOSPITAL, ITS MEMBERS AND COMMITTEES

St. John's Hospital is a Public Voluntary Hospital funded by the Health Service Executive. The objective of the Hospital is to provide the surgical, medical and nursing service of a Public General Acute Hospital to every person who avails of our services.

St. John's Hospital endeavours to achieve health gain and social gain for the population, which it serves through the prevention, diagnosis and treatment of illness. It aims to achieve this in a manner, which is equitable in its delivery, sensitive, and responsive to the needs of those availing of the service and supportive of the staff entrusted with its delivery.

MANAGEMENT STRUCTURES

3.1 BOARD OF GOVERNORS

The Hospital is controlled and governed by a Board of Governors consisting of persons qualified by subscription and persons qualified by the holding of office.

3.1.1 Persons Qualified by Subscription

- (a) Annual Governors, on application to the Hospital's Management Committee and if the application is approved, by payment of a yearly subscription of €31.74 or such other sum as may be fixed by the Management Committee.
- (b) Life Governors, on application to the Hospital's Management Committee and if the application is approved, by payment of a sum of €127.00 or such other sum as may be fixed by the Management Committee.

3.1.2 Persons Qualified by the Holding of Office

- (a) The Catholic Bishop of Limerick, the Reverend Administrator of the Parish of St. John, the Parish Priests of the Parishes of St. Munchin, St. Mary, St. Patrick and St. Michael.
- (b) Two members of the Little Company of Mary nominated by the Province Leader of the Little Company of Mary.
- (c) The Mayor of Limerick and four members of Limerick City Council, nominated by the City Council.

There is an Annual General Meeting of the Board of Governors each year and at this meeting the Annual Accounts are submitted, the Management Committee is constituted, the Auditors are appointed and any other business may be considered or adjourned or referred to the Management Committee.

An extra-ordinary meeting of the Board may be requisitioned by not less than ten members of the Board or by the Management Committee

3.2 MANAGEMENT COMMITTEE

The management and business of the Hospital is conducted by the Management Committee constituted annually by the Board of Governors, in line with the Scheme of Management. Membership consists of :

- (a) the Catholic Bishop of Limerick
- (b) the Mayor
- (c) the Administrator of St. John's Parish
- (d) two Sisters of the Little Company of Mary being Governors nominated by the Province Leader of the Little Company of Mary
- (e) three Governors qualified by subscription
 - a member or former member of the Medical Staff nominated by the Medical Board
 - a member or former member of the Medical Staff elected by the Board of Governors
 - a lay person elected by the Board of Governors.

3.3 MEDICAL BOARD

The Medical Board acts as an advisory body to the Management Committee and reports to the Management Committee on any matter which it considers should receive the consideration of the Management Committee.

The Medical Board consists of all Consultant Medical Staff.

3.4 SPECIAL COMMITTEES

The number of Special Committees may vary from time to time. The following Committees currently exist:-

Accreditation Teams	Operational Management Groups
Audit & Research Committee	- AHP Group
Cultural Diversity Working Group	- Support Services x 2
Decontamination Committee	- Nursing OMG
Drugs & Therapeutics Committee	Patient Partnership Forum
Ethics Committee	Point of Care Committee
Focus Group	Policy Procedure & Guideline Committee
Health Safety & Security Committee	Purchasing Working Group
Hygiene Services Committee	Quality Committee
- Hygiene Services Team	Radiation Safety Committee
Infection Control Committee	Resuscitation Committee
Medical Records Committee	Strategy Group
Nursing Practice Development Group	Transfusion Committee
	Wound Care Committee

4.0 STRUCTURE & ORGANISATION

The following outlines how the Hospitals services are managed and co-ordinated.

4.1 Chief Executive

The Chief Executive is responsible for the day-to-day management of the Hospital, including: -

- (a) Responsibility for the executive Management of the Hospital
- (b) Monitoring the delivery of agreed levels of clinical activity within approved financial allocations
- (c) The recruitment, supervision and remuneration of staff
- (d) The implementation of service plans and ensuring that the net expenditure determined by the Health Service Executive is not exceeded.

4.2 Strategy Group

The Strategy Group is responsible for reviewing strategic issues and developing strategic plans.

4.3 Focus Group

This group acts as the main point of interaction between the Strategic Management and Operational Management levels.

