

University Hospitals of Leicester NHS Trust
Progress of actions arising from the Trust Board meeting held on Thursday 1 December 2016

Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
1.	286/16	Matters arising log To provide updates (including specific timescales) for all outstanding items on the matters arising log to the Senior Trust Administrator.	ALL	By 20.12.16	Actioned.	5
1a	286/16	Patient story To ensure that the 'mapping out' of the patient journey communication requirements covers both inpatients and outpatients.	CN	By TB 5.1.17	The Chief Nurse has confirmed that both in patients and out patients will be included.	5
2.	287/16	Chairman's monthly report – December 2016 To circulate a briefing note re: his November 2016 visit to a Delhi hospital, to Trust Board members for information.	CHAIR MAN	By TB 5.1.17	Key points summarised in Chairman's briefing for all staff circulated on 19.12.16.	5
3.	289/16/1	Patient Story – Serious Untoward Incident To circulate the NHSLA 'Saying Sorry' leaflet to Trust Board members for information.	MD/ DSR	By TB 5.1.17	The leaflet can be accessed on the NHSLA website at the following link on the http://www.nhsla.com/Claims/Documents/Saying%20Sorry%20-%20Leaflet.pdf	5
3a	289/16/1	To review opportunities for sharing the video more widely within the Trust, and to respond to Non-Executive Director comments re:- <ul style="list-style-type: none"> • potential use of a 'mystery shopper' approach to gain insight in to the patient experience; • the need to train staff in saying sorry, and • the need to provide appropriate and adequate support to any patients wishing to access the Trust's complaints and claims processes. 	MD/ DSR	By TB 5.1.17	Also discussed at the 22.12.16 QAC, at which the following points were noted:- <ul style="list-style-type: none"> • We already undertake an element of mystery shopper with patient partners but it was agreed that patient experience team would work with patient partners to scope how this might be done differently • We do stress this already but again there may be more we can do – the Director of Safety and Risk's team will review what training currently exists • Established processes are in place to assist all patients, and staff do help patients to access those processes. 	4

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4.	289/16/3	Emergency care update Further assurance to be provided on the plans in place to manage the move to the new Emergency Floor (see also item 6 below) .	COO	TBTD 8.12.16	Scheduled accordingly for the 8.12.16 Trust Board thinking day.	5
4a	289/16/3	To develop an appropriate programme of visits (by partner organisations) to the new Emergency Floor facility.	COO	Early 2017	In place with further visits to Wolverhampton and Northwick Park in the diary.	5
4b	289/16/3	An update on the outcome of the red to green initiative to be provided to the Healthwatch representative.	COO	By TB 5.1.17	Completed.	5
4c	289/16/3	To maintain an appropriate focus on delivering the amber and red elements of the LLR emergency care recovery action plan.	COO	Ongoing	Ongoing, picked up through the monthly Board update.	5
5.	289/16/4	Equality and diversity action plan update Update on the reverse mentoring programme to be provided to the Trust Board during 2017.	DWOD	via the 6-monthly updates	To be covered in the 6-monthly equality and diversity updates to Trust Board (August and February).	5
5a	289/16/4	Formal UHL signing of the British Sign Language Charter to be effected at the January 2017 Trust Board thinking day.	DWOD	TBTD 12.1.17	Scheduled accordingly.	4
6.	290/16	Integrated risk register Update on the Emergency Floor to be added into the existing monthly Trust Board update on emergency care, noting the key issues of workforce and IM&T considerations (see also item 4 above) .	COO	TB 5.1.17 onwards	Standalone report features on the Trust Board agenda for the meeting on 5.1.17.	5
6a	290/16	(re: risk 6) Development of a single, cross-organisational dashboard for the LLR STP to be discussed with the STP SRO (Toby Sanders).	CE	By TB 5.1.17	CEO has written to Toby Sanders 8/12/16 – awaiting reply.	4

