

Board of Directors Meetings (Public): Oct 2013 – June 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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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 JULY 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 information. Individual service line/divisional meetings are being scheduled with the aim of deriving strategic plans against the backdrop of	
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							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								
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	MAY 2014		COMPLETED A report pertaining to the 3 month assessment of the ward dashboards and ward performance was presented at the CG&QC meeting as requested and also in May 2014	
ACTIONS ARISING FROM 19 DECEMBER 2013								
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	DATE REVISED TO JUNE 2014		RD updated that consideration is still being given to the inclusion of the CQC Colchester report in the 2014/15 internal audit programme. Directors noted that the Colchester report has not been issued to date and	

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							the Trust will undertake a “true for us” exercise upon receipt.	
ACTIONS ARISING FROM 30 JANUARY 2014								
48.	14/018	ESTATES STRATEGY	<p>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.</p> <p>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.</p> <p>GMc requested that a clear benefit realisation statement be included pertaining to the effect of the incorporation of the Estates Strategy on backlog maintenance.</p>	<p>PW</p> <p>PW</p> <p>PW</p>	DATE REVISED TO SEPT 2014	<p>There have been a number of developments during April:</p> <p>The Better Together estate work stream has concluded its membership & terms of reference & engaged external support. It will be working to a timeframe concluding in Sept 2014 to comprehensively review 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</p>		

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							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. Phase 2 of the SFH estate strategy will be developed in light of the outcomes of the Better Together work.	
ACTIONS ARISING FROM 24 APRIL 2014								
55.	14/103	BETTER TOGETHER ESTATES WORKSTREAM	PW advised that there are clear milestones set which he will share with the Board and	PW	JUNE 2014		This action is on track	

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			ensure that regular updates are factored in to this milestone timeline.					
ACTIONS ARISING FROM 29 MAY 2014								
61.	14/140	QUALITY AND SAFETY MONTHLY REPORT – D.O.L	Directors AGREED that a robust risk assessment will be carried out pertaining to D.O.L and this issue will be placed on the corporate risk register until such time as a local consensus is gained detailing the proposed way forward.	KR	JUNE 2014			
62.	14/143	INTEGRATED PERFORMANCE REPORT	SB questioned why the key performance indicator relating to Cancer 62 day wait: consultant upgrade is red for Q1 and YTD. JT responded that she would investigate this question and report back accordingly.	JT	JUNE 2014	COMPLETED	2 patients were unfit during the diagnostic phase and as the numbers of patients are so small this does significantly impact the percentage.	
63.	14/143	INTEGRATED PERFORMANCE REPORT	PM questioned the accuracy of the data included in the sickness absence trends and themes regarding 1369	KF	JUNE 2014	COMPLETED	HR have reviewed the sickness absence data and are able to confirm	

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			working days out of a total of 5034 (27%) working days were lost to sickness within the health care support worker group. KF advised that she would check this information and report back accordingly			that the figures shown are correct. We employ 618 Health Care Support Workers and the absence rate for that group of staff is 8.58%. The total days lost for this group of staff equates therefore to 1,369 as previously stated.	
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