

**DUBLIN DENTAL HOSPITAL**

**ANNUAL FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED**

**31 DECEMBER 2017**

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## GENERAL INFORMATION

The following Board Members unless otherwise stated were appointed by the Minister for Health with effect from 11<sup>th</sup> May 2015 until 10<sup>th</sup> May 2019, Mr Frank Nolan (Chairman) was appointed with effect from 17<sup>th</sup> June 2015 until 16<sup>th</sup> June 2019.

<b>BOARD MEMBERS</b>	Mr. Frank Nolan (Chairman) Dr. Ronan Donelan* (Appointed 23rd Nov. 2017) Mr. John O'Halloran * Ms. Maura J McGrath* (Resigned 19 <sup>th</sup> January 2017) Prof. Mary McCarron** Dr. Aislinn Joy*** (Appointed 23 <sup>rd</sup> Nov. 2017) Ms. Sally Corr***	Ms. Valerie Judge** (Resigned 26 <sup>th</sup> Feb. 2018) Prof. Brian O'Connell Prof. Aideen Long* Ms. Pat O'Boyle Mr. Conor Hannaway** Dr. Robert Gorby*** Prof. Derek Sullivan* Ms. Sinead O'Loughlin*** (Appointed 23 <sup>rd</sup> Nov. 2017)
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Dr. Ronan Donelan was appointed to the Audit and Risk Committee on 26 February 2018. Dr. Aislinn Joy and Ms. Sinead O'Loughlin were appointed to the Quality and Safety Committee on 26 February 2018.

- \*Members of the Audit and Risk Committee
- \*\*Members of the Performance and Succession Committee
- \*\*\*Members of the Quality and Safety Committee

<b>OFFICERS</b>	Chief Executive Officer Accountant	Mr. David Barry Mr. Paul Walters
<b>ADDRESS</b>	Lincoln Place Dublin 2	
<b>BANKERS</b>	Ulster Bank Limited 31/33 College Green Dublin 2	Allied Irish Banks, p.l.c, 7/12 Dame Street Dublin 2
<b>AUDITOR</b>	Comptroller & Auditor General 3a Mayor St Upper Dublin 1	
<b>SOLICITOR</b>	Orpen Franks & Company 30 Burlington Road Dublin 4	

**Dublin Dental Hospital**  
**Statement on Internal Control**

**Scope of Responsibility**

On behalf of the Dublin Dental Hospital, I acknowledge the Board's responsibility for ensuring that an effective system of internal control is maintained and operated. This responsibility takes account of the requirements of the Code of Practice for the Governance of State Bodies (2016).

**Purpose of the System of Internal Control**

The system of internal control is designed to manage risk to a tolerable level rather than to eliminate it. The system can therefore only provide reasonable and not absolute assurance that assets are safeguarded, transactions authorised and properly recorded and that material errors or irregularities are either prevented or detected in a timely way.

The system of internal control, which accords with guidance issued by the Department of Public Expenditure and Reform, has been in place in the Dublin Dental Hospital for the year ended 31 December 2017 and up to the date of approval of the financial statements.

**Capacity to Handle Risk**

Dublin Dental Hospital has an Audit and Risk Committee (ARC) comprising four Board Members with the Chair having financial and audit expertise. The ARC met four times in 2017.

Dublin Dental Hospital has also established an outsourced internal audit function, which is adequately resourced and conducts a programme of work agreed with the ARC.

The ARC has developed a risk management policy which sets out its risk appetite, the risk management processes in place and details the roles and responsibilities of staff in relation to risk. The policy has been issued to all staff who are expected to work within the Dublin Dental Hospital's risk management policies, to alert management on emerging risks and control weaknesses and assume responsibility for risks and controls within their own area of work.

**Risk and Control Framework**

The Dublin Dental Hospital has implemented a risk management system which identifies and reports key risks and the management actions being taken to address and, to the extent possible, to mitigate those risks.

A risk register is in place, which identifies the key risks facing the Dublin Dental Hospital, and these have been identified, evaluated and graded according to their significance. The register is reviewed by the ARC at every meeting. The outcome of these assessments is used to plan and allocate resources to ensure risks are managed to an acceptable level.

The risk register details the controls and actions needed to mitigate risks and responsibility for operation of controls assigned to specific staff. I confirm that a control environment containing the following elements is in place:

- procedures for all key Hospital processes have been documented,
- financial responsibilities have been assigned at management level with corresponding accountability,
- there is an appropriate budgeting system with an annual budget which is kept under review by senior management,
- there are systems aimed at ensuring the security of the information and communication technology systems,
- there are systems in place to safeguard the assets and

- control procedures over grant funding to outside agencies ensure adequate control over approval of grants and monitoring and review of grantees to ensure grant funding has been applied for the purpose intended.

#### Ongoing Monitoring and Review

Formal procedures have been established for monitoring control processes and control deficiencies are communicated to those responsible for taking corrective action and to management and the Board, where relevant, in a timely way. I confirm that the following ongoing monitoring systems are in place:

- key risks and related controls have been identified and processes have been put in place to monitor the operation of those key controls and report any identified deficiencies,
- reporting arrangements have been established at all levels where responsibility for financial management has been assigned, and
- there are regular reviews by senior management of periodic and annual performance and financial reports, which indicate performance against budgets/forecasts.

#### Procurement

I confirm that Dublin Dental Hospital has procedures in place to ensure compliance with current procurement rules and guidelines. Matters arising regarding controls over procurement are highlighted under internal control issues below.

#### Review of Effectiveness

I confirm that the Dublin Dental Hospital has procedures to monitor the effectiveness of its risk management and control procedures. The Dublin Dental Hospital's monitoring and review of the effectiveness of the system of internal financial control is informed by the work of the internal and external auditors, the Audit and Risk Committee, which oversees their work and the senior management within the Dublin Dental Hospital responsible for the development and maintenance of the internal financial control framework.

