Correspondence 3A.5 (A+B) Meeting 108 – 16/01/2014



Mater Misericordiae University Hospital

Annual Financial Statements for the year ended 31 December 2012

ANNUAL FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 DECEMBER 2012

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BOARD MEMBERS:

Mr. John Morgan (Chairman)

Ms. Mary Day

Mr. Brian Conlan (resigned 31 December 2012)

Ms. Caroline Pigott

Prof. Bill Powderly (resigned 19 December 2012)

Sr. Margherita Rock Prof. Conor O'Keane Dr. Brendan Kinsley

Mr. Eamon Clarke (resigned 25 April 2013)

Mr. Martin Cowley Fr. Kevin Doran

Ms. Nuala Healy (resigned 25 April 2013)

Mr. Don Mahony Sr. Eugene Nolan Dr. Mary Carmel Burke

Mr. Kevin Murphy (resigned 5 March 2012)

Mr. Thomas Lynch (appointed 18 December 2012) Mr. Eddie Shaw (appointed 18 December 2012)

SECRETARY TO THE BOARD:

Mr. Patrick Mahony

REGISTERED OFFICE:

74 Upper Dorset Street

Dublin 1

SOLICITORS:

Mason Hayes & Curran South Bank House Barrow Street Dublin 4

BANKERS:

Bank of Ireland Drumcondra Dublin 9

AUDITORS:

Deloitte & Touche

Chartered Accountants and Statutory Audit Firm

Deloitte & Touche House

Earlsfort Terrace

Dublin 2

STATEMENT OF BOARD MEMBERS' RESPONSIBILITIES

The Board of the Hospital is responsible for preparing the Annual Financial Statements in accordar ce with applicable law and Generally Accepted Accounting Practice in Ireland including the accounting standards is id down by the Department of Health & Children.

The Board of the Hospital is required by Company Law to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the Mater Misericordiae University Hospital as at the end of that year and of its surplus or deficit for that year.

In preparing those statements, the Board is required to:

- Select suitable accounting policies and then apply them consistently;
- Make judgements and estimates that are reasonable and prudent;
- Comply with applicable accountings standards, subject to any material departures disclosed and explained in the financial statements;
- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Hospital will continue in existence.

The Board of the Hospital is responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Mater Misericordiae University Hospital and to enable the Hospital Board to ensure that the financial statements comply with Company Law and with the accounting standards laid down by the Minister for Health & Children. The Board is also responsible for safeguarding the assets of the Hospital and hence for taking reasonable steps for the prevention and the detection of fraud and other irregularities.

On behalf of the Hospital Board:

Chairman

Board Melmber

Deloitte

Deloitte & Touche Chartered Accountants & Registered Auditors

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF MATER MISERICORDIAE UNIVERSITY HOSPITAL

We have audited the financial statements of Mater Misericordiae University Hospital for the year ended 31. December 2012 which comprise the Non-Capital Income & Expenditure Account, Capital Income & Expenditure Account, the Balance Sheet, the Cash Flow Statement, the Statement of Accounting Policies, and the related notes 1 to 25. The financial reporting framework that has been applied in their preparation is the Accounting Standards and the Format of Accounts for Voluntary Hospitals issued by the Department of Health and Children in Ireland.

This report is made solely to the board of directors of the Hospital, as a body. Our audit work has been undertaken so that we might state to the board of directors those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Hospital and the board of directors as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of board directors and auditors

As explained more fully in the Statement of the Board of Directors' Responsibilities, the board of directors are respons ible for the preparation of financial statements in accordance with the Accounting Standards and the Format of Accounts for Voluntary Hospitals issued by the Department of Health & Children in Ireland. Our respons ibility is to audit and express an opinion on the financial statements in accordance with Irish law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practice's Board Ethical Standards for Auditors.

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 in accordance with the Accounting Standards and the Format of Accounts for Voluntary Hospitals issued by the Department of Health & Children in Ireland; the reasonableness of significant accounting estimates made by the board of directors; and the overall presentation of the financial statements.

Opinion on financial statements

In our opinion the financial statements give a true and fair view, in accordance with the Accounting-Standards and the Format of Accounts for Voluntary Hospitals issued by the Department of Health & Children in Ireland, of the state of the affairs of the Hospital as at 31 December 2012 and of its deficit for the year then ended.

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

Emphas is of matter - going concern

In formir g our opinion, which is not modified, we have considered the adequacy of the disclosures made in Note 25 to the financial statements concerning the Hospital's ability to continue as a going concern. These conditions, along with the other matters explained in Note 25 to the financial statements, indicate the existence of a material uncertainty which may cast significant doubt about the Hospital's ability to continue as a going concern. The Hospital is dependent on the ongoing support of the HSE to provide adequate funding to enable it to continue to provide services. The HSE has not given any indication that it will withdraw its financial support from the Hospital in the for esceable future. On that basis the directors have prepared the financial statements of the Hospital on a going concern basis. The financial statements do not include the adjustments that would result if the Hospital was unable to continue as a going concern.

Thomas Cassin

LOJEIJ

For and on behalf of Deloitte & Touche

Chartered Accountants and Statutory Audit Firm

Dublin

31 July 2 13

Members of Deloitte Touche Tohmatsu

Deloitte

Anna American

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CERTIFICATION OF CHIEF EXECUTIVE OFFICER AND CHAIRMAN FOR THE YEAR ENDED 31 DECEMBER 2012

We ce tify that the financial statements of the Mater Misercordiae University Hospital for the year ended 31 December 2012 as set out herein are in agreement with the books of accounts 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, except as disclosed on page 5.

These financial statements, which comprise pages 8 to 22 and the statement of accounting policies, pages 6 and 7, give a true and fair view of the state of affairs of the Hospital at 31 December 2012 and of its income and expend ture and cash flow for the year then ended.

SIGNED:

Chairman

SIGNED:

Chief Executive Officer

DATE:

31 Tuly 2013

SCHEDULE OF NON-COMPLIANCE WITH DEPARTMENT OF HEALTH & CHILDREN ACCOUNTING STANDARDS FOR THE YEAR ENDED 31 DECEMBER 2012

Standard 1.8 - Subsidiary/Related Companies/Investments by Hospitals

The Hospital is in the process of restructuring its relationship with subsidiaries and quasi-subsidiaries having completed the process of incorporating the Mater Misericordiae University Hospital as a Limited Company. Once the relationships have been fully considered the Board will review the appropriateness of preparing conscilidated financial statements.

