

Annual Report 2015



St. John's Hospital
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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

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FOREWORD

It gives me great pleasure to present the 2015 Annual Report of St John's Hospital Limerick. Our mission statement states that, "***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 service***" and in presenting this report I believe that St. John's did indeed strive to live its mission in 2015.

I want to acknowledge the commitment and support of my fellow Committee members, all of whom give of their time and expertise so generously on a voluntary basis. The Board met on 10 occasions during 2015. In addition, the Audit Sub-Committee also met on 3 occasions and their work greatly augmented the overall work of the Board. The Board members vast wealth of experience and wisdom and long-standing commitment to St. John's Hospital continues to be a great help to me

In 2015, the hospital commenced the delivery of our three year Strategic Plan 2015-2018. The plan articulates the five key focus areas for St John's in the next three years;- Sustain and expand the delivery of high quality safe services, Demonstrate that our corporate governance framework is effective and robust, Upgrade information and communication technology systems to national standards, Continue to develop the hospital infrastructure to underpin the quality of service we provide and to provide a positive patient experience, and Build on our reputation as a patient centred care provider. These five goals will continue to be the guiding light for the Management Committee until 2018.

The 2015 annual report provides an overview of progress and achievements in the year under review.

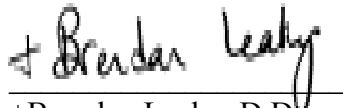
2015 was again challenging, particularly on the staffing front but services have improved and St John's is proving responsive to the needs of its patient and the local communities. For the second consecutive year the hospital has recorded a breakeven performance ending 2015 with an underspend of €1.170m, mainly due to a decrease in salaries and an increase in patient income, this despite a decrease of €0.481m in the allocation received from the HSE during 2015.

The major development on the operational and service front during 2015 was the total refurbishment of the Ground Floor during the summer and the development of an Acute Geriatric Service for patients. The upgrading of patient rooms, bathrooms, floors and corridors has greatly improved the area and made it more amenable to the delivery of modern day medicine. This area has been refurbished specifically to care for the frail elderly patient with the introduction of ceiling hoists and many aides and appliances. The subsequent appointment of a Physiotherapist, Pharmacist, Occupational Therapist, Dietician and a Medical Team to support a Geriatrician means that patients are assured multidisciplinary assessment and treatment in more optimal surroundings.

The emphasis on governance in healthcare continued to increase in 2015 and I am happy to say that St. John's corporate structure is still fit for purpose and on an annual basis we are able to demonstrate our compliance to best practice when requested. At national level the Voluntary Healthcare Forum has provided some support to Voluntary Hospitals on the matters of corporate governance and this has been greatly appreciated. Moving forward it is always important to keep reflecting on our corporate structure.

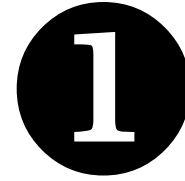
The Management Committee has enjoyed an excellent working relationship with the Chief Executive and members of the Senior Management Team. I have also had the opportunity to meet with many members of the public at various meetings and events throughout the country and to hear first-hand about the excellent work that is being undertaken by the hospitals' highly committed staff. I have also been struck by our staff's enthusiasm for St John's, despite the inevitable challenges that we are facing in a period of transition, and their commitment to St. John's continued development.

Finally, I would also like to thank our Patient Partnership Forum for their on-going support and assistance to the hospital. I look forward to continue working with the hospital Governors, Management Committee and staff over the coming years to ensure that St. John's Hospital continues to provide high quality health care to our patients in keeping with our tradition and long history.



+Brendan Leahy, D.D.
Bishop of Limerick

Executive



Summary



INTRODUCTION

This Annual Report for the year ending 31 December 2015 gives details of activity levels and financial performance for both 2015 and 2014. The Annual Report for Infection Prevention and Control is reproduced in Chapter 3. Activity statistics are shown in Chapter 4. The financial details are taken from the Audited Accounts and a copy of the Audited Accounts is reproduced in Chapter 5.

THE YEAR IN REVIEW

Thank You

Before identifying all the activity and developments that took place in St John's in 2015, it is appropriate that we thank each member of staff for their contribution throughout the year. Our staff are the face of St John's. In their interactions with patients, families and other staff they enhance people's lives and in doing so spread the mission and vision of the hospital. All of the activity and developments that follow flow from the hard work of the staff and for these we say "Thank You".

St. John's Strategic Plan 2015 - 2018

The Hospital Management Committee published the St. John's Strategic Plan 2015 - 2018 in February 2015. The plan was the culmination of several months' work involving consultation with all of our key stakeholder groups. The Strategic Plan identified five key objectives for this period as follows:

1. Sustain and expand the delivery of high quality safe services
2. Demonstrate that our corporate governance framework is effective and robust
3. Upgrade information and communication technology systems to national standards
4. Continue to develop the hospital infrastructure to underpin the quality of service we provide and to provide a positive patient experience
5. Build on our reputation as a patient centred care provider

Much work has already been done in respect of the five objectives and the document has helped focus management activity in 2015.

A copy of the hospital's Strategic Plan is available on the hospital website.

Service Delivery

(a) National Integrated Medical Imaging System (NIMIS)

St. John's completed installation of the NIMIS system on schedule and the system went 'live' on 24 February 2015. St. John's X-Ray Department images can now be viewed externally across the University of Limerick Hospital Group (ULHG) and in hospitals nationwide.

(b) iPMS Implementation

Implementation of the new national patient administration system (iPMS) commenced in the region in 2015. The proposal was for one installation in all six ULHG hospitals which posed data protection and governance issues for St. John's Hospital. The Data Protection Commissioner outlined that a Memorandum of Understanding was required between St. John's Hospital and the other hospitals in the region and this was signed in November 2015.

The system will go live in 2016 and will mean that the six hospitals in the group will be using the one patient administration system and patients will have the same medical record number no matter which hospital they attend. Hospitals can share patient demographic details so reducing the administration workload and reducing the risk of identification errors.

(c) Urgent Care Centre

The centre is now well established. The activity levels continue to grow marginally and feedback from patients and GPs is very positive. Initial staffing issues are currently resolved and indeed the unit now has an Advanced Nurse Practitioner, who greatly assists in the Local Injuries Unit.

(d) Laboratory Service

The proposed transfer of the major part of the laboratory service from St. John's to University Hospital Limerick (UHL) did not take place as scheduled in April 2015 as UHL were not in a position to accept the transfer. The transfer is deferred until issues at UHL are resolved.

Work continued in 2015 on a Blood Sciences Project for the laboratory services in the region which will lead to replacement of the ageing laboratory equipment across the UHLG with new equipment which will be common to all the laboratories.

It is anticipated that negotiations on integration of Laboratory Services will commence once the Blood Sciences Project is complete.

(f) Ground Floor Refurbishment

We have availed annually of the decreased patient activity during the summer months to carry out much needed refurbishments. The Ground Floor was the designated area for 2015. Initial plans were for upgrades to wards, bathrooms, flooring etc. The allocation of capital funding for an "acute geriatric service" enabled us to expand this further with the installation of ceiling hoists to each ward, the replacement of the patient call system and the installation of a "Wandering Patient" alarm system.

The refurbishment programme also addressed many of the environmental issues raised in the HIQA audit in December 2014.

(h) Minor Capital Funding 2015

St. John's Hospital has received further funding under the HSE's national equipment replacement programme this year. An amount of €0.155m was approved for a new Ultrasound Scanner for the X-Ray Dept., a new mobile x-ray machine, a Physiotherapy treadmill and exercise bicycle and a second light source and processor stack for the Endoscopy Unit. Diathermy Units approved in 2014 were also purchased in 2015.

In addition, capital funding of €0.444m was received for the Ground Floor refurbishment and was used to cover the building works, purchase the ceiling mounted patient hoists referred to above, new electric beds, pressure relieving mattresses, etc.

A capital grant of €0.024m was also approved by the HSE/The Irish Hospice Foundation's Project Advisory Group as a contribution to fitting out a Family Room with the balance of the project costs being met by the hospital.

(i) Acute Geriatric Service

The allocation of funding to St. John's for the provision of an acute geriatric service to facilitate increased patient flow from UHL to decrease the pressure on the Emergency Department has been a welcome development.

In consultation with all the key stakeholders we aim to provide increased medical input and access to physiotherapy, occupational therapy, speech and language therapy, dietetics and pharmacy who collectively will deliver a comprehensive geriatric assessment for each patient availing of the service as per the national clinical guidelines.

These increased resources will focus on decreasing the length of stay of our elderly population, getting them home quicker and increasing the patient flow from UHL.

(j) Capital Development Plan

St. John's Capital Development Plan was re-activated by the hospital Management Committee in 2015 with a proposed 90 single-bed rooms development to replace the present patient accommodation.

The project is supported by the UHL Group CEO, Prof. Colette Cowan, who is a member of the National Capital Steering Group. The application for the Capital Development Plan has been successful at National Acute Hospitals level and is listed for consideration at National Capital Development level.

The next stage of the project will see the appointment of an Architect to conduct a site feasibility study. The proposed development will provide much needed new patient accommodation to meet current standards.

(k) Site acquisition

The Management Committee is actively pursuing the acquisition of the derelict site adjacent to the Out-Patient Department (OPD) to facilitate further expansion of the OPD. The owner of the site is identified as Limerick City Council and discussions are on-going.

(l) Family Room

The hospital commenced restructuring of the Pastoral Care Department as a Family Room, following receipt of a Design and Dignity grant from the Irish Hospice Foundation. Construction work is almost complete.

The family room is to support the families of dying patients, who up to now would have had to stay on the ward corridors or in the patient lounges. They now have access to a quiet, purpose built room where they can rest and wait as a family.

(m) Wi-Fi for patients

Patient feedback is an important part of service development within the hospital and recent feedback demonstrated a request for Wi-Fi to be made available to patients. This service was installed in 2015.

(n) Nurse Staffing

St. John's Hospital in line with most other public hospitals, is facing great difficulties in recruiting nursing staff to replace staff who retire or leave for other reasons. We have sent representatives to staff recruitment fairs in Liverpool and Manchester and continue other recruitment efforts but the recruitment of nurses continues to challenge.

Our Director of Nursing, Ms Kay Hogan, also retired earlier this year. Following a recruitment process Ms Emer Martin was appointed to the position and will take up duty as our new Director of Nursing in January 2016.

Quality and Safety

(a) HIQA

The annual HIQA Hygiene Standards visit took place in November 2014 and the report was received in December 2014. The report highlighted problems associated with hand hygiene compliance and with patient surrounds on the Ground Floor. A Quality Improvement plan was formulated to address these issues in 2015 and the refurbishment of the Ground Floor addressed many of the infrastructure items raised in the report.