I confirm that the Board conducted an annual review of the effectiveness of the internal controls for 2017.

#### Internal Control Issues

The following weaknesses in internal control was identified in relation to 2017 that require disclosure in the financial statements:

#### Non-Compliant Procurement

During 2017 expenditure of €358,000 was incurred in relation to goods and services where the procedures employed did not fully comply with procurement guidelines. In five instances, amounting to €273,000, existing contracts were rolled over pending finalisation of new tender competitions. New tender competitions were completed in 2018. During the audit of the financial statements, three further cases were noted amounting to €85,000 where a non-compliant processes was used. These related to a number of purchases from sole suppliers and some repairs and maintenance which are on a needs only and emergency basis and fluctuate from year to year. Total non-compliant expenditure in 2017 represented 7.8% of non-pay related expenditure in 2017.

Signed on behalf of the Board of the Dublin Dental Hospital.



Mr. Frank Nolan

Chairman

Dublin Dental Hospital Board

Dated: 26/11/2018

## Governance Statement and Board Members' Report

### Governance

The Board of Dublin Dental Hospital was established under the Dublin Dental Hospital (Establishment) Order 1963. The functions of the Board are set out in Section 4 of this Order. The Board is accountable to the Minister for Health and is responsible for ensuring good governance and performs this task by setting strategic objectives and targets and taking strategic decisions on all key business issues. The regular day-to-day management, control and direction of Dublin Dental Hospital are the responsibility of the Chief Executive Officer (CEO) and the Executive Team. The Executive Team comprises of the CEO, Clinical Director and Dean of Dental Affairs. The CEO and the Executive Team must follow the broad strategic direction set by the Board, and must ensure that all Board members have a clear understanding of the key activities and decisions related to the Hospital, and of any significant risks likely to arise. The CEO acts as a direct liaison between the Board and management of Dublin Dental Hospital.

### Board Responsibilities

The work and responsibilities of the Board are set out in Dublin Dental Hospital (Establishment) Order 1963, which also contain the matters specifically reserved for Board decision. Standing items considered by the Board include:

- declaration of interests,
- reports from committees,
- financial reports/management accounts,
- performance reports, and
- reserved matters.

Section 18 of the Dublin Dental Hospital (Establishment) Order 1963 requires the Board of Dublin Dental Hospital to keep, in such form as may be approved by the Minister for Health with consent of the Minister for Public Expenditure and Reform, all proper and usual accounts of money received and expended by it. In preparing these financial statements, the Board of Dublin Dental Hospital is required to:

- select suitable accounting policies and apply them consistently,
- make judgements and estimates that are reasonable and prudent,
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that it will continue in operation, and
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements.

The Board is responsible for keeping adequate accounting records which disclose, with reasonable accuracy at any time, its financial position and enables it to ensure that the financial statements comply with Section 18 (1) of the Dublin Dental Hospital (Establishment) Order. The maintenance and integrity of the corporate and financial information on the Dublin Dental Hospital 's website is the responsibility of the Board.

The Board is responsible for approving the annual plan and budget. An evaluation of the performance of Dublin Dental Hospital by reference to the annual service plan and budget was carried out on 23 April 2018.

The Board is also responsible for safeguarding its assets and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Board considers that the financial statements of Dublin Dental Hospital give a true and fair view of the financial performance and the financial position of Dublin Dental Hospital at 31 December 2017.

## Board Structure

Board Member	Role	Date Appointed
Mr Frank Nolan	Chairman	17 June 2015
Ms Sally Corr	Ordinary Member	11 May 2015
Dr Ronan Donelan	Ordinary Member	23 November 2017
Dr Robert Gorby	Ordinary Member	11 May 2015
Mr Conor Hannaway	Ordinary Member	11 May 2015
Dr Aislinn Joy	Ordinary Member	23 November 2017
Ms Valerie Judge	Ordinary Member	11 May 2015
Professor Aideen Long	Ordinary Member	11 May 2015
Professor Mary McCarron	Ordinary Member	11 May 2015
Ms Pat O'Boyle	Ordinary Member	11 May 2015
Professor Brian O'Connell	Ordinary Member	11 May 2015
Mr John O'Halloran	Ordinary Member	11 May 2015
Ms Sinead O'Loughlin	Ordinary Member	23 November 2017
Professor Derek Sullivan	Ordinary Member	9 August 2016

The Board has established three Board sub - committees, as follows:

**1. Audit and Risk Committee:** comprises four Board members. The role of the Audit and Risk Committee (ARC) is to support the Board in relation to its responsibilities for issues of risk, control and governance and associated assurance. The ARC is independent from the financial management of the organisation. In particular, the Committee ensures that the internal control systems including audit activities are monitored actively and independently. The ARC reports to the Board after each meeting, and formally in writing annually.

The members of the Audit and Risk Committee are: Mr John O'Halloran (Chairperson), Dr Ronan Donelan (appointed 26 February 2018), Professor Aideen Long, Ms Maura McGrath (resigned 19<sup>th</sup> January 2017) and Professor Derek Sullivan. There were 4 meetings of the ARC in 2017.

**2. Performance and Succession Committee:** comprises three Board members. The role of the Performance and Succession Committee (P&SC) is to oversee the performance of the CEO and the Executive Team of the Hospital and to devise logical succession planning protocols to be followed to ensure continuity of the Executive Team. The members of this Committee are: Professor Mary McCarron (Chairperson) Ms Valerie Judge (resigned 26 February 2018) and Mr Conor Hannaway. There were 3 meetings of the PSC in 2017.

**3. Quality and Safety Committee:** comprises four Board members. The role of the Quality and Safety Committee (QSC) is to oversee patient quality and safety on behalf of the Board. The members of this Committee are: Dr Robert Gorby (Chairperson), Ms Sally Corr, Dr Aislinn Joy (appointed 26 February 2018) and Ms Sinead O'Loughlin (appointed 26 February 2018). There were 4 meetings of the QSC in 2017.

