

University Hospitals of Leicester NHS Trust  
**Progress of actions arising from the Trust Board meeting held on Thursday 3 September 2015**

Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
1.	181/15	<b>Matters arising</b> Lord Lieutenant of Leicestershire to be invited to attend the signing of the Armed Forces community covenant (any additional suggestions for attendees to be sent to the Director of Marketing and Communications).	DMC/ ICNED	5.11.15 (signing ceremony)	Work in progress.	4
2.	183/15	<b>Chief Executive's report – September 2015</b> Presentation on 'Delivering Caring at its Best, our 5-year plan' to be scheduled for the October 2015 Trust Board.	CE	TB 1.10.15	Scheduled accordingly.	5
2a	183/15	UHL-NHSE Graduate Trainees as a group to be invited to meet the Trust Board, including (eg) observing a Trust Board meeting.	DWOD	Immediate	This will be implemented. Each month we will arrange for 2 graduates to attend a Board session where their training programme permits and stay for lunch. Graduates will brief the rest of the cohort on their observations. We will invite all graduates to UHI Leadership Conference during their induction week.	5
2b	183/15	Trust action plan to address PLACE concerns to be shared with Healthwatch.	STA	Immediate	To be actioned by 1.10.15.	5
3.	184/15/1	<b>Patient story – cancellations of surgery</b> Appropriate feedback to be shared with the patients featured in the Trust Board patient stories, re: improvements/actions as a result of their experience.	CN	Ongoing	Completed. Action shared with Patient Experience Team.	5
3a	184/15/1	Letter of apology to be sent to any patient cancelled on the day for non-clinical reasons (process to be organised through the Project Manager, same day cancellations).	CE/COO	With immediate effect	Letter approved - system to commence 1.10.15	5

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## Trust Board Paper B

Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
4.	184/15/2	<b><i>UHL reconfiguration programme update</i></b> 'Operational performance' to be included as a separate workstream (Chief Operating Officer to be the Executive Lead), and feature on the risk log accordingly.	COO/DS	TB 1.10.15 onwards	Risk log updated. Operational risk picked up through the business case monthly meeting.	5
4a	184/15/2	Programme risk deepdive at the October 2015 Trust Board to focus on the delivery of 250 beds worth of activity from UHL to LPT (first 130 beds worth planned for 2015-16), including workforce aspects (recruitment and mobilisation) and the cultural change needed re: earlier discharge to appropriate community facilities.	DS	TB 1.10.15	Work is in progress.	4
4b	184/15/2	Activity shift from UHL to LPT also to be discussed at the October 2015 Board to Board meeting.	DS	B2B 8.10.15	Provisionally scheduled on the agenda for the October 2015 meeting.	5
4c	184/15/2	ITU reconfiguration and the need to maintain operational performance also to feature as a future programme risk deepdive.	DS	TB 5.11.15	Work is in progress.	4
4d	184/15/2	Any further suggestions for deepdives to feature in future Trust Board reconfiguration updates, to be sent to the Director of Strategy.	All	By 11.9.15	Noted.	5
4e	184/15/2	Scores within the reconfiguration programme risk log to be appropriately aligned with scores for the same item in the UHL risk register/Board Assurance Framework (where applicable).	DS	TB 1.10.15 onwards	Work is in progress.	4
4f	184/15/2	Patient and public engagement aspects to be included in the update to the Joint Health Overview and Scrutiny Committee once the BCT consultation business case was available.	DS	October/ November 2015	Update to Leicestershire County Council Health OSC provisionally scheduled for 11.11.15	5
5.	184/15/3	<b><i>LLR Better Care Together update</i></b> Future Trust Board reports on this item also to identify the implications (for UHL) of the BCT Programme Board update.	DS	TB 1.10.15 onwards	Work is in progress.	4
5a	184/15/3	Further consideration to be given to the nature and timing of possible Trust Board presentations from the BCT clinical workstreams.	Chairman/ DCLA	TBA	Under consideration.	4

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Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
5b	184/15/3	Clarification to be provided on the nature of the Trust Board approval required for the BCT consultation business case.	DCLA	October 2015	The Better Care Together pre-consultation business case will be shared with the Trust Board ahead of submission formally to NHS England.	4
6.	184/15/4	<b>Emergency care performance</b> Issue of targeting GP letters for specific cohorts of patients (re: seeking GP treatment at an appropriate stage) to be raised at the Urgent Care Board.	CE/COO	UCB	Update provided in the Trust Board emergency performance update for 1.10.15.	5
6a	184/15/4	Emergency care LLR system to be discussed at the October 2015 Board to Board meeting.	COO	B2B 8.10.15	Provisionally scheduled on the agenda for the October 2015 meeting.	4
7.	185/15/1	<b>Multi-professional education update</b> Quarterly reports to be more 'headline' in nature, with the more detailed report as per paper I provided on a yearly basis.	AMD/CN	December/ March/June/ September	Completed.	5
7a	185/15/1	Education and training facilities strategy to be discussed by the Executive Quality Board.	AMD/CN	Future EQB	To be scheduled at future EQB meeting.	4
7b	185/15/1	The CMG-level 'Listening into Action' style events planned with medical trainees to be discussed at the Executive Workforce Board.	AMD	Future EWB	Actioned.	5
7c	185/15/1	To explore the scope for joint UHL-University of Leicester use of the Robert Kilpatrick Building examination facilities.	AG NED	Immediate	Verbal update to be provided on 1.10.15	
7d	185/15/1	Education and training developments to be communicated to the Consultant body via the Clinical Senate (including factoring in research and education facilities into UHL's long-term planning).	AMD/DS	Immediate	To be discussed with the Clinical Senate Chair as a potential item for a future Senate agenda.	5
8.	186/15/1	<b>UHL annual report and accounts 2014-15</b> External Audit findings to be reproduced in the Minutes of the Trust Board discussion on this item.	STA	Immediate	Actioned.	5
9.	186/15/2	<b>UHL patient and public involvement strategy (PPI) update</b> Quarterly Trust Board updates to be provided re: implementation of UHL's PPI Strategy.	DMC	December/ March/June/ September	Reports scheduled accordingly.	5