(b) Quality and Patient Safety

The Health Information and Quality Authority's planned approach to regulatory activity in public hospitals was issued in early 2015. The monitoring programme included the following:

1. Unannounced inspections against the National Standards for the Prevention and Control of Healthcare Associated Infection (PCHCAI)
2. A programme of monitoring against the National Standards for PCHCAI with a focus on Antimicrobial Stewardship
3. A review of the arrangements in place to ensure that patients are adequately assessed, managed and evaluated to effectively meet their individual nutrition and hydration needs (unannounced inspection)

In respect of monitoring programmes 2 and 3 outlined, the hospital was required to complete and return a self-assessment. Action Plans were drafted based on the finding of both self-assessments and are being actively pursued through the hospital's Drugs and Therapeutics Committee and Nutrition and Hydration Committee.

HIQA visited the hospital on 20 November 2015 with a follow-up announced inspection of antimicrobial stewardship. Feedback on the day from the inspectors was generally positive in the context of the services provided within the available resources. A hospital specific summary report and a single national report will issue towards the end of quarter one 2016.

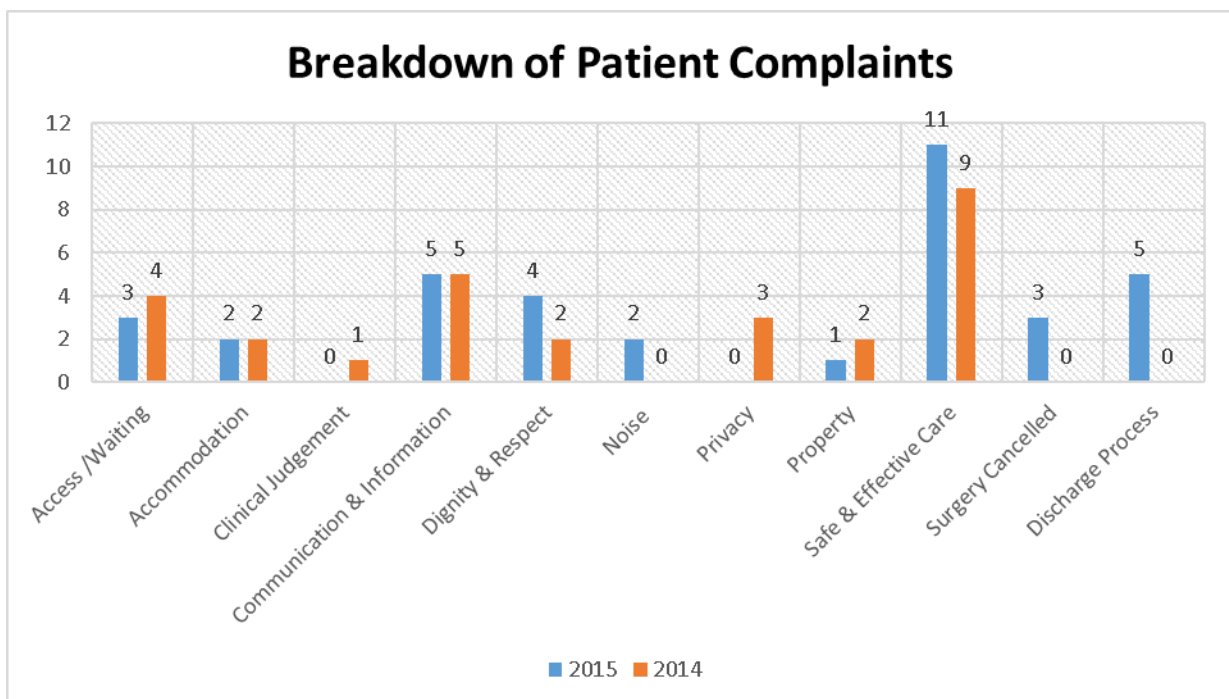
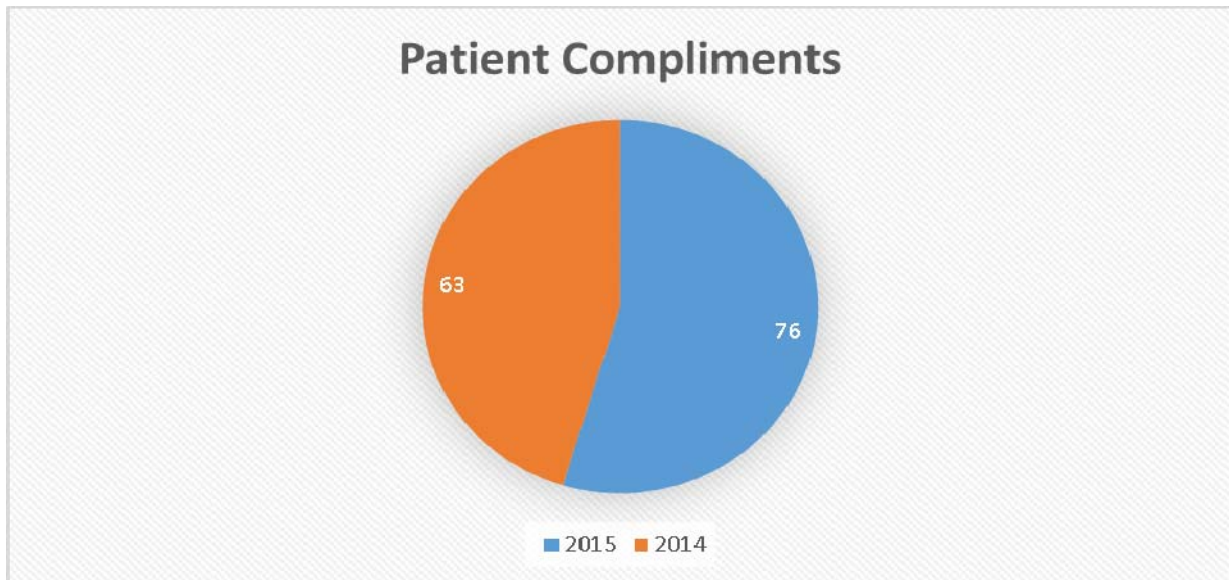
(c) Public Sector Energy Performance

St. John’s Hospital is working towards the government’s objective to improve public sector energy efficiency by 33% by 2020. Energy conservation/efficiency improvement was a major consideration in the Ground Floor Refurbishment Project in 2015 with replacement of cast iron radiators by new slim-line radiators, new energy efficient lighting, replacement windows and cut-off taps. Our medical gas plant was also replaced with newer and more energy efficient equipment. We are on track to meet our 2020 target.

(d) Patient Feedback

While St. John’s prides itself in high quality healthcare and it receives many very positive compliments from patients, it also receives negative feedback and it takes these comments very seriously, investigating each thoroughly, trying to address short fallings where they occur.

Complaints showed an increase of 21% in 2015.



Patient feedback is reviewed monthly by the Management Committee. While ensuring that issues identified are addressed, the Management Committee acknowledges the high level of positive comment received in respect of delivery of high quality care to our patients by all staff. The Committee appreciates the continued commitment and dedication of staff to keep the patient at the centre of their work in the face of the current challenging times.

Hospital Governance

(a) Annual Compliance Statement (ACS) 2015

This was the third year of the ACS, whereby Section 38 and 39 Voluntary Agency Boards are obliged to review their governance arrangements and to sign off that they are in compliance with "good governance standards" and that payment of all senior staff are also in accordance with the national consolidated pay scales. St John's signed the ACS in April as fully compliant.

(b) Service Level Arrangement (SLA) 2015

The SLA, our annual contract of services with the HSE, was also signed in Quarter 1. There has been much negotiation at national level concerning the SLAs for Voluntary Hospitals. A working group with representatives from the Dept. of Health, the HSE and the Voluntary Hospitals has met quarterly to review and amend the implementation of the SLA.

(c) Voluntary Healthcare Forum (VHF)

The VHF continues to increase its impact at a Dept. of Health and HSE level as it has now become the main vehicle of dialogue between the Voluntary Hospitals and both these bodies. This is a very welcome development and one that St. John's has been actively involved in. The work of the forum is vital for the Voluntary Hospitals as it deals with the many national strategic challenges.

(d) University Of Limerick Hospital Group

Little progress has taken place locally concerning the progression of a single "group" governance structure in 2015. However, much work is taking place nationally as the other hospital groups get up and running and attempt to deal with the challenges St John's and UHLG have faced since 2013. Indications from the Minister and the Department would suggest that it will be several more years before there are any further significant developments concerning local hospital governance arrangements.

(e) Management Committee meeting with UHL Group CEO

The Management Committee met with Professor Colette Cowan, UHL Group CEO on 13 July 2015. Issues discussed included St. John's future role in the delivery of health services in the Mid-West region, iPMS, NCHD staffing, Major Capital Development Plan, SLA and governance.

Prof. Cowan outlined that the future for St. John's Hospital is bright and stated the UHL did not have the capacity to take on the work carried out in St. John's Hospital.

It was acknowledged by all present that the lack of clarity on governance and management issues nationally was posing challenges for all organisations. Prof. Cowan undertook to work with the Management Committee through the Chief Executive and to work to the SLA in place.

FINANCIAL

The comparable figures for 2015 and 2014, under the headings of overall expenditure and income, are shown hereunder. The accumulated surplus at 31 December 2014 was €88,000 which was brought forward to 2015. There was a surplus of €1,170,000 at year-end, mainly due to a decrease in salaries and an increase in patient income.

There was a decrease of €0.481m in the allocation received from the HSE during 2015. This was mainly due to the fact that the 2014 allocation included funding related to 2013 expenditure.

	2015 €000	2014 €000	% Increase/ (Decrease)
(SURPLUS)/DEFICIT B/F FROM PREVIOUS YEAR	(88)	258	
SALARIES/WAGES	18,175	18,935	(4.0) %
GOODS/SERVICES	7,732	7,484	3.3 %
TOTAL EXPENDITURE	25,819	26,677	(3.2) %
INCOME	7,423	6,718	10.5 %
NET EXPENDITURE	18,396	19,959	(7.8) %
ALLOCATION FROM HEALTH SERVICE EXECUTIVE	19,566	20,047	(2.4) %
(SURPLUS) DEFICIT	(1,170)	(88)	

Salaries and Wages

Salaries and wages decreased by €0.760m (4.0%) compared to 2014, mainly due to difficulties in recruiting nursing and paramedical staff. Also, additional NCHDs were directly recruited which resulted in less reliance on more expensive agency staff.

Goods and Services

The cost of goods and services increased by €0.248m (3.3%) compared to 2014, mainly due to the purchase of medical equipment. Areas where significant changes occurred were:-

	2015 €000	2014 €000	% Increase/ (Decrease)
OTHER MEDICAL EQUIPMENT	178	30	493 %
OTHER MEDICAL EQUIPMENT SUPPLIES	476	403	18 %
FURNITURE, CROCKERY & HARDWARE	67	27	148 %
MAINTENANCE MATERIALS SUPPLIES	327	417	(22) %

- Other Medical Equipment includes the purchase of ureteroscopes, hysteroscopes, cystoscopes and an endoscopy processor stack
- Other Medical Equipment Supplies includes the purchase of fifty infusion pumps
- Furniture Costs increased due to the purchase of patient lockers and over-bed tables
- Maintenance Costs decreased as 2014 included the first floor refurbishment cost

Income

Income increased by €0.705m (10.5%) in 2015. The main area where significant change occurred was:-

	2015 €000	2014 €000	% Increase/ (Decrease)
In-Patient Income	5,736	5,067	13 %

- In-Patient Income increased by €0.669m due to an increase in the number of patients opting for private accommodation

Prompt Payment of Accounts Act – Statement

Payments to suppliers are made within thirty days of receipt of the invoice or delivery of the goods or services, whichever is the later, unless an alternative payment period is specified in an agreed contract.