STATEMENT OF ACCOUNTING POLICIES

BASIS OF ACCOUNTING

These accounts were prepared on an accruals basis under the historical cost convention, in accordance with the accounting standards laid down by the Minister for Health & Children, except as disclosed on Page 5.

INCOME

Health Service Executive Funding

The Health Service Executive (HSE) provides funding towards the net annual running costs of the Hospital in accordance with the Service Level Agreement. These grants / funding are accounted for on an accruals basis to the extent that they have been approved by the HSE.

Non-grant income other than in-patient income is accounted for on a cash receipts basis. In-patient income is accounted for on an accruals basis.

Out Patient and Road Traffic Accident Income

This income is accounted for on a cash receipts basis.

FIXED ASSETS AND DEPRECIATION

All fixed asset acquisitions are stated at cost less accumulated depreciation. Equipment purchased using Revenue funds are only capitalised if the cost exceeds €3,809 in respect of medical and other equipment and €1,270 in respect of computer equipment.

Fixed assets are depreciated in compliance with the Department of Health & Children accounting standards. The depreciation is matched by an equivalent amortisation of the capital reserve. Depreciation is provided over the assets as follows:

Owned and Leased Equipment - Over the estimated useful life of 5 years. Building additions are transferred to the Company's Parent Company on completion and commissioning.

RETRO SPECTIVE PAY AWARDS

The expense is charged in the year in which the Department of Health & Children allows the corresponding revenue allocation and therefore not necessarily in the year to which the expense relates.

STOCKS

Stocks on hand at year end are included in the financial statements at the lower of cost and net realisable value. These are comprised of pharmaceutical stocks held in the Pharmacy and Wards, stocks in the Orthopaedic, Anaesthetic and Cardiovascular Theatres and in the Central Surgical and Central Supplies Departments. All other stocks are held on an ongoing basis and are not included in the accounts.

SUPERANNUATION

The Hospital operates a defined benefits pension scheme in respect of employees eligible for inclusion under the Voluntary Hospital Superannuation Scheme. The Scheme is administered, funded and underwritten by the Department of Health & Children. The Hospital acts as an agent in the operation of the Scheme and does not make any contributions to the scheme. Contributions are received from eligible employees only. In accordance with the service plan agreed with the HSE and the DOH&C, pension contributions received may be offset against pension payments made and the surplus or deficit each year forms part of the funding for the Hospital.

Contributions received are credited to the Non Capital Income and Expenditure Account as they are received. Payments made under the Scheme are charged to the Non Capital Income and Expenditure Account as they fall due.

Refunds of Contributions paid are charged to the Income and Expenditure Account when notification is received from the Department of Health & Children to make a payment to an employee who is leaving the Scheme.

STATEMENT OF ACCOUNTING POLICIES (CONTINUED)

CONTINGENT LIABILITIES

There were no material contingent liabilities at 31st December 2012.

CAPITAL RESERVE ACCOUNT

The Capital Reserve Account represents the unamortised value of the funds for fixed assets.

CAPITAL INCOME AND EXPENDITURE ACCOUNT

The Capital Income and Expenditure Account represents the value of capital grants received not yet spent.

FOREIGN CURRENCIES

The euro is the reporting currency of the Hospital. Transactions in foreign currencies are recorded at the rate of exchange ruling at the transaction dates. Assets and liabilities denominated in foreign currencies are translated into euro at the exchange rate ruling at the Balance Sheet date, with a corresponding charge or credit to the Non-Capital Income & Expenditure Account.

PATIENT PROPERTY

The Hospital includes a statement in the letter of admission that Patients should not bring valuable items or cash on admission as the Hospital will not accept responsibility for the safeguard of valuables. All staff are informed of the Hospital policy and a member of the Hospital Management is responsible for monitoring the Hospital policy.

NON-CAPITAL INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2012

			¥	
115		Note	2012	2011
Cumulative non-capit	al deficit brought		€	€
forward from the prev	ione vest		4 000 = 4 11	espued support let
a trom the piet	ious year		(1,863,714)	(1,866,011)
Pay				
Salaries		1	(470 250 762)	/400.050.4051
Superainnuation and Gr	atuities	1	(170,359,763)	(168,053,465)
		,	(13,713,058)	(13,296,562)
			(184,072,821)	(181,350,027)
Non-Pay				
Direct Patient Care		1	(45,951,720)	. (44.004.440)
Support Services		1	(21,774,206)	(44,984,118)
Financial and Administra	ation	1	(15,644,260)	(20,382,791)
			(10,044,200)	(8,532,286)
A			(83,370,186)	(73,899,195)
Gross expenditure for	the year		- What is	
Includes deficit brought	forward from previous year)	11.88	(269,306,721)	(257,115,233)
ncome				
icome		1	44,160,830	41,643,071
let expenditure for the			Carl to Estimated Vert	AlifeCylinieR sels
· ·	year		(225,145,891)	(215,472,162)
05 1-1 - 1 - 1 - 1	•			
SE determination for t	he year .		207,341,911	213,608,448
and Park to the Barrier			207,341,911	213,608,448
	WARD TO FOLLOWING YEA			

With the exception of fixed asset depreciation which is dealt with through the Capital Reserve Account, all recognised cains and losses for the year ended 31 December 2012 have been included in the Income and Expenditure Account.

The net cefict in both years arises from continuing operations.

The finar cial statements, which include the accounting policies and notes, were drawn up in compliance with the accounting standards laid down by the Minister for Health & Children, except as disclosed on Page 5, and were approved by the Hospital Board on 31.

