

Public Board of Directors action log 2025- 2026

| Action Ref | Date of Board | Minute Ref | Item | Action | Update | Lead | Target Date (RAG) |
|------------------------|---------------|------------|---|---|---|-------|-------------------|
| Actions from 2024-2025 | | | | | | | |
| Action 46 | 26-Mar-25 | Item 9 | Board committee activity reports - Mental Health Legislation Committee (MHLC) | The Chair noted the update relating to the legal directions and it was requested that a deep dive of this takes place, and that assurance is provided in next update to the Board. | Incidents update in respect of legal directions was provide to MHLC in June 2025. Action proposed to be closed. | HC | Jul-25 |
| Action 47 | 26-Mar-25 | Item 9 | Board committee activity reports - Mental Health Legislation Committee (MHLC) | The concerns raised from the CQC report were noted and it was requested that further assurance on the actions being taken to address this is provided to the Board. It was agreed to provide an update on this in the next report | Actions being taken to address concerns raised by the CQC will be taken to the MHLC in September 2025, and an update will be provided to the Board following this. Action in progress. | CJ | Jul-25 |
| Action 49 | 26-Mar-25 | Item 11 | Patient safety and learning report | It was requested that further work takes place on report style to provide assurance and learning from patient safety related matters and that future reports include bench marking. It was agreed that a review of operational processes in relation to medication errors would be included in future reporting. | Items have been included in the reports to the Board of Directors in July 2025. Propose action to be closed. | CJ | Jul-25 |
| Action 49 | 26-Mar-25 | Item 12 | Safe Staffing Report (Clinical Establishment Review progress) | Multi-disciplinary mix on wards to be reported to the People Committee (PC) and the Quality Assurance Committee (QAC). Future reporting to provide assurance on safe staffing levels in relation to the Board responsibility as per the NQB guidance. | This was noted on the cross-committee tracker and added to the committee work programmes for PC and QAC. An update is provided to the July Board via the AAA reports. An update is provided in the safer staffing report to the Board in July 2025. Propose action to be closed. | CP/CJ | Jul-25 |
| Action 56 | 26-Mar-25 | Item 23 | Board Assurance Framework (BAF) 2024/25 | It was agreed that the movement on BAF risk scores and a summary of the main report would be included on the front sheet for future reporting. | The BAF review for 2025-2026 has taken place and is scheduled for receipt at the Board of Directors in July 2025. A summary of the risks and movement of scores is included in the front sheet. Action closed. | DP | Jul-25 |

| Actions from 2025-2026 | | | | | | | |
|------------------------|-----------|-------------|---|--|--|-------|--------|
| Action 1 | 01-May-25 | 9 | Board committee activity reports | It was agreed that an update on care plans and any implementation of changes alongside clarification of the capital prioritisation in relation to LAP would be discussed at a quality assurance committee in June 2025 and reported back to the Board in three months | A report on ligature anchor point update including action plan timeframes, in depth review of risk assessments and how they are mitigated is planned for receipt at the Quality Assurance Committee in September 2025. An update is noted on the Bord work programme for September 2025. | CJ | Jul-25 |
| Action 2 | 01-May-25 | 13 | Plan to respond to the 'Independent Mental Health Homicide Review' into the tragedies in Nottingham | It was agreed that there will be quarterly updates to the executive management team, quality assurance committee and the Board | This has been noted on the cross-committee tracker referral and agreed post meeting that updates will be provided to the Board via an AAA report. Propose action to be closed. | CJ | Jul-25 |
| Action 3 | 01-May-25 | 14 | Improvement and Change report | The Heely and Gleadless neighbourhood mental health model to be planned for a Board strategy session. NED team visit to be planned to the Gleadless and Heeley neighbourhood mental health centre | This has been noted on the Board strategy, planning and development work programme with a proposed date for October 2025. Propose action to be closed. | JD | Jul-25 |
| Action 4 | 01-May-25 | 20 | Freedom to speak up (FTSU) annual report 2024/2025 | Visibility of the FTSU champions to be supported by a communications approach. Review of the objectives and outcomes to reflect the well-led review to be included in future reporting to the Board | A new comms approach to promoting freedom to speak up is in development and out for consultation with guardians, staff side and staff network groups- this will be launched in summer. The assessment framework for FTSU will now be managed through a working group which will include the GGI well-led findings to ensure we have robust plan in place. | DP | Sep-25 |
| Action 5 | 01-May-25 | 23 | Keeping our people safe at work | Delivery of actions will be monitored through the people committee and the quality assurance committee and it was agreed the progress from the committee will be reported to the Board, bi- annually and regular updates from the committee will be provided through the regular Board committee update reports, and to align a future Board story to this work. | This has been noted on the relevant work programmes, with the experience story alongside the report in November 2025, with the update. Propose action to be closed. | CP/CJ | Jul-25 |
| Action 6 | 01-May-25 | | Systems and Partnerships briefing | The Chair requested an update on autism spectrum disorder (ASD) and attention deficit hyperactivity disorder (ADHD) services be provided to the Governors in the Board update report. | The update on autism and ADHD services is scheduled for the Council of Governors as part of a development session on 1 July 2025. Action closed. | DP | Jul-25 |
| Action 7 | 01-May-25 | 28 | Review of Standing Orders (SO), Standing Financial Instructions (SFI) & Scheme of Delegation | A revised governance process will be taken forward to ensure version control of the corporate documents. It was agreed that the wording on the eating disorders joint committee and provider collaborative will be consistent throughout the SO's, SFI's and scheme of delegation | A meeting is planned for 27 August 2025 between corporate assurance and finance colleagues to confirm the revised governance process and update any outstanding inconsistencies. Action in progress. | DP/PE | Sep-25 |
| Action 8 | 01-May-25 | 29 | Governance report | The process for reviewing the declarations to be included in the report to the Board in July 2025 | This has been include int eh governance report to the Board in July 2025. Action closed. | DP | Jul-25 |
| RAG rating key | Overdue | In Progress | Propose action to be closed | Action complete | | | |