

Board of Directors Meetings (Public): May 2013 – April 2014

MATTERS ARISING / ACTIONS TRACKER

24 April 2014

KEY:

GREEN	ACTION COMPLETE	AMBER	ACTION ON TRACK	YELLOW	UPDATE REQUIRED	RED	ACTION OVERDUE
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7.	13/85	MONTHLY QUALITY AND SAFETY REPORT – PPC WORKFORCE	Directors noted that the recent PPC workforce change will be reviewed in 3 months to check the effectiveness and benefits.	JT	DATE REVISED TO APR 2014	This action remains ongoing and a further update will be provided at the April Board meeting	
ACTIONS ARISING FROM EXTRAORDINARY MEETING 29th OCTOBER 2013							
13.	13/ 126	CLINICAL SERVICE PLANS	Following discussions Directors APPROVED the Clinical Services plan as a blueprint and requested that action be taken to transform this blueprint into a firm plan with a definitive action plan.	PW	DATE REVISED TO APR 2014	Supported by Healthcare Planners, the strategy team has now produced pre-populated templates for seven key clinical specialties, containing market analysis and performance information. These documents will be available for Board members to inspect in advance of the April meeting. Colleagues from a number of Trust departments are now assembling locally sourced information to supplement the templates – this crucially includes service line financial performance	

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							information. Individual service line/divisional meetings are being scheduled with the aim of deriving strategic plans against the backdrop of the data packs. These will need to include matters relating to long term viability, internal efficiency, quality and potential for growth.	
ACTIONS ARISING FROM MEETING 7TH NOVEMBER 2013								
19&20.	13/138	REGULATORY – DISCRETIONARY REQUIREMENTS – KEOGH – NEWARK STRATEGY	The Newark Operational plan that will be developed by the end of December 2013 following the completion of the work stream groups.	JT/PW	DATE REVISED TO APR 2014		COMPLETED The five work streams have now completed their work, and the report of the key outputs is included on the agenda. This work is now moving into a new phase, where the Newark Hospital Management Board takes responsibility for implementation and future stewardship of the plan, whilst the Newark	

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							Strategy group is reconstituted into a reference group to ensure local ownership and accountability.	
23.	13/138	REGULATORY – DISCRETIONARY REQUIREMENTS – KEOGH – WARD PERFORMANCE INFORMATION	PO requested that a report be presented to the March 2014 Clinical Governance and Quality Committee pertaining to a 3 month assessment of the Ward dashboards and ward performance	SB	MAR 2014	COMPLETED	A report pertaining to the 3 month assessment of the ward dashboards and ward performance was presented at the CG&QC as requested	
28.	13/138	REGULATORY – DISCRETIONARY REQUIREMENTS – KEOGH- NEWS	AH reported that regular reports pertaining to NEWS will be submitted to the Board on a quarterly basis from March 2014 onwards	SB	DATE REVISED TO MAY 2014	COMPLETED	This information is provided in the quarterly patient safety report.	
ACTIONS ARISING FROM 19 DECEMBER 2013								
41.	13/176	FINANCIAL PERFORMANCE REPORT	MC proposed that in 2014/15 each divisional cost line is linked with an appropriate CIP	FS	APR 2014		Action on track	

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42.	13/180	CQC- REVIEW OF COLCHESTER	RD confirmed that he would liaise with the Trust's Internal audit team with a view to them providing a 3 rd party opinion following the Trust assessment against the failings at Colchester.	RD	APR 2014	RD updated that he had spoken to JT, FS and KR and agreement had been reached that this matter should be assessed internally but not necessarily by the Trust's internal audit team. Consideration would be given whether to include this review in the 2014/15 internal audit programme	
ACTIONS ARISING FROM 30 JANUARY 2014							
48.	14/018	ESTATES STRATEGY	MC requested that the strategy identify clear links to the benefits of the changes and provide further reference to the PFI and any surplus estate that the Trust currently holds. CW requested that the strategy be more "public facing" and further explanation be included to support the Trust's decision to reduce the theatre accommodation from 9 to 5.	PW PW	DATE REVISED TO APR 2014	There have been a number of developments during April: The Better Together estate work stream has concluded its membership and terms of reference and engaged external support. It will be working to a timeframe concluding in September 2014 to comprehensively review	

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			GMc requested that a clear benefit realisation statement be included pertaining to the effect of the incorporation of the Estates Strategy on backlog maintenance.	PW		<p>all health and social care premises in Mid-Notts and make recommendations about its optimum future utilisation.</p> <p>Whilst phase 1 of the estate strategy addressing the retained estate issues at KMH remains relevant, for financial planning purposes the executive has taken the view that the requirements of the capital expenditure approvals regime, coupled with the timeframe for the Better Together Estate work stream to conclude its work means that expenditure is unlikely to begin until 2015/16, and has therefore slipped the notional capital profile (for £30m scheme) by twelve months.</p> <p>Phase 2 of the SFH</p>	
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							estate strategy will be developed in light of the outcomes of the Better Together work.	
ACTIONS ARISING FROM 27 FEBRUARY 2014								
49.	14/040	PATIENT STORY	Following concerns raised regarding the failings within the primary care setting AH agreed to look at implementing a robust method of sharing failings with our primary care partners to ensure patient pathways are of a high standard throughout.	AH	APR 2014		COMPLETED A meeting has been held with the appropriate CCG representatives to ensure that patient pathways are of a high standard throughout and work is underway to ascertain the best way of establishing a forum between the Trust and the CCG	
50.	14/045	CHIEF EXECUTIVES REPORT	KF advised that she was now in a position to share the staff survey results for SFH and these will be shared accordingly. A more detailed comparison analysis against other Trusts will be provided at the next	KF KF	MAR 2014 MAR 2014		COMPLETED A paper was presented at the march 2014 Board of Directors meeting containing all required information	

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			Board of Directors meeting.					
51.	14/050	TRANSFORMATION AGENDA	Directors NOTED the Service Improvement Strategy and requested that a further update be provided at the March 2014 Board of Directors meeting	AH	MAR 2014	COMPLETED A paper was presented at the march 2014 Board of Directors meeting containing all required information		
52.	14/051	GOVERNING DOCUMENTS	KR advised that a further update paper charting progress associated with the constitutional changes will be presented to the March Board of Directors meeting.	KR	DATE REVISED TO APR 2014	Directors noted that an update regarding the constitutional changes will be presented at the Board of Directors meeting scheduled to take place in April 2014.		
ACTIONS ARISING FROM 27 MARCH 2014								
53.	14/074	CHIEF EXECUTIVE'S REPORT	PO advised that a further update would be provided at the April Board of Director's meeting pertaining to the best method of implementing the NICE guidelines across the Trust sites This advice would include long and short term	PO	APR 2014	The Director of Health has been written to , asking for help in defining a new approach to smoking cessation at the Trust		

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			measures regarding the best methods of implementation of a “No Smoking” policy The inclusion of the Trust’s smoking cessation lead would also be key.				
54.	14/074	CHIEF EXECUTIVE’S REPORT	PO to implement the changes detailed in the minutes of the March 2014 meeting into the “Plan on a page”	PO	APR 2014	COMPLETED These changes were incorporated and implemented in the Quality For All sessions	