On behalt of the Hospital Board

Chairman

Chief Executive

Date:

CAPITAL INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2012

eras crass		2012 €	2011 E
Capital Income Sources HSE/DOHC - Capital Grants HSE/ DOHC - Charge on non-capital I&E a/c Leasing Repayments		3,403,847 561,958 19,319	4,661,060 273,595 78,740
Total Capital Income		3,985,124	5,013,395
Capital Expenditure Buildings Equipment		(2,654,257) (1,311,548)	(2,737,393) (2,384,837)
Capital Expenditure - Capitalised		(3,965,805)	(5,122,230)
Movement in Grants Receivable		un Turnett a	180,375
Net Capital Income for Year		19,319	71,540
Opening Deficit from Previous year		(19,319)	(90,859)
Closing Result/(Deficit) C/F to Following yes	ar .	They a	(19,319)
			Communication of the Control of the

The financial statements, which include the accounting policies and notes, were drawn up in compliance with the accounting standards laid down by the Minister for Health & Children, except as disclosed on Page 5, and were approved by the Hospital Board on ...312423

On behalf of the Hospital Board

Shairmen

Chief Executive

Date:

BALANCE SHEET AS AT 31 DECEMBER 2012

	*			
FIXED ASSETS		Note	2012 €	. 2011
Tangible Assets Financial Assets	. 272,027 62	13	21,349,303 184	15,999,641 184
			21,349,487	15,999,825
CURRENT ASSETS Debto s Stocks		14	34,264,629	46,120,584
Cash in Hand and Ba	nk Balances	15	3,848,860 41,165	3,377,716
			38,154,654	49,498,300
CREDITORS: (Amoun Creditors Bank Loans and Over Obligations under Fina	ets falling due within one year) drafts ance Leases	16 17	(45,147,935) (9,657,509)	(38,956,246) (11,105,825) (19,319)
NET CURRENT LIABI	LITIES		(54,805,444)	(50,081,390)
TOTAL ASSETS LESS	S CURRENT LIABILITIES		4,698,697	15,416,735
CREDITORS: (Amount than one year) Bank Loans	ts falling due after more	17	bendessaf utna 3 taloga 2 to to topad	(146,752)
8 SALKER	4,075,643		4,698,697	15,269,983
Capital Income and Exp	nd Expenditure Account - Deficit		(17,803,980)	(1,863,714) (19,319)
Capital Reserve Accour	nt	18	22,502,677	17,153,016
1301 3:1753			4,698,697	15,269,983
13 7 1000		,		

The finar cial statements, which include the accounting policies and notes, were drawn up in compliance with the accounting standards laid down by the Minister for Health & Children, except as disclosed on Page 5, and were approved by the Hospital Board on 3:200.

On behalf of the Hospital Board

Chairman

Chief Executive

Date:

CASH FLOW STATEMENT FOR THE YEAR ENDED 31 DECEMBER 2012

	S VAN		2012	2011
		Note	€	€
let Cash Inflow from	n Operating Activities	19	759,278	2,813,461
	nents and Servicing of Finance			
nterest Paid on Loa			(49,778)	(72,606)
nterest Paid re Fina	ince Leases		(3,480)	(3,480)
nterest Received			29,375	40,522
let Cash Outflow I	from Servicing of Finance		(23,883)	(35,564)
Victoria de la constante de la				
Capital Expenditur		500	(2 402 947)	(4,661,060)
Expenditure from Hi Add back unpaid Ca			(3,403,847)	(1,475,921)
			(3,403,847)	(6,136,981)
Payments, from Nor	n-Capital, re Acquisition of Fixed Asse	ets	(561,958)	(273,595)
Net Cash Outflow	from Capital Expenditure		(3,965,805)	(6,410,576)
Net Cash Outflow	Before Financing		(3,230,410)	(3,632,679)
Financing	I Compte Page is and		4,304,685	5,039,457
HSE/ DOHC Capita HSE Revenue Gran	it in Respect of Capital Expenditure		561,958	273,595
	100,89a.h		4,866,643	5,313,052
Cash Flow from Mo	vement in Leasing		(19,319)	(78,740)
	it in Respect of Leasing		19,319	78,740
		20	-	manifer and the second
Net Cash Flow Fro	m Financing		4,866,643	5,313,052
Net Cash Flow			1,636,233	1,680,373
			The state of the s	
Decrease in Bank C		20	(1,493,168)	(1,550,498)
ncrease in Short To		20	3,687	19,335
Decrease in Long T	erm bank Loans	20	(146,752)	(149,260)
Decrease in Net D	ebt		(1,636,233)	(1,680,373)

Note 1 - Detailed Non-Capi	tal Income and Expenditure	2012	2011
		Note €	€
	*		
PAY			
Management / Administration	4	17,623,608	17,853,214
Medica / Dental I (NCHDs)	•	23,672,963	23,829,798
Medica / Dental II (Consultants Nursing	5)	22,367,517	20,349,181
Paramedical		71,383,034	71,058,297
Catering & Housekeeping / Sup	anort Consider	23,972,468	22,708,346
Mainter ance / Technical	Sport dervices	9,118,123	9,811,693
Other - Pastoral Care		1,763,672 458,378	1,911,794
		430,376	531,142
· (1)	110, 120	170,359,763	168,053,465
		,000,.00	700,000,400
		-	and the same of th
Pensions & Refunds	Nagity E. J.	10,380,112	9,439,564
Gratuities & Lump Sums	tuvi dise	3,332,946	3,856,998
		*	
		13,713,058	13,296,562
40.00		-	
		184,072,821	181,350,027
NON-PAY		250000	Marian Company
Direct Patient Care			
Drugs & Medicines		44.570.004	44 405 450
Blood & Blood Products		14,570,061	14,435,456
Medical Gases		4,362,947	4,160,515
Medical & Surgical Supplies		563,254 25,120,442	516,596
Other Medical Equipment		473,302	24,295,841 560,820
Other Medical Equipment Suppli	ies / Contracts	861,714	1,014,890.
The state of the s	CONTRACTOR OF STATE AND PROPERTY OF A CONTRACTOR OF STATE		1,014,030.
	₩ (+	45,951,720	44,984,118
_			
Support Services			
X-Ray / linaging Equipment	TO DECEMBE	267,653	(112,208)
X-Ray / Imaging supplies / Contr	acts	3,975,413	4,144,846
Laboratory Equipment Laboratory supplies / Contracts		220,076	339,582
Catering Equipment		5,323,547	4,718,461
Catering Provisions / Contracts		85,638	93,956
Heat, Pover & Light		1,511,827	1,490,132
Laundry, Cleaning & Washing su	polies / Contracts	2,847,868 5,069,948	2,374,860
Furniture, Crockery & Hardware	ppiles) contracts	234,806	5,286,481 124,897
Bedding & Clothing		47,550	56,078
Maintenance Materials Supplies	Contracts	1,663,069	1,129,785
Travel & Subsistence	A CONTRACTOR	49,094	58,350
Transport of Patients		461,068	650,522
Vehicles Supplies / Contracts		16,649	27,049
1		21,774,206	20,382,791
		200	