**Schedule of Attendance, Fees and Expenses**

A schedule of attendance at the Board and Board Sub-Committee meetings for 2017 is set out below including the fees and expenses received by each member:

	Board	Audit and Risk Committee	Performance and Succession Committee	Quality and Safety Committee
Mr Frank Nolan	5 of 5	-	-	-
Ms Sally Corr	4 of 5	-	-	3 of 4
Dr Ronan Donelan (appointed 23 November 2017)	-	-	-	-
Dr Robert Gorby	5 of 5	-	-	4 of 4
Mr Conor Hannaway	3 of 5	-	3 of 3	-
Dr Aislinn Joy (appointed 23 November 2017)	-	-	-	-
Ms Valerie Judge	4 of 5	-	2 of 3	-
Professor Aideen Long	5 of 5	4 of 4	-	-
Professor Mary McCarron	1 of 5	-	3 of 3	-
Ms Maura McGrath	-	-	-	-
Ms Pat O'Boyle	5 of 5	-	-	-
Professor Brian O'Connell	4 of 5	-	-	-
Mr John O'Halloran	5 of 5	4 of 4	-	-
Ms Sinead O'Loughlin (appointed 23 November 2017)	-	-	-	-
Professor Derek Sullivan	4 of 5	4 of 4	-	-

**Board Members Expenses**

	Mr Frank Nolan	Mr John O'Halloran
Fees	11,970	
Course Fee		45
Accommodation	244	
Car Mileage	271	
Car Parking	73	
Computer	328	
<b>Total</b>	<b>12,886</b>	<b>45</b>

**Note:** All of the expenses above are for domestic accommodation and travel.

**Key Personnel Changes**

Ms Maura McGrath resigned from the Board on 19 January 2017. In accordance with the Dublin Dental Hospital (Establishment) Order 1963 the Minister appointed three new members to achieve a full Board complement: Dr Ronan Donelan, Ms Sinead O'Loughlin and Dr Aislinn Joy were appointed on 23 November 2017. Mr David Barry was appointed as CEO with effect from 26 June 2017.

**Subsequent Events**

Ms Valerie Judge resigned from the Board on 26 February 2018. Ms Rebecca Conlon was appointed to the Board on 24 April 2018.



**Disclosures Required by Code of Practice for the Governance of State Bodies (2016)**

The Board is responsible for ensuring that Dublin Dental Hospital has complied with the requirements of the Code of Practice for the Governance of State Bodies (“the Code”), as published by the Department of Public Expenditure and Reform in August 2016. The following disclosures are required by the Code:

***Employee Short-Term Benefits Breakdown***

Employees’ short-term benefits in excess of €60,000 are disclosed in Note 9(d) of the Financial Statements.

***Consultancy Costs***

Consultancy costs include the cost of external advice to management and exclude outsourced ‘business-as-usual’ functions.	2017 €	2016 €
Legal advice	28,023	22,323
Financial/actuarial advice	6,000	-
Public relations/marketing	-	-
Human Resources	-	-
Business improvement	-	-
Other	4,305	-
<b>Total consultancy costs</b>	<b>38,328</b>	<b>22,323</b>
Consultancy costs capitalised	-	-
Consultancy costs charged to the Income and Expenditure and Retained Revenue Reserves	38,328	22,323
<b>Total</b>	<b>38,328</b>	<b>22,323</b>

***Legal Costs and Settlements***

The table below provides a breakdown of amounts recognised as expenditure in the reporting period in relation to legal costs, settlements and conciliation and arbitration proceedings relating to contracts with third parties. This does not include expenditure incurred in relation to general legal advice received by Dublin Dental Hospital which is disclosed in Consultancy costs above.

	2017 €	2016 €
Legal fees – legal proceedings	-	-
Conciliation and arbitration payments	-	-
Settlements	-	-
<b>Total</b>	<b>-</b>	<b>-</b>

***Travel and Subsistence Expenditure***

Travel and subsistence expenditure is categorised as follows:

	2017 €	2016 €
<b>Domestic</b>		
- Board	588	1,419
- Employees	74,622	67,880
<b>International</b>		
- Board	-	-
- Employees	45,686	55,838
<b>Total</b>	<b>120,896</b>	<b>125,137</b>

***Hospitality Expenditure***

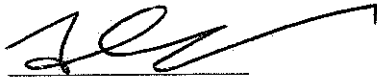
The Income and Expenditure Account includes the following hospitality expenditure:

	2017	2016
	€	€
Staff hospitality	-	-
Client hospitality	6,128	4,350
<b>Total</b>	<b>6,128</b>	<b>4,350</b>

€5,544 of the Client hospitality expenditure in 2017 (2016: €4,107) are costs associated with the annual reception for graduating students and their families.

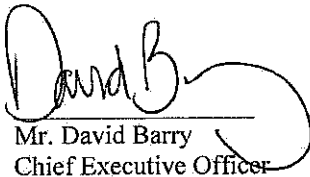
***Statement of Compliance***

The Board has adopted the Code of Practice for the Governance of State Bodies (2016) and has put procedures in place to ensure compliance with the Code. Dublin Dental Hospital was in full compliance with the Code of Practice for the Governance of State Bodies for 2017.



Mr. Frank Nolan  
Chairman  
Dublin Dental Hospital Board

Date signed: 26/11/2018



Mr. David Barry  
Chief Executive Officer

Date signed: 26/11/18



## Ard Reachtaire Cuntas agus Ciste Comptroller and Auditor General

### Report for presentation to the Houses of the Oireachtas

#### Dublin Dental Hospital Board

##### Opinion on financial statements

I have audited the financial statements of Dublin Dental Hospital Board for the year ending 31 December 2017 as required under the provisions of section 5 of the Comptroller and Auditor General (Amendment) Act 1993. The financial statements comprise

- the non-capital income and expenditure account
- the capital income and expenditure account
- the balance sheet
- the cash flow statement and
- the related notes, including a summary of significant accounting policies.

