

**Opening Statement: Dr Peter Boylan**

1. The Sisters of Charity's transfer to St Vincent's Holdings required them to apply for Vatican permission under the mandatory Canon Law, 1291 procedure of "alienation". Vatican permission was conditional on the Sisters observing certain specified canon laws. *[Attachment 1, "Text of Vatican Letter to RSC"]*

The Main Objects of the St Vincent's companies bind them to uphold the values of Mother Mary Aikenhead. *[Attachment 2, New Constitution of SVHG, April 2022]*

The directors/ shareholders are committed to upholding the vision and values of Mary Aikenhead. *[Attachment 3 – Statement by Sister Mary Christian]*

It is not credible that these values include the provision of services, such as elective abortion, directly contradictory to Catholic teaching.

The concern about Catholic ethos is too acute to proceed unless and until there is full scrutiny of all correspondence between the Ireland and Rome.

*[See Note D below for schedule of documents required for Alienation]*

2. The plan is contrary to the recommendations of the 2019 Report on the role of Voluntary Organisations in Public Healthcare *[Attachment 5, Day Report Voluntary Sector]*: that the State should own the land on which the hospital is built, and if this is not possible "any capital investment by the State should only be provided subject to prior agreement on the services that will be delivered."

The Government should directly ask the new owners of St Vincent's Holdings why they cannot gift, as the Sisters of Charity said they would in 2017 *[Attachments: RSC press releases Jpgs]*, or sell the land to the State. Specifically, do the conditions set down by the Vatican preclude SVH from gifting or selling the land.

Prior agreement on the services must include a specified list of procedures "**including but not limited to** abortion, elective sterilisation, assisted fertility and gender realignment surgery, and any procedure that becomes legal in the future". It is incorrect to suggest that the Constitution would have to be revisited every time a new treatment or procedure becomes legally permissible.

3. The phrase “clinically appropriate” is a major red flag. Providing healthcare on the basis of this test removes autonomy from women and gives the sole decision-making capacity to doctors. These words qualify access to services and enshrine justification for refusing legally permissible treatments.

I attach a letter on behalf of Minister Donnelly which is a perfect example of “clinically required” (interchangeable in medical practice with clinically appropriate) in action denying patients legally permissible services.

“St Vincent’s University Hospital has carried out sterilisation procedures when it is **clinically required** to do so, but **not for the exclusive purpose of sterilisation**”.

*[Attachment: By\_PQ\_SVH\_Oct21]*

NMH clinicians who say terminations take place at St Vincent’s must confirm if those are under the terms of the 2018 Act or for clinical indication to save a patient’s life. Minister Donnelly’s response to PQ confirms fewer than 5 before October 2021, and that routine terminations do not happen at St Vincent’s.

4. The original plan to co-locate the NMH as an independent stand-alone hospital at Elm Park has been shredded. The NMH would be one of four hospitals owned by St Vincent’s Healthcare Group which in turn is wholly owned by St Vincent’s Holdings.

On 29 May 2017 James Menton, Chair of the Board of SVHG, insisted – after the RSC announced their intention to depart - that the move of NMH to the SVHG site “will proceed only on the basis of existing agreements that give ownership and control of the new hospital to SVHG” [Link to Irish Times article](#) . That intent has been achieved.

The existing National Maternity Hospital would cease to exist, but the mechanisms to do this have not yet commenced. The NMH Governors have not yet been asked to vote for the dissolution of the 1903 Charter, nor the required Act of the Oireachtas passed.

NMH staff would be employed by NMH DAC, whose board would have minority NMH representation and be subsidiary to SVHG. The Master would be relegated to one clinical director of four in the group *[Attachment: Mulvey.doc]*.

SVHG would own 99 NMH DAC shares. The Minister of the Day would have one share. The NMH would have none.

St Vincent’s would nominate one third of members of the NMH DAC board as well as the chair of that board on a rotating basis every three out of nine years.

There would only be three NMH directors, one of whom would be the Master (as opposed to reporting to the board). The CEO of the HSE is not a board member.

There is no security against a future conservative Minister for Health appointing 3 conservative State directors.

This is not independence.

5. The HSE's business case is undergoing review by the Department of Health as part of new rules to prevent a repeat of the National Children's Hospital budget's huge overrun. I am reliably informed that the HSE is unable to put a final figure on the cost but believes it is rising by more than €10 million every month.

The Comptroller & Auditor General's spending audit has not been completed.

6. Delays to the project have been caused by St Vincent's withdrawing co-operation between 2014-2016, during which there were three mediation processes.  
Delay in the Sisters of Charity completing the three stages of their alienation – canon law application, civil law registration and HSE approval, and  
Delay in producing legal documents.
7. There is risk associated with committing a flagship hospital to a catchment area of South County Dublin and the east coast for 299 years when the demographic evidence shows higher birth numbers in north and west Dublin and the surrounding counties.