In 2015 there were 44 late payments totalling €201,327 which constituted 2% of total non-pay expenditure during 2015. These late payments attracted interest payments of €665.

LEGAL & BANKING 2015

Auditors: Grant Thornton,
Chartered Accountants & Registered Auditors,
Mill House, Henry Street, Limerick.

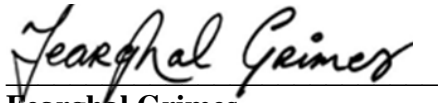
Bank: Bank of Ireland,
125 O'Connell Street, Limerick.

Legal Advisors: Dundon Callanan Solicitors,
17 The Crescent, Limerick.

Insurance Brokers: AON Ireland,
Metropolitan Building, James Joyce Street, Dublin 1.

PATIENT PARTNERSHIP

I would like to thank our Patient Partnership Forum for their continued activities in 2015 to assist us to further improve the quality of service that we provide to our patients. Their input to the refurbishment of the Ground Floor and the Family Room greatly contributed to the success of each project



Fearghal Grimes
Chief Executive

2

Governance & Management



BOARD OF GOVERNORS

Chairman:

Most Rev. Brendan Leahy, D.D.

Members (Ex-Officio)

Mayor of Limerick (1 Jan.–18 June 2015)

Her Worship Cllr. Michael Sheahan

Mayor of Limerick (19 June–31 Dec. 2015)

His Worship Cllr. Jerry O’Dea

Administrator:

St. John’s Parish

Very Rev. N. Kirwan

St. Mary’s Parish

Very Rev. D. O’Malley, P.P.

St. Michael’s Parish

Very Rev. L. McDonnell, P.P.

St. Munchin’s Parish

Very Rev. D. McNamara, P.P.

St. Patrick’s Parish

Very Rev. D. Gibson, P.P.

L.C.M. Nominees:

No nominees 2015

Limerick City Council Nominees:

Cllr. Maria Byrne

Cllr. Gerald Mitchell

Cllr. Jerry O’Dea (1 Jan–18 June 2015)

Cllr. Kieran O’Hanlon (21 July–31 Dec 2015)

Cllr. Cian Prendiville

Life Governors:

P.E. Burke, BSc., M.D., F.R.C.S., F.R.C.S.I.

G.L. Cantillon, M.Ch.

Brendan Conroy, M.D., F.F.A.R.C.S.I.

Morgan Costelloe, M.B., B.Ch., B.A.O.

Cornelius J. Cronin, M.B., B.Ch., F.R.C.P.I.

Una Fahy, M.D., M.R.C.O.G.

Peter N. Faul, MB, MRCPI, FRCPath, FFPPath(RCPI)

Joseph G. Geary, F.C.A., A.I.T.I.

Sr. Mary Hassett

Josephine Hennessy

Patricia Humphreys, M.B., F.F.A.R.C.S.I.

Raphael Keane, B.A., M.Ch., F.R.C.S.I.

Fasih Khan, M.B., B.S., F.F.A.R.C.S.I.

Joseph Lee, M.B., M.S., F.F.A.R.C.S.I.

Mary McCarthy

Dermot Molony, M.B., M.A.O., F.R.C.O.G.

Eithne Mulloy, M.B., F.R.C.P.I.

J.P. Roche Esq.

MANAGEMENT COMMITTEE

Member	Role	Appointment Period
Most Rev. B. Leahy, D.D.	Chairperson	On holding office
Cllr. Michael Sheahan*	Deputy Chairperson	1 January – 18 June 2015
Cllr. Jerry O'Dea**	Deputy Chairperson	19 June – 31 December 2015
Very Rev. N. Kirwan	Member	On holding office
Dr. Dermot Molony	Member	1 January – 31 December 2015
Dr. Eithne Mulloy	Member	1 January – 31 December 2015
Dr. Una Fahy	Member	1 January – 31 December 2015
Little Company of Mary	Member	No nominee 2015
Little Company of Mary	Member	No nominee 2015

* Tenure expired 19 June 2015 ** Appointed to the Committee 19 June 2015

Committee Attendance in 2015

Member	Feb	Mar	Apr	May	Jun	Jul	Sep	Oct	Nov	Dec
Most Rev. B. Leahy, D.D.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Cllr. Michael Sheahan*	Yes	Yes	Yes	No	Yes					
Cllr. Jerry O'Dea**						Yes	No	No	No	No
Very Rev. N. Kirwan	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	No
Dr. Dermot Molony	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Dr. Eithne Mulloy	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Dr. Una Fahy	Yes	No	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes

* Tenure expired 19 June 2015 ** Appointed to the Committee 19 June 2015

In Attendance

Name	Role
Fearghal Grimes	Chief Executive / Secretary
John Cummins	Deputy Chief Executive
Kay Hogan	Director of Nursing (January – June 2015)
Margaret Finn	Acting Director of Nursing (July – December 2015)
Patricia Keeshan	Management Services Co-ordinator

SUB-COMMITTEE: AUDIT COMMITTEE

The hospital's Audit Committee produced its Annual Report to the Management Committee in May 2015. It outlined the Committee's activities and included a performance review and evaluation.

The Committee was satisfied with the activities of the Audit Committee and approved its Annual Report.

Member	Role	Appointment Period
Mr. Brendan Lane	Chairperson	2014 – 2016
Ms. Josephine Hennessy	Member	2014 – 2016
Mr. Ralph Keane	Member	2014 – 2016
Ms. Patricia Keeshan	Secretary	2014 - 2016

Committee Attendance in 2015

	Feb	May	Nov
Mr. Brendan Lane	Yes	Yes	Yes
Ms. Josephine Hennessy	Yes	Yes	Yes
Mr. Ralph Keane	Yes	Yes	Yes

SENIOR MEDICAL STAFF

- ANAESTHETISTS:** Joseph G. Lee, MB, MS, FFARCSI
Brendan Conroy, MB, FFARCSI
Fasih Khan, MB, BS, FFARCSI
*John Kennedy, MB, FFARCSI
*P.J. Breen, MB, FFARCSI
- CONSULTANT IN EMERGENCY MEDICINE:** *Gareth Quin, MRCPI, FRCS(Ed), FFAEM
- E.N.T./HEAD & NECK SURGEON:** *Neville Shine, FRCS(ORL-HNS) MB BCh BAO
- GASTROENTEROLOGIST:** *Maeve Skelly, PhD, FRCPI
- GYNAECOLOGISTS:** Catherine M. Casey, MRCOG, MRCPI, Dip.PST, DCH
*Una Fahy, MD, MRCOG
- PATHOLOGISTS:** Peter N. Faul, MB, MRCPI, FRCPath., FFPPath.(RCPI)
*Maeve Leahy, MD, FRCP, FRCPath.
*Nuala O'Connell, MB, BCh, BAO, MSc, MRCPath.MD.
*Denis O'Keefe, MB, MRCPath.
- PHYSICIANS:** Cornelius J. Cronin, MB, BCh, FRCPI
Eithne M.T. Mulloy, FRCPI
*Liam Casserly, MB, MRCPI
Heather Holloway, FRCPI (sessional)
Paul Finucane, MB, BCh, MRCPI (sessional)
- SURGEONS:** Paul E. Burke, BSc, MD, FRCS, FRCSI
*Anne Merrigan, FRCSI

* Denotes sessional commitments from Consultants holding their contracts with the HSE Mid-Western Regional Hospital

Additional Consultants are also now providing sessions in St. John's Hospital as part of the on-going reconfiguration of services in the region.

3

Infection Prevention and Control



INTRODUCTION

St. John's Hospital endeavoured to provide and maintain an effective and efficient infection prevention and control programme in 2015 in recognition of the integral role it plays in the delivery of safe patient care. The Infection Prevention and Control Committee oversee all aspects of infection prevention and control, surveillance of alert organisms and delivery of education to all grades of staff.

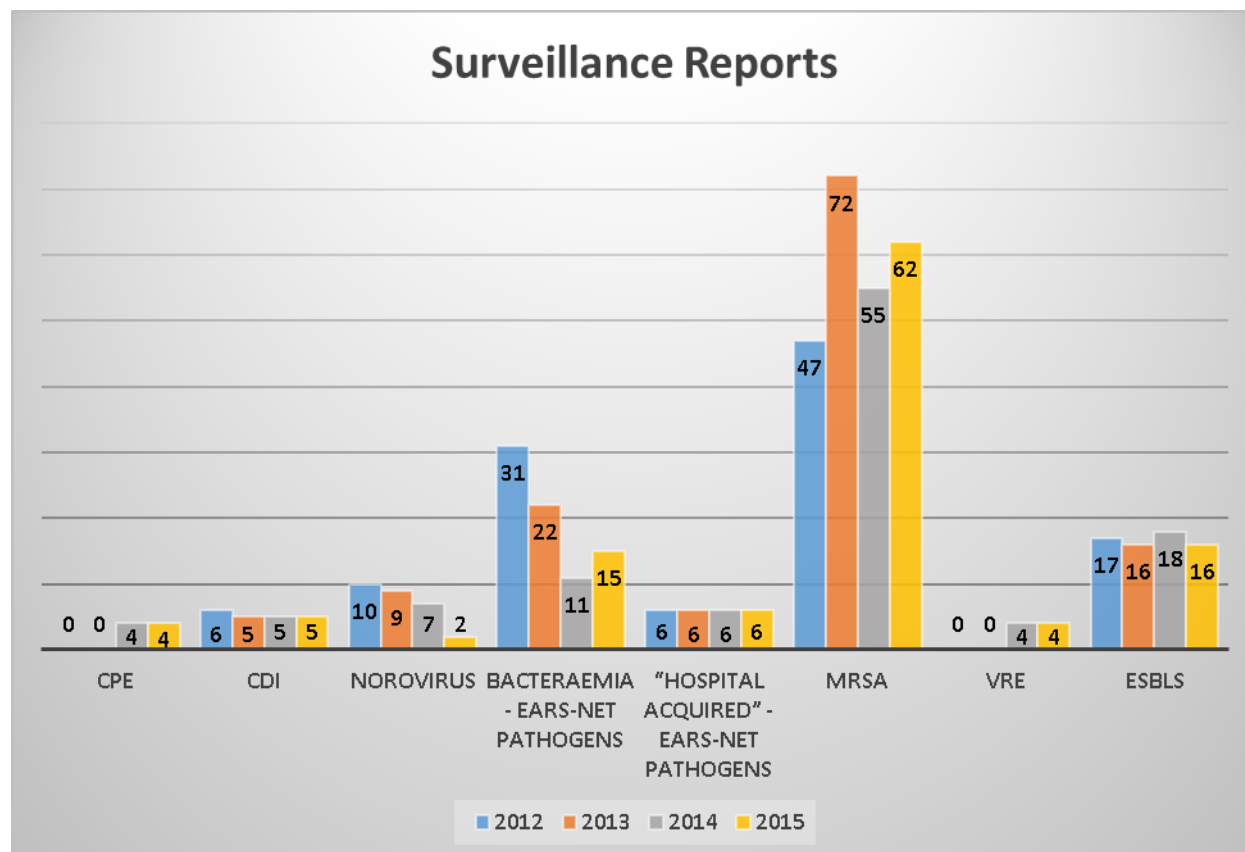
The Committee meets on a regular basis and Infection Prevention and Control is also a standing item on the agenda for meetings of the hospital's Management Committee.