Note 1 - Detailed Non-Ca	apital Income and Expenditur	re (Continued	2012	2011
		Note	€	€
Financial and Administrat	ive Loan Repayment Principal			
Finance Lease Repayment	- Principal Elements		19,319	78,740
Bank & Other Interest	129,570,53			A CORE OF STREET
Overdraft			41,498	72,606
Capital loan			8,280	- 0.450
Finance Lease Charges			3,480 21,718	3,480 58,184
Bank Charges			21,710	30,104
Other				
Insurance - Other	1.31 905 007	2	533,306	511,338
Audit			72,849	120,951
Legal	D . BT.L.		79,626	62,006
Office Expense (Rent & Ra	tes, Postage & Telephone)		3,370,270	1,585,574
Office Supplies / Contracts			1,055,219	1,065,182
Computer Equipment	anta		236,069	(73,744)
Computer Supplies / Contra	BCIS		1,383,555	1,192,855
Professional Services			1,154,592	819,489
Bad Debts Written Off Non-Capital Expenditure or	Capital Projects	12	2,078,000 561,958	445,000 273,595
Miscellaneous Expenses	i Gapitai Projects	. 4	5,024,521	2,317,030
500.00 (1) • \$400.00 (1) \$400.	*		15,644,260	8,532,286
TOTAL NON-PAY			83,370,186	73,899,195
TOTAL GROSS EXPENDI	TURE		267,443,007	255,249,222
INCOME				
A section to the section of	ne man ela			
Patient Income		7 ES		
In-Patient		5	18,589,495	16,472,780
Out-Patient		5	736,381	815,347
	200.435		19,325,876	17,288,127
	10 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m		***************************************	
Other Income				
Superannuation			9,282,070	9,408,234
Pension Levy			10,570,595	10,461,980
Other Payroll Deductions	V. W. I. I. D. J.		4,648	(2,826)
RTA Receipts		10	589,928	1,259,177
Income from External Agen	cies	6	273,523	175,836
Canteen Receipts	and the second	abor t	565,379	640,341
Other Income (Non-Capital		7	3,548,811	2,412,202
	P.H. 60		24,834,954	24,354,944
TOTAL INCOME			44,160,830	41,643,071
NET EXPENDITURE	* STATE BALL DA		223,282,177	213,606,151
				Total Control of the

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2012

		1980	
Note 2 - Analysis of	nsurance	2012	2011
		€	€
Other Insurance			
Combined Liability		040.040	di bede lea comme
Property Damage & Bu	siness Interruption	318,949	365,029
Director's & Officers	isiness interruption	120,903	85,284
Other: Motor	M11 530 F	8,645	10,588
Computer		24,143	19,534
Engineering		6,109	6,508
Miscellaneous Po	oligion CER UNICHT	25,078	14,949
Wiscellaneous Pe	oncies	29,479	9,446
		533,306	511,338
100			0.1,000
44,011			
Note 3 – Analysis of M on Capital Projects	iscellaneous Non-Capital Expenditure		
on dapitat t tojects			
Not applicable	48		
State of the state			
100	x+05		
Note 4 Applyois of Mi	innellan F		
Note 4 – Analysis of M	scellaneous Expenses	2012	2011
0.8 0.52		€ :	€
Security			
	min, et sum of	1,569,480	1,567,651
Members hip / Subscription	ons etc.	195,384	212,308
Education / Training & Fa	aciilles	432,867	606,370
Other		2 925 700	(00 000)

2,826,790

5,024,521

(69, 299)

2,317,030

	v		
Note 5 – Analysis of Patie	ent Income	2012	2011 €
In-Patient			3
Statutory In-Patient Charge	es	1,751,229	1,813,182
Private / Semi Private Cha	rges	13,556,399	11,816,467
National Treatment Purcha		1,235,502	1,013,139
Other In-Patient Charges:	Day Cases	1,722,714	1,603,221 226,771
Date H	Non EU	323,651	220,771
		18,589,495	16,472,780
Out-Patient			
Statutory Accident & Emer		515,250	521,350
Other Out-Patient Charges	8-	221,131	293,997
		736,381	815,347
TOTAL PATIENT INCOM	E Children epid	19,325,876	17,288,127
			4 23831 2324-004
			order livery
Note 6 - Income from Ex	ternal Agencies	2012	2011
		€	€
Laboratory		207,523	109,836
Child Guidance Unit - Adm	ninistration Charge	36,000	36,000
	ont - Administration Charge	30,000	30,000
	10.31	273,523	175,836
an e			
			8-000000 C (9-12) (5-11) (1-11) (1-11)
			•
Note 7 - Other Income (I	Von-Capital)	2012	20 1
	(an-e-an) (an e-an e-an e-an e-an e-an e-an e-an e-	€	€
Car Parking		61,419	93,901
Public Telephones		737	(2,927)
Rent / Licences / Franchis	es, Etc	160,654	137,280
PP Admin. Charges		7,709	3,607
Fundraising		1,531,921	926,478
Sundries Interest Received		1,756,996 29,375	1,213,341 40,522
Inferest veceiven	*	25,010	40,000
	and the second spine.	3,548,811	2,412,202
	to the control of the second control of the control		