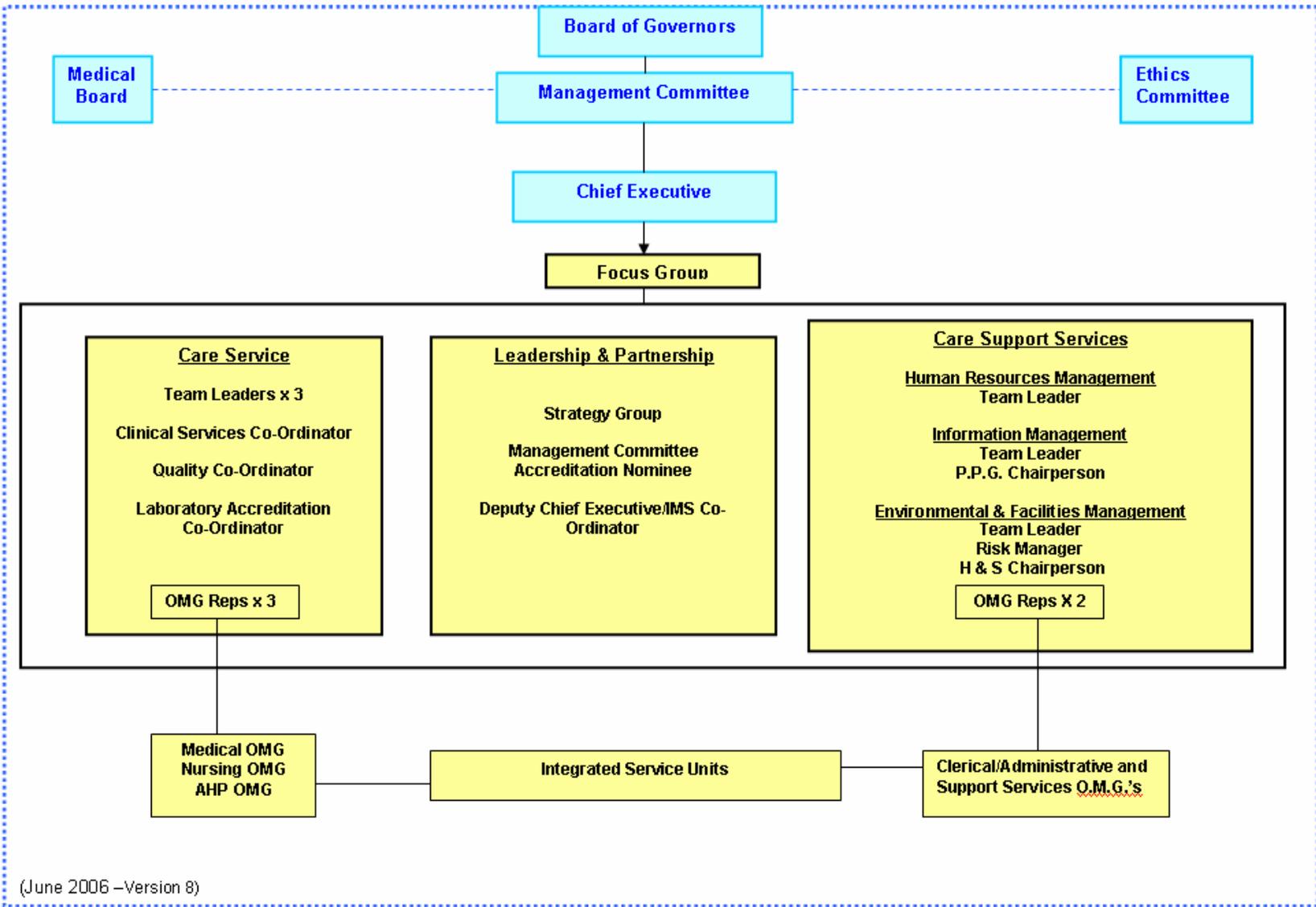
4.4 Service Heads

Each Service Head is responsible for the day-to-day management of his/her service area.

4.5 Department Heads

Each Department Head is responsible for the day-to-day management of his/her department.

Integrated Management Structures (I.M.S.)



(June 2006 –Version 8)

5.0 SERVICE DIRECTORY

This section outlines the main services available in St. John's Hospital, together with information on how to access those services, the classes of information held and the appropriate contact numbers.

LIST OF SERVICES

5.1 **MEDICAL**

- **Accident & Emergency** The A & E Department is open from 8.00 a.m. to 8.00 p.m. Monday to Friday. Nursing, Medical & Administrative services are provided to patients who present with illnesses and injuries.
- **Anaesthetics** This speciality deals with ensuring the absence of sensation and pain in patients undergoing surgical procedures. The speciality also delivers care to patients who are in the Intensive Care Unit.
- **Breast Surgery** This service specialises in treatment of conditions and diseases related to the breast(s) for in-patients and out-patients.
- **Cardiology** The study of anatomy, normal functions and disorders of the heart.
- **Endoscopy** Specialises in inspections and investigations of the gastro-intestinal system by means of fiberoptic endoscope for in-patient and day care patients.
- **E.N.T.** Deals with the treatment of conditions relating to Ear, Nose & Throat for out-patients only.
- **General Medicine** General Medicine involves the management and investigation of patients with wide ranging medical problems including cardiovascular, respiratory, neurology, diabetes.
- **General Surgery** Treatment of diseases, conditions and injuries by operative methods.
- **Gynaecology** This speciality is concerned with the health care of women during the treatment of conditions and diseases of the reproductive system.

- **Minimally Invasive Surgery** Surgery carried out using techniques such as laparoscopy or thoracoscopy which allow visualisation, manipulation and surgery on organs using tiny wounds, thus avoiding the problems, longer hospital stays and recovery associated with traditional surgery

- **Nephrology** This specialty includes working with our Vascular Colleagues for creation of Vascular Access (AV Fistula) for our Dialysis patients. Dr. Cronin and Dr. Casserly are also involved in Renal Consultation in St. John's and would also have a busy Medical Out-Patients clinic with a high proportion of Diabetes and Hypertension patients who have renal related problems.

- **Nutrition & Dietetic Service** Specialises in the application of nutrition and dietetic knowledge to improve the well being of those patients with clinically related nutrition problems.

- **Oncology** Specialises in the investigation and treatment of tumours.

- **Oral Surgery** Diagnosis and treatment of diseases and defects of the oral and facial region. It encompasses dental surgery and oral surgery and is provided on a day care basis.

- **Paediatrics** This speciality is concerned with the development of children and the particular diseases of children and their treatment and prevention for out-patients only.

- **Pain Management** The Department of Anaesthesia provides a very active approach to both chronic and acute pain with the ability to provide patient controlled analgesia and epidural analgesia for pre-operative pain relief on an in-patient and day care basis.

- **Pathology** This speciality diagnoses, monitors and controls diseases in association with the medical profession for in-patients and out-patients. Departments within the Pathology Services include; Biochemistry, Haematology, Histology.

- **Phlebotomy** This service specialises in the removal of blood from blood vessels.

- **Radiology** Uses techniques of visualisation for the diagnosis and treatment of disease using many of the various sources of x-ray.

- **Respiratory Medicine** This service specialises in diagnosis, treatment of chest, lung and breathing.
- **Vascular Surgery** This service specialises in treatment of conditions pertaining to blood vessels.

Out-Patient Clinics

Out-patient clinics provided at this Hospital are listed below.

Day	Clinic	Time	Consultant
Monday	Paediatric	9.00 a.m. - 12 noon	Dr. Liam Carroll
	Pain Management	9.00 a.m. - 12 noon	Dr. Brendan Conroy
	Surgical	2.00 p.m. - 5.00 p.m.	Mr. Ralph Keane
Tuesday	Gynaecology	9.00 a.m. - 12 noon	Dr. Catherine Casey
	Gynaecology	2.00 p.m. - 5.00 p.m.	Dr. Una Fahy
Wednesday	E.N.T.	9.00 a.m. - 12 noon	Mr. Kevin Manning
	Medical	2.00 p.m. - 5.00 p.m.	Dr. Eithne Mulloy
Thursday	Medical	9.00 a.m. - 12 noon	Dr. C.J. Cronin
First Thursday every month	Medical	2.00 p.m. - 5.00 p.m.	Dr. Liam Casserly
Friday (alternate weeks)	Surgical	9.00 a.m. - 12 noon	Mr. Paul Burke
	Surgical	9.00 a.m. - 12 noon	Ms. Anne Merrigan

5.1.1 Access to Services

Patients can access the above Services to the Hospital by referral from :-

- (i) General Practitioner
- (ii) Accident & Emergency
- (iii) Other Consultant
- (iv) Other Hospital

5.1.2 Classes of Records

- **Personal files** Medical Records held in ancillary departments relating to Casualty, Out-Patient Clinics, X-Ray, Laboratory and In-Patient Records.
- **Administration**
 - Waiting List Records
 - Administrative Records/Operational Files
 - Policy & Procedure Manuals
 - Safety Statement

Statistical Information/Reports
Supplies and Equipment data
Lecture/education records

5.1.3 Contact Persons

Contact should be made by phoning or calling to Main Reception (061) 462222 and asking for the Head of the Department you wish to contact.