In my opinion, the financial statements

- properly present the state of Dublin Dental Hospital Board's affairs at 31 December 2017
- have been prepared in the form prescribed under Section 18 of the Dublin Dental Hospital Board (Establishment) Order 1963, and in accordance with the Accounting Standards for Voluntary Hospitals approved by the Minister for Health

##### Basis of opinion

I conducted my audit of the financial statements in accordance with the International Standards on Auditing (ISAs) as promulgated by the International Organisation of Supreme Audit Institutions. My responsibilities under those standards are described in the appendix to this report. I am independent of Dublin Dental Hospital Board and have fulfilled my other ethical responsibilities in accordance with the standards.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

##### Report on information other than the financial statements, and on other matters

Dublin Dental Hospital Board has presented certain other information together with the financial statements. This comprises the governance statement and the statement on internal control. My responsibilities to report in relation to such information, and on certain other matters upon which I report by exception, are described in the appendix to this report.

I have nothing to report in that regard.

**Patricia Sheehan**  
For and on behalf of the  
Comptroller and Auditor General

5 December 2018

## Appendix to the report

### Responsibilities of Board members

The governance statement and Board members' report sets out the Board members' responsibilities. The Board members are responsible for

- the preparation of financial statements in the form prescribed under section 18 of the Dublin Dental Hospital Board (Establishment) Order 1963, and in accordance with the Accounting Standards for Voluntary Hospitals approved by the Minister for Health
- ensuring the regularity of transactions
- assessing whether the use of the going concern basis of accounting is appropriate, and
- such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

### Responsibilities of the Comptroller and Auditor General

I am required under section 5 of the Comptroller and Auditor General (Amendment) Act 1993 to audit the financial statements of Dublin Dental Hospital Board and to report thereon to the Houses of the Oireachtas.

My objective in carrying out the audit is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement due to fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with the ISAs, I exercise professional judgment and maintain professional scepticism throughout the audit. In doing so,

- I identify and assess the risks of material misstatement of the financial statements whether due to fraud or error; design and perform audit procedures responsive to those risks; and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- I obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal controls.
- I evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures.
- I conclude on the appropriateness of the use of the going concern basis of accounting and, based on the audit evidence obtained, on whether a material uncertainty

exists related to events or conditions that may cast significant doubt on the Dublin Dental Hospital Board's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my report. However, future events or conditions may cause Dublin Dental Hospital Board to cease to continue as a going concern.

- I evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

### Information other than the financial statements

My opinion on the financial statements does not cover the other information presented with those statements, and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, I am required under the ISAs to read the other information presented and, in doing so, consider whether the other information is materially inconsistent with the financial statements or with knowledge obtained during the audit, or if it otherwise appears to be materially misstated. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

### Reporting on other matters

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation. I report if there are material matters relating to the manner in which public business has been conducted.

I seek to obtain evidence about the regularity of financial transactions in the course of audit. I report if there is any material instance where public money has not been applied for the purposes intended or where transactions did not conform to the authorities governing them.

I also report by exception if, in my opinion,

- I have not received all the information and explanations I required for my audit, or
- the accounting records were not sufficient to permit the financial statements to be readily and properly audited, or
- the financial statements are not in agreement with the accounting records.

## STATEMENT OF ACCOUNTING POLICIES

- a) **Historical Cost Convention**  
The financial statements are prepared under the historical cost convention.
- b) **Income and Expenditure**  
Income and expenditure are recognised on the accruals basis except for minor miscellaneous income which is recognised on a receipts and payments basis.
- c) **Apportionment of net expenditure between Government Departments**  
Direct and indirect teaching and related costs are apportioned to the Department of Education and Skills. The remaining costs of the hospital are apportioned equally to the Health Service Executive and the Department of Education and Skills.
- d) **Grants**  
Revenue grants are received from the Health Service Executive and the Department of Education and Skills towards the net annual running costs of the Hospital. The amounts brought to account represent the approved allocations for the year. Revenue grants may be used to finance the acquisition of certain fixed assets. In such instances, the cost of the assets is recognised in arriving at net expenditure in the Income and Expenditure Account. Capital grants and the expenditure to which they relate are accounted for in the Capital Income and Expenditure Account on the accruals basis.
- e) **Fixed Assets and Depreciation**  
Buildings are valued at cost.  
  
Buildings are depreciated at the rate of 2.5% per annum on a reducing balance basis and equipment is depreciated at various rates on a straight-line basis calculated to write them off over their useful lives. All Art Work purchases are capitalised but they are not depreciated. Depreciation is not charged to the income and expenditure account but is matched against the amortisation of the capitalisation account.
- f) **Capitalisation Account**  
The account is amortised in line with the depreciation of the assets funded.
- g) **Stocks**  
Stocks comprise consumable stores and are valued on the basis of cost with appropriate write-offs for damaged or obsolete stock.
- h) **Doubtful Debts**  
Provision is made against all debts which are deemed unlikely to be collected but have not yet been written off.
- i) **Pensions**  
As directed by the Minister for Health no provision has been made in respect of benefits payable under the Local Government Superannuation Scheme as the liability is underwritten by the Ministers for Health and Education and Skills. Contributions from employees who are members of the scheme are credited to the income and expenditure account when received. Pension payments under the scheme are charged to the income and expenditure account when paid.
- j) **Research Income and Expenditure**  
Research funding is received from Exchequer and private sources. In addition, certain fees earned by consultants are ring fenced for use in research and education/training projects. The Hospital incurs expenditure in relation to payment of researchers, research related costs and research related education and training costs. This ring fenced income and expenditure is not recognised in the income and expenditure account. Details of research income and expenditure are shown in Note 5(b). Unspent balances are shown as a liability in Note 5(a) and the related funds are included in year-end bank balances.

