

University Hospitals of Leicester NHS Trust  
**Progress of actions arising from the Trust Board meeting held on Thursday 4 May 2017**

Item No	Minute Ref:	Action	Lead	By When	Progress Update	RAG status*
1.	111/17	<b>Matters arising log</b> The meaning of question 14b of the National Staff Survey 2016 (and the response findings) to be included in the matters arising log for the June 2017 Trust Board.	<b>DWOD/ STA</b>	For TB 1.6.17	Reports from Picker are presented in a positive score format. The question asked to staff was 'In the last 12 months how many times have you personally experienced physical violence at from Managers?'. The responses showed that out of 419 people that responded, 416 answered 'Never'; 1 answered 1-2 times; 2 answered 3-5 times. Information is being shared with CMGs to be actioned locally.	<b>5</b>
2.	112/17	<b>Chairman's monthly report – May 2017</b> To circulate the slides from Dr B Bhargava's 'frugal innovation' presentation to Trust Board members for information.	<b>CHAIR MAN</b>	By TB 1.6.17	Slides requested and will be circulated to Trust Board members on receipt.	<b>5</b>
3.	113/17	<b>Chief Executive's monthly report – May 2017</b> New format Board Assurance Framework to be presented to the June 2017 Trust Board.	<b>MD</b>	TB 1.6.17	Included on the 1.6.17 Trust Board agenda accordingly.	<b>5</b>
3a	113/17	To consider how to communicate the Trust's strategic objectives and 2017-18 annual priorities to stakeholders including Commissioners.	<b>CE/ DCIE</b>	30.6.17	DCIE will send updated priorities to stakeholders including new strategic "jigsaw" and 2017/18 Quality Commitment "house"	<b>4</b>
4.	114/17/2	<b>EMCHC monthly update</b> Proposed UHL response to the public consultation to be presented to the July 2017 Trust Board for approval.	<b>DCIE</b>	TB 6.7.17	Scheduled accordingly.	<b>4</b>
5.	114/17/3	<b>Emergency care performance including red 2 green update</b> To ensure appropriate monitoring of progress on reducing the number of patients with a length of stay exceeding 10 days.	<b>COO</b>	TB 1.6.17	Verbal update to be provided at the 1.6.17 Trust Board.	
5a	114/17/3	To emphasise to all nursing and medical staff the need to deliver the red 2 green basics.	<b>MD/CN</b>	Immediate	Working through the programme and approach with the team.	<b>4</b>

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6.	114/17/4	<b>Emergency floor project update</b> May 2017 IFPIC to undertake a deep dive review of emergency care performance.	COO	IFPIC 25.5.17	Scheduled accordingly.	4
7.	114/17/5	<b>Operational plan 2017-19 – refresh</b> Finalised operational plan 2017-19 to be approved as presented.	CFO	Immediate	Complete.	5
8.	117/17/1	<b>East Midlands Clinical Research Network (EMCRN) Annual Delivery Plan 2017-18</b> To give UHL Trust Board approval (as the Host organisation) to the EMCRN annual delivery plan 2017-18, as presented.	MD	Immediate	Actioned.	5
9.	118/17/2	<b>IFPIC 27.4.17 – summary of discussions</b> To approve the recommendations from the 27.4.17 IFPIC meeting as per paper N, namely approval of the final UHL operational plan 2017-19 and approval of the 2017-18 financial plan.	CFO	Immediate	Complete.	5
10.	122/17	<b>Questions from the press and public</b> To provide an update on UHL's EPR plans to the public June 2017 Trust Board.	CE/CIO	TB 1.6.17	Included in June CEO report.	5

**Matters arising from previous Trust Board meetings**

Item No.	Minute ref	Action	Lead	By when	Progress update	RAG rating
<b>6 April 2017</b>						
11.	85/17	<b>Matters arising log</b> Progress in convening a new 'disability access advisory group' to be included in the next scheduled diversity and equality update to the Trust Board.	DWOD	TB 3.8.17	Actioned.	5

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11a	85/17	Scenario planning for the availability of national capital to be discussed further at IFPIC, ahead of the May 2017 Trust Board thinking day	<b>CFO/ IFPIC Chair</b>	IFPIC 27.4.17 TBTD 11.5.17	<del>Alternative clinical (reconfiguration) scenarios are being developed in advance of the Trust Board Thinking Day. A specific Exec and CDs session was held on 25<sup>th</sup> April 2017 and a 3 day workshop is taking place between 2<sup>nd</sup> – 4<sup>th</sup> May 2017.</del> <b>Complete.</b>	<b>5</b>
12.	86/17	<b>Chairman's monthly report – April 2017</b> Trust plan for managing the 2017-18 financial position to be included in the May 2017 TBTD strategic direction discussions with PwC (plan already scheduled for April 2017 IFPIC discussion)	<b>CFO</b>	TBTD 11.5.17	<del>Scheduled accordingly.</del> <b>Complete.</b>	<b>5</b>
13.	88/17/2	<b>National staff survey 2016</b> The meaning of question 14b and its response findings to be clarified to Mr R Moore Non-Executive Director outside the meeting.	<b>DWOD</b>	By TB 4.5.17	<del>Verbal update on this item to be provided at the 4.5.17 Trust Board.</del> Superseded by action 1 above.	<b>5</b>
13a	88/17/2	To seek a view from Optimise Ltd on what constitutes a reasonable sample size and response rate (sufficient to enable meaningful conclusions to be drawn from the response data).	<b>DWOD</b>	By TB 4.5.17	Verbal update at the 4.5.17 Trust Board confirmed that 'over 30%' was classed as a reasonable sample and response rate. It was noted that all East Midlands Trusts were facing similar challenges in terms of response rates.	<b>5</b>
14.	91/17	<b>Research &amp; innovation 2016-17 quarter 4 update and East Midlands Clinical Research Network [EMCRN] 2016-17 quarter 4 update</b> To approve the EMCRN Governance Framework 2017-18, noting however a suggestion to consider whether there it should include Non-Executive Director representation in future.	<b>MD</b>	For consideration	Chairman to discuss further with Non-Executive Directors.	<b>4</b>
14a	91/17	To consider setting up a staff access portal to provide information about UHL research and innovation activities on both a Trust and a regional basis. Useful information to include (eg) number of research studies/regional activity/ outcome of research projects etc.	<b>MD/DR&amp;/ EMCRN Director</b>	For consideration	Director of Research and Innovation to review feasibility and feedback in next quarterly report.	<b>5</b>