Our Patient Partnership Forum plays an active part in promoting best practice, by actively participating in audits and making very practical recommendations. St John's Hospital also has a strong link with the Consultant Microbiologist in University Hospital Limerick who liaises regularly with our Infection Prevention & Control Clinical Nurse Specialist and is a valued member of the Infection Prevention and Control Committee.

SURVEILLANCE OF INFECTIONS

Surveillance forms a major part of the control of infection in St. John's Hospital. Surveillance Data is collected and collated in the Microbiology Department in University Hospital Limerick. We acknowledge the great assistance of the Consultant Microbiologists and the Surveillance Scientists in providing this valuable information.

The following Table compares the Surveillance Reports for 2012, 2013, 2014 and 2015:



1. CPE = Infection with Carbapenemase Producing Enterobacteriaceae
2. CDI = Clostridium Difficile Infection, a common cause of mortality and morbidity in hospital patients.
3. Norovirus (previously known as “the Winter Vomiting Bug” or Small Round Structured Virus – SRSV).
4. The European Antimicrobial Resistance Surveillance Network (EARS-Net) provides comparable and validated data on the prevalence and spread of major invasive bacteria with clinically and epidemiologically relevant antimicrobial resistance in Europe
5. MRSA = Meticillin Resistant Staphylococcus Aureus
6. VRE = Vancomycin Resistant Enterococcus
7. ESBLs = Extended-Spectrum β -Lactamases and enzymes produced by some types of bacteria that make these bacteria resistant to most antibiotics,

The enhanced surveillance includes information such as patient risk factors, sources of infection and patient outcomes and allows the ‘hospital/community acquired’ status of the bacteraemia to be determined. Enhanced surveillance is conducted by the Infection Prevention and Control Clinical Nurse Specialist. This surveillance is conducted on all bacteraemia cases associated with the EARS-Net pathogens. The national form is completed and submitted to the Surveillance Scientist for national reporting. The same surveillance applies to all cases of Clostridium difficile associated diarrhoea. Cases of phlebitis associated with peripheral lines are also investigated. St. John’s Hospital has an intensive admission screening protocol which continued during the year and expanded to screen patients transferred from other hospitals for CRE species.

Education and Training continued to be a key component in combatting avoidable infection in St. John’s Hospital in 2015. Monthly training sessions were held in the classroom and there was also ward/department based training. There is a mandatory training programme for Hand Hygiene and Standard Precautions. Clinical staff receive regular education sessions which focus on specific infection prevention and control related topics, Training may be on a new product, updated changes to a policy, feedback on clinical audit, etc. There was an increased focus on hand hygiene education and awareness throughout the hospital in 2015. A total of 462 staff attended at 63 hand hygiene training sessions held in 2015, with 191 staff attending 63 Blood Borne Virus training sessions and a further 104 staff attended at 24 Standard Precautions training sessions. All staff in patient areas are required to attend hand hygiene training every year and attendance for all other staff is mandatory every two years.

St. John’s Hospital took part in the National Hand hygiene audits during 2015. There were two such audits in May/June and October/November 2015. The overall compliance rate for May/June 2015 was 75.5% and the rate of compliance was 84.5% in October/November 2015.

In addition to the hand hygiene audits above, there was also an extensive infection prevention and control audit programme completed in 2015 incl. clinical room audits, isolation room audits, linen audits, sharps audits, peripheral catheter audits and urinary catheter audits.

A number of infection prevention control documents, e.g. “Guideline for the transportation, storage, segregation and handling of linen”; “Guideline for the prevention of Infection in Peripheral vascular catheters”; “Guideline for hand hygiene”; “Standard Infection Prevention & Control Guideline” and “Transmission based precautions” were also reviewed and updated in 2015.

WASTE MANAGEMENT ACTIVITIES

Dangerous Goods Safety Audit

Two dangerous goods safety audits took place at St. John's Hospital in 2015. The audits were completed by the Dangerous Goods Safety Adviser (DGSA) on 20th April 2015 and 30th October 2015. The DGSA also completed an Annual Report for 2015 on the activities of the hospital concerning the transport of dangerous goods and the storage of clinical and chemical waste.

The Audit Reports stated that:

“The level of compliance with the guidelines and regulations associated with the segregation, handling, storage and transport of dangerous goods in the Hospital was found to be very good” on the days of both audits. Areas commended from the audits included:

- Signing of sharps bins throughout the hospital wards.
- Clinical waste tag traceability system managed by the Stores department.
- Security of ward sluice and treatment rooms.
- Availability of safety data sheets in the Household department.
- Availability of clinical waste consignment documentation.
- Security of the clinical waste compound and medical gas cylinders cages.
- Segregation of healthcare risk waste in all areas visited during the audit.
- Completion of chemical agent risk assessments in the Pathology department.

There are procedures in place relevant to each individual department within the hospital relating to the activities associated with the segregation, storage, handling and transport of dangerous goods. These procedures are reviewed on an ongoing basis by staff within the hospital and during the audits completed by the designated DGSA.

Training sessions on the segregation, packaging and storage of healthcare waste continued in 2015. A total of 104 staff members attended 23 training sessions on the segregation, handling, storage and transport of clinical waste within the hospital. The waste segregation training was held on a monthly basis.

Chemical Safety Awareness training was provided to 31 personnel on six occasions in 2015.

The **DECONTAMINATION AND HYGIENE TEAMS** continued their great work in 2015 and reported to each meeting of the Infection Prevention and Control Committee. The Hygiene Team met on a fortnightly basis to oversee hygiene standards and the delivery of the hospital cleaning service. The Decontamination Team continued to ensure that reusable invasive medical devices (RIMDs) were safe for use on patients and handling by staff. A Track and Trace Endoscopy system was introduced in St. John's Hospital in 2015 as part national project. Tracking instrumentation through the decontamination lifecycle and linking this information to the individual patient, on whom the RIMD has been used, provides key quality assurance data, with patient safety as the core objective for project implementation.

HIQA AUDIT

St. John's Hospital developed a Quality Improvement Plan (QIP) to address the issues identified in the HIQA Audit on 19th December 2014 and this was uploaded on to the hospital website by 30th January 2015.

HIQA had commented that "the condition of the building impacts on the ability of staff to maintain a clean physical environment". The major capital development of the hospital is being re-activated again to advance the replacement of all the in-patient accommodation by a new building in the near future. In the interim, the issues raised are being addressed under an on-going refurbishment programme as resources permit. A major refurbishment programme of the Ground Floor took place on the summer of 2015 to attempt to address many of the Environment and Facilities Management issues raised in the November 2014 Hygiene Audit. All the patient wards were refurbished with new floor covering, white-rock panelling, re-painting, new hand sinks, new bed screens and bed curtains, etc. All the bathrooms and sluice rooms were also completely upgraded and there is general agreement that the newly re-furbished ward now facilitates the maintenance of much higher hygiene and infection prevention and control standards.

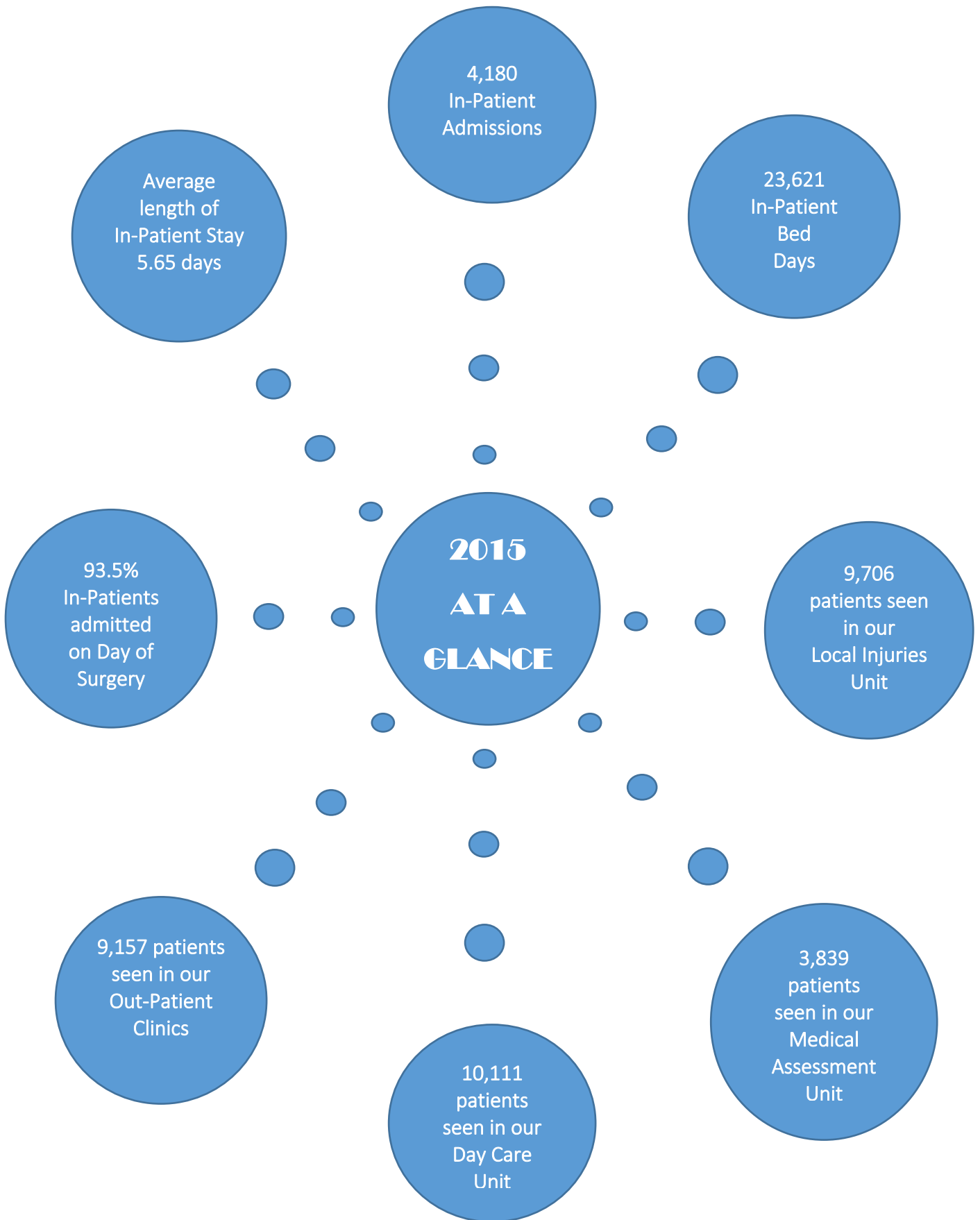
HIQA undertook a review of Antimicrobial Stewardship in St. John's Hospital on 20 November 2015. The draft report received was very positive overall. HIQA will collate findings nationally and create a single assurance report which will be published on their website in 2016.