5.2 NURSING

The Nursing service provided within the Hospital promotes, protects and improves health through:

- **Performance** By providing effective treatment and care for patients, through our extensive range of specialist and general services. The general services include Medical, Surgical and Gynaecological Nursing Care, Intensive and Coronary Care, Out-Patient, Operating Theatre and Accident & Emergency care. Our extensive range of specialist care includes Clinical Nurse Specialists in Continence Management, Diabetes, Infection Control, Health Promotion, Pain Management, Palliative Care, Respiratory Care and Tissue Viability. Our Nursing staff, which includes Trained Nurses, Student Nurses and Care Assistants, provide a caring holistic approach, based on knowledge and skills in partnership with other professional users of the services and their carers.
- **Development** By providing teaching and education and making a commitment to research, innovation and staff development. On-going training programmes occur and staff are involved in external university-based programmes also.
- **Quality** By pursuing excellence through initiative and strategy. We have a Quality Co-Ordinator in post who deals with improving our service to our patients. We also have committees which oversee policy development, documentation etc. We keep abreast of changes in nursing and where possible, incorporate research findings into our care. We actively seek our patients' views on the care they receive and are always open to suggestions which may enhance/improve the services we provide.
- **School of Nursing** Student Nurses rotate between the Mid-Western Regional Hospital and St. John's Hospital. A Clinical Placement Co-Ordinator ensures that a learning environment exists on all wards, to facilitate training.

The Commission on Nursing

The Commission on Nursing, established in 1998, has been the catalyst for dramatic change in nursing. The year 2002 saw the advent of the Nursing Degree Programme. All Student Nurses undertake this course, in conjunction with the University of Limerick. Prior to the introduction of the Degree Programme, the Diploma Programme was the Student Nurse Training Programme. Other changes, which have occurred, include Nurses now having structured career pathways, providing endless opportunities for further training, development

and promotion. Titles have also changed. The title Matron is now known as Director of Nursing and Assistant Matron is now Assistant Director. The title Clinical Nurse Manager 2 replaces Ward Sister and two new levels of Clinical Nurse Manager (1 and 3) have been introduced. The Scope of Practice Framework, introduced by An Bord Altranais (the National Nursing Body) has allowed Nurses to expand their roles, resulting in a multi-skilled workforce and provides the practitioner with greater job satisfaction, which in turn, enhances patient care.

Nursing services are provided on a 24 hour basis, except in the Accident & Emergency Department, where the service is 12 hours per day, Monday to Friday. Services are provided on an in-patient, out-patient and day care basis. Services are in the areas of Surgery, Medicine, Gynaecology, Theatre, Intensive Care, Endoscopy, Phlebotomy, Haemovigilance, Central Sterile Supplies Department and Nursing Administration.

5.2.1 Access to Services

General nursing services are provided in conjunction with all medical services. This covers In-Patients, Out-Patients and Day Care. For access to these services see Medical Services (Section 6.1). General Nursing Services are also provided in conjunction with our Clinical Nurse Specialists

5.2.2 Classes of Records

- **Personal Files** Nursing records relating to patient care

- **Administration** Administrative records/Operational records
An Bord Altranais Regulations
Continence Care
Diabetic Care
Fire Plan
Haemovigilance
Infection Control Policies etc.
Nursing Administration Records/Personnel Records
Nursing Protocols/Policy, Procedure & Guideline Manuals
Occupational Health
Pain Control
Palliative Care
Respiratory Care
Resuscitation
Safety Statement
Supplies and Equipment data
Tissue Viability

5.2.3 Contact Persons

Contact should be made by phoning (061) 462100 or calling to Main Reception and asking for the Director of Nursing, the Assistant Director on duty or Director of Nursing's Secretary.

5.3 ALLIED HEALTH PROFESSIONALS

The Allied Health Professional services include the following:

5.3.1 PATHOLOGY

The Pathology Department (Laboratory Services) provides diagnostic services to Hospital Consultants, Non-Consultant Hospital Doctors and to G.P.^s in Limerick City and its environs.

Laboratory test results and clinical interpretation are provided in the disciplines of Clinical Biochemistry, Haematology, Coagulation and Histopathology.

CPA (UK Ltd.) Accreditation

The Pathology Department is preparing for Medical Laboratory Accreditation as part of an overall Quality Improvement Initiative. The chosen authoritative body is CPA (Clinical Pathology Accreditation) UK Ltd., which has accredited over 80% of Medical Laboratories (Private & Public) in the U.K. Benefits to the users of the Pathology Service will include:-

- Internationally recognised Accreditation Laboratory Service
- More responsive service to needs of users
- Improved safety for staff and visitors
- Better quality of service through Quality Management system and audit.

5.3.1.1 Access to Services

Routine Pathology opening hours are from 9.30 a.m. to 5.30 p.m., Monday to Friday. An out of hours on-call service which includes 24-hour cover at weekends is also provided. This service is only available to referrals from within the Hospital. Patients can access laboratory services by:-

- In-patient referral
- referral from General Practitioner
- referral from Accident & Emergency
- referral from Out-Patient Clinics
- referral from Consultant's Private Rooms
- referral from another Hospital

5.3.1.2 Classes of Records

- **Personal files** Laboratory Records held relating to patient's test results for In-Patients and Out-Patients.

- **Administration** Administrative records/Operational files
Fire Plan
Policy & Procedure Manuals
Safety Statement
Statistical information/reports
Supplies and Equipment data
Quality Assurance data

5.3.1.3 Contact Persons

Contact should be made for all general queries by phoning the Laboratory Office (061) 462141 or calling to Main Reception and asking for the Consultant Head of the Department or for the Chief Medical Scientist (061) 462286.

5.3.2 PHARMACY

The Pharmacy provides pharmaceutical care to patients. The Pharmacist is professionally, ethically and legally responsible to the patients for the quality of care. The Pharmacy has full control over procurement, storage and dispensing of all pharmaceutical products, the main aim being to promote the safe, effective and economical use of drugs. The Warfarin Clinic is run by Clinical Pharmacists in co-operation with and under the guidance of Hospital Consultants.

5.3.2.1 Access to Services

The Pharmacy Department is open from 9.00 a.m. to 5.00 p.m. Monday to Friday. There is no week-end or on-call service.

5.3.2.2 Classes of Records

- **Personal files** Pharmacy Records held relating to patient/ward dispensing.
Warfarin Clinic Patient Files
- **Administration** Administrative records/Operational files e.g. Stock Control,
Purchasing Records
Fire Plan
Policy & Procedure Manuals
Safety Statement
Statistical information/reports
Supplies and Equipment data
Warfarin Clinic Protocol

5.3.2.3 Contact Persons

Contact should be made by phoning (061) 462171 or calling to Main Reception and asking for the Chief Pharmacist.

