## University Hospitals of Leicester NHS Trust Progress of actions arising from the Trust Board meeting held on Thursday 24 April 2014

ltem No	Minute Reference	Action	Lead	By When	Progress Update	RAG status*
1	114/14 (d)	Clarity to be provided regarding the timescale for commencement of the quarterly BAF reviews of risk 2 (failure to transform the emergency care system).	COO	29.5.14	Verbal update to be provided on 29 May 2014.	
2	114/14 (f)	Chief Executive to provide an indicative date for submission of the Electronic Document and Records Management (EDRM) business case to the TDA.	CE	29.5.14	The two pilot areas are underway and are in the proving stage as requested. This stage will be complete in June. The main task of the pilot was to prove the benefits within the case and as soon as we have the final report confirming the original benefits and the newly identified ones the business case will be complete and ready to submit for approval at the end of June The initial view from the work with clinical genetics is that we have under-estimated the benefits that can be achieved as well as potential other models for the deployment.	4
3	114/14	Use of acronyms within Trust Board reports to be reviewed and the scope to provide a standardised list of commonly used acronyms to be explored.	DCLA/STA	Ongoing	Actioned. Glossary of standard NHS acronyms and UHL-specific terms to be handed out to public attendees at Trust Board meetings.	5
4	115/14	Progress reports to be provided to the Trust Board on the development of the LLR 5 Year Health and Social Care Strategy.	CE	As appropriate	Actioned. Verbal update to be included in the May 2014 Trust Board Chief Executive's report.	5
5	115/14	Director of Corporate and Legal Affairs to assume the role of Trust Senior Independent Risk Owner (SIRO) with effect from 24 April 2014.	DCLA	Immediate	Actioned. Director of Corporate and Legal Affairs has attended the 12 May 2014 Privacy Board and is arranging attendance at an external training course.	5

						Some Delay	- expected to		Significant Delay – unlikely		Not yet
RAG Status Key:	5	Complete	4	On Track	3	be complete	ed as planned	2	to be completed as planned	1	commenced

CHAIR/ QAC 116/14/2 Subject to Executive Team approval on 29 April 2014, Acting Actioned. Approval given to 6 As Chairman and QAC Chair to approve the re-commencement of CHAIR recommencement of service. appropriate UHL's renal transplant service. Actioned. Item features on QAC agenda 116/14/3 Progress of CQC action plan and future iterations of this CN/ QAC 7 As 5 document to be monitored by the Quality Assurance Committee. CHAIR appropriate for 28 May 2014. Wording within the 2014-15 UHL Quality Commitment to be CN/CE Actioned. Item features on QAC agenda 5 8 116/14/4 29.5.14 finalised through discussion between the Chief Nurse and the for 28 May 2014. Chief Executive. 117/14/1(b) Chief Nurse to provide the Audit Committee Chair with supporting CN Verbal report to be provided at the 29 9 Immediate additional information on the meaning and the impact of the May 2014 Trust Board. Quality Schedule and CQUIN indicators. Chief Operating Officer to respond to the CCG Representative's CO0 10 117/14/1(c) Immediate The Head of Performance Improvement 5 query (re: the impact on Choose and Book if particular clinical provided this information to the CCG specialties were excluded from the data) outside the meeting. Representative by email on 24 April 2014. 117/14/1(d) Director of Human Resources to consider setting milestones 11 DHR 29.5.14 Under consideration. 4 towards achievement of the 95% target for statutory and mandatory training compliance by the end of March 2015. 117/14/3(c) Finalised UHL Capacity Plan for 2014-15 to be presented for CO0 Actioned. Featured on the 29 May 2014 12 29.5.14 5 Trust Board agenda. Trust Board approval in May 2014. Progress report on UHL's nurse recruitment programme to be 117/14/3(e) CN Actioned. Featured on the 29 May 2014 29.5.14 5 13 presented to the May 2014 Trust Board meeting. Trust Board agenda. Feedback from the diagnostic phase of the health economy C00 Dr I Sturgess is attending the 29 May 14 117/14/4 26.6.14 4 redesign work being undertaken by Dr I Sturgess be presented to 2014 Trust Board. the June 2014 Trust Board meeting (subject to availability). Alternative arrangements be developed for seeking Trust Board 15 118/14/1 DS 29.5.14 Actioned at the Trust Board Deevlopment 5 approval of the materials for the external facades of the new Session on 15 May 2014. emergency floor building. 118/14/2(a) Update on Delivering Caring at its Best to be presented to the Actioned. Featured on the 29 May 2014 16 CE 29.5.14 5 May 2014 Trust Board meeting. Trust Board agenda.

