

**Public Board of Directors OPEN Action Log  
For receipt November 2022**

Public	Date of BOD	Minute Ref	Item	Action	Update	Lead	Target Date (RAG)
Action 1	28/09/22	Item 07	Board Committee (AAA) report	It was agreed that the Executive will be discussing and advising on approach to addressing resistant issues directors including review of recovery plans to determine timelines and approach using improvement methodologies. Status of recovery plans will be reported through board sub committees and referenced in reports to Board.	For assurance this action is in progress the Medical Director is taking forward co-ordination of work required to address resistant issues in collaboration with Executive colleagues. Updates will be provided as required in appropriate reports to Board, and in agreement with the Chief Executive. <b>Action proposed to be closed.</b>	Executive team led by Dr. Mike Hunter	Nov 22
Action 2	28/09/22	Item 07	Board Committee (AAA) report	A six-month review on quoracy and attendance at board sub committees will be received at the October Audit and Risk Committee  The Corporate Calendar will be updated and circulated to the Board  The Finance and Performance Committee AAA report will be included in the public papers going forward.	Audit and Risk committee received a mid-year review on attendance at Board Committees for information and assurance. <b>Action closed.</b>  The Corporate Calendar for 2023-2024 has been circulated to Board. <b>Action closed</b>  The AAA reports for October and November shared in public – November. Confidential updates shared in private Board with the FPC minutes. <b>Action closed</b>	Deborah Lawrenson  Amber Wild  Amber Wild	Nov 22
Action 3	28/09/22	Item 8	Recovering from Covid	It was agreed that future reporting should highlight innovation and practice changes resulting from learning from working during the pandemic  Future reporting should capture the flexible model being utilised in terms of vaccination  Work with the voluntary sector should be mapped and included in a future strategy session	Innovation and practice changes are included in the November report to Board. <b>Action proposed to be closed.</b>  Flexible model included in the November report to Board. <b>Action proposed to be closed.</b>  Initial mapping of VSCE will be included in December strategic direction session. <b>Action to remain open</b>	Beverley Murphy  Beverley Murphy  Pat Keeling	Nov 22
Action 4	28/09/22	Item 10	Transformation Portfolio report	Future reporting to include lessons learned with regard to green elements on the healthcard to support the movement of amber risks and to support sharing of good practice and to clarify understanding of the risks that are being held for programmes	This is included in the November Transformation Portfolio Board report. <b>Action proposed to be closed.</b>	Pat Keeling	Nov 22

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Action 5	28/09/22	Item 11	<b>Learning Disability Services Transformation – community model</b>	<p>A fully formed project initiation document should be developed</p> <p>Future reporting should include evidence of partnership working with voluntary sector on engagement and co-production; certainty about support, funding, people, an understanding of the risks of it not being a 24/7 service and what the offer is to people outside of the core hours.</p> <p>Monthly reporting to be provided via the Transformation Board with a report provided back to the Board on progress with the areas identified in January 2023</p>	<p>Learning Disability Services Transformation added to the Board workplan for reporting in January 2023 (all actions to be reflected)</p>	Dr. Mike Hunter	Jan 23
Action 6	28/09/22	Item 13	<b>Financial performance