**SUMMARY INCOME AND EXPENDITURE ACCOUNT (NON-CAPITAL)**

For the year ended 31 December 2017

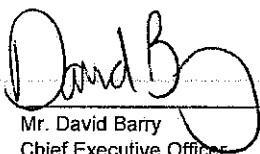
	Note	2017 DoE&S €	2017 HSE €	2017 Total €	2016 Total €
Net Expenditure	1	(10,553,001)	(6,352,069)	(16,905,070)	(16,242,376)
Approved Determination	16	10,685,779	6,146,363	16,832,142	16,198,829
<b>Surplus/(Deficit) for the year</b>		132,778	(205,706)	(72,928)	(43,547)
Cumulative surplus at beginning of year		270,766	122,272	393,038	436,585
<b>Cumulative surplus/(deficit) at year end</b>		403,544	(83,434)	320,110	393,038



Mr. Frank Nolan  
Chairman

Date signed:

26/11/18



Mr. David Barry  
Chief Executive Officer

Date signed:

26/11/18

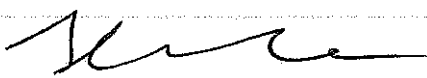
With the exception of fixed assets depreciation and amortisation of the Capitalisation Account, the Board has no gains or losses in the financial year or the preceding financial year other than those dealt with in the Income and Expenditure Account. The results of the year relate to continuing operations.

The statement of accounting policies together with the notes on pages 19 to 25 form part of these accounts.

**CAPITAL INCOME AND EXPENDITURE ACCOUNT**

For the year ended 31 December 2017

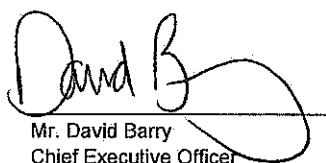
	2017	2016
	€	€
<b>Capital Income Sources</b>		
Department of Education and Skills - Capital Grant	380,921	664,717
Health Service Executive	--	54,360
Trinity College Dublin	858,786	458,166
Bank Interest	67	25
<b>Total Capital Income</b>	<u>1,239,774</u>	<u>1,177,268</u>
<b>Capital Expenditure</b>		
Equipment	(147,369)	(655,407)
Minor Capital Works	(685,716)	(153,302)
Front Façade Repairs	(14,786)	(517,903)
<b>Total Capital Expenditure</b>	<u>(847,871)</u>	<u>(1,326,612)</u>
<b>Surplus/(Deficit) for the year</b>	391,903	(149,344)
Surplus brought forward 1 January	80,952	230,296
<b>Surplus carried forward 31 December</b>	<u>472,855</u>	<u>80,952</u>



Mr. Frank Nolan  
Chairman

Date signed:

26/11/18



Mr. David Barry  
Chief Executive Officer

Date signed:

26/11/18

With the exception of fixed assets depreciation and amortisation of the Capitalisation Account, the Board has no gains or losses in the financial year or the preceding financial year other than those dealt with in the Income and Expenditure Account. The results of the year relate to continuing operations.

The statement of accounting policies together with the notes on pages 19 to 25 form part of these accounts.

**BALANCE SHEET**

As at 31 December 2017

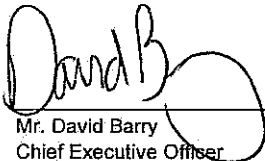
	Note	2017 €	2016 €
<b>FIXED ASSETS</b>	2	18,769,555	19,740,976
<b>CURRENT ASSETS</b>			
Stocks	3	118,183	138,522
Debtors	4	4,209,226	1,577,093
Cash at bank and in hand		974,126	2,740,150
		<u>5,301,535</u>	<u>4,455,765</u>
<b>CURRENT LIABILITIES</b>			
Other Creditors		2,627,407	2,900,776
Deferred Income	5(a)	1,881,163	1,080,999
		<u>4,508,570</u>	<u>3,981,775</u>
<b>TOTAL ASSETS LESS LIABILITIES</b>		<u>19,562,520</u>	<u>20,214,966</u>
<b>CAPITAL AND RESERVES</b>			
Non-Capital Income and Expenditure Account Surplus		320,110	393,038
Capital Fund:-			
Capitalisation Account	6	18,769,555	19,740,976
Surplus on Capital Income and Expenditure Account		472,855	80,952
		<u>19,562,520</u>	<u>20,214,966</u>



Mr. Frank Nolan  
Chairman

Date signed:

26/11/18



Mr. David Barry  
Chief Executive Officer

Date signed:

26/11/18


The statement of accounting policies together with the notes on pages 19 to 25 form part of these accounts.



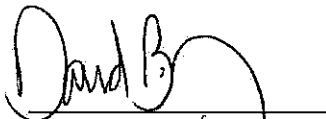
**CASH FLOW STATEMENT**

For the year ended 31 December 2017

	Note	2017 €	2016 €
<b>OPERATING (NON-CAPITAL) ACTIVITIES</b>			
Cash received from the Health Service Executive		5,958,929	6,119,463
Cash received from Department of Education and Skills		10,685,779	10,090,079
Cash received from patients		1,241,166	1,227,231
Other cash receipts		2,401,278	4,836,548
<b>Total Inflows</b>		<u>20,287,152</u>	<u>22,273,321</u>
Non - pay cash payments		(4,674,631)	(4,738,331)
Cash payments to and on behalf of employees		(17,300,969)	(16,010,658)
<b>Total (Outflows)</b>		<u>(21,975,600)</u>	<u>(20,748,989)</u>
<b>Net Cash (Outflow) / Inflow from Operating Activities</b>	7	<u>(1,688,448)</u>	<u>1,524,332</u>
<b>RETURNS ON INVESTMENTS AND SERVICING OF FINANCE</b>			
Bank interest paid		(62)	(448)
<b>Net Cash (Outflow) from Returns on Investments &amp; Servicing of Finance</b>		<u>(62)</u>	<u>(448)</u>
<b>CAPITAL EXPENDITURE AND FINANCIAL INVESTMENT</b>			
Payments from capital re acquisition of fixed assets		(1,040,276)	(1,201,945)
<b>Net Cash (Outflow) from Capital Expenditure and Financial Investment</b>		<u>(1,040,276)</u>	<u>(1,201,945)</u>
<b>Net Cash (Outflow) / Inflow before Financing</b>		<u>(2,728,786)</u>	<u>321,939</u>
<b>FINANCING</b>			
Department of Education and Skills capital grant received		380,921	664,717
Health Service Executive capital grant received		--	54,360
Bank Interest Received		67	25
TCD Grant Received		581,774	458,166
<b>Net Cash Inflow from Financing</b>		<u>962,762</u>	<u>1,177,268</u>
<b>(Decrease) / Increase in cash in the period</b>	8	<u>(1,766,024)</u>	<u>1,499,207</u>

