

Public Board of Directors OPEN Action Log For receipt at the November 2023 Board

Public	Date of BOD	Minute Ref	Item	Action	Update	Lead	Target Date (RAG)
To note: it was agreed actions for 2023/24 for board and its sub committees will be numbered rising from 1. This began with the May 2023 actions. There were no actions from the June extraordinary meeting.							
Action 18.1	27 Sep 2023	Item 8	Board Committee Activity Reports	Finance and Performance Committee (FPC) - Capital plan received at FPC be shared with the full Board.	The Five-year Capital Plan has been circulated to Board members. Action closed.	PE/AW	Nov 2023
Action 18.2	27 Sep 2023	Item 8	Board Committee Activity Reports	People Committee (PC) - Committee to look in more detail and report back through the next AAA report on supervision compliance and numbers of staff off with mental health/stress related issues	Papers received for supervision and HWB at November People Committee. This is reflected in the AAA report to BoD in November 2023. Action closed.	MD/CP	Nov 2023
Action 18.3	27 Sep 2023	Item 8	Board Committee Activity Reports	People Committee (PC) - members of the Board were asked to ensure they are fully up to date with mandatory training including new modules	Mandatory training times have been scheduled in diaries for Board members. Action proposed to be closed.	ALL	Nov 2023
Action 18.4	27 Sep 2023	Item 8	Board Committee Activity Reports	Audit and Risk Committee (ARC) - The committee is to assure itself through its discussions at the next meeting that the Head of Internal Audit Opinion is not likely to be impeded by decision making around internal audit, core audit planning discussed at FPC and planned for receipt at ARC.	Assurance was received at Audit and Risk Committee in October 2023 that the plan had been agreed with Internal Audit and this is reported through the AAA report to Board in November. Action closed.	AD/PE/DL	Nov 2023
Action 18.5	27 Sep 2023	Item 8	Board Committee Activity Reports	Mental Health Legislation Committee (MHLC) - Executive team to take forward issues raised in the report around Health Based Place of Safety and ensuring a joined-up approach to addressing issues concerning re-purposing; and with regard to issuing of notices as a result of issues with attendance of Associate Mental Health Act Managers at some tribunals.	In progress, QEIA requested for HBPOS. Head of MH Legislation is also seeking legal advice around repurposing.	Exec team	Dec 2023
Action 19.1	27 Sep 2023	Item 9	Operational resilience and business continuity	HS asked for more detail to be included in future on the cover sheet to draw attention to risks and implications to support understanding on where focus is required in the discussion. Action: All to note for board paper drafting.	Noted and risks are drawn out more clearly in the reports however cover sheet template to be updated to include a specific request and reflected in reports from January 2024.	ALL	Jan 2024
Action 19.2	27 Sep 2023	Item 9	Operational resilience and business continuity	AD asked that the trajectory for addressing the 20% of adult beds occupied by delayed discharges be included in the next report as well as an increased focus on risks, gaps and opportunities. Action NR to note and take forward.	NR has confirmed that this will be included in the next report. There is reference in the November report to a trajectory to reduce the percentage from 26% in October 2023 to 10% by October 2024.	NR	Nov 2023
Action 20.1	27 Sep 2023	Item 10	Learning and Safety report Q1	HS commended the progress continuing to be made in learning and safety reporting. She asked for future reports to start to outline in more detail what has changed as a result of learning.	It has been confirmed that this will be reflected in the next report and has been noted on the work programme for receipt at QAC in December.	SMi/VI	Jan 2024
Action 20.2	27 Sep 2023	Item 10	Learning and Safety report Q1	DL asked if the PSIRF required Board approval and VL confirmed not but that it would be taken through EMT, QAC and Board for discussion. SY asked that take place before the document is finalised.	A discussion took place at the October Development session and the final document is on agenda for November Board. Action closed.	SMi/VL	Nov 2023
Action 21.1	27 Sep 2023	Item 11	Transformation Portfolio report	It was noted the proposal was for the decant to move back for Maple ward itself to the new year. It was noted (at the meeting) the full business case was due for receipt through Finance and Performance Committee and Board of Directors in December. SM asked that the Executive reflect on what is required and provide assurance to the Board around management of the risk. SY asked that the clinical executive trio bring	This action is complete. Updates have been received at EMT, at Board (in October) and FPC in November and reported through AAA report. There will be a further update in the confidential	NR/MH/S Mi	Nov 2023

Target Date:

Overdue

In Progress

Completed

Closed/Archive

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				assurance back through EMT for onward discussion at committees and Board.	session. Action closed.		
Action 21.2	27 Sep 2023	Item 11	Transformation Portfolio report	SM asked for the learning disability model to be brought back to the Board when it is finalised, post discussion at committees, with the timing to be confirmed for reflection on the forward plans and to confirm timing for this to be taken through to the Council of Governors (at either December or February). SM asked that it also outline how this model links across into the work of the Mental Health Learning Disability and Autism Provider Collaborative.	An update will be presented to committees and Board in January 2024 and this has been noted on forward planners. Governor development session is confirmed for 30 January 2024. Action closed.	MH	January 2024
Action 22.1	27 Sep 2023	Item 13	IPQR	CP noted with regard to the update from People committee the second sentence should read ' <i>supervision recovery plans</i> '.	The IPQR report has been updated and the amended version has been updated on iBabs and the website. Action closed.	PE/AW	Nov 2023
Action 22.2	27 Sep 2023	Item 13	IPQR	It was confirmed TUPE will have an underlying impact and there was a need to understand the underlying turnover figure not including TUPE, in future reports.	It has been confirmed that the People dashboard will include an underlying figure of staff turnover excluding TUPE for that period (when TUPE impacts turnover rates outside control limits). Action closed.	PE	Nov 2023
Action 22.3	27 Sep 2023	Item 13	IPQR	SM noted in terms of work taking place to review the approach to the IPQR she and SY have noted duplication across documents. She asked that the initial focus be on ensuring the performance report is correct and then considering changes required to other related reports. She asked that consideration be given to work required on reframing of the IPQR and that this include discussion with Non-Executive directors and to reflect on timing related to capacity to do the work required. PE to develop plan for re-framing the IPQR and confirm timeframe for the board forward plan.	This is in progress. Timing for receipt of plan for re-framing the IPQR will be confirmed following the completion of Tranche 2 of the EPR rollout as digital input is key to the process. PE will meet with key parties and will advise of a revised timeline and this will be noted on forward plan.	PE	Nov 2023
Action 23.1	27 Sep 2023	Item 14	Annual Mortality report for 2022-23 and Q1 report	SY suggested feedback received from BS [on the need for flex in the system on how contact is offered if we are to ensure those who are taken out of services are done so appropriately] should be fed into the community transformation work and be reflected in our Board visits briefings.	This has been fed into Board Visit administrator for noting. Action closed.	NR/SMi	Nov 2023
Action 23.2	27 Sep 2023	Item 14	Annual Mortality report for 2022-23 and Q1 report	It was agreed dates [for trust wide learning events] should be shared with the Board to attend when available.	It has been agreed and noted that dates for trust-wide learning events will be shared with Board members, as they become available. Action closed.	MH/VL to share with DL/AW for circulation	Nov 2023
Action 24.1	27 Sep 2023	Item 15	Safe staffing bi-annual review and declaration for December 2022 to July 2023	AD asked if more detail could be brought out in future safe staffing reports on inclusion and in having representative staff.	Inclusion detail is reported as part of the annual WRES Report received at People Committee and on the work programme for receipt at People Committee and Board in July 2024 and this has been noted for future reporting. Action closed	SMi/SB	Nov 2023
Action 24.2	27 Sep	Item 15	Safe staffing bi-annual	SM asked that the People Committee look in more detail at bank and agency, training,	This has been noted for the planner	CP/SMi/	Nov 2023

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Overdue	In Progress	Completed	Closed/Archive
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	2023		review and declaration for December 2022 to July 2023	support, opportunities and ethnicity (where appropriate) to provide further insight framed in an assurance paper to be received at People Committee and then reported up to Board through the AAA report. To take forward and note for People forward plan.	for receipt at January People Committee. Action closed.	KPD	
Action 24.3	27 Sep 2023	Item 15	Safe staffing bi-annual review and declaration for December 2022 to July 2023	CP outlined the work of the agency reduction group including work taking place to improve the experience of our bank staff. The work also looks at trends and identifies where different action is required. She confirmed she would capture this in a report for People Committee. HS asked that this also include detail on impact to support answering the 'so what' question.	This has been noted on the planner for receipt at January People Committee. Action closed	CP	Nov 2023
Action 25	27 Sep 2023	Item 19	Financial Performance Report	MD asked for future forecasting to include detail on gaps and learning to try to prevent issues currently being experienced recurring.	In progress - Forecasts are developed monthly and Finance will consider how risks identified in section 8 of the Finance report can be developed to ensure material risks are highlighted fully and work with FPC to ensure these are understood, including triangulation with section 1 Financial overview and the bridge to the forecast out-turn which will be reflected in future reporting. Action proposed to be closed.	PE	Nov 2023
Action 26	27 Sep 2023	Item 20	Operating Plan Q1 report	SM noted the four key priorities of the MHLDA Collaborative included Eating Disorders which had not been included in the list in the report. She asked that this be corrected. Paper to be updated for the records.	The report has been updated and the amended version has been updated on iBabs and the website. Action closed.	PE/AW	Nov 2023
Action 27	27 Sep 2023	Item 27	Board forward plan	The Board noted the work programme. It was noted EMT will be looking at this in more detail for updating of the planner for receipt at the November Board. After review at EMT it was agreed it would be shared with the Non-Executive directors.	The updated planner for 2023/24 was received at EMT in November and is shared in the Board pack. The planner for 2024/25 will be updated post Board. Action proposed to be closed.	DL/AW	Nov 2023
Open actions from previous board meetings in 2023/24				closed actions are available in the 2023/24 actions archive			
Action 11a	26 July 2023	Item 10	Quality Assurance Report	<ul style="list-style-type: none"> Back to Good Programme closure Report to QAC and BoD in September 2023. 	This was deferred to the November to support alignment with on-going system oversight and next steps around this. On agenda for the November Meeting. Action closed.	MH	September 2023 Nov 2023
Action 12	26 July 2023	Item 11	Quality Improvement Report	<ul style="list-style-type: none"> The Board asked that the next report set out more clearly in the main body of the report process, outcome measures, impact measures and examples. 	Not yet due but noted for future drafting.	MH/PR-	Jan 2024

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Action 14	26 July 2023	Item 16	Patient Safety Report	<ul style="list-style-type: none"> The Board asked that future reports include more detail on the areas which were verbally outlined in the discussion at the July meeting in terms of demonstrating continuous improvement. 	The Patient Safety Incident Response Plan is on the agenda for November Board post receipt through EMT and QAC. Action closed	SMi/VL	November 2023

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