5.3.3 PHYSIOTHERAPY

The Physiotherapy Department provides a comprehensive physiotherapy programme of out-patient, in-patient and weekend care including education/information, assessment, treatment and rehabilitation. Patients are accepted for care regardless of age or geographical location. A comprehensive programme of care is available to all appropriately referred patients.

5.3.3.1 Access to Services

Patients can access to Physiotherapy Services by:-

- written Hospital Doctor referrals within the Hospital
- written Hospital Doctor referrals from geographically distant hospitals

Referrals from Chartered Physiotherapists are not accepted without an accompanying Doctor's referral letter.

Telephone referrals from any source are not accepted without prior receipt of written data.

The Physiotherapy Department is open Monday to Friday. Emergency weekend respiratory care for in-patients is provided subject to referral from Hospital Consultant. There is a 24 hour voice mail service available where calls will be dealt with on the following working day.

5.3.3.2 Classes of Records

- **Personal Files** Physiotherapy records relating to patients treatment/patient records.
- **Administration** Academic Publications
Administration Files relating to the day to day Operation of the Service and Records of its facilities by outside Agencies
Circulars
Equipment Service Records/Catalogues
Financial Reports
Fire Plan
Information Leaflets
Lectures, Conference Papers and Speeches prepared and presented by Staff
Policy and Procedure Manuals
Safety Statement
Statistical Information/Information Technology
Student Education Records/Files

5.3.3.3 Contact Persons

Contact should be made by phoning (061) 462118 or calling to Main Reception and asking for the Physiotherapy Manager.

5.3.4 RADIOGRAPHY

The Radiology Department provides a high quality diagnostic service to in-patients, out-patients, day care and A & E patients by means of x-rays and ultrasound scans. These radiological services provide images to assist in the diagnosis and treatment of patients.

5.3.4.1 Access to Services

Radiology services are available Monday to Friday as follows:-

A&E	08.30 - 20.00
GP's	08.30 - 16.30
Day Ward	08.30 - 16.00
In-Patients	08.30 - 20.00

There is an out of hours on-call and weekend emergency service for in-patients only. Doctors and Dentists must initiate all X-Ray and Ultrasound requests. G.P. patients must make an appointment. Patients can access radiology services by:-

- In-patient referral
- Referral from A & E
- Referral from out-patient clinics
- Referral from Consultant's Private Rooms
- Referral from another hospital
- Referral from General Practitioner

5.3.4.2 Classes of Records

- **Personal Files** Radiology Records held relating to patient's imaging results for both In-Patients and Out-Patients. These results are also held by the original referring clinician.
- **Administration** Administrative records/Operational files e.g. Stock Control
Fire Plan
Policy & Procedure Manuals
Safety Statement
Statistical information/reports
Supplies and Equipment data

5.3.4.3 Contact Persons

Contact should be made by phoning (061) 462120 or calling to Main Reception and asking for the Radiography Services Manager.

5.3.5 DIETETICS

The Dietetics Department provides a high quality Dietetic service to in-patients and out-patients, by means of improving the well being of patients with clinically related nutrition problems.

5.3.5.1 Access to Services

Dietetic services are available Monday to Friday 9.00 a.m. to 5.00 p.m. There is no weekend or on-call service.

5.3.5.2 Classes of Records

- **Personal Files** Dietetic records relating to patients treatment.

- **Administration** Administrative files relating to the day to day Operation of the Service
Fire Plan
HSE Circulars
Safety Statement
Policy & Procedure Manuals
Statistical information/reports
Information Leaflets

5.3.5.3 Contact Persons

Contact should be made by phoning (061) 462175 or calling to Main Reception and asking for the Senior Dietitian.

5.4 SUPPORT SERVICES

The following staff provides the Non-Nursing services:

- **Catering & Household** The Catering & Household Department provides a service to both patients and staff from 8.00 a.m. to 6.00 p.m. The Catering Department operates the service from the Kitchen to the Staff Restaurant and the Ward Kitchens. This Department operates in accordance with its HACCP plan at all times.
- **Contract Cleaning** This service is provided by an outside contractor and deals with the overall cleaning of the hospital. The contract is put out to tender on a two-yearly basis and has to be approved by the Management Committee.
- **Porters** Porter staff provide a patient transportation service to all hospital wards, theatres, out-patients and other departments, as the need arises.
- **Chaplaincy** The Chaplaincy service provides help and support within the hospital setting to the patients, their relatives and staff members. The focus of Chaplaincy is directed to the physical, spiritual and psychological dimensions of the ill.

5.4.1 Access to Services

Services can be accessed by going to the Main Reception in the Hospital and asking for the appropriate department.

5.4.2 Classes of Records

- **Administration**
 - Industry Standards Hygiene in the Catering Sector IS340/IS343
 - Operational/Administrative Records
 - Policy & Procedure Manuals
 - Safety Statement
 - Statistical information/reports
 - Supplies and Equipment data
 - HACCP System/Manual

5.4.3 Contact Persons

Contact should be made by phoning or calling to Main Reception (061) 462222 and asking for the Head of the relevant Department.

5.5 ADMINISTRATION

Administration services provide administrative and clerical support in the following areas:

- **Executive Management** Responsible for the overall Executive and General Management of the Hospital, dealing with staff, public and public representatives on all matters. Development of Service Plans in accordance with Department of Health and Children Strategies. The preparation of strategic, operational and action plans to implement the approved Service Plans. Monitoring the delivery of agreed levels of clinical activity within the approved financial allocation and management of the budget for the Capital Development Programme.
- **Finance Department** This department comprises :-
 - Payroll Department - Responsible for paying salaries on a fortnightly and monthly basis
 - Patient Accounts Dept. - Issues invoices to patients and medical insurance providers and is responsible for the receipt of payments
 - Creditors Dept. - Responsible for the payment of suppliers in accordance with the Prompt Payment of Accounts Act.

The Finance Department is responsible for the completion of monthly and annual returns for the Inspector of Taxes. The Department produces monthly management accounts for the Management Committee and the Health Service Executive and also produces draft annual accounts which are audited by external auditors
- **Human Resources Department** Responsible for the recruitment of all staff, staff relations issues, staff development/training and pensions.
- **Information Systems** Responsible for the efficient management of all electronic information and communication systems in the Hospital, the implementation of new systems and the on-going maintenance of existing systems.
- **Information Management Services** Responsible for the production of Management Information Reports, the Annual Report & Accounts, Statistical Reports and the preparation of reports in relation to activity levels. This service is also responsible for the management of the Accreditation process within the Hospital.

- **Patient Services Department** Responsible for co-ordinating all activities, clinical and non-clinical relating to the provision of services to patients. The Hospital In-Patient Enquiry (H.I.P.E.) system is in operation and is also attached to this department
- **Risk Management Department** Responsible for the co-ordination of risk management activities and services.