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## Trust Board Paper B

Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
9a	186/15/2	The scope to approach recent Non-Executive Director applicants to become Patient Partners, to be explored with the NTDA.	Chairman	By 1.10.15	Actioned	5
9b	186/15/2	Executive Directors to assess the most appropriate location for the PPI portfolio.	CE	Ongoing	There are no immediate plans to alter responsibilities but this will be kept under review.	5
10.	186/15/3	<b>UHL risk register/Board Assurance Framework (BAF)</b> Director of Strategy to be the Executive Lead for principal risk 15.	DS/AMD	For next iteration of BAF	Actioned.	5
10a	186/15/3	Ongoing work to explore alternative sources of capital funding to be included in principal risk 17.	CFO	For next iteration of BAF	Actioned.	5
10b	186/15/3	Principal risk 18 to be reviewed at the October 2015 Trust Board.	CIO	TB 1.10.15	Scheduled accordingly for October 2015 Trust Board.	5
10c	186/15/3	Further discussion to take place re: restructure of the BAF, in light of recent Internal Audit feedback.	CE/AC Chair	Prior to AC 17.9.15	Actioned – considered at Audit Committee on 17.9.15.	5
11.	187/15/4	<b>2015-16 financial recovery plan</b> Further update to be provided to the October 2015 Trust Board, following detailed discussed by the September 2015 IFPIC.	CFO	IFPIC 24.9.15 TB 1.10.15	Scheduled accordingly.	5
11a	187/15/4	To review the scope for further reductions in sickness absence.	DWOD	Immediate	Actioned. Policy currently under review and out with staff side for comment. Assessment being undertaken on correlation between sickness 'hot spots' and agency spend.	5
11b	187/15/4	UHL's communication of the detailed financial recovery action plan to staff to be shared with Non-Executive Directors by the IFPIC Non-Executive Director Chair.	IFPIC Chair	Immediate	Actioned.	5

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12.	189/15/1	<b>Corporate Trustee business – Charitable Funds Committee items</b> Recommendations for charitable funds applications to be approved and progressed as per Trust Board paper S (6.8.15 Charitable Funds Committee Minutes).	CFO	Immediate	Actioned.	5
12a	189/15/1	Confirmation to be sought of whether the £300k Thomas Cook Children's Charity donation was appropriately reflected in the emergency floor business case.	DS	Immediate	Actioned – confirmed.	5
12b	189/15/1	Subject to assurance in 12a above, a Deed to be signed by the Chairman and sealed appropriately.	DCLA	Immediate	In hand.	4
13.	191/15	<b>Public questions</b> Patient and carer experience issues (as now outlined to the Trust Board by the questioner) to be pursued by the Acting Medical Director and the Chief Nurse.	AMD/CN	Immediate	Completed.	5
14.	200/15/2	<b>Any other business</b> Chief Information Officer to be invited to attend the 10 September 2015 Trust Board thinking day workforce discussions.	STA	Immediate	Chief Information Officer unable to attend on 10.9.15 due to a prior commitment.	5

## Matters arising from previous Trust Board meetings

Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
<b>6 August 2015</b>						
15.	163/15/2	<b>Vascular business cases</b> Hybrid theatre issues to be included in the 'project assurance' review being undertaken by the September 2015 Audit Committee.	AC Chair	AC 17.9.15	To be covered in the 'Reconfiguration Project - Risk Management and Project Assurance' paper to be presented at the Audit Committee Meeting on 17th September 2015.	5

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15a	163/15/2	Clear communication to take place with staff regarding the timing of the moves associated with the vascular business cases and the ICU reconfiguration.	DS/DMC	When appropriate	Work is ongoing.	4
15b	163/15/2	When considering the ICU reconfiguration full business case, appropriate contextual detail to be provided to the Trust Board on the business case's position within the overall reconfiguration programme.	DS	When FBC presented to TB	Work is ongoing.	4
16.	165/15/4	<b>Armed Forces Community Covenant</b> Consideration to be given to how best to highlight the work of UHL staff who are also reservists.	DWOD/DMC	by 3.9.15	No central record is held of current reservists. Communication being drafted which seeks to capture who are reservists within the CMGs to go out w/c 14 <sup>th</sup> September 2015. Additionally, HR will confirm how this information can then be retained/held on ESR.	4

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