	8		74	
Note 8 - Summary of I	Pay (Memorandum Only)		2012	2011
,	ay (mamarandam offiy)		€	€
Basic Pay			120 540 200	400 004 004
Overtin e			128,519,298	126,361,601
Premium Payments	mer, the care		14,450,689 8,907,526	13,968,302
On Call / Standby			3,442,230	10,102,707
PRSI Employer			13,860,014	2,910,568 13,442,031
	rears and Other Payments)		1,180,006	1,268,256
gran 1776 ann				a Signeration and a second
			170,359,763	168,053,465
-				4 Thomas of the Control of the Contr
Note 9 Reconciliation	of Expenditure to Costs of Serv	ires	2012	2011
(Memorandum Only)	or Experience to doubt of derv	Note	2012	2011 €
	CARTERIA V	14010		6
Net Expenditure - Curren	t Year	1	223,282,177	213,606,151
Deduct				
Purchase of Equipment for	rom Non Capital	10	504.050	Budiness of a section (SEE) to pr
Funding of Capital Project		12	561,958	273,595
randing or Capital Project	is non non-capital	3	(561,958)	(273,595)
Total Deductions				
	20			
Sub-Total			223,282,177	213,606,151
Add Back			Letter and arms h	Design of Care
Depreciation Charge for the	ho Voor	42	4044707	0 -0
Depresident of ange for the	ne rear	13	4,914,737	2,784,532
Running cost of Service			228,196,914	216,390,683
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				inguitz-function
Note 10 - Road Traffic A	ccident Memorandum Account		2012	2011
R THE PROPERTY OF	· (20), BOX		€	2511
Polonos shift to				
Balance at 1 st January	16 - 17 -		6,111,676	7,355,731
Bills Issued in Respect of I			1,598,049	1,429,469
Less Cash Received durin			(589,928)	(1,259,177)
Less waivers and other wr	ILE-OIIS		(1,366,087)	(1,414 <mark>,</mark> 347)
Balance at 31st December	er		5,753,710	6,111,676

Note 11 – Statement of Adv Due From HSE (N	rances & Balances Ion-Capital & Capital)	2012	2011 €
Non-Capital			
Total notified non-capital dete Less: Remittance from HSE I		207,341,911 (187,507,723)	213,608,448 (192,198,701)
Balance due from HSE in res	enect of the year	19,834,188	21,409,747
Dalance due nom FIOL III res			
(RES. RIV)	Brut tief i		00 550 0.0
Balance due from HSE re pre Less: Remittance from HSE i	evious years as at 1 January in year re previous year	21,409,747 (21,409,747)	20,552,3 ¹ 2 (20,552,3 ¹ 2)
Balance due from HSE re pre	evious years as at 31 December		-
Total Balance of Non-Capit	al Grants due from HSE	19,834,188	21,409,747
	(10) amonumento i		
Capital	h. HOT facility was	2 402 047	4 664 060
Total Capital Grants notified Less: Remittance from HSE		3,403,847 (4,304,685)	4,661,060 (5,039,457)
Less. Remittance from HSE	Capital III life year	(4,504,665)	(5,055,437)
Balance due to HSE in respe	ct of the year	(900,838)	(378,397)
Balance due from HSE re pre	evious years as at 1 January	900,838	1,279,235
	*	**************************************	
Balance due from HSE re pre	evious years as at 31 December	रू श	1,279,235
Total Balance of Capital Gr	ants Due from HSE	-	900,838
Gross Total Due from HSE	- Capital and Non-Capital	19,834,188	22,310,585
Egy Pat U.S.	pendin mo		2204
Note 12 - Purchase of Equi	ipment from Non-Capital Account	2012	2011
(Amounts Capitalis	sed)	€	
Other Medical Equipment		306,869	203,638
X-Ray / Imaging Equipment		30,936	66,293
Laboratory Equipment	ESSECTION	98,870	107,497
Computer Equipment	m.n.808, t	125,283	(103,833
		561,958	273,595

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2012

MATER MISERICORDIAE UNIVERSITY HOSPITAI

Note 13 m Schodula of Fixad Assots and Deprestation

Cost or Valuation at 01/01/2012			Buildings .€	Cowned Equipment	Leased Equipment E	Total E
Sub-Total			•	44,912,874	6,007,270	50,920,144
Additions From Capital						
Additions From Non-Capital Transfers from MCHD			2,654,257	749,590		3,403,847
Transfer to Parent Company Obsciete & Written Off Equipment		715.	(2 654 257)	8,952,850	t o	561,958 8,952,850
Cost / Valuation at 2440 Cost			(1001,001)	(1,143,468)		(2,654,257)
00317 Valuation at 31/12/2012	•			54 033 ROA	100	(pot pt)
Accumulated Depreciation at 01/01/2012					0,2/10	60,041,074
Obsolete & Written Off Equipment		<i>(0)</i> 5		(28,913,232) (4,914,737)	(6,007,270)	(34,920,502)
Accumulated Depreciation at 31/12/2012		9	7	1,143,468	ř.	1,143,458
Net Book Amount at 31/12/2012			1	(32,684,501)	(6,007,270)	(38,691,771)
Net Book of the state of the st			E .	21,349,303	•	21,349,303
ייני נסמא לייניסטוו פו ס וו ומוצח ו				15,999,641	1	15 000 641
100 M						10000

Note: On 1st January 2002 the operation of the unincorporated Hospital were taken over by Mater Misericordiae University Hospital (a Limited Company). The land and buildings that comprised the Mater Hospital and related buildings, which were held in legal ownership under trust by the Sisters of Mercy and were previously included in the accounts of the unincorporated Mater Misericordiae Hospital Mater Misericordiae and The Children's University Hospitals Limited, which company is the sole shareholder of Mater Misericordiae University Hospital. The additions to buildings along with the related grant from 1 January 2002 were transferred to the ownership of the Parent Company at the end of each

Mater Misericordiae University Hospital has a licence relating to these fixed assets for the provision of the relief, cure and prevention of sickness and disability in the community in general in accordance with the

Certain expenditure in respect of development projects were funded by the HSE through Mater & Children's Hospital Development Limited. Amounts incurred in respect of building are transferred to the Parent Company and the related equipment costs are transferred to Mater Misericordiae University Hospital on completion and commissioning.

Expenditure capitalised during the year in respect of land and buildings have been transferred to the company's parent Mater Misericordiae and The Children's University Hospitals Limited (MMCUH') at cost along with the related grants. The amount transferred for the year ended 31 December 2012 was €2,654,257 (2011: €2,737,393).