5.5.1 Access to Services

The Administration Department is open from 9.00 a.m. to 1.00 p.m. and 2.00 p.m. to 5.00 p.m., Monday to Friday (excluding public holidays). Access to the Administration building is sign-posted in the grounds near the round-about or alternatively you may call to the Main Reception who will direct you to the relevant section.

5.5.2 Classes of Records

- **Personal**
 - Medical Records
 - Human Resources/Personnel Records
 - Financial Records
 - Electronic Records
 - Legal Records
- **Administration**
 - Academic Publications
 - Administrative / Operational Records
 - Annual Reports
 - Articles / Publications
 - Fire Plan
 - Corporate and Departmental Safety Statements
 - Hospital Policies - Finance, Personnel etc.
 - Major Emergency Plan
 - Media Queries
 - Minutes of Meetings etc.
 - Strategies, Policies, Procedures & Guidelines (incl in all sections)
 - Statistical Reports

5.5.3 Contact Persons

Contact should be made by phoning (061) 462253 or calling to Main Reception and asking for the Head of the section you wish to contact

5.6 MAINTENANCE DEPARTMENT

This department provides routine maintenance for all areas of the Hospital and Grounds. It also provides the drawing up or in appropriate circumstances, arranging for the development of plans and contract arrangements for the implementation of approved maintenance programmes. The Maintenance Department ensures that the Hospital is adequately maintained in accordance with approved maintenance programmes. The Maintenance Manager is responsible for the general supervision of the planning and the execution of minor capital works and for the development and implementation of adequate fire prevention and safety measures.

5.6.1 Access to Services

The Maintenance Department is open from 8.00 a.m. to 1.00 p.m. and 2.00 p.m. to 5.00 p.m. Monday to Friday.

5.6.2 Classes of Records

- **Administration**
 - Administration/Operational Files
 - Disposal of Hazardous Waste (clinical waste, laboratory waste, recycling of waste)
 - Fire Plan
 - Maintenance Requisitions
 - Safety Statement
 - Service Reports on Utilities (Service, Fire Alarm etc.)
 - Supplies and Equipment data
 - Transportation arrangements

5.6.3 Contact Persons

Contact should be made by phoning (061) 462200 or calling to Main Reception and asking for the Maintenance Manager.

6.0 LEGISLATIVE BACKGROUND

Services within the Hospital are governed by legislation. The more important Acts and Regulations (in alphabetical order) are as follows :-

Adoptive Leave Act, 1995
Births & Deaths Registration Act 1880
Child Care Act, 1991 & Regulations 1995
Control of Clinical Trials & Drugs Act 1990 & Directive 1995
Comptroller & Auditor General Act, 1993
Control and Supply of Drugs Regulations 1993
Coroners Act, 1962
Data Protection Acts 1988 & 2003
Department of Health Regulations
Employee Information & Consultation Act 2006
Employment Equality Act 1998
Equal Status Act 2000
Equality Acts 1998 & 2004
Ethics in Public Office Acts 1995 & 2001
Ethics in Public Office Regulations 2006
EU Regulations
EU Procurement Directives
Finance Act
Fire Services Act, 1981
Food Hygiene Regulations 1950 – 1989
Food Standards Act 1974
Freedom of Information Acts (FoI) 1997 & (Amendment) 2003
Health Act 2004
Health Charges for In-Patients Regulations 1976 as amended by 1987 Regulations
Health Services (Amendment) Regulations Act 1986 & 1996
Health Services (In-Patient Charges) Regulation 1994
Health Services (Out-Patient Charges) Regulations 1994
Industrial Relations Act 1946 - 2001
Infectious Diseases Regulations 1981 – 1988
Irish Medicines Board Act 1995
Jury Service Act, 1976
Maternity Protection Act 1994 & 2004
Medical Devices Directives 1994
Medical Practitioners Act 1978 – 1993
Medical Preparations (Control of Amphetamines) Regulations 1969-1970
Medicinal Products (Prescription and Control of Supply) Regulations 1996 – 2000
Medicinal (Amendment) Regulations 1999
Medicinal Products (Prescription and Control of Supply) Amendment Regulation 2002
Medicinal Products (Control of Paracetamol) Regulations 2001
Medicinal Products (Licensing and Sale) Regulations 1998
Mental Health Legislation and Associated Orders/Regulations 1945 - 1961
Minimum Notice & Terms of Employment Acts 1973 – 2001
Misuse of Drugs (Safe Custody) Regulations 1982
Misuse of Drugs Act 1977, 1984 as amended 1993
Misuse of Drugs Regulations 1998 – 1993
Misuse of Drugs (Scheduled Substances) Regulations 1993 & (Exemption) Order 1993
Misuse of Drugs (Supervision of Prescriptions & Supply of Methadone) Regulations 1998
Non-Fatal Offences against the Persons Act, 1997 - section 23
Nurses Act 1985
Official Languages Act 2003
Ombudsman Act 1980
Organisation of Working Time Act 1997
Other Employment Legislation
Parental Leave Acts, 1998 & 2006
Part-Time Workers Employment Act 1995
Payment of Wages Act 1991
Pharmacy Act 2007
Poisons Act 1961 and Regulations 1982 - 1991
Prompt Payments of Accounts Act 1997
Protection of Employees (Fixed Term Work) Act 2003
Protection of Employees (Part-Time Work) Act 2001
Public Service Management Act 1997
Public Health Tobacco Act 2002

Radiological Protection Act 1991 & 2002
Redundancy Payments Act 1967 - 2001
Safety Health & Welfare at Work Act 1989 &
2005
Safety, Health & Welfare at Work (General
Applications) Regulations 2007
Standards in Public Office Act 2001
Terms of Employment (Information) Acts
1994-2001

Tobacco (Health Promotion and
Protection) Regulations, 1990
Unfair Dismissals Act 1977 - 2001
Voluntary Health Insurance (Amendment)
Act, 1996 & 1998
Waste Management Act 1996 &
(Amendment) Act 2001
Worker Protection (Regular-Part Time)
Employees Act, 1991

If you would like to obtain copies of legislation visit the website <http://acts.oireachtas.ie/> or alternatively contact the Government Publications Office at:

Government Publications Office,
Sun Alliance House,
Molesworth Street,
Dublin 2.

