

Board of Directors Meetings (Public): May 2013 – May 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	<p>COMPLETED Directors NOTED that a full review of the PPC workforce change has been undertaken at TMB and Executive Team meetings. The formal review was completed at the beginning of April and during the review process all backlog work has been cleared. Since the workforce change 100% of letters are responded to in 10 days, 66% within 5 days. This improvement has, in turn, led to a reduction in telephone enquiries. The new model is also encouraging PPC's to manage the individual 18 week waiting list within their own specialties. A few issues remain within the general surgery and vascular departments which are being addressed.</p>	
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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		A report pertaining to the 3 month assessment of the ward dashboards and ward performance was presented at the CG&QC as requested and a further report will be provided in May 2014	
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	DATE REVISED TO MAY 2014		COMPLETED This work has been completed as requested.	
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	RD	DATE REVISED TO JUNE		RD updated that consideration is still being given to the inclusion of	

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			providing a 3 rd party opinion following the Trust assessment against the failings at Colchester.		2014	the CQC Colchester report in the 2014/15 internal audit programme. Directors noted that the Colchester report has not been issued to date and 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</p>	PW		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</p>	

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			backlog maintenance.				<p>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 estate strategy will be developed in light of the outcomes of the Better Together work.</p>	
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ACTIONS ARISING FROM 27 FEBRUARY 2014

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	COMPLETED 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.	
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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 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.	PO	DATE REVISED TO MAY 2014	COMPLETED PO has met with the Director of Public Health who has , in turn agreed to attend the June meeting of the Board with members of his team to discuss the Trust's approach to reducing smoking .	
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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 ensure that regular updates are factored in to this milestone timeline.	PW	JUNE 2014	This action is on track	
56.	14/105	CHIEF EXECUTIVE'S REPORT	TR requested that once the buddying arrangements have been formalised a high level benchmark summary be provided detailing the expected outcomes and the expectations for both parties.	PO / SC	MAY 2014	COMPLETE A high level milestone plan and payment schedule has been submitted to Monitor and NUTH colleagues. The Memorandum of Understanding has been distributed to all Trust Board Members	
57.	14/109	GOVERNANCE REVIEWS – MONITOR Q4 SELF CERTIFICATION	Directors noted that whilst the Trust is reporting that they have no posts filled by interim appointments AH does not start his substantive appointment at the Trust until July 2014 due to the period of notice that is required to be given. This change position	SC	MAY 2014	COMPLETE The Q4 Monitor return was amended to reflect AH interim position, prior to submission.	

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			needs to be recorded					
58.	14/114	BETTER+TOGETHER PROGRESS REPORT	The Better+Together report will be circulated to Board members outside this meeting	PW	MAY 2014	COMPLETE This document was circulated as requested		
59.	14/115	INTEGRATED PERFORMANCE REPORT	GMc concluded that following discussion pertaining to 52 week waits the escalation process will be reviewed at the next Quality Committee meeting.	GMc	MAY 2014	COMPLETE A review will be undertaken as proposed		
60.	14/119	CONSTITUTION	TR requested that further clarity be provided regarding the attendance and speaking rights of co-opted governors	SC	MAY 2014	COMPLETED Co-opted governors are allowed to speak but not vote, this was clarified with the Director of Corporate Services/Company Secretary.		