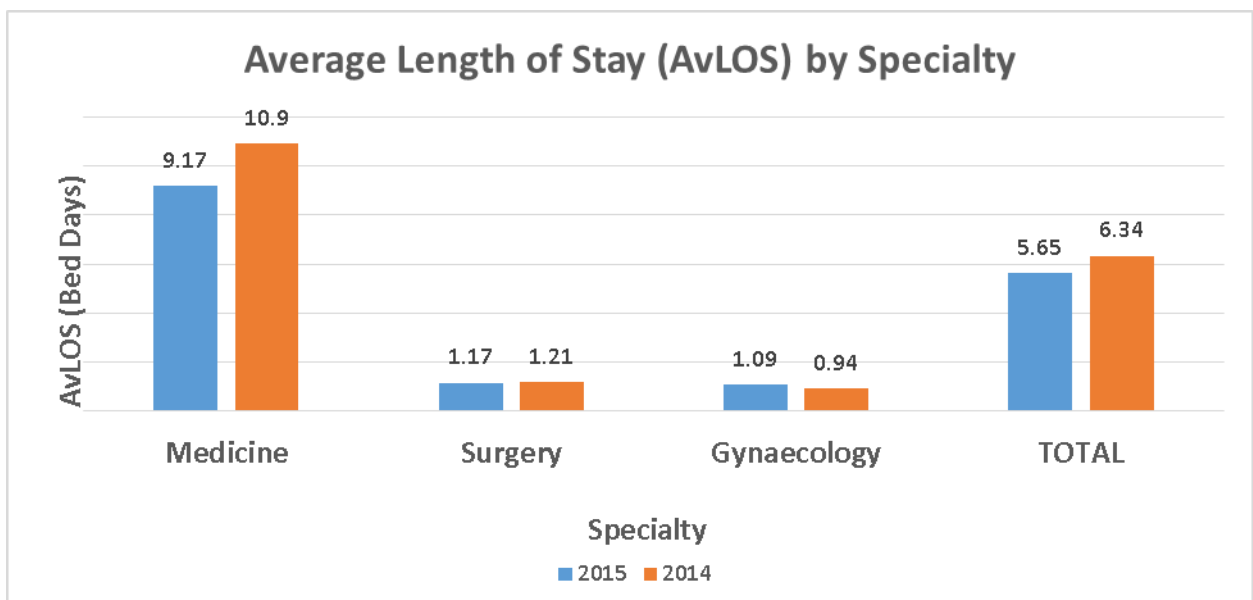
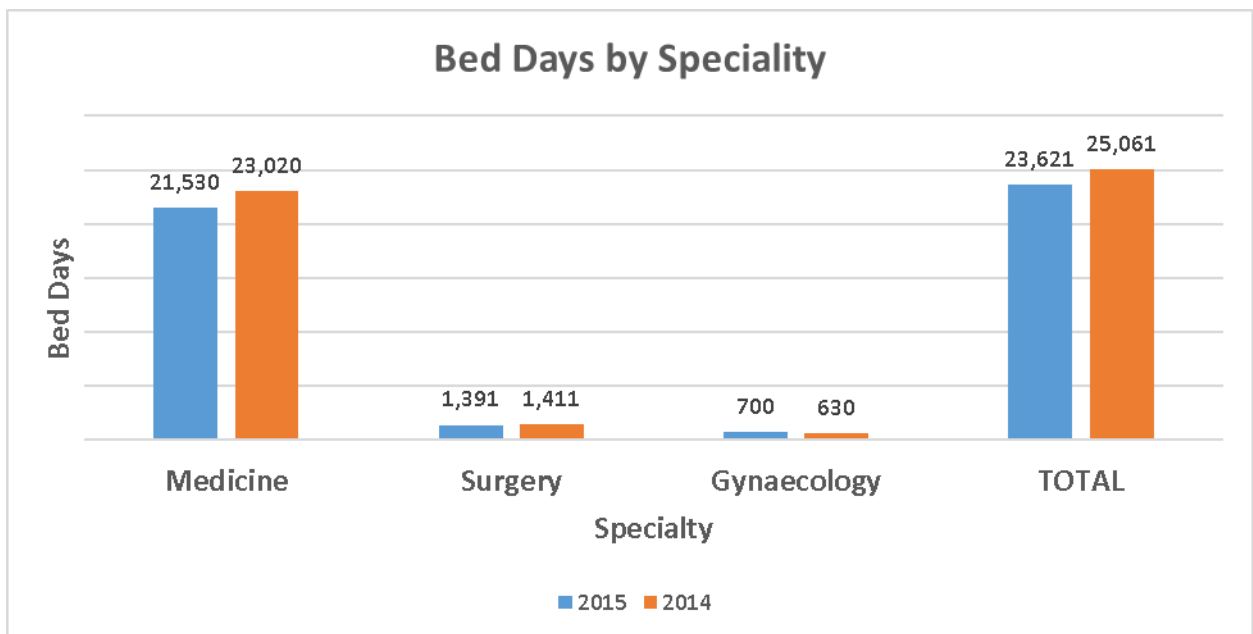
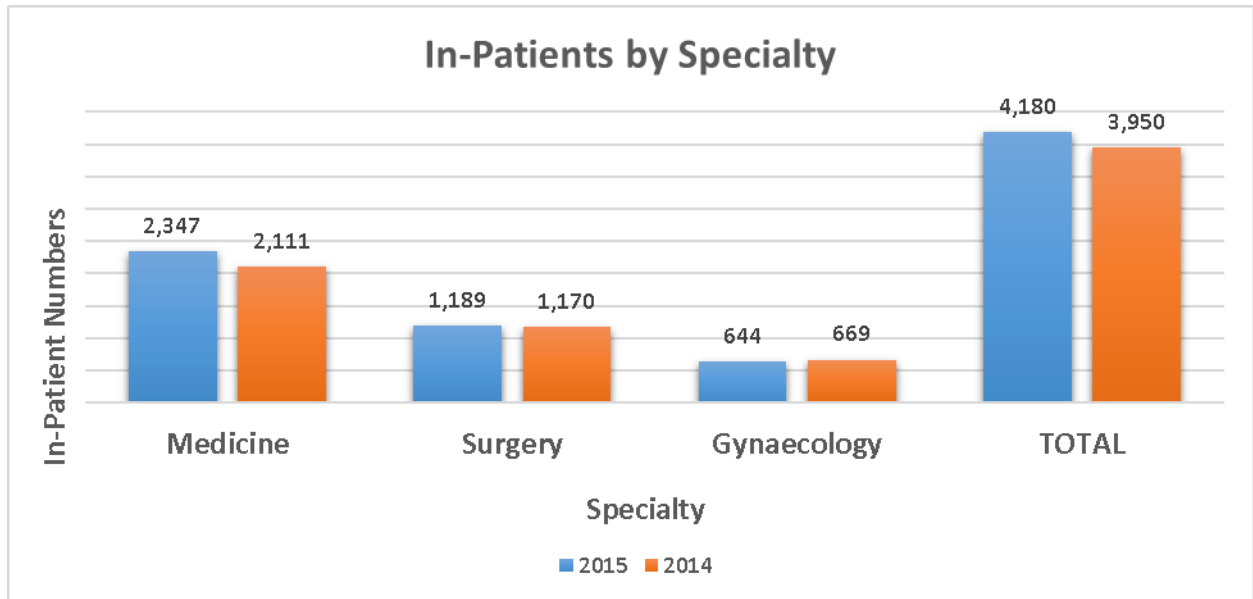
A sincere thank you is due to all the staff who contributed to infection prevention and control in St. John's Hospital in 2015.