Tel: (01) 647 6879

7.0 STRATEGIES, POLICIES, PROCEDURES, PROTOCOLS & GUIDELINES

Strategies, Policies, Procedures, Protocols and Guidelines held by the Hospital include:-

Strategies

Strategy on Audit
Strategy on Communications
Strategy on Governance and Management
Strategy on Human Resources
Strategy on Information Management
Strategy on Major Emergency and Disaster Management
Strategy on Nursing
Strategy on Patient Partnership
Strategy on Patient Satisfaction Surveys
Strategy on Policies, Procedures and Guidelines
Strategy on Quality Improvement
Strategy on Research
Strategy on Risk Management
Strategy on Staff Retention

Policies, Procedures & Guidelines

- **Hospital Wide**
 - Policy on Smoking
 - Guidelines for Dealing with Breaches of the Hospital's Smoking Policy
 - Policy on Patient Visiting
 - Admissions/Discharges/Transfers Policy
 - Confidentiality/Release of Information Policy
 - Policy on Manual Handling
 - Policy on Patients Complaints
 - Policy on Patient Consent
 - Procedures for dealing with Freedom of Information requests
 - Policy on Administrative Access to Health Records
 - Policy on Freedom of Information
 - Segregation Packaging and Storage Guidelines for Health Care Risk Waste (DOHC)
 - Policy on Decontamination

- **Administration**
 - Finance**
 - Accounting Standards for Voluntary Hospitals
 - Book Keeping & Record Keeping
 - Cashier Procedures
 - Creditors Accounts Procedures
 - Financial Accounts
 - Financial Control
 - Patient Accounts Procedures
 - Payroll Procedures
 - Production of Financial Accounts & Management Information
 - Prompt Payment of Accounts

General

Corporate Safety Statement
Department of Health & Children Policies & Circulars
Departmental Safety Statement
Hospital Fire Plan
Internal Emergency Plan
Major Emergency Plan
Policy on Accidents/Incident Reporting and Investigation
Policy on Claims Management
Policy on Clear Desk and Computer Desk Top
Policy on Purchasing

Human Resource Policies

Adoptive Leave Policy
Annual Leave Policy
Career Break Policy
Carers Leave Policy
Compassionate Leave Policy
Dignity at Work Policy for the Health Service
Disciplinary Policy
Force Majeure Leave Policy
Garda Vetting Policy
Grievance Procedure
Human Resource Planning Policy
Jury Service Policy
Managing Attendance Policy
Maternity Leave Policy
Parental Leave Policy
Paternity Leave Policy
Policy on Leave for Trade Union Representatives
Policy on Leave for Training with the Reserve Defence Forces
Policy on Special Leave with Pay on Marriage
Recruitment and Selection Policy
Retirement and Resignation Policy
Staff Induction- Guidelines for Supervisors/Line Managers
Staff Induction Policy
Staff Transfer Policy
Stress Management Policy
Study Leave Policy
Term Time Leave Policy
Training and Development Policy
Trust in Care Policy
Violence at Work Policy

Information Systems/Services

I.S. Contingency Plan
I.S. Induction Pack
Electronic Communications Policy

Procedure for Obtaining or Varying Access to Electronic Information or Communication Systems
Confidentiality Agreement between St. John's Hospital and Third Party Agencies/Vendors/Suppliers

Patient Services

Hospital Policy on Patients Medical Records
NHO Code of Practice for Healthcare Records Management
Policy on Safety, Protection and Destruction of Information

• **Allied Health Professional**

Laboratory

Procedure for Relaying Significantly Abnormal Laboratory Test Results to the Medical Team.
Policy on Point of Care
Procedure for Use of PCx Glucometers

A large number of Pathology Policies and Procedures have been written in preparing for CPA Accreditation.

Pharmacy

ADR Reporting
Albumin & Blood-derived Products, Dispensing, Record Keeping and recall
Anaphylaxis Kit Management Procedure
Avery Scales checking procedure
Checking in goods inwards
Cleaning the Tablet Counter
Cleaning of Vaccine Fridge
Closing down the Pharmacy
Continuing Education
Controlled Drugs-In house management
CPR blue box or tray management
Delivery of pharmaceuticals
Dialysis Fluids
Digibind sourcing
Drug delivery to wards
Drug Information
Drug returns from wards
Drugs storage
Emergency discharge dispensing
Expiry date monitoring
Extemporaneous dispensing procedure
Fridge alarm and Panic button test
Hi-tech Medicines
HIV PEP
Leave
Major emergency pharmacy action plan

Meningitis
Other Pharmacy Supplies
Personal Development Planning
Prescription Review
Procurement of Drugs
Recall of Drugs
Routine Dispensing Procedure
Samples
Security Policy
Smoking Cessation
Stock Take Procedures
T B Therapy
TPN Management
Uniform Policy
Unlicensed Drugs
Waste Management of Pharmaceuticals

The Department of Pharmacy is guided by the standards, guidelines & protocols of the Pharmaceutical Society of Ireland (PSI) and the Hospital Pharmacists Association of Ireland (HPAI).

Physiotherapy

Departmental Patient Safety Statement
Guideline on the Management of Out-Patient Physiotherapy Referrals
Guidelines for Record-keeping for the In-Patient Physiotherapy Service
Guidelines for the Issue and Instruction on the use of Respiratory Exercisers
Policy on Consent to Physiotherapy for Minors
Policy on the Acceptable Standard of Uniform to be worn by Physiotherapists
Policy on the Issue and Monitoring of Neuromuscular Stimulation Units
Procedure on Acceptance of Referrals for In-Patient Physiotherapy

X-Ray

Policy on Chemicals
Policy on Uniform for Radiographers
Professional Standards Manual
Radiology Safety Procedures
Tracking of X-Ray Films Policy
Ultrasound Referral Policy
X-Ray Guideline Manual
X-Ray Pregnancy Policy
X-Ray Referral Policy

The X-Ray Department is guided by the standards, guidelines and protocols of the Irish Institute of Radiography.

- **Medical/Nursing**

Policies

Administration of IV Drugs by Medical & Nursing Staff
Administration of Oral Non-Controlled Prescribed Medications
C.S.S.D. Policy / Procedure Manual
Care of a Patient who is Dead on Arrival to A&E Department
Epidural Policy
Health Promotion Policy
Management of Changing Intravenous Giving Sets
Marsden Manual of Clinical Nurse Procedures
Needlestick Injury Policy
Patients Dead on Arrival to A & E Policy
Policy on Medical Emergency – Day or Night – I.C.U.
Policy on Nursing Documentation
Policy on Patient Identity Bracalets and Allergy Bands
Policy, Procedure & Guidelines for the Management and Treatment of Health Care Workers Exposed to Blood and/or Body Fluids.
Processing Blood Samples for Dispatch to MWHB Blood Bank
Sims Graseby Syringe driver MS16A and the MS26
Swab,Sharps and Instrument Counts in the Operating Theatre
Venepuncture Policy for Nursing Staff