Trust Board paper M

						Some Delay – expected to		Significant Delay – unlikely		Not yet
RAG Status Key:	5	Complete	4	On Track	3	be completed as planned	2	to be completed as planned	1	commenced

Trust Board paper M

17	118/14/2(b)	Older People's Strategy (including the links with dementia care) to be presented to the May 2014 Trust Board meeting.	DMC	29.5.14	Featured on the agenda for 29 May 2014 Trust Board.	5
18	118/14/3	Indicative timescales and work programme for building further specialised service alliances be presented to a future Trust Board meeting – to include an assessment of UHL's internal capacity.	DS	ТВА	Verbal update to be provided on 29 May 2014.	
19	118/14/4	Director of Marketing and Communications to provide clarity on the outcome of the proposal that the UHL Members Engagement Forum to be co-chaired and provide assurance that any non-car drivers amongst the membership would not be disadvantaged by holding meetings on the LGH site.	DMC	29.5.14	Verbal update to be provided on 29 May 2014.	
20	119/14/2(a)	Director of Marketing and Communications to liaise with the Director of Research and Development with a view to incorporating any research related themes into the Older People's Strategy.	DMC	29.5.14	Actioned.	5
21	119/14/2(b)	Medical Director to provide feedback to the Director of Research and Development highlighting opportunities to include additional narrative commentary on current UHL R&D activities in future quarterly reports and reduce the emphasis on standard data sets.	MD	Immediate	Verbal update to be provided on 29 May 2014.	
22	119/14/3(a)	Medical Director to provide feedback to the Associate Medical Director, Clinical Education on opportunities to improve the format of future quarterly reports, providing greater detail of assurance and possibly including progress against an action plan (using the standard UHL template).	MD	Immediate	Verbal update to be provided on 29 May 2014.	
23	119/14/3(b)	<ul> <li>Opportunities to be explored to mainstream the reporting processes for SIFT and MADEL funding, and</li> <li>funding resources for proposed works to the Robert Kilpatrick Building to be explored.</li> </ul>	IDFS	29.5.14	Initial discussions held with the Associate Medical Director (Clinical Education) regarding financial reporting, progress will be reported through the Finance and Performance Committee. Proposed works to the Robert Kilpatrick Building will be discussed through the Capital Group and prioritisation of the programme will be agreed through the Trust Board.	4
24	119/14/3(c)	Quarterly Medical Education reports to be presented to the new quarterly Executive Workforce Board meetings.	MD	3.6.14 & ongoing	Provisionally scheduled on the 3.6.14 Executive Workforce Board agenda.	4
* Both	numerical and	colour keys are to be used in the RAG rating. If target dates are cha	nged this must b ay – expected to		strikethrough so that the original date is still vision in the second state is still vision if it is the second state is still vision if it is a still vision is a still vision if it is a still vision is a still	ble.
RAG	Status Key:		eted as planned		e completed as planned 1 commence	ed