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15.	92/17/1	<b>QAC 30.3.17 – summary of discussions</b> To approve the recommendations from the 30.3.17 QAC meeting as per paper O, namely [1] release of the draft Quality Account to external stakeholders for comment, ahead of final Trust Board approval on 1.6.17, and [2] endorsement of the action plan in respect of the nasogastric tube misplacement patient safety alert appended to Trust Board paper O.	<b>CN/ MD</b>	Immediate	Actioned – final draft Quality Account 2016/17 features separately on the agenda of the Trust Board meeting for 1.6.17 for approval.	<b>5</b>
<b>2 March 2017</b>						
16.	62/17	<b>Chairman’s monthly report – March 2017</b> To consider undertaking a conducted tour of the Trust’s estate, for all Trust Board members.	<b>ALL/ DEF</b>	2017-18 financial year	Trust Admin will liaise with Estates & Facilities to organise the tour.	<b>4</b>
17	63/17	<b>Chief Executive’s monthly report – March 2017</b> To contact the Healthwatch representative outside the meeting to discuss (i) mortality and (ii) fractured neck of femur issues.	<b>MD</b>	By 6.4.17	Actioned.	<b>5</b>
<b>2 February 2017</b>						
18.	37/17	<b>Matters arising log</b> The Chief Executive’s letter relating to the UHL Annual Operational Plan 2017-19 to be sent to NHS Improvement once finalised at the end of February 2017 (copied to the Trust Board for information).	<b>CE</b>	Once finalised ( <del>end Feb 2017</del> ) 31.3.17 30.4.17	CE and CFO have agreed that letter is no longer required/helpful in light of recent NHSI interactions including deep dives and quarterly review meeting. Action closed.	<b>5</b>
18a	37/17	Healthwatch representative’s report on his visit to UHL cancer services to be passed to the Chief Operating Officer once finalised.	<b>DH/ COO</b>	Once finalised	Awaiting report.	<b>4</b>
<b>19 January 2017</b>						

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19.	30/17	<b>UHL draft annual operational plan (AOP) 2017-19</b> To consider including more detail on the Emergency Floor development in any public-facing summary/version of the AOP 2017-19 (noting the prescribed format of the formal NHSI submission).	<b>HoSP</b>	once AOP 2017-19 is finalised	Work in progress.  <b>Director of Communications, Integration and Engagement to outline the timescale for the public-facing summary at the 1.6.17 Trust Board.</b>	<b>4</b>
20.	30/17	To consider how to ensure that future medical workforce investment decisions are appropriately 'future proofed' in the context of new ways of working and care pathway developments.	<b>DWOD/ MD</b>	Ongoing	Work in progress.	<b>4</b>
<b>1 December 2016</b>						
21.	290/16	<b>Integrated risk register</b> (re: risk 6) Development of a single, cross-organisational dashboard for the LLR STP to be discussed with the STP SRO (Toby Sanders).	<b>CE</b>	By TB 5.1.17	CEO has written to Toby Sanders 8.12.16 — awaiting reply. Update 10.2.17: No response as yet. Update 29.3.17: STP organisational and governance arrangements are still in development so a dashboard is not imminent.	<b>2</b>
22.	291/16/1	<b>STP/BCT and UHL reconfiguration programme monthly update</b> To consider the most appropriate way to provide further public assurance on reconfiguration contingency plans, given the constraints on capital availability.	<b>CFO/ CE</b>	Once formal STP feedback is received	Suggest that consideration is given to this matter once formal STP feedback on prioritised capital schemes is received	<b>4</b>
<b>1 September 2016</b>						
23.	189/16/1	<b>Reconfiguration – monthly update</b> Reconfiguration strategic outline case (SOC) to be restated/relaunched and presented to the December 2016 Trust Board, providing:- <ul style="list-style-type: none"> <li>increased clarity on the total costs;</li> <li>clarity on phasing, and</li> <li>a reiteration of the compelling clinical and organisational case for reconfiguration.</li> </ul>	<b>EDs/ CFO</b>	By TB 1.12.16	Work in progress. <del>Scheduled accordingly.</del> Now scheduled for 2.3.17 Trust Board. Awaiting STP/capital feedback before progressing SOC to conclusion. Preliminary work underway. <b>Capital bid submitted to NHSI on 24/5/17</b>	<b>3</b>

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