Guidelines

Clinical Guideline for the use of Oxygen Therapy
Clinical Guideline on Pressure Ulcer Prevention and Management
Clinical Guidelines on Non-Invasive Ventilation
Discharge Planning Guideline
Do Not Resuscitate Guideline
Guideline on the Discharge of a Patient from the A&E Department
Guidelines for Admission of Patients to the Intensive Care Unit
Guidelines for the Management of Changing Total Parenteral Nutrition
Guidelines for the Transfer of Ambulatory Patients to Theatre from the Wards
Guidelines on the Observation of Patients within the Ward Area
Guidelines on the Preparation of a Patient for Coronary Angiogram in the Mid-Western Regional Hospital
Guidelines to Prevent Accidental Inoculation/Sharps Injuries in Theatre
ICU Guidelines for the Removal of an Epidural Catheter
Wound Care Guidelines

- **Nursing Support** Chaplaincy Policies and Procedures
 HACCP Food Safety Management Systems
 Cleaning Procedures for Catering Department
 Kitchen Safety Procedures
 Specification for Contract Cleaners

- Note:**
- (i) Situations which arise from time to time and are not covered by agreed policies, etc., are dealt with on their merits.
 - (ii) The introduction of new and the updating of current Policies, Procedures and Guidelines is a continuous working process in line with National Policy, Legislation and Best Practice.
 - (iii) Specific Policies, Procedures & Guidelines are available at Service/ Departmental level.

8.0 ELIGIBILITY CRITERIA

HOSPITAL SERVICES & CHARGES

In-Patient Services

8.1 If you choose to be a Public In-Patient

- You are required to avail of public accommodation
- You are not the private patient of any Consultant and do not have to pay Consultant Fees
- You are liable for the **Hospital In-Patient Charge** unless you are in an exempt category, (see 8.3 hereunder). The rates effective from 1st January 2007 are €60.00 per day and €600.00 maximum in any twelve-month period.

8.2 If you choose to be a Private In-Patient

- You are required to avail of private or semi-private accommodation and the following daily maintenance charges apply, effective from 1st January 2007:-

Private	€ 460.00
Semi-Private	€ 370.00
Day Case	€ 329.00

- You are the private patient of your own Consultant and all other Consultants involved in your care (e.g. Radiologist, Pathologist, Anaesthetist) and are liable for Consultant fees.
- You are liable for the **Hospital In-Patient Charge** (see 8.1 above), unless you are in an exempt category, (see 8.3 hereunder).

8.3 Exemptions from Hospital In-Patient Charges

- Medical Card Holders.
- Women receiving services in respect of motherhood.
- Children up to six weeks old, children suffering from prescribed diseases and disabilities and children referred for treatment from child health clinics and school board examinations.
- Persons receiving services in respect of prescribed infectious diseases.
- Persons receiving services provided in accordance with E.U. regulations.

We have a direct payment system in place with Voluntary Health Insurance, Quinn Healthcare and Vivas.

9.0 ACCESS TO RECORDS

9.1 How to Obtain Information (Routine & Administrative Access)

Applications for information can be made under the following:-

9.1.1 Routine Access

St. John's Hospital currently makes information routinely available to the public about its functions and services. Information leaflets, guidelines, application forms and other general information will still continue to be available without the need to use the **Freedom of Information Act**.

9.1.2 Administrative Access

Access to records containing personal, medical or clinical data should generally be provided administratively. Therefore it should not be necessary to use the **Freedom of Information Act** to obtain this information. This form of access is known as "Administrative Access". All administrative access applications must be in writing and forwarded to the Administration Department. It is Hospital Policy that Administrative Access requests are dealt with, within or less than the same time limits as Freedom of Information requests.

With regard to accessing records, if there is any aspect of your record which you would like to discuss, we will arrange for you to meet with an appropriate Hospital representative who will make every effort to assist you with your query/request.

9.1.3 Form of Access

Access may be offered to requesters in the following format.

You may:-

- (i) view the information / record
- (ii) receive a copy of the information / record
- (iii) receive a computer disk, (if the record is stored in this form)

9.1.4 Exceptions to Administrative Access

Where access to a record of information **cannot** be provided to you directly under administrative access, you will be informed of this and advised of the option of making an application under the **Freedom of Information Act**. Likewise, certain information may be of such a sensitive nature that requests for access can only be dealt with under the **Freedom of Information** legislation.

9.1.5 Other Mechanisms for Access to Records

Information and records are the property of St. John's Hospital. They are kept under strict security and apart from the circumstances above, may only be removed from the Hospital under the following conditions:-

- (i) Upon a Court Subpoena
- (ii) Search Warrant
- (iii) Court Order
- (iv) Police Investigation
- (v) Request and/or Investigation by the Information Commissioner/Ombudsman
- (vi) By an Officer authorised in writing by the Minister for Health & Children

Current statutory provisions in Health legislation may apply to the disclosure of information. Therefore, the release of such records/information will be made on the grounds of public interest and on the basis of upholding, enforcing and/or administering the law.

10.0 ACCESSING INFORMATION UNDER THE FREEDOM OF INFORMATION ACTS 1997 & 2003.

Under the **Freedom of Information Acts 1997 & 2003**, you are entitled to apply for access to information not otherwise publicly available. You have a right to:

- access records held by St. John's Hospital
- correct personal information relating to yourself held by the Hospital where it is incomplete, incorrect or misleading
- access reasons for decisions made by the Hospital directly affecting you

The following records come within the scope of the Act:

- all records held by the Hospital which were created after 21st April, 1998
- any record created before 21st April, 1998 if this record is necessary for understanding a record created after 21st April, 1998
- all personal information about you which is held by the Hospital regardless of when the records were created
- personnel records of St. John's Hospital staff can be requested after 21st April, 1995 or earlier records may be accessed if they are liable to be used adversely against a staff member.

10.1 Making an Application under the Freedom of Information Acts 1997 & 2003

Requests for information under the **Freedom of Information Acts 1997 & 2003** must be made in writing. In preparing your request, you should follow these guidelines.

- **State that your Request is under the Freedom of Information Act.**
No legal formulas are required. It is sufficient to mention the name of the Act or that you are making a **Freedom of Information** request. If you request records which are only available under the Act, without explicitly mentioning the act, you will receive a letter from the Hospital informing you of this.
- **Provide Sufficient Information**
You should provide enough information to enable St. John's Hospital staff to identify the records requested. An unnecessarily vague request may make your request difficult to deal with and also expensive.
- **Specify Preferred Medium of Access**
State the preference you have regarding the format in which the records are to be supplied i.e. inspect the originals; obtain photocopies; obtain computer disk etc. Please note some records may not be available in computerised format.
- **Provide Full Personal Contact Details**
Please state your full name, address, date of birth and telephone number so that we will be able to contact you, should the need arise.

- **Provide Identification**
Before you are given access to your personal information, the Hospital will need proof of your identity. If you are requesting personal information in respect of another person, the consent of that person is required.
- **€15.00 Fee**
In accordance with the Freedom of Information (Amendment) Act 2003 there is an application fee of €15.00 required for all non-personal requests. This fee must accompany the request.

