

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**TRUST BOARD**

**REPORT ON MATTERS ARISING FROM THE MEETING HELD ON 5 MAY 2011**

Minute ref:	Issue	Lead Officer	Outcome
116/11	<ul style="list-style-type: none"> <li>• Consideration to be given to holding agencies to appropriate account regarding their use of the VITAL tool.</li> <li>• Consideration to be given to incorporation of additional sources of patient experience feedback within the relevant dashboard.</li> </ul>	)Chief Operating )Officer/Chief Nurse ) ) )	Agencies are furnished with local policy details and will be provided with the VITAL toolkit.  Arrangements have been made for external sources of patient feedback to be regularly accessed by the patient experience team, with commentary forwarded to the relevant area(s) and actions included in action plans where appropriate.
117/11/1	Interface geriatrics project slides to be appended to the 5 May 2011 Trust Board Minutes.	Medical Director/Senior Trust Administrator	Actioned.
118/11	Review of the LRI Fire to take place, with findings to be communicated as appropriate.	Chief Operating Officer/Chief Nurse	Review of organisational learning from the LRI fire scheduled for GRMC consideration in June 2011.
119/11/1	<ul style="list-style-type: none"> <li>• Confirmation to be sought from NHSLCR regarding incentives/sanctions used to encourage appropriate referral patterns by GP practices.</li> <li>• Continued monthly updates on the LLR emergency and urgent care system to be provided to the UHL Trust Board.</li> </ul>	)Chief Operating )Officer/Chief Nurse ) ) )	Actioned.  Actioned. Latest update featured accordingly on the 2 June 2011 Trust Board agenda.
119/11/2	<ul style="list-style-type: none"> <li>• Specialty project plans to address RTT performance to be shared with Trust Board members for information.</li> <li>• Proposals to improve fractured neck of femur performance to be discussed by the Executive Team.</li> </ul>	)Chief Operating )Officer/Chief Nurse Medical Director/Director of Research & Development	Circulated.  Provisionally scheduled for an Executive Team meeting in June 2011.

**Paper B**

	<ul style="list-style-type: none"> <li>Plans for the further reduction of sickness absence to be discussed through the Executive Team.</li> <li>Further analysis of pay costs and headcount reductions to be presented to the Finance and Performance Committee.</li> <li>Action plans to improve patient experience polling results to be discussed at the GRMC and shared with the Audit Committee Chair outside the meeting.</li> </ul>	Director of Human Resources Director of Finance and Procurement /Chief Operating Officer/Chief Nurse Chief Operating Officer/Chief Nurse	Provisionally scheduled for an Executive Team meeting in June 2011.  Discussed at the 25 May 2011 Finance and Performance Committee meeting.  Work in progress.
121/11	<ul style="list-style-type: none"> <li>Assurance arrangements and escalation processes for highlighting specific risks to the GRMC/Finance and Performance Committee/Audit Committee to be confirmed.</li> <li>Any material risk changes to be advised to the June 2011 Trust Board.</li> </ul>	)Medical Director ) ) )	To be reported to the 7 July 2011 Trust Board meeting.  Covered in the risk register update on the 2 June 2011 Trust Board agenda.
122/11/1	UHL's updated corporate governance policies to be published as required.	Director of Corporate and Legal Affairs	Actioned.

**Update on any outstanding matters arising from Trust Board meetings since 16 July 2009**

<b>Minute ref:</b>	<b>Issue</b>	<b>Lead Officer</b>	<b>Outcome</b>
<b>7 April 2011</b>			
90/11	Update on the Hutton reports to be provided to a future Trust Board meeting.	Chief Executive	To be scheduled once further information is available on the response to the reports.
91/11	Quarterly patient experience report to be provided to the Trust Board.	) Chief Operating )Officer/Chief Nurse	To be scheduled as requested.
92/11/3	QPMG to review how best to refresh UHL's learning from and understanding of complaints.	Medical Director	Scheduled for 1 June 2011 QPMG.
93/11/1	Quarterly updates against the 2011-12 annual operational plan milestones to be provided to the Trust Board.	Director of Strategy	To be scheduled on a quarterly basis accordingly.

**Paper B**

Minute ref:	Issue	Lead Officer	Outcome
<b>3 March 2011</b>			
56/11	New format Strategic risk register to be presented to the 5 May 2011 Trust Board following the April risk workshop discussions.	Medical Director	Scheduled accordingly for 5 May 2011 Trust Board agenda. <b>Work underway to reformat the SRR/BAF following the risk workshop on 7 April 2011 – new version to be presented to the July 2011 Trust Board.</b>
<b>6 Jan 2011</b>			
7/11/1	Trust Board to be kept appropriately informed of developments on the various DoH consultations.	Chief Executive	To be included in the Chief Executive's monthly as and when appropriate.
<b>2 Dec 2010</b>			
287/10	A further progress report on the Mrs M K patient experience to be provided to the Trust Board in 6 months' time.	Chief Operating Officer/Chief Nurse	Scheduled for June/July 2011 Trust Board. <b>Proposed to be remitted to the June 2011 GRMC meeting.</b>