  
 \_\_\_\_\_  
 Mr. Frank Nolan  
 Chairman

Date signed: 26/11/18

  
 \_\_\_\_\_  
 Mr. David Barry  
 Chief Executive Officer

Date signed: 26/11/18

The statement of accounting policies together with the notes on pages 19 to 25 form part of these accounts.

## NOTES TO THE ACCOUNTS

For the year ended 31 December 2017

	Note	2017 DoE&S €	2017 HSE €	2017 Total €	2016 Total €
<b>1 NET EXPENDITURE</b>					
<b>Pay expenditure</b>					
Management/Administration		1,581,849	1,281,850	2,863,699	2,824,161
Medical/Dental		4,980,174	1,675,713	6,655,887	6,026,516
Nursing		260,442	217,484	477,926	497,761
Paramedical		420,889	102,692	523,581	666,572
Support Services		2,236,104	1,500,739	3,736,843	3,534,518
Maintenance/Technical		252,232	252,232	504,464	462,092
Superannuation		2,390,385	519,872	2,910,257	2,673,557
<b>Total Pay Expenditure</b>	<b>9</b>	<b>12,122,075</b>	<b>5,550,582</b>	<b>17,672,657</b>	<b>16,685,177</b>
<b>Non pay expenditure</b>					
Drugs & Medicines		36,583	30,278	66,861	54,257
Medical gases		3,754	3,755	7,509	10,371
Medical/Surgical supplies		617,891	469,642	1,087,533	1,078,604
Supplies & Contracts on Other Medical Equipment		68,826	47,740	116,566	137,046
X-ray/Imaging		23,073	22,416	45,489	40,753
Laboratory Supplies		360,685	157,645	518,330	490,281
Catering		21,744	20,711	42,455	41,470
Heat, Power & Light		60,068	60,068	120,136	148,592
Cleaning & Washing		239,991	239,104	479,095	464,099
Furniture, Crockery & Hardware		6,935	6,936	13,871	35,945
Bedding & Clothing		9,812	8,567	18,379	14,904
Maintenance		176,143	174,077	350,220	402,497
Education & Training		213,506	26,804	240,310	214,305
Travel & Subsistence (National)		42,121	33,089	75,210	69,299 *
Travel & Subsistence (International)		36,955	8,731	45,686	55,838 *
Bank Interest		31	31	62	448
Bank Charges		6,918	6,800	13,718	13,045
Insurance		19,996	19,997	39,993	49,177
Audit		14,500	14,500	29,000	27,000
Legal		14,012	14,011	28,023	22,323
Bad Debts Written Off		193,421	193,420	386,841	117,823
Adjustment to provision for bad debts		(154,388)	(154,388)	(308,776)	(107,428)
Office Expenses, Rent/Rates		188,986	142,357	331,343	309,709
Computer		311,796	256,562	568,358	566,906
Professional Services		36,181	41,567	77,748	74,193
Miscellaneous	<b>10</b>	129,240	42,106	171,346	146,145
<b>Total Non-Pay Expenditure</b>		<b>2,678,780</b>	<b>1,886,526</b>	<b>4,565,306</b>	<b>4,477,602</b>
<b>Gross (Pay &amp; Non-Pay) Expenditure</b>		<b>14,800,855</b>	<b>7,437,108</b>	<b>22,237,963</b>	<b>21,162,779</b>
<b>Income</b>					
Superannuation		379,122	166,647	545,769	553,557
Patient income		660,076	660,077	1,320,153	1,167,998
Charges for services to external agencies	<b>11</b>	707,747	223,496	931,243	915,711
Other	<b>12</b>	2,500,909	34,819	2,535,728	2,283,137
<b>Total Income</b>		<b>4,247,854</b>	<b>1,085,039</b>	<b>5,332,893</b>	<b>4,920,403</b>
<b>Net Expenditure (Non-Capital)</b>		<b>10,553,001</b>	<b>6,352,069</b>	<b>16,905,070</b>	<b>16,242,376</b>

\* Some prior year expenditure has been re-analysed on the same basis as the current year.

**NOTES TO THE ACCOUNTS - CONTINUED**  
For the year ended 31 December 2017

2 FIXED ASSETS	Buildings	Art Works	Equipment	Total
	€	€	€	€
<b>Cost</b>				
Opening Balance at 01/01/2017	23,356,715	447,665	14,858,383	38,662,763
Additions from Capital	--	--	147,369	147,369
Disposals during the year at Gross Book Value	--	--	--	--
Closing Balance at 31/12/2017	<u>23,356,715</u>	<u>447,665</u>	<u>15,005,752</u>	<u>38,810,132</u>
<b>Depreciation</b>				
Opening Balance at 01/01/2017	7,831,947	--	11,089,840	18,921,787
Depreciation charge for the year	388,119	--	730,671	1,118,790
Disposals - Accumulated Depreciation	--	--	--	--
Closing Balance at 31/12/2017	<u>8,220,066</u>	<u>--</u>	<u>11,820,511</u>	<u>20,040,577</u>
<b>Net book amount at 31/12/2017</b>	<u>15,136,649</u>	<u>447,665</u>	<u>3,185,241</u>	<u>18,769,555</u>
<b>Net book amount at 31/12/2016</b>	<u>15,524,768</u>	<u>447,665</u>	<u>3,768,543</u>	<u>19,740,976</u>