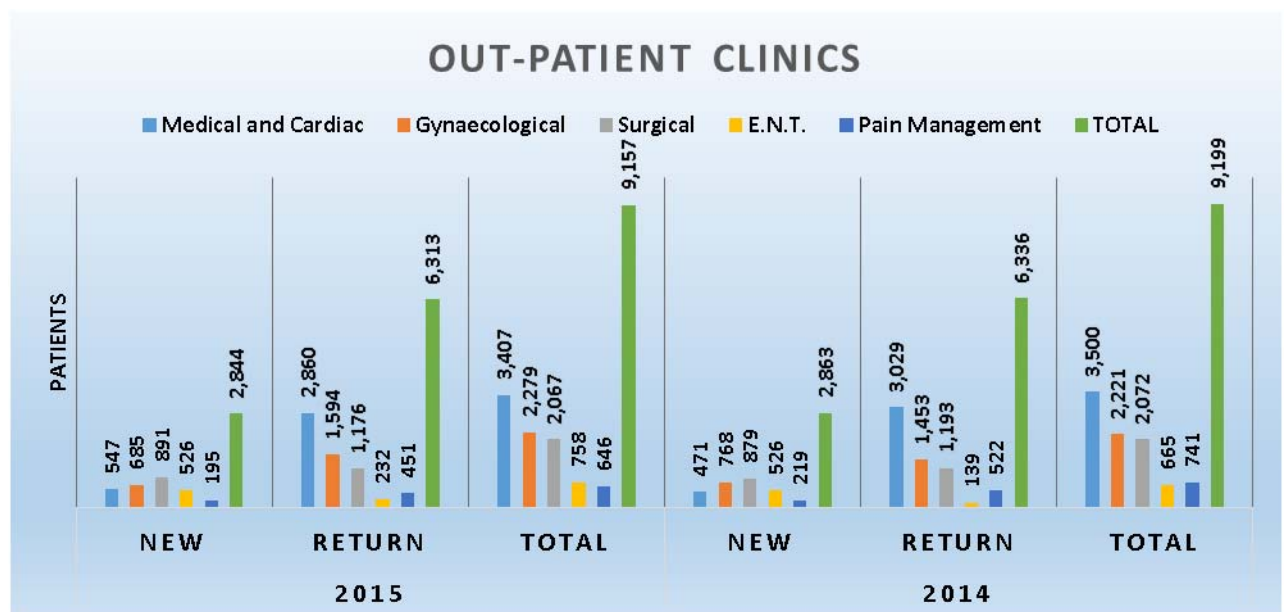
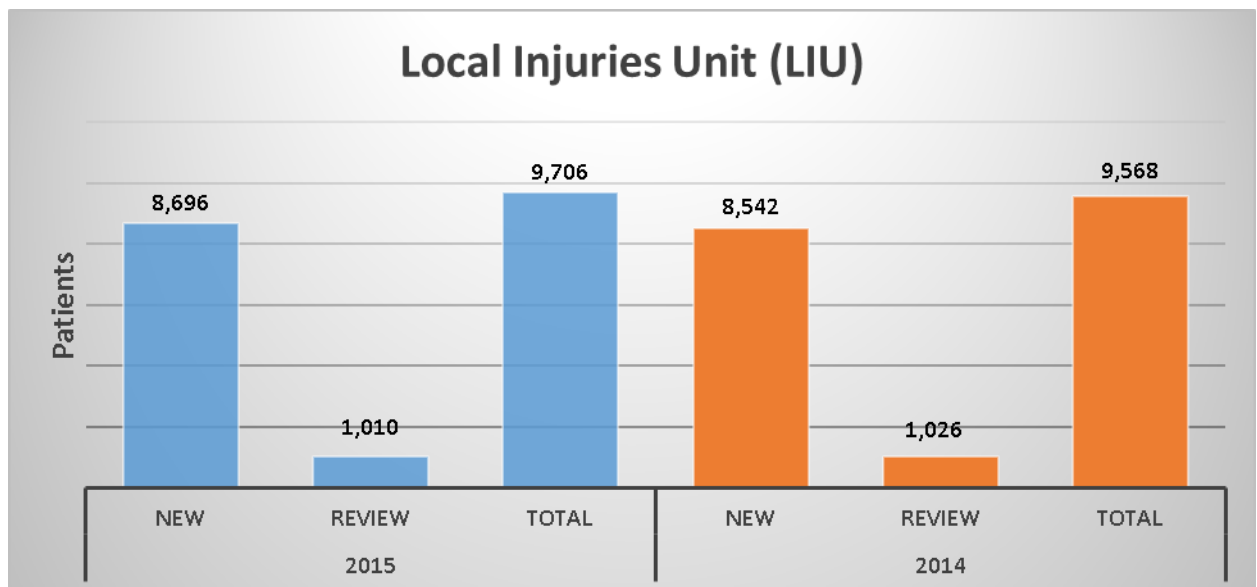
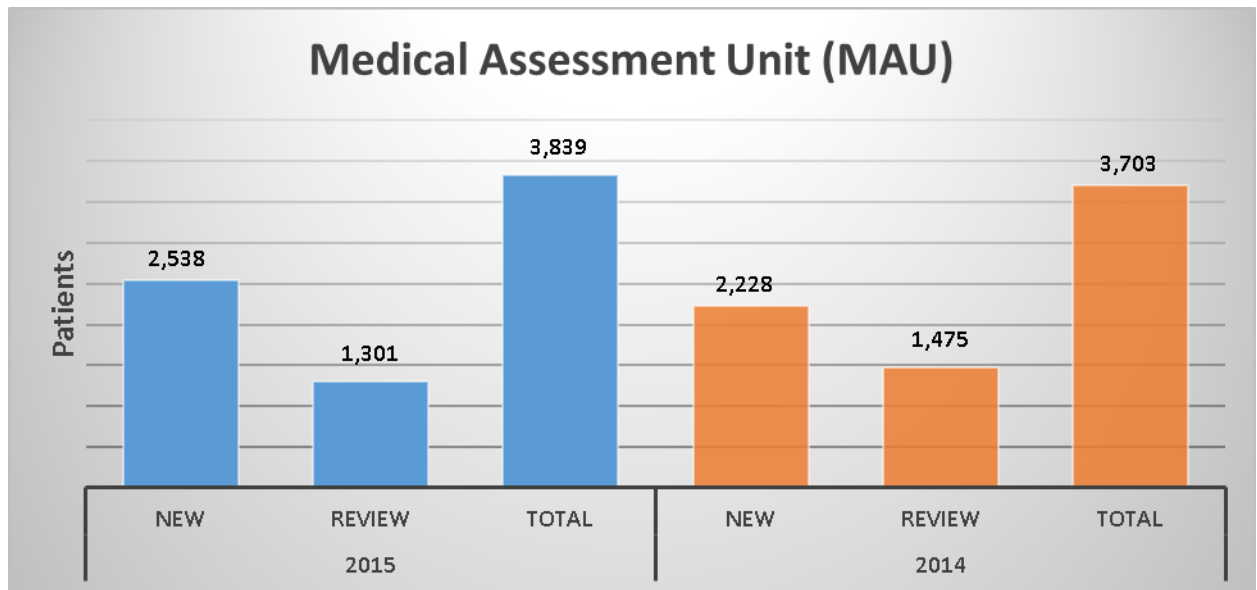
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Activity Statistics

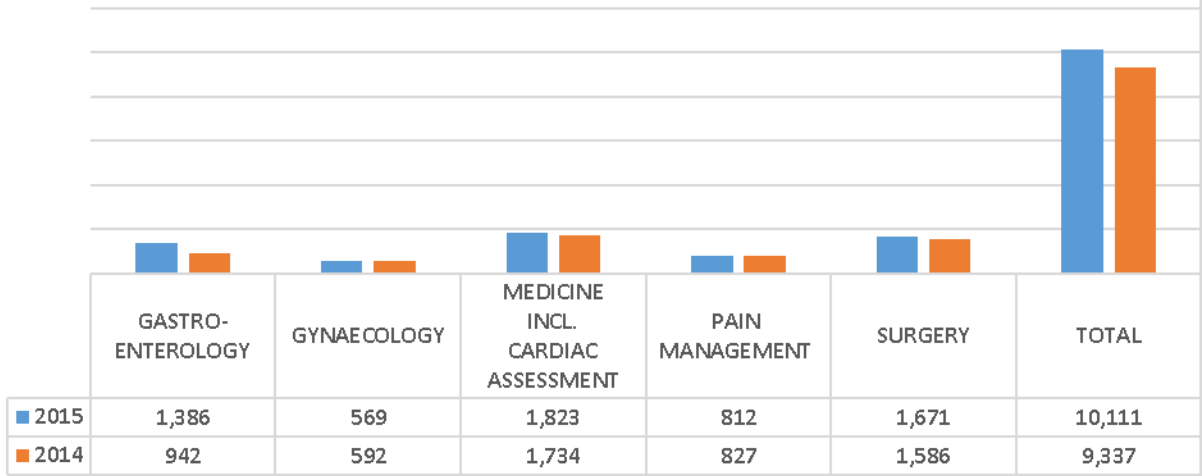








Day Care Patients



5

Audited Report & Accounts



Audited Report and Accounts

St. John's Hospital

Financial Statements

The following is a full and true copy of the Audited Financial Statements for the year ended 31 December, 2015.

Hospital Auditors: **Grant Thornton**
Chartered Accountants & Registered Auditors

St. John's Hospital

**Financial Statements
31 December 2015**

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St. John's Hospital

General Information

Address: Saint John's Square
Limerick

Main Bankers: Bank of Ireland
125 O'Connell Street
Limerick

Auditors: Grant Thornton
Chartered Accountants
& Registered Auditors
Mill House
Henry Street
Limerick

Solicitors: Dundon Callanan
17 The Crescent
Limerick

St. John's Hospital

Responsibilities of the Trustees and the Management Committee

Year ended 31 December 2015

The Trustees are required by the Scheme of Management as approved by the High Court on 26 November 1989, to keep accurate account of all receipts and payments on behalf of the hospital. This function is in practice devolved by the Trustees to the Management Committee. The Management Committee is required, in accordance with the guidelines and accounting standards issued by the Department of Health & Children, to:

- (1) Prepare financial statements which give a true and fair view of the results and state of affairs of the hospital,
- (2) Select suitable accounting policies which are consistently applied, identify and explain any departure from accounting standards,
- (3) Make judgements and estimates which are reasonable and prudent,
- (4) Safeguard the assets of the hospital and take reasonable steps for the prevention and detection of fraud.

On behalf of the Management Committee:

+ Brendan Leahy, D.D.

Chairperson

Fearghal Grimes

Chief Executive

Date: 30 May 2016

St. John's Hospital

Statement of the Board Members' Responsibilities in respect of the Annual Financial Statements

Year ended 31 December 2015

The members of the Board are responsible for preparing the annual financial statements in accordance with applicable law.

Section 36 of the Health Act 2004 requires St. John's Hospital to prepare the annual financial statements in such form as the Minister for Health and Children may direct and in accordance with accounting standards specified by the Minister.

In preparing the annual financial statements, Board members are required to: - select suitable accounting policies and then apply them consistently; - make judgements and estimates that are reasonable and prudent;

- disclose and explain any material departures from applicable accounting standards; and
- prepare the financial statements on a going concern basis unless it is inappropriate to presume that St. John's Hospital will continue in business.

The Board members are responsible for ensuring that accounting records are maintained which disclose, with reasonable accuracy at any time, the financial position of St. John's Hospital. The Board members are also responsible for safeguarding the assets of St. John's Hospital and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

On behalf of the Board:

+ Brendan Leahy D.D.

Chairperson

Fearghal Grimes

Chief Executive

Date: 30 May 2016

**Report of the Auditors to the Board of
St. John's Hospital**

We have audited the financial statements of St. John's Hospital for the year ended 31 December 2015 which comprise the Income & Expenditure Account, the Balance Sheet and related notes. The financial reporting framework that has been applied in their preparation is Standard Accounting Policy Guidelines for Voluntary Agencies set by the Department of Health and Children, ("the Guidelines"), and the accounting policies as set out on pages 49 and 50.

Respective Responsibilities of the Trustees, the Management Committee and the Auditors

As explained more fully in the Responsibilities Statements set out on page 41, the Trustees and the Management Committee are responsible for the preparation of the financial statements giving a true and fair view. Our responsibility is to audit and express an opinion on the financial statements.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of whether the accounting policies are appropriate to the organisation's circumstances and have been consistently applied and adequately disclosed, the reasonableness of significant accounting estimates made by the hospital and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the Management Committee Members report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

In our opinion the financial statements give a true and fair view of the Hospital's affairs as at 31 December 2015 and of its surplus and cash flows for the year then ended and have been properly prepared in accordance with the Department of Health & Children Guidelines.

In our opinion St. John's Hospital has complied with the regulations of the Prompt Payment of Accounts Act 1997.

Matters on which we are required to report

- We have obtained all the information and explanations which we consider necessary for the purposes of the audit.
- In our opinion proper books of account have been kept by the organisation.
- The financial statements are in agreement with the books of account.

Mill House
Henry Street
Limerick
30 May 2016

MR. JOHN NEVILLE FCA
(For and on behalf of)
GRANT THORNTON
Chartered Accountants
& Registered Auditor

St. John's Hospital

**Certification of Chief Executive Officer and Chairperson
for the year ended 31 December 2015**

We certify that the financial statements of Saint John's Hospital for the year ended 31 December 2015 as set out herein are in agreement with the books of account and have been drawn up in accordance with generally accepted accounting practices and with the accounting standards as laid down by the Minister for Health & Children.

These financial statements, which comprise pages 45 to 59 and the statement of accounting policies, on pages 49 and 50, give the true and fair view of the state of affairs of the hospital at 31 December 2015 and of its income and expenditure and cash flow for the year then ended.

On behalf of the Management Committee:

+ Brendan Leahy, D.D.