You do not have to give any reason for wanting access to the record and no person has the right to demand such reasons from you. The **Freedom of Information Act, 1997** prohibits the denial of access based on your real or presumed motives in requesting a record. If you have any difficulty in identifying the precise records which you require, the Freedom of Information Officer or other appropriate staff will be happy to assist you in preparing your request. However, in accordance with **Section 8(4) of the Freedom of Information (Amendment) Act 2003** it now allows that the requester's reasons for making the request may be taken into account where required by the Act, e.g. to assess public interest in favour of release, to assess benefit to an individual from release or to assess if frivolous or vexatious requests are being made.

Applications under the **Freedom of Information Acts, 1997 & 2003** should be addressed to :

**The Freedom of Information Officer,
St. John's Hospital,
St. John's Square,
Limerick.
Tel: (061) 462253 Fax: (061) 415231**

St. John's Hospital also provides Freedom of Information application forms on request. You may make an application by post or in person.

10.2 How Freedom of Information Applications are dealt with.

The **Freedom of Information Act** sets down strict time limits for the processing of your request.

- You should receive an acknowledgement of your request within two weeks of your receipt of your request. If there is a fee you will be given details of same.
- You should receive a reply to your request within four weeks of receipt of your request. However, St. John's Hospital may extend this period if:-
 - your request relates to a very large number of records
 - a large number of requests for the same record(s) have been made
 - the records relate to a third party who may have to be contacted.

- If the period is extended, you will receive notice of this before the end of the initial four-week period and the reasons for the delay will be given.
- If St. John's Hospital considers that your request should have been sent to another public body, the request shall be forwarded to that body and you will be notified that this has happened. This must be done not later than two weeks from the receipt of your request. Your request will be effective from the date it is received by the second public body. The request actually becomes effective on the date the second public body receives it.
- If St. John's holds some, but not all of the records you have requested, then you will be sent a letter informing you of this and supplying the name(s) and contact details of the other bodies from whom you should request those records not held by St. John's.

If your request is granted:

- You will receive a letter stating that your request has been granted;
- You will be told the name of the person dealing with your request;

If your request is refused:

- You will receive a letter stating that your request has been refused and giving reasons for the refusal;
- You will be informed of your rights of appeal and review, as set out below.

10.3 Rights of Appeal and Review

The Act sets out a series of exemptions to protect sensitive information, where its disclosure may damage key interests of the State or of third parties. Where St. John's Hospital invokes these provisions to withhold information, the decision may be appealed. Decisions in relation to deferral of access, charges, forms of access, etc. may also be appealed. Details of appeals mechanisms are as follows:-

10.3.1 Internal Review

You may seek internal review of the initial decision, which will be carried out by an official at a higher level if :-

- You are dissatisfied with the initial response received e.g. refusal of access, form of access, charges, etc.
- You have not received a reply within four weeks of your initial application. This is deemed to be a refusal of your request and allows you to proceed to internal review.

Requests for internal review should be submitted in writing to the Freedom of Information Officer marked "Internal Review". A request of internal review must be submitted within four weeks of the initial decision. St. John's Hospital must complete the review within three weeks. An internal review must

normally be completed before an appeal is made to the Information Commissioner. Fees in relation to non-personal information for Internal Review are outlined below.

Decision Makers

Human Resource Records	-	Frank White, H.R. Manager
Finance Records	-	Michael Corcoran, Accountant
Purchasing Records	-	Anthony Kilmartin, Purchasing Officer
Medical Records	-	Admitting Consultant
Corporate/Admin Records	-	Patricia Keeshan, Management Services Co-Ordinator.
Information Services	-	Darren O'Brien, I.S. Manager.

Internal Reviewers

Chief Executive	-	Tim Kennelly
Medical Board Chairman	-	Mr. R. Keane (<i>chair rotates every 2 years</i>)
Director of Nursing	-	Kay Hogan
Deputy Chief Executive	-	John Cummins

10.3.2 Review by the Information Commissioner

If, following completion of the Internal Review, your request has still been refused in part or in full, you may seek independent review of the decision by the Information Commissioner. Also, if you have not received a reply to your application for internal review within three weeks, this is deemed to be a refusal and you may appeal to the Information Commissioner.

Appeals may be made in writing to:

**The Information Commissioner,
18 Lower Leeson Street,
Dublin 2.
Telephone: (01) 6785222 Fax: (01) 6610570
e-mail : foi@ombudsman.irlgov.ie**

Applications for independent external review can be made to the Information Commissioner within six months of the completion of the internal review by the Hospital. The Information Commissioner will advise the applicant of her decision within four months. Fees in relation to non-personal information for Appeal to the Information Commissioner are outlined below.

10.3.3. Appeals to the High Court

A party to a review by the Information Commissioner or any other person affected by the decision of the Commissioner following such a review may appeal to the High Court on a Point of Law only.

10.4 Fees

Fees may be charged as follows:-

- In respect of personal records, no fees will be charged for copying the records requested unless a large number of records are involved. A fee of €6.35 will be charged per x-ray film.
- In respect of non-personal records there is a non-refundable application fee of €15.00 required. Fees may be charged for the time spent in efficiently locating and copying records, based on the standard rates in operation at the time of the request, currently €20.95 per hour and €0.04 per copy. €0.51 may be charged for a 3½ inch computer diskette. No charges may apply in respect of the time spent by public bodies in considering requests.
- A deposit of at least 20% must be sought where the total fee is likely to exceed €50.79. The requester should be notified of this within 2 weeks of their FOI request and should also be provided with an estimate as to how many hours searching will be required. In these circumstances the Hospital must, if requested, assist the member of the public to amend the request to reduce or eliminate the amount to be charged.

Charges may be waived in the following circumstances :-

- where the cost of collecting and accounting for the fee would exceed the amount of the fee
- where the information would be of particular assistance to the understanding of an issue of national importance
- in the case of personal information where such charges would not be reasonable having regard to the means of the requester.

Type of Request / Appeal	Original Request	Internal Review	Appeal to OIC
Access to personal information relating to the applicant	No Fee	No Fee	No Fee
Amendment to records (Section 17 of FOI Act)	No Fee	No Fee	No Fee
Statement of reasons (Section 18 of FOI Act)	No Fee	No Fee	No Fee
Appeal of decision to charge a fee	No Fee	No Fee	No Fee

Request to which Section 28(6) of the Act applies	No Fee	No Fee	No Fee
Access to a non-personal record by a non-medical card holder	€15	€75	€150
Request for a non-personal record by medical card holder or dependant of medical card holder	€10	€25	€50
Third parties appealing a decision of a public body to release their information on public interest grounds	-	-	€50