3 STOCK DETAILS	2017	2016
	€	€
Medical Gases Stock	646	527
Medical and surgical supplies	103,994	123,074
X-ray/Imaging supplies	1,008	2,854
Laboratory supplies	923	1,789
Provisions Stock	--	65
Cleaning & Washing Supplies	6,022	6,969
Furniture, Crockery, Hardware Stock	225	--
Bedding & Clothing Stock	--	205
Maintenance supplies	--	123
Stationery and office supplies	5,068	2,690
Computer Supplies	--	101
Other stock	297	125
	<u>118,183</u>	<u>138,522</u>

## NOTES TO THE ACCOUNTS - CONTINUED

For the year ended 31 December 2017

4 DEBTORS	2017	2016
	€	€
<b>Government Departments</b>		
Health Service Executive - Revenue Grants	596,236	592,808
	<u>596,236</u>	<u>592,808</u>
<b>Patients</b>		
Total amount due	924,216	1,214,031
Less provision for bad and doubtful debts	(782,645)	(1,091,421)
	<u>141,571</u>	<u>122,610</u>
<b>Other Debtors</b>		
Hospitals	31,727	24,725
Irish Prison Service	14,655	32,688
Student Fees	2,302,184	473,017
Payroll Recoupments	45,984	42,942
Withholding Tax	113	278
Capital Debtors	692,532	-
Sundry Debtors	6,806	6,326
	<u>3,094,001</u>	<u>579,976</u>
<b>Prepayments</b>		
Pay	72,509	3,963
Non-pay	304,909	277,736
	<u>377,418</u>	<u>281,699</u>
<b>Total Debtors</b>	<u>4,209,226</u>	<u>1,577,093</u>

5(a) CURRENT LIABILITIES	2017	2016
	€	€
Revenue creditors and accrued expenses	1,007,334	1,303,345
Deferred Tuition Fees	1,465,643	1,080,999
Research Funds (see Note 5(b) analysis below)	1,602,674	1,387,627
Deferred Capital Income	415,520	-
Capital creditors	17,399	209,804
	<u>4,508,570</u>	<u>3,981,775</u>

5(b) Research Funds	2017	2016
	€	€
<u>Research Income Sources</u>		
Exchequer - Health Research Board	304,292	196,026
Non-exchequer	206,748	290,430
Total Research Income	<u>511,040</u>	<u>486,456</u>
<u>Research Expenditure</u>		
Pay	(267,231)	(277,641)
Exchequer Grant Returned to Health Research Board	-	(82,396)
Non-pay	(28,762)	(72,162)
Total Research Expenditure	<u>(295,993)</u>	<u>(432,199)</u>
Net Surplus for year	215,047	54,257
Balance brought forward 1 January	1,387,627	1,333,370
Balance carried forward 31 December	<u>1,602,674</u>	<u>1,387,627</u>

Research income and expenditure is not reflected in Note 1 Net Expenditure.

## NOTES TO THE ACCOUNTS - CONTINUED

For the year ended 31 December 2017

6 CAPITALISATION ACCOUNT	Note	2017 €	2016 €
Balance at beginning of year		19,740,976	20,246,302
<b>Additions</b>			
Equipment		147,369	655,407
<b>Sub-Total Additions</b>		<u>147,369</u>	<u>655,407</u>
<b>Less</b>			
Depreciation for the year		(1,118,790)	(1,160,733)
<b>Sub-Total Deductions</b>		<u>(1,118,790)</u>	<u>(1,160,733)</u>
<b>Balance at year end</b>		<u><u>18,769,555</u></u>	<u><u>19,740,976</u></u>

7 RECONCILIATION OF NON-CAPITAL DEFICIT TO NET CASH (OUTFLOW) / INFLOW FROM OPERATING ACTIVITIES	2017 €	2016 €
Deficit for the year	(72,928)	(43,547)
<b>Adjust for:</b>		
Bank Interest paid	62	448
Decrease in stocks (note 3)	20,339	16,279
(Increase) / Decrease in debtors-excluding capital (note 4)	(1,939,601)	1,586,446
(Decrease) in creditors-excluding capital (note 5)	303,680	(35,294)
<b>Net cash (outflow) / inflow from operating activities</b>	<u>(1,688,448)</u>	<u>1,524,332</u>

8 Analysis of the balances of cash as shown in the balance sheet	2017 €	2016 €	CHANGE IN 2017 €	CHANGE IN 2016 €
Cash at Bank and in Hand	974,126	2,740,150	(1,766,024)	1,499,207
	<u>974,126</u>	<u>2,740,150</u>	<u>(1,766,024)</u>	<u>1,499,207</u>

**NOTES TO THE ACCOUNTS - CONTINUED**

For the year ended 31 December 2017

<b>9 Remuneration</b>		<b>2017</b>	<b>2016</b>
		€	€
<b>(a) Aggregate Employee Benefits</b>			
Staff short-term Benefits		13,578,360	12,882,005
Termination benefits		--	--
Retirement benefit costs		2,910,257	2,673,557
Employers Contribution to social Welfare		1,184,040	1,129,615
		<u>17,672,657</u>	<u>16,685,177</u>

Statutory pension related deductions of €601,335 (2016: €603,533) were deducted from employees and remitted to the Department of Education and Skills in the amount of €417,328 (2016: €422,870) and the Health Service Executive in the amount of €184,007 (2016: €180,663).

The number of employees at the 31 December 2017 (in whole time equivalents (WTEs) was 211 (2016: 211).