Chairperson

Fearghal Grimes

Chief Executive

Date: 30 May 2016

St. John's Hospital
Non - Capital Income and Expenditure Account for the year ended 31 December 2015

	2015	2014
	€000	€000
Cumulative Non-Capital (Surplus)/ Deficit B/F From Previous Year	(88)	258
Pay		
Salaries	15,658	16,501
Superannuation and Gratuities	2,517	2,434
	18,175	18,935
Non-Pay		
Direct Patient Care	3,389	3,083
Support Services	2,629	2,758
Financial & Administrative	1,714	1,643
	7,732	7,484
Gross Expenditure for the Year Includes Surplus from previous year	25,819	26,677
Income	7,423	6,718
Net Expenditure for the Year	18,396	19,959
Determination from HSE	19,566	20,047
(Surplus) C/F to Following Year	(1,170)	(88)

On behalf of the Management Committee:

+ **Brendan Leahy, D.D.**

Chairperson

Fearghal Grimes

Chief Executive

Date: 30 May 2016

Note: All figures are rounded to the nearest €000

St. John's Hospital
Capital Income and Expenditure Account for year ended 31 December 2015

	2015	2014
	€000	€000
Capital Income Sources		
HSE- Capital Grant	655	170
HSE - Charge on non-capital Income & Expenditure	30	-
HSE - Non-Capital Repayment of Loan Capital	-	-
Fund-raising - Capital only	-	-
EU Grants	-	-
Disposal, Net Proceeds of	-	-
Other	695	-
Total Capital Income	1,380	170

Capital Expenditure

Land	-	-
Buildings	-	-
Work-In-Progress	-	-
Equipment	255	170
Vehicles	-	-
Other	-	-
Capital Expenditure - Capitalised	255	170
Capital Expenditure - Not Capitalised	401	-
Total Capital Expenditure	656	170

Opening (Surplus) from previous year

(308)	(308)
(1,032)	(308)

Closing (Surplus) to following year

On behalf of the Management Committee:

+ Brendan Leahy, D.D.

Chairperson

Fearghal Grimes

Chief Executive

Date: 30 May 2016

Note: All figures are rounded to the nearest €000

St. John's Hospital
Balance Sheet as at 31 December 2015

	Note	2015 €000	2014 €000
<u>Fixed Assets</u>			
Tangible Assets	12	11,584	11,617
Financial Assets			
		11,584	11,617
<u>Current Assets</u>			
Debtors	13	3,980	4,398
Stocks	14	237	229
Investments		0	0
Cash in hand and bank balances		1,759	30
		5,976	4,657
<u>Creditors-Amounts Falling Due Within One Year</u>			
Creditors	15	3,774	3,403
Bank loans and overdraft		-	858
Obligations under Finance Leases			-
		3,774	4,261
Net Current Assets		2,202	396
Total Assets Less Current Liabilities		13,786	12,013
<u>Creditors-Amounts Falling Due After One Year</u>			
Bank Loans		-	-
Obligations under Finance Leases		-	-
		-	-
<u>Capital & Reserves</u>			
Non-Capital Income & Expenditure Surplus		1,170	88
Capital Income & Expenditure Surplus		1,032	308
Capitalisation Account	17	11,584	11,617
		13,786	12,013

+ Brendan Leahy, D.D.

Chairperson

Fearghal Grimes

Chief Executive

Date: 30 May 2016

Note: All figures are rounded to the nearest €000

St. John's Hospital
Cash Flow Statement as at 31 December 2015

	Note	2015 €000	2014 €000
Net Cash Inflow/(Outflow) from Operating Activities	18	1,943	(99)
<u>Returns on Investments and Servicing of Finance</u>			
Interest Paid on Loans and Overdraft		(5)	(7)
Interest Paid re Finance Leases			-
Equity Dividends Received			-
Interest Received			-
Net Cash (Outflow) from servicing of Finance		(5)	(7)
<u>Capital Expenditure</u>			
Expenditure from HSE Capital		(255)	(170)
Add back unpaid Capital Expenditure		-	-
Add back movements in finance lease obligations		-	-
		(255)	(170)
Capital Expenditure - Not Capitalised		(401)	-
Payments from non-capital, re acquisition of fixed assets		(266)	(30)
Receipts on sale of fixed assets		-	-
Net Cash (Outflow) from Capital Expenditure		(922)	(200)
Net Cash (Outflow) before Financing		1,016	(306)
<u>Financing</u>			
HSE Capital grant received		876	141
Receipts from other sources -acquisition of fixed assets		695	-
		1,571	141
Increase in investments		-	-
Capital element of finance lease rental repayments		-	-
Cash Inflow from movement in Debt and Lease Financing		-	-
Net Cash Inflow from Financing		1,571	141
Net Cash Flow		2,587	(165)
Increase/(Decrease) in Cash and Bank	19	1,729	(5)
Decrease/(Increase) in Bank Loans < 1 Year & O/D	19	858	(160)
Increase in Bank Loans > 1 Year	19	-	-
Changes in Net Debt		2,587	(165)

St. John's Hospital
Accounting Policies

1. Basis of Accounting

- (i) These accounts were prepared on an accruals basis under the historical cost convention, as modified for the valuation of fixed assets, in accordance with the accounting standards laid down by the Minister for Health & Children. Those standards also provide that the following, should be treated on a receipts and payment basis:- EU Funds, Road Traffic Accident Income, Out-Patients Charges and minor miscellaneous incomes.
- (ii) Grants from the Health Service Executive are the amounts for the year allocated by the Executive up to the date of certification of these accounts by the Chief Executive Officer.
- (iii) The currency used in these financial statements is the Euro denoted by the symbol €.

2. Fixed Assets

- (i) The fixed assets are also included in the balance sheet at cost or valuation, where the cost of each individual asset is at least €3,809 (computer equipment at least €1,270) and an equivalent credit is included in the balance sheet capitalisation account.
- (ii) The basis of valuation of the hospital's fixed assets is as follows:

Land: As advised by the Department of Health and Children.

Buildings: Valuation or cost, less accumulated depreciation.

WIP: Cost.

Equipment: Cost, less accumulated depreciation.

St. John's Hospital
Accounting Policies

3. Fixed Assets and Related Capital Account

Buildings were revalued at 30 June 2005 by Bruce Shaw and are stated in the accounts at the revalued amount.

Land is stated at 1 April 1981 valuation.

Plant and Equipment are stated at 31 December 1982 valuation and subsequent additions at cost.

In accordance with the guidelines, it is not policy of the hospital to charge depreciation on fixed assets to the income and expenditure account. Instead, depreciation, which is calculated on fixed assets is matched by an equivalent write down in the Capitalisation Account. The following bases and rates apply:

Land	No Depreciation
Buildings	2.5% Straight Line
WIP	No Depreciation
Equipment	20% Straight Line

4. Stocks

Stocks are valued at cost. Provision is made, where necessary, for obsolete, slow moving and defective stocks.

5. Pension Scheme

Contributions from employees who are members of the Voluntary Hospitals Superannuation Scheme are treated as income in accordance with the requirements of the Department of Health & Children. Pension payments under the scheme are charged to the Income and Expenditure Account when paid.

6. Bad Debts

Known bad debts are written off and appropriate provision is made for any debts that appear doubtful.

St. John's Hospital

Notes to the Financial Statements – 31 December 2015

Insurance : Note 1

Medical Defence

(a) Consultants
(b) NCHDs

Other

Public Liability
Employers Liability
Property
Other

	2015	2014
	€000	€000
	-	-
	-	-
	-	-
	2	5
	1	5
	22	18
	21	17
	46	45

Misc. Non-Capital Expenditure

On Capital Projects : Note 2

Land
Buildings
Work-In-Progress
Equipment
Vehicles
Other

	2015	2014
	€000	€000
	30	-
	-	-
	-	-
	-	-
	-	-
	-	-
	30	-

Miscellaneous Expenses : Note 3

Security
Publications Etc.
Membership / Subscriptions etc.
Interest on Late Payments
Education / Training
Shop / Restaurant Purchases
Other

	2015	2014
	€000	€000
	200	257
	2	2
	-	-
	1	0
	22	18
	-	-
	89	55
	314	332

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

Analysis of Patient Income : Note 4

In-Patients

Statutory In-Patient Charges
Private / Semi Private Charges
Long Stay Charges
Other In-Patient Charges

2015	2014
€000	€000
79	67
5,656	4,999
-	-
-	1
5,735	5,067

Out-Patients

Statutory Accident & Emergency Charges
Other Out-Patient Charges

59	54
-	-
59	54

Total Patient Income

5,794	5,121
--------------	--------------

Income From External Agencies : Note 5

Laboratory
Pathology
Radiology
Commissioning Services
Other

2015	2014
€000	€000
-	-
-	-
-	-
-	-
-	-
-	-

Other Income (Non-Capital) : Note 6

Shop / Restaurant Sales
Car Parking
Public Telephones
Pharmacy / stores sales - Staff & Patients
Recoverables
Insurance Claims
Fas Grants
Rents / Licences / Franchises
PP Admin. Charges
Fund Raising - Non-Capital only
Sundries
Equity Dividend Received
Interest received

2015	2014
€000	€000
-	-
-	-
-	-
-	-
-	-
-	-
-	-
-	-
0	1
-	-
-	-
144	99
-	-
-	-
144	100

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

Summary Pay Analysis (Memorandum Only)

Note 7

Basic Pay

Overtime

Premium Pay

Shift Allowance

Holiday / Public Holiday Premiums

Higher Degree

Special Nursing

On call / Standby

PRSI Employer

Travel Allowance

Other

	2015	2014
	€000	€000
	11,977	12,349
	307	236
	719	772
	-	-
	117	97
	-	-
	71	89
	202	229
	1,171	1,152
	3	1
	3,608	4,010
	18,175	18,935

Reconciliation of Expenditure to Cost of Services (Memorandum Only) : Note 8

Net Expenditure - Current Year

Deduct

Purchase of Equipment from Non-Capital

Funding of Capital Projects from Non-Capital

Loan Repayments - Principal Only

Depreciation on Disposal

Total Deductions

Sub-Total

Add-Back

Depreciation charge for Year

Running Cost of Service

	2015	2014
	€000	€000
	18,396	19,959
	266	30
	30	-
	-	-
	-	-
	296	30
	18,100	19,929
	554	457
	18,654	20,386

Road Traffic Accident (Memorandum Only) : Note 9

Balance at 1 January

Bills Issued in Respect of the Year

Less Cash Received during the Year

Less Waivers and other Write-Offs

Balance at 31 December

	2015	2014
	€000	€000
	2	2
	-	-
	-	-
	(1)	-
	1	2

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

**Statement of Advances & Balances Due From
HSE Non-Capital & Capital : Note 10**

Non-Capital

Total notified non-capital determination for the year
Less: Remittances from HSE Non-Capital in the year
Balance due from HSE in respect of the year

2015	2014
€000	€000
19,566	20,047
(18,038)	(18,170)
1,528	1,877
1,877	823
(1,877)	(823)
0	0