Fixed Assets that were funded by the Minister for Health & Children are the property of the Flospital but may not be disposed of or applied to any other purpose, wilhout the Minister's prior consent.

ote 14 - Debtors: (Amounts falling due within one year)	Note	2012 €	2011
ISE - Revenue Grants Due	11	19,834,188	21,409,747
ISE Capital Grants Due	11	-	900,838
ISE Debtors		19,834,188	22,310,585
Subsidiary companies		2,555,764	5,491,722
Patient Debtors (Closing Ledger Balance)		4,023,129	10,696,285
ESS: Provision for Bad and Doubtful Debts		(2,604,754)	(2,142,084)
Other Receivables		7,018,455	6,990,703
Prepayments		3,437,847	2,773,373
Non-HSE & Non Health Board Debtors		11,874,677	18,318,277
		34,264,629	46,120,584
Note 15 – Stocks		2012	2011
1515 15 5135.15		€	€
Orugs & Medicines		1,587,928	1,460,404
Medical and Surgical Supplies		715,548	212,916
Sterile Supplies		133,449	96,892
Theatre Stocks		1,411,935	1,607,504
		3,848,860	3,377,716
			5,011,11
Note 16 - Creditors: (Amounts falling due within one year)		2012 €	2011 €
			4574
Creditors - Capital		1,800,197	1,870,652
Creditors - Non-Capital		20,174,488	16,094,904
PAYE and PRSI		5,267,279	4,951,574
Wages and Salaries		7,280,881	8,981,359
Other Creditors		243,317	133,692
Accruals and deferred income		10,381,773	6,924,065
		45,147,935	38,956,246
			x
Note 17 – Bank Loans and Overdrafts		2012	2011
Amounts falling due within one year		€	6
Bank Overdraft		9,510,437	10,962,440
Bank Loans - Short Term		147,072	143,385
		9,657,509	11,105,825
		THE ROOM OF THE CONTRACT OF	1-11-11-11-11-11-11-11-11-11-11-11-11-1
Amounts falling due after one year			
Amounts falling due after one year Bank loan		1 11254	146,752

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2012

Note 18	- Capital Reserve Acco		2012 €	2011 €	
Balance Addition	at beginning of year			17,153,016	17,552,711
	xpenditure			3,403,847	4,661,060
Non-Car	ital Expenditure			561,958	461,170
Transfer	Equipment MCHD			8,952,850	-
Sub-Tot	al Additions	8		30,071,671	22,674,941
					1 1 1 1 1 1
Less	See His work				
	to Parent Company			(2,654,257)	(2,737,393)
Deprecia	tion for the year			(4,914,737)	(2,784,532)
Sub-Tot	al Deductions			(7,568,994)	(5,521,925)
BALANC	E at Year-end			22,502,677	17,153,016
Note 19 -	- Note to the Cash Flow	Statement		2012 €	2011
	6 596 at 1 (190, a	Statement			Charles and the second state of the second sta
Non-Capi	- Note to the Cash Flow tal Deficit deficit brought forward	Statement			Charles and the second state of the second sta
Non-Capi Add back (Deficit)/s	tal Deficit deficit brought forward urplus for current year	Statement		(17,803,980) 1,863,714 (15,940,266)	(1,863,714) 1,866,011
Non-Capi Add back (Deficit)/s Deduct In	tal Deficit deficit brought forward urplus for current year terest Income	(0,00) (0,00) (1,00)		(17,803,980) 1,863,714 (15,940,266) (29,375)	(1,863,714) 1,866,011
Non-Capi Add back (Deficit)/s Deduct In Add back	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again	(0,00) (0,00) (1,00)		(17,803,980) 1,863,714 (15,940,266) (29,375) 49,778	(1,863,714) 1,866,011
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks	st non-capital		(17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144)	(1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase Decrease	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks (increase) in HSE Debtor	st non-capital s (Non-Capital)		(17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144) 1,575,559	(1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305 (857,435)
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase Decrease	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks (increase) in HSE Debtor (Increase) in Subsidiary D	st non-capital s (Non-Capital) Debtors	e la rasque ave	(17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144) 1,575,559 2,935,958	(1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305 (857,435) (918,240)
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase Decrease Decrease	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks (increase) in HSE Debtor (Increase) in Subsidiary I in Non-HSE and Non-Hea	st non-capital s (Non-Capital) Debtors	ers	(17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144) 1,575,559 2,935,958 6,443,600	(1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305 (857,435) (918,240) 4,381,390
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase Decrease Decrease Decrease Finance L	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks (increase) in HSE Debtor (Increase) in Subsidiary I in Non-HSE and Non-Hea asse Interest Payments	st non-capital s (Non-Capital) Debtors alth Board Debto	ers	€ (17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144) 1,575,559 2,935,958 6,443,600 3,480	€ (1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305 (857,435) (918,240) 4,381,390 3,480
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase) Decrease Decrease Decrease Finance L Increase/(tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks (increase) in HSE Debtor (Increase) in Subsidiary I in Non-HSE and Non-Hea	st non-capital s (Non-Capital) Debtors alth Board Debto	ers	(17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144) 1,575,559 2,935,958 6,443,600 3,480 6,262,143	(1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305 (857,435) (918,240) 4,381,390
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase) Decrease Decrease Decrease Finance L Increase/(Decrease	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks (increase) in HSE Debtor (Increase) in Subsidiary I in Non-HSE and Non-Hea ease Interest Payments decrease) in Non-Capital in capital creditors	st non-capital s (Non-Capital) Debtors alth Board Debto Creditors	e la company	€ (17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144) 1,575,559 2,935,958 6,443,600 3,480	€ (1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305 (857,435) (918,240) 4,381,390 3,480
Non-Capi Add back (Deficit)/s Deduct In Add back (Increase) Decrease Decrease Decrease Finance L Increase/(Decrease	tal Deficit deficit brought forward urplus for current year terest Income all interest charged again /decrease in Stocks (increase) in HSE Debtor (Increase) in Subsidiary II in Non-HSE and Non-Hea ease Interest Payments decrease) in Non-Capital	st non-capital s (Non-Capital) Debtors alth Board Debto Creditors	ers	(17,803,980) 1,863,714 (15,940,266) (29,375) 49,778 (471,144) 1,575,559 2,935,958 6,443,600 3,480 6,262,143	€ (1,863,714) 1,866,011 2,297 (40,522) 72,606 802,305 (857,435) (918,240) 4,381,390 3,480

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NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2012