Trust Board paper M

					Trust Doard	
25	120/14/1	Board Assurance Framework:-			Actioned.	5
		<ul> <li>the risk score for risk 5 be amended to 25 (5x5);</li> <li>further Trust Board review of risk 7 be undertaken in June</li> </ul>	DS	29.5.14		
		2014 and this risk be updated to include engagement with the Trust's Commissioners	DMC	29.5.14		
		• the score and actions for risk 3 be reviewed, factoring in the impact of additional bed capacity upon staffing levels, and	DHR	29.5.14		
		<ul> <li>the Director of Safety and Risk and the Risk and Assurance Manager liaise with PWC to confirm the intended structure for the June 2014 TB development session.</li> </ul>	DSR/RAM	12.6.14		
26	121/14/1	Copy of the draft Annual Governance Statement to be shared with the Audit Committee Chair, prior to submission to the 27 May 2014 Audit Committee meeting and the External Auditors.	DCLA	Urgent	Actioned.	5
27	123/14/1(b)	Trust Board approval be granted for charitable funding application numbers 4949, 4952, 4892 and 4893 (as Corporate Trustee).	IDFS	Immediate	Actioned.	5
28	123/14(c)	Consideration be given to scheduling a future Trust Board discussion on the Leicester Hospital Charity's strategies for Charitable Funds Committee expenditure and investment.	DCLA/CHAIR	2014/15	Under consideration as part of a new Board effectiveness plan.	4

## Matters arising from previous Trust Board meetings

ltem No	Minute Reference	Action	Lead	By When	Progress Update	RAG status*
27 Ma	rch 2014					
1.	90/14/1	<ul> <li>(2-year operational plan)</li> <li>clinical and strategic rationale for the vascular services proposals to be reported to the June 2014 Trust Board.</li> <li>revised approach to considering business cases to be discussed by the Finance and Performance Committee and Trust Board.</li> </ul>	MD/DS IDFS	TB 26.6.14 31.5.14	Provisionally scheduled for 26 June 2014 Trust Board. To be considered as part of the review of the working of the Commercial Executive.	4
		<ul> <li>timetable of Trust Board-required approvals for the individual capital schemes, to be developed and advised to Board members.</li> </ul>	IDFS	by 24.4.14	Report to be considered by the 25 June 2014 Finance and Performance	

						Some Delay – expected to		Significant Delay – unlikely		Not yet	
RAG Status Key:	5	Complete	4	On Track	3	be completed as planned	2	to be completed as planned	1	commenced	

Trust Board paper M

					Thust Doard	paper in
					Committee.	
2.	95/14/3	<i>(any other business)</i> (subject to recognised exceptions such as the quality finance and performance report, and formal business cases) All future Trust Board papers to be a maximum of 10 pages in length with no appendices, wherever possible.	All EDs	From April 2014 TB	Actioned.	5
tem No	Minute Reference	Action	Lead	By When	Progress Update	RAG status*
	oruary 2014					
3.	56/14/3	EDRM business case to be submitted to the NDTA in parallel with the POC rather than afterwards.	CE/CIO	ongoing	In progress.	4
4.	61/14/1	<i>(Board assurance framework)</i> May 2014 Trust Board Development Session to review (and refresh as required) the Board Assurance Framework.	CN/ ALL	15.5.14 TBDS	timescale now agreed as the Trust Board Development Session on 12 June 2014.	4
20 De	cember 2013					
5.	342/13/3	Trust Board development time to be allocated for discussion of issues relating to the UHL Travel Plan.	DCLA	<del>31.3.14</del>	Now programmed for quarter 2 2014-15 Trust Board development programme.	4
6.	344/13/1	Equality and Diversity report to feature earlier in the agenda in July 2014 and consideration be given to holding a Board development session on equality and diversity.	DCLA	31.7.14	Now programmed for quarter 2 2014-15 Trust Board development programme.	4
7.	344/13/2	Assurance, Escalation and Response Framework to be updated, implemented as a "live" document and further reviewed in March 2014.	DCLA	27.3.14	Provisionally scheduled on the 27 March 2014 Trust Board agenda. Deferred to the June 2014 Trust Board with the agreement of the Acting Chairman and Chief Executive.	3
8.	344/13/3	Trust Board calendar of business to be refreshed and presented to the February 2014 Board meeting for approval.	DCLA	27.2.14	Provisionally scheduled on the 27 February 2014 Trust Board agenda. Deferred to the June 2014 Trust Board with the agreement of the Acting Chairman and Chief Executive.	3

						Some Delay – expected to		Significant Delay – unlikely		Not yet
RAG Status Key:	5	Complete	4	On Track	3	be completed as planned	2	to be completed as planned	1	commenced