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7.	291/16/1	STP/BCT and UHL reconfiguration programme monthly update A briefing on potential PF2 options to be provided to the January 2017 Trust Board thinking day.	CFO	TBTD 12.1.17	Due to pressure on the agenda, the Chairman has agreed to defer the briefing from the January to the February 2017 Trust Board Thinking Day.	4
7a	291/16/1	To consider the most appropriate way to provide further public assurance on reconfiguration contingency plans, given the constraints on capital availability.	CFO/CE	TBA	Suggest that consideration is given to this matter once formal STP feedback on prioritised capital schemes is received	4
7b	291/16/1	Further proposals for STP governance arrangements to be presented to the Trust Board in either December 2016 or January 2017.	DCLA	TB 22.12.16 or 5.1.17	Report features on the Trust Board agenda for 5.1.17.	5
8.	292/16/1	Multiprofessional education and training 2016-17 quarter 2 update The Trust Board's thanks to all those involved in the GMC October 2016 visit to be communicated to appropriate staff.	MD	By TB 5.1.17	Actioned.	5
8a	292/16/1	GMC visit feedback re: potential patient safety aspects of UHL IT systems to be raised appropriately in the IM&T update at the December 2016 Trust Board thinking day.	MD	TBTD 8.12.16	Actioned.	5
8a	292/16/1	Q-Eye medical students initiative to be presented to the Trust Board in early 2017.	MD/MT/IC NEDs	TB 2.3.17	Scheduled accordingly.	4
9.	292/16/2	RCS invited review of the oral and maxillo-facial surgery (OFMS) service The action plan resulting from the planned further review to be reviewed by QAC once available, and the Trust Board kept informed as appropriate.	MD	Future QAC (once available)	To be scheduled accordingly.	4

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10.	293/16/1	Patient and public involvement and engagement strategy 2016-17 quarter 2 update (see also item 13 below) To consider how best to tap into the knowledge and views of UHL's Volunteers.	DMC	TBA	Under consideration.	4
10a	293/16/1	Progress report on the patient and public engagement issues raised within paper L to be provided to the December 2016 QAC by the Patient Partner lead.	DMC/ MC (PP)	QAC 22.12.16	Discussed at the 22.12.16 QAC.	5
11.	294/16/1	QAC 24.11.16 – summary Any further Executive or Non-Executive Director comments on the safety improvement presentation made to the November 2016 QAC to be sent to the Director of Safety and Risk.	EDs/ NEDs	By TB 5.1.17	Action to be closed after 5.1.17.	4
11a	294/16/1	Assurance to be provided to QAC re: the project plan in place re: LRI access during the planned March 2017 closure of the Balmoral Building entrance (linked to Emergency Floor work).	DEF/ COO	Future QAC (TBA)	A sub-group of the E & F workstream has been established. Paper submitted to ESB on 13.12.16. A report has been requested for the 26.1.17 QAC.	5
12.	295/16/1	Audit Committee 3.11.16 – minutes Revision of UHL's Board Assurance Framework to be discussed at a Trust Board thinking day in early 2017, taking appropriate account of the reworking of UHL's organisational priorities.	MD	TBTD Early 2017	Will be scheduled accordingly.	4

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13.	297/16	<p>Questions from the press and public</p> <p>To consider how best to engage with wider PPI groups beyond seeking views from UHL members or UHL-badged groups.</p>	DMC	<p>01.02.17</p> <p>TB 02.02.17</p>	<p>The Trust does already actively seek out the views of patient representative groups which are not “UHL – Badged”. For example, the Chief Executive meets quarterly with the Chairs of our local Healthwatch organisations. He also meets regularly with the Leicester Mercury Patients Panel.</p> <p>The recent Trust Board Thinking Day on 11.8.16 focused on Patient and Public Involvement and benefitted from the participation of nine local patient representative groups. One of the outcomes from the session was for these groups to consider how they may best come together to share concerns and issues relating to UHL. To that end two subsequent meetings have been held which aimed to bring these groups together and discuss how their views will be fed in to the Trust. There is still work to do on this project but as a result of the two meetings plans are now being drawn up to propose a formal and iterative route by which shared concerns may be fed in to the Trust and monitored.</p> <p>The PPI team are also drawing up a programme of community engagement for 2017 which will go out to a diverse range of local groups, organisations and communities. The dual aim of this engagement will be to better understand how people experience our services and to promote greater involvement with the Trust. A proposal is due to come to the Trust Board in February 2017.</p>	4

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Matters arising from previous Trust Board meetings

Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
3 November 2016						
14.	249/16	Matters arising Update on the 6.10.16 action to consider reviewing establishment/ recruitment and retention benchmarks for non-nursing staff groups (Minute 222/16/1) to be included in the matters arising log for December 2016 Trust Board.	DWOD	For TB 1.12.16	Verbal update to be provided on 1.12.16 Update to be included in the matters arising log as per item 1 above.	
15.	251/16	Chief Executive's monthly report – November 2016 Executive Quality Board/Quality Assurance Committee to receive a briefing from the Healthwatch representative, following his forthcoming visit to cancer services.	COO/ Healthwatch Rep	Once available	To be timetabled accordingly for consideration at EQB/QAC on receipt of the briefing.	4
16.	252/16/1	Patient story – post-operative surgical experience To check how widely the welcome letter (or any alternative) is used across the Trust, and explore developing a personalised local-area-specific version for inclusion in bedside booklets (also including appropriate reference to carers).	CN	Immediate	Bedside booklet content and republication is undertaken annually and includes local information. The welcome letter concept has been discussed at Nursing Executive Team and taken forward by matrons where appropriate.	5
16a	252/16/1	To explore 'mapping out' the patient journey in a consistent and holistic manner to understand what communication is required with the patient at each stage.	CN	TBA	This will be taken forward by PIPEEAC	5
16b	252/16/1	To review the ward information folders to ensure that they are up to date and adequate for patients' needs.	CN	Immediate	There is a process already in place to review the Bedside Booklet content and republication is undertaken annually	5
17.	252/16/3	Emergency care performance To consider a formal opening event and appropriate communications programme for the new non-medical education and training facility.	DMC/ DDCE	Early 2017	Proposed to progress this in the New Year when a formal opening date has been agreed. Date now set as 10.3.17 and e-invitations issued to Trust Board accordingly.	5

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18.	253/16/1	Integrated risk report December 2016/January 2017 QAC report on the internal re-audit of PLACE indicators to be shared with the Healthwatch representative.	DEF	Once available	To be shared once available.	4
19.	254/16/2	2-year planning process guidance Operational plans for 2017-18 and 2018-19 to be discussed further at the November 2016 Trust Board thinking day and at extraordinary Trust Board meetings to be convened in November and December 2016.	CFO	TBTD 10.11.16 TB 24.11.16 & 22.12.16	Meetings have taken place in November 2016 as planned. Further discussions and final decisions to be made in December 2016 as scheduled.	5
19a	254/16/2	Once finalised, an appropriate communications exercise to take place in respect of the 2-year operational plans.	DMC	TBA	Submission is Dec 23 rd . Following that in the New Year we will promote the revised objectives & priorities... recognising that there is likely to be a material change in both the number and presentation of objectives.	5
20.	257/16/1	Corporate Trustee Business – Charitable Funds Committee minutes 6.10.16 Charity annual accounts to be submitted to the Trust Board by January 2017, once signed off by External Audit.	CFO	By TB 5.1.17	Report features on the Trust Board agenda 5.1.17 (Trust Board acting as Corporate Trustee).	5
6 October 2016						
21.	219/16/4	LLR Learning Lessons to Improve Care – next stage review To develop an appropriate public communication plan accordingly, in liaison with UHL's Director of Marketing and Communications.	MD	Ongoing	Work in progress – already agreed to involve the Director of Marketing and Communications.	4
1 September 2016						
22.	189/16/1	Reconfiguration – monthly update Reconfiguration strategic outline case (SOC) to be restated/relaunched and presented to the December 2016 Trust Board, providing:- <ul style="list-style-type: none"> increased clarity on the total costs; clarity on phasing, and a reiteration of the compelling clinical and organisational case for reconfiguration. 	EDs/CFO	By TB 1.12.16	Work in progress. Scheduled accordingly. Now scheduled for 2.3.17 Trust Board.	4

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22a	189/16/1	To consider any lessons learned from the delays to date, acknowledging that issues may have been outside the Trust's control.	CFO	Ongoing	In progress.	4
4 August 2016						
23.	164/16/1	Integrated risk report To consider holding a future Trust Board thinking day on capital.	Chairman	2 nd half of the 2016-17 financial year	Timetabling of a Thinking Day session under consideration. Now scheduled for December 2016 Trust Board thinking day. Provisionally scheduled for the 9.2.17 Trust Board thinking day.	4

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