		*				
Note 20 – Analysis of	Changes in Net Debt	At 1 Jan 2012 €	Cash Flow €	Non Cash changes €	At 31 Dec 2012 €	
Cash in Hand and Ban Bank Overdraft	k Balance	(10,962,440)	41,165 1,452,003	-	41,165 (9,510,437)	
		(10,962,440)	1,493,168	711 70	(9,469,272)	
Bank Loans due within one year Bank Loans due after one year		(143,385) (146,752)	(3,687) 146,752		(147,072)	
	(X27, 84, 87, 87, 87, 87, 87, 87, 87, 87, 87, 87	(290,137)	143,065		(147,072)	
153 E 21 **		(11,252,577)	1,636,233	-	(9,616,344)	
2511 24 17	125 / 101 48				THE PARTY OF THE P	
Note 21 – Reconciliat	ion of Net Cash Inflow	to Movement i	n Net Debt	2012 €	2011 €	
Net Debt at 1st Januar Increase in Cash in the				18,081) 36,233	. (16,498,454) 1,680,373	
Net Debt at 31st Dece	mber		(13,1	81,848)	(14,818,031)	
			NIEST PROPERTY.	CONTRACTOR OF	Wednesday to the second second	

Note 22 - Capital Commitments

Annual commitments under operating leases in respect of buildings amount to €1,341,000 and this operating lease expires in 2018 and 2019.

Note 23 - Contingent Liabilities

The Hospital had no material contingent liabilities at 31st December 2012.

Note 24 - Pensions

The Hospital operates a defined benefits pension scheme in respect of employees eligible for inclusion under the Voluntary Hospital Superannuation Scheme.

In the year ended 31st December 2012 €9,282,070 (2011: €9,408,234) was retained as income, €10,380,112 (2011: €9,439,564) was paid to pensioners and refunded to employees leaving the scheme and €3,332,946 (2011: €3,856,998) was paid in respect of lump sums.

The scheme is a defined benefits scheme, however the Hospital has availed of the disclosure exemptions in respect of multi-employer pension schemes outlined in paragraph 9(a) of FRS 17. On this basis the scheme is considered for disclosure purposes as a defined contribution scheme and no further disclosures are required.

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 DECEMBER 2012

Note 25 - Going Concern

The Hospital is dependent on the HSE providing adequate funding to ensure it can meet its liabilities as they fall due. The company had a cumulative deficit of €1.86 million at 31 December 2011. Following a reduction in the HSE revenue allocation for 2012 to €207.34 million (2011: €213.61 million) a further substantial deficit has been recorded of €15.94 million leading to a total accumulated deficit at 31 December 2012 of €17.80 million.

The allocation for 2013 as notified by the HSE amounts to €210.35 million. This represents a 4.7% reduction in cost budget targets as compared to the cost outlurn for 2012. The decrease in the revenue allocation presents a challenge to management to maintain activity at current levels, and to achieve a breakeven position. Cost containing ent measures have been actioned by management and discussions are ongoing with the HSE and other interested parties to ensure that a breakeven position for 2013 can be achieved.

The difference between the projected expenditure for 2013 and the budget received from the HSE for 2013 is €8.9m. This difference comprises two elements. €5.8m relates to budget reduction from the HSE relating to Legislation changes, increased statutory charges and the employment control framework. The HSE has requested MMUH not to engage in any additional cost saving measures to address this element of the deficit. MMUH has a cost saving plan in place to address the remaining balance of €3.1m. Progress on this plan is reported to the Finance and General Purpose Committee of the Board on a monthly basis.

In assessing whether the financial statements should be prepared on a going concern basis, the directors have given due consideration to the cost containment measures and the ongoing discussions with the HSE.

The Hospital is dependent on the ongoing support of the HSE to provide adequate funding to enable it to continue to provide services. The HSE has not given any indication that it will withdraw its financial support from the Hospital in the foreseeable future.

On this basis these financial statements have been prepared on the going concern basis. The Directors are of the opinion that it remains appropriate to present the financial statements on a going concern basis and that there is a reasonable expectation that the Hospital will continue to trade. The financial statements do not include any adjustments that may result from any reduction in the budgetary allocation provided or unsuccessful cost containment measures.

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MODEL OF THE MAKES ALL STATEMENTS (GOAT STIED)

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THIS ACREEMENT made the him day of Jour One thousand nine hundred and seventy seven BETALEN THE MATER MISERICORDIAE

HOSPITAL DUBLIN (hereinafter called "the Hospital") of the one part and CENTRAL REMEDIAL CLIMIC a Company limited by Guaranted and not having a Share Capital having its registered office at Vernon Avenue Clontarf in the City of Dublin (hereinafter called "the Clinic") of the other part.

WHEREAS:

- A. The Clinic was incorporated on the 8th day of October 1953 and is engaged in the running of an assessment and treatment centre for physically disabled persons.
- B. The Hospital is owned and administered by the Congregation of the Sisters of Mercy Dublin and managed by a Board of Management (of which Mr. William Finlay is Députy Chairman hereinafter called "Mr. Finlay") and provides general services for both inpatients and out-patients including orthopaedic treatment and pedical remabilitation.
- C. The Hospital and the Clinic between them provide the two pajor Novil Sity Centres for medical rehabilitation services and have agreed primarily to prevent overlapping and generally for the murual panefit of themselves and their patients to rationalise develop and empand such services in association.
- D. The Clinic and the Hospital have already established an

association for the benefit of the ratients of both who require specialist treatment and are referred from the Hospital to the Clinic and the Clinic to the Hospital wherever the specialist facilities exist for the required treatment for the individual patient and it is proposed to further extend this association by the provision of additional equipment and to develop and extend such services.

NOW IT IS HEREBY ACREED AND DECLARED by and between the parties hereto as follows:

- 1. This Agreement shall commence from the date hereof and shall continue until terminated in accordance with the provisions hereof or by agreement between the parties.
- (A) The Hospital and the Clinic will co-operate so as to develop and extend where possible and provided funds are available the existing arrangements between the Hospital and the Clinic whereby patients requiring specialized treatment are referred from the Hospital to the Clinic and from the Clinic to the Hospital depending on the nature of the special services required and it is agreed that such development will include the provision in the Clinic of the following services:
 - (i) A purpose built unit for management of "stroke" cases for North Dublin.
 - (ii) The increased provision in the Clinic of rehabilitation and vocational assessment for persons injured in accidents

and for persons who have had major orthopaedic surgery or treatment in the Hospital.