In the last few years there has been impressive investment in Holles Street with a new labour suite, neonatal intensive care unit, operating theatres, emergency room, fetal medicine unit, upgrading of postnatal wards. Patient satisfaction is at 95% and clinical outcomes are on a par with the best in the world.

The current proposals are flawed. In view of deep public and political disquiet, more time is needed to get this project right.

Ends.

**Supplementary Notes**

A. The following is in the public domain:

## **Re Canon law and proposed alienation of property by Sisters of Charity to St Vincents Holdings**

### **Request to the Holy See.**

**The Superior General of the Religious Sister of Charity**, whose General House is located in Dublin (Ireland) requests of

**Your Holiness**, permission to transfer the entire issued share capital of St. Vincent's Healthcare group to St. Vincent's Holdings for a nominal sum of €1.00 for the reasons presented.

### **Response of the Holy See dated 16 March 2020**

**The Congregation for Institutes of Consecrated Life and Societies of Apostolic Life**, having studied the documentation submitted and heard the opinion of His Excellency, the Most Rev. Diarmuid Martin, the Archbishop of Dublin, His Excellency The Most Rev. Eamon Martin, the President of the Irish Episcopal Conference and His Excellency, The Most Rev. Jude Thadeus Okolo, the Apostolic Nuncio to Ireland **grants the request** in conformity with the petition. **The provisions relating to the validity and lawfulness of alienations, found in Canons 638-639 and Canons 1292-1294 of the Code of Canon Law and in Proper Law, are to be observed.**

Sr. Carmen Ros Nortes, NSC

[Congregation for the Institutes of Consecrated Life and Societies of Apostolic Life]

This is the congregation of the Roman Curia with competency over everything which concerns religious orders worldwide regarding their government, discipline, studies, goods, including property, rights, and privileges.

- B. Book V of the Code of canon law affirms the inherent right of the Catholic Church, **independently of any secular power**, to acquire, retain, **administer and alienate temporal goods**, of course for pursuing her own objectives that are principally the regulation of divine worship, provision of fitting support for the clergy and other ministers and **carrying out the works of sacred apostolate, and of charity** (can. 1254). Affirming the Church's right on temporal goods clearly without any ambiguity, the Code directs the administrators of the ecclesiastical goods to **respect the provisions of civil laws in various undertaking**.
- C. The transfer of the Sisters of Charity shareholding in SVHG **must observe Canon Law**, specifically the Canons explicitly cited in order to be valid.

Canon 1293 is particularly relevant. Canon 1293.1.1. requires the Sisters of Charity to have "a just cause, such as urgent necessity, evident advantage, piety, charity, or some other grave pastoral reason" to make the transfer. Canon 1293.2. requires that

“other precautions prescribed by legitimate authority are also to be observed to avoid harm to the Church.”

Canon 1294. §2 ‘Normally goods must not be alienated **for a price lower than that given in the valuation**. The money obtained from alienation must be carefully invested for the benefit of the Church, or prudently expended according to the purposes of the alienation’.

- D. It is difficult to accept, in the absence of the correspondence with Rome being made available, that the Vatican agreed – uniquely in the world – to bring to an end nearly 200 years of Catholic healthcare ministry to an end to facilitate a hospital which would perform abortions and other procedures absolutely forbidden by Catholic teaching. What is the ‘just cause’ and what is the potential for such a move to cause “harm to the church” in the eyes of the faithful?

Archbishop Eamon Martin has confirmed that “the carrying out of abortions or morally illicit medical procedures at the NMH would be repugnant” to Catholic teaching and “regardless of the eventual outcome of the proposed transfer, the church will remain clear in its public statements that there is no place in a maternity hospital for abortion”.

- E. We must see the full suite of documents required for an Alienation request to the Vatican which include, but are not limited to:
- **Request of the competent person (RSC) – the petition**
  - **Vote of provincial or general council**
  - **Rationale for the petition for alienation**
  - **(Two) valuations of the property (one could be the tax assessment of the property)**
  - **Purchase offer (if known)**
  - **Explanation of use of the proceeds from the transaction**
  - **Audited financial statements**
  - **Written opinion of diocesan bishop of the place where the property is located – in this case Archbishops Eamon Martin, Diarmuid Martin, and Jude Thaddeus Okolo**
  - **If request is from a province,**
    - **Statement of support from superior general for the request**
    - **Vote of general council**
    - **Reference to letter of provincial**

[Source: The Resource Centre for Religious Institutes]

- F. It has repeatedly been stated that all legally permissible procedures will be performed in the new hospital”. Taking into account the qualification of “clinically

appropriate”; the ownership and governance structures; and commitment to upholding Catholic values it is worth quoting from the “Code of Ethical Standards for Healthcare” from the Irish Catholic Bishops’ Conference:

“If a particular law conflicts with the fundamental and inalienable rights of the human person, however, it conflicts with the common good and with reason and **does not command obedience**” (Chapter 8, page 99).

The risks for patients attending the new hospital are clear.