Balance due from HSE re previous year @ 1 Jan
Less: Remittances from HSE in year re: previous year
Balance due from HSE re previous year @ 31 Dec

**Total Balance of Approved Non-Capital
Determinations Due From HSE**

1,528	1,877
-------	-------

Capital

Total Capital Grants notified by HSE for the year
Less: Remittances from HSE Capital in the year
Balance due from HSE in respect of the year

655	170
(656)	-
(1)	170
191	162
(190)	(141)
1	21

Balance due from HSE re previous year @ 1 Jan
Less: Remittances from HSE in year re: previous year
Balance due from HSE re previous year @ 31 Dec

Total Balance of Capital Grants Due From HSE

0	191
---	-----

Gross Total Due From HSE Capital & Non-Capital

1,528	2,068
-------	-------

**Purchase of Equipment and Vehicles From
Non-Capital Account (Capitalised) : Note 11**

Other Medical Equipment
X-Ray / Imaging Equipment
Laboratory Equipment
Catering Equipment
Laundry Equipment
Maintenance Equipment
Farm & Garden Equipment
Computer Equipment

2015	2014
€000	€000
176	30
21	-
-	-
-	-
-	-
4	-
-	-
65	-
266	30
-	-
266	30

Vehicles Purchased

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

**Schedule of Fixed Assets
and
Depreciation : Note 12**

		Land	Buildings	Work-In Progress	Equipment	Total
		€000	€000	€000	€000	€000
Cost Or Valuation at	1-Jan-15	159	14,491	-	10,566	25,216
Transfers from Work-In-Progress		-	-	-	-	-
Sub-Total		159	14,491	-	10,566	25,216
Additions From Capital		-	-	-	255	255
Additions From Non-Capital		-	-	-	266	266
Disposals during the year		-	-	-	(2,091)	(2,091)
Cost / Valuation at	31-Dec-15	159	14,491	-	8,996	23,646
Accumulated Depreciation at	1-Jan-15	-	3,315	-	10,284	13,599
Depreciation charge for year		-	362	-	192	554
Disposals - Accumulated Depreciation		-	-	-	(2,091)	(2,091)
Accumulated Depreciation at	31-Dec-15	-	3,677	-	8,385	12,062
Net Book Amount at	1-Jan-15	159	11,176	-	282	11,617
Net Book Amount at	31-Dec-15	159	10,814	-	611	11,584

Valuation of Fixed Assets

Messrs. Louis De Courcy Ltd., Auctioneers, completed Professional valuations of fixed assets as follows:

		€
Land & Building	01/04/1981	4,114,581
Plant & Equipment	31/12/1982	808,620

The revision of the amounts stated was made to comply with the requirements of the Department of Health and Children. Subsequent additions under the various headings are stated at cost. In accordance with Department of Health and Children instructions. Land has been valued at the rate per acre advised by the Department.

Bruce Shaw completed an Insurance Reinstatement valuation of buildings at 20 October 2015 as follows:

Building	20/10/2015	30,677,956
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St. John's Hospital
Notes to the Financial Statements – 31 December 2015

Debtors : Note 13

HSE - Revenue Grants Due	
HSE - Capital Grants Due	
HSE Debtors	
HSE Mid-West	
Patients (Closing Ledger Balance)	
Less: Provision for bad and doubtful debts	
Other	
Prepayments	
Non-HSE & Non-HSE Mid-West Debtors	

2015 €000	2014 €000
1,528	1,877
-	-
1,528	1,877
0	191
3,943	3,304
(1,587)	(1,109)
0	38
96	97
2,452	2,330
3,980	4,398

Total Debtors

Stocks - Note 14

Drugs & Medicines	
Blood & Blood Products	
Medical Gases	
Medical & Surgical Supplies	
Sterile Supplies	
Pathology Supplies	
X-Ray / Imaging	
Provisions	
Laundry / Cleaning	
Bedding / Clothing	
Furniture / Crockery	
Heat / Power / Light Supplies	
Maintenance Supplies	
Office Supplies	
Computer Supplies	
Shop	

2015 €000	2014 €000
95	74
-	-
-	-
120	133
-	-
-	-
10	11
-	-
6	5
-	-
-	-
0	0
6	6
-	-
-	-
237	229

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

Creditors - Note 15

Creditors - Capital
 Creditors - Non-Capital
 PAYE and PRSI
 Wages and Salaries
 Other

2015	2014
€000	€000
-	-
760	1,094
426	433
741	1,215
1,847	661
3,774	3,403

Bank Loans - Greater Than One Year : Note 16

Bank Loans
 Deficit Bank Loan Account
 Deficit Financing Account

2015	2014
€000	€000
-	-
-	-
-	-
-	-

Capitalisation Account : Note 17

Balance at beginning of year

Additions

Capital Expenditure
 Non-Capital Expenditure

Sub-Total Additions

Less

Disposals
 Depreciation for the year

Sub-Total Deductions

Balance at year-end

2015	2014
€000	€000
11,617	11,874
255	170
266	30
521	200
-	-
554	457
554	457
11,584	11,617

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

Note To The Cash Flow Statement : Note 18

	2015	2014
	€000	€000
Surplus Non-Capital	1,170	88
Add back (Surplus)/Deficit brought forward	(88)	258
Surplus for current year	1,082	346
Deduct repayment of loan (Capital element) charged against non-capital	0	-
Deduct Interest and Dividend Income	0	-
Add back purchase of equipment from non-capital	266	30
Add back Interest charged against non-capital	5	7
(Increase)/Decrease in Stocks	(8)	39
Decrease/(Increase) in HSE Debtors (Non-Capital)	349	(1,055)
Decrease in HSE Mid-West Debtors	0	0
(Increase) in Non-HSE and Non-HSE Mid-West Debtors	(122)	(29)
Increase in Creditors	371	563
Net Cash Inflow from Operating Activities	1,943	(99)

Analysis of Changes in Net Debt : Note 19

	At 1	Cash	Non Cash	At 31
	Jan '15	Flow	Changes	Dec '15
	€000	€000	€000	€000
Cash in Hand and Bank Balances	30	1,729	-	1,759
Bank Overdraft	(858)	858	-	0
	(828)	2,587	-	1,759
<u>Bank Loans</u>				
Debt Due within one year	-	-	-	-
Debt Due after one year	-	-	-	-
	-	-	-	-
Finance Leases : within one year	-	-	-	-
Finance Leases : from 2 to 5 years	-	-	-	-
	-	-	-	-
	(828)	2,587	-	1,759

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

**Reconciliation of Net Cash inflow to
Movement in Net Debt : Note 20**

(Decrease)/Increase in cash in the year
Cash Inflow/(Outflow) from increase/(decrease) in
debt and lease financing
Changes in net debt resulting from cash flow
New Finance Leases taken out in the year
Changes in Net Debt
Net Debt at beginning of year
Net Debt at end of year

2015	2014
€000	€000
2,587	(165)
-	-
2,587	(165)
-	-
2,587	(165)
(828)	(663)
1,759	(828)

Bank Security : Note 21

There is a Letter of Understanding dated 31 July 2015 from the Commissioners of Charitable Donations and Bequests for Ireland in which they sanctioned the Hospital's borrowing requirements for the year ended 31 December 2015.

**The following pages do not form part of the Audited Financial Statements.
The details provided are for information purposes only.**

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

Non-Capital Income & Expenditure - Details

Pay

Management / Administration	2,790	2,741
Medical / Dental I (NCHDs)	1,617	1,835
Medical / Dental II (Consultants)	1,731	1,745
Nursing	5,874	6,188
Paramedical	1,182	1,325
Catering & Housekeeping / Support Services	2,367	2,571
Maintenance / Technical	97	96

	2015	2014
	€000	€000
	15,658	16,501
Pensions & Refunds	2,225	2,132
Gratuities / Lump Sums	292	302
Others	-	-
	2,517	2,434
	18,175	18,935

Non-Pay

Direct Patient Care

Drugs & Medicines	848	873
Blood & Blood Products	242	223
Medical Gases	58	43
Medical & Surgical Supplies	1,587	1,511
Other Medical Equipment	178	30
Other Medical Equipment Supplies / Contracts On	476	403

	3,389	3,083
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St. John's Hospital
Notes to the Financial Statements – 31 December 2015

	2015	2014
	€000	€000
<u>Support Services</u>		
X-Ray / Imaging Equipment	21	-
X-Ray / Imaging supplies / Contracts On	641	685
Laboratory Equipment	-	-
Laboratory Supplies / Contracts On	359	390
Catering Equipment	-	-
Catering Provisions / Contracts On	208	195
Heat, Power & Light	287	302
Laundry, Cleaning & Washing Equipment	-	-
Laundry, Cleaning & Washing Supplies / Contracts On	602	640
Furniture, Crockery & Hardware	67	27
Bedding & Clothing	24	11
Maintenance Equipment	4	-
Maintenance Materials Supplies / Contracts On	327	417
Farm & Garden Equipment	-	-
Farm Supplies / Contracts On	3	6
Travel & Subsistence	86	85
Transport of Patients	-	-
Vehicles Purchases	-	-
Vehicles Supplies / Contracts On	-	-
	2,629	2,758

St. John's Hospital
Notes to the Financial Statements – 31 December 2015

Financial And Administrative

Loan Repayment Principal

	2015 €000	2014 €000
Non-Capital	-	-
Capital	-	-
Finance Lease Repayment-Principal Element	-	-

Bank Interest

Overdraft	0	2
Non-Capital Loan	-	-
Capital Loan	-	-
Finance Lease Repayment-Interest Element	-	-
Bank Charges	5	5

Other

Insurance - Medical Defence	-	-
Insurance - Other	46	45
Audit	21	14
Legal	-	8
Office Expenses (Rent & Rates, Postage, Phone)	110	104
Office Supplies / Contracts On	311	281
Computer Equipment	-	-
Computer Supplies / Contracts On	347	398
Professional Services	57	18
Bad Debts written off	(4)	(41)
Adjustment to Doubtful Debts Provision	478	477
Misc. Non-Capital Exp. on Capital Projects	30	-
Miscellaneous Expenses	313	332

	2015 €000	2014 €000
	-	-
	-	-
	-	-
	0	2
	-	-
	-	-
	-	-
	5	5
	-	-
	46	45
	21	14
	-	8
	110	104
	311	281
	-	-
	347	398
	57	18
	(4)	(41)
	478	477
	30	-
	313	332
	1,714	1,643

Total Non-Pay

7,732	7,484
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Total Gross Expenditure

25,907	26,419
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St. John's Hospital
Notes to the Financial Statements – 31 December 2015

	2015	2014
	€000	€000
Income		
Patient Income		
In-Patient	5,736	5,067
Out-Patient	59	54
	5,795	5,121
Other Income		
Superannuation	661	642
Other Payroll Deductions	772	803
RTA Receipts	-	-
Income from External Agencies	-	-
Canteen Receipts	50	52
Other Income (Non-Capital)	145	100
Total Income	7,423	6,718
 Net Expenditure	 18,484	 19,701