- (B) In addition the Hospital and Clinic will rationalise their development so as to ensure as far as practicable that no unnecessary duplication of treatment equipment or services occurs.
- (C) The Clinic will provide training facilities to the Hospital for its trainees.
- (D) The Hospital will use its best endeavours to give assistance to the Clinic in particular by the provision of back-up services in radiology scanning pathology and the like and allow access to various specialists opinions and in the secundment of staff where practicable and in the provision of supervisory consultancy services.
- (E) The Hospital will make available to patients of the Clinic and the Hospital the services of its Child Guidance Unit and the Clinic will make available the use of its occupational therapy Department and Training Sheltered Work-Shop.
- (F) The Hospital will use its best endeavours to procure for the Clinic such financial assistance as lies within its power but so that the Hospital shall not be expected or required to provide any funds out of resources intended for its own purposes.
- (G) The Clinic will provide such training as they consider practicable for the Mater physiotherapy students and para-medical personnel occupational therapists speech therapists medical social workers and the like.

- (H) The parties shall use their best endeavours to provide a wider service in rheumatology rehabilitation and occupational therapy for the population North East Dublin and Leinster.
- 3. The Clinic will procure that the Board of Governors of the Clinic ("The Board") will consist of not more than fourteen members and not less than ten members of whom the Hospital shall be entitled to nominate appoint and remove either individually or collectively as nearly as may be one half thereof from time to time by notice in writing signed by or on behalf of the Hospital and addressed to the Secretary of the Clinic and the Clinic shall be entitled to nominate appoint and remove either individually or collectively as nearly as may be one half thereof by notice in writing signed on behalf of the Clinic and addressed to the Secretary thereof. Notwithstanding the provisions of Article 19 of the Articles of Association of the Clinic as to determination of the number of Governors and the procedure for the co-option of additional Governors the Hospital and Clinic undertake to procure the nomination of all the Governors of the Clinic in the manner above specified and during the currency of this Agreement the provisions of Article 19 of the Articles of Association of the Clinic shall apply only in the manner specified herein. All the Governors shall be members of the Clinic and the parties hereto agree that notwithstanding any provisions in the Articles of Association of the Clinic no person shall be a member of the Clinic other than the Board or such other person as shall first have been approved of by the Chairmand and Vice-Chairman for the time being of the Board and

who is a member at the date of these presents shall be prevailed upon to resign from membership prior to the coming into effect of this Agreement. The first Chairman of the Board shall be The Honourable Lady Goulding who shall continue to hold office as The Vice-Chairman of the Board shall be Mr. Finlay while he shall continue to be a member of the Board of Management of the Hospital and it is agreed between the parties that The Honourable Lady Goulding will be duly elected as Chairman and Mr. Finlay be duly elected as Vice-Chairman by the Board of Covernors of the Clinic in accordance with Article 21 of the Articles of Association of the Clinic. If the Honourable Lady Goulding shall vacate the office of Chairman of the Board for any resson the parties hereto shall procure that Mr. Finlay or in the event of his not being Deputy Chairman of the Board of Management of the Hospital the Deputy Chairman for the time being of the Board of Management of the Hospital will be elected as Chairman of the Board of Governors of the Clinic. If Mr. Finlay or such Deputy Chairman of the Board of Management of the Hospital shall vacate the office of Chairman of the Board of Governors of the Clinic for any reason then the Governors of the Clinic shall duly elect a Chairman in accordance with Article 21 of the Articles of Association of the Clinic.

^{4.} So long as The Honourable Lady Goulding is Chairman of the Board of the Clinic weither the Hospital nor the Clinic will nominate any additional Governors of the Clinic unless they shall be first approved of by The Honourable Lady Goulding and by Mr. Finlay (so long as he occupies the post of Vice-Chairman of the

clinic) PROVIDED ALWAYS that at no time shall the present ratio of Governors nominated by the Clinic and Governors nominated by the Hospital be altered.

- Board of Governors of the Clinic in consultation with the Board of Management of the Hospital if so requested by the Hospital. It is intended that the services of the Clinic will initially be developed and extended in accordance with the report dated the 14th day of November 1975 and prepared by Dr. Ciaran Barry and Dr. Bryan Alton which has already been submitted to the Hospital and to the Clinic and a copy of which is appended to this Agreement. Such development and extension will be for the benefit of the Hospital and the Clinic and the Hospital will use its best endeavours to procure financial aid for it in accordance with Clause 2G of this Agreement.
- 6. The present fund raising activities of the Clinic will be carried on by the Clinic as heretofore and will be extended where practicable. This Agreement will not in any way affect adversely the existing activities of the Clinic or the Hospital save as may be expressly agreed between the parties hereto.
- 7. The day to day affairs of the Clinic will be administered by an Executive Committee which shall consist of not more than eight and not less than six persons nominated and removed under the same provisions as the Board are nominated in accordance with Clause 3 hereof, half thereof as near as may be to be nominated

by the Hospital and half thereof as near as may be to be nominated by the Clinic. Such persons shall not be required to be members or Governors of the Clinic or members of the Board of Management of the Hospital. The Executive Committee will be responsible for the general day to day administration of the Clinic and will act in accordance with policies laid down by the reconstituted Board of Governors of the Clinic from time to time.

- 8. The Hospital and Clinic may jointly agree to nominate additional Governors to the Board not exceeding fourteen in all in the same ratio in accordance with Article 3 of the Articles of Association of the Clinic.
- 9. In the event of either of the parties hereto being satisfied that no substantial benefit is accruing to it or its patients under this Agreement or the performance thereof they may serve six prior calendar months notice in writing on the other party determining this Agreement upon the expiration of which the Agreement will terminate without prejudice to any rights which may have accrued prior to such termination:

IN WITNESS whereof the parties hereto have caused this Agreement to be signed on its behalf the day and year first herein WRITTEM.

SIGNED on behalf of the Board of Management of THE MATER
MISERICORDIAE HOSPITAL DUBLIN in the presence of:

Xolut Joffyman Sall

PRESENT when the Common Seal of CENTRAL: REMEDIAL CLINIC was affixed hereto: Gentleiter Green Ruching