**(b) Staff Short-Term Benefits**

Basic pay		13,400,528	12,700,299
Overtime		66,784	61,064
Allowances		111,048	120,642
		<u>13,578,360</u>	<u>12,882,005</u>

**(c) Termination Benefits**

Termination benefits charged to I&E		<u>          --          </u>	<u>          --          </u>
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**(d) Employee Short Term benefits breakdown**

The number of employees whose benefits fell within each band of €10,000 from €60,000 onwards is as follows:-

		<b>Number of Employees</b>		
		<b>2017</b>	<b>2016</b>	
€ 60,000	-	€69,999	8	6
€ 70,000	-	€79,999	9	11
€ 80,000	-	€89,999	5	2
€ 90,000	-	€99,999		2
€ 100,000	-	€109,999	3	
€ 110,000	-	€119,999		
€ 120,000	-	€129,999	1	1
€ 130,000	-	€139,999	1	4
€ 140,000	-	€149,999	1	
€ 150,000	-	€159,999	2	
€ 160,000	-	€169,999		
€ 170,000	-	€179,999		
€ 180,000	-	€189,999	2	2
€ 190,000	-	€199,999		7
€ 200,000	-	€209,999	2	
€ 210,000	-	€219,999	4	
€ 220,000	-	€229,999	2	1
€ 230,000	-	€239,999	1	1
€ 240,000	-	€249,999	1	
€ 250,000	-	€259,999	1	
		<u>          1          </u>	<u>          43          </u>	<u>          37          </u>

Note : For the purposes of this disclosure, short-term employee benefits in relation to services rendered during the reporting period include salary, overtime allowances and other payments made on behalf of the employee, but exclude employer's PRSI.

**NOTES TO THE ACCOUNTS - CONTINUED**

For the year ended 31 December 2017

**(e) Key Management Personnel**

Key management personnel in the Dublin Dental Hospital consists of members of the Board, the Chief Executive Officer, the Clinical Director and the Dean of Dental Affairs. The total value of employee benefits for key management personnel is set out below:

	2017	2016
	€	€
Salary	501,726	524,249
Allowances	49,493	48,343
Termination benefits	--	--
Health Benefits	--	--
	<u>551,219</u>	<u>572,592</u>

This does not include the value of retirement benefits earned in the period. The key management personnel are members of either the Local Government Superannuation Scheme or the Single Public Service Pension Scheme.

**(f) Chief Executive Officer Salary and Benefits**

The CEO remuneration package for the financial period was as follows:

	2017	2016
	€	€
Basic Pay	76,188	106,996
	<u>76,188</u>	<u>106,996</u>

The Chief Executive Officer is a member of the Single Public Service Pension Scheme, and his entitlements in that regard do not extend beyond the terms of the scheme. The value of the retirement benefits earned in the period is not included above.

10 Miscellaneous	2017	2016
	€	€
Miscellaneous teaching costs	16,920	12,955
Recruitment Costs	42,692	31,378
Subscriptions	99,832	106,715
Research	271	8,227 *
Security	318	--
Presentations / Retirements	1,249	1,655
Other	10,064	(14,785) *
	<u>171,346</u>	<u>146,145</u>

\*Some prior year expenditure has been re-analysed on the same basis as the current year

11 Charges for services to external agencies	2017	2016
	€	€
Paediatric Service	21,312	20,891
Oral Surgery Service	124,376	121,918
Oral Medical Service	108,524	106,380
General Dental Service	676,710	665,879
Forensic Dental Service	321	643
	<u>931,243</u>	<u>915,711</u>

12 Miscellaneous Income	2017	2016
	€	€
Student kits	115,906	102,725
Student fees	2,146,605	1,900,843
Education courses	195,122	220,428
Disability & Maternity Benefit (DSFA)	54,878	34,971
Other income	23,217	24,170
	<u>2,535,728</u>	<u>2,283,137</u>

**NOTES TO THE ACCOUNTS - CONTINUED**

For the year ended 31 December 2017

**13 Running Cost of Service**

After adjusting for depreciation, which is not accounted for through the Income and Expenditure Account, the running costs of the Hospital on a conventional accruals basis has been calculated as follows:-

	2017 €	2016 €
Net Expenditure	16,905,070	16,242,376
Add Depreciation Charge	1,118,790	1,160,733
	<u>18,023,860</u>	<u>17,403,109</u>

**14 Board Members Interests**

The Board adopted procedures in accordance with guidelines issued by the Department of Finance in relation to the disclosure of interests by Board members and these procedures have been adhered to in the year. There were no transactions in the year in relation to the Board's activities in which the Board members had any beneficial interest.

**15 Premises**

The Board own the following properties:-

1. The floors above ground level of premises at 18 and 19 Lincoln Place, Dublin 2
2. Premises at 20-28 Lincoln Place, Dublin 2
3. Premises at 1 and 2 South Leinster Street, Dublin 2
4. The floors above ground level of premises at 3 and 4 South Leinster Street, Dublin 2
5. The premises known as the *Watts Oral Biosciences Research Centre* at the rear of nos. 2-4 South Leinster Street, Dublin 2.

Annual ground rent of €2,540 is paid to TCD.

**16 HSE Determination**

The approved determination for the HSE for 2017 of €6,146,363 is made up of the allocation as notified to us by the HSE for 2017 of €5,962,357 plus €184,007 pension levy deductions retained by the Board in respect of deductions made through the payroll from employees funded from the HSE allocation.

**17 Contingent liability**

In June 2018 the HSE concluded an agreement with consultants in relation to remuneration and /or pension entitlements payable under their contract of employment. The terms of the settlement include payment of arrears for the 6 years up to June 2018 with 40% to be paid by 1 June 2019 and the balance due before March 2020.

The Hospital is actively engaging with the HSE to quantify the amounts due.

The Hospital will seek funding for these payments from the HSE and the Department of Education and Skills (DES) but at the date of signing of these Financial Statements no agreement has been reached with the HSE or DES for the funding of these settlements.

**18 Approval of the accounts**

The accounts were approved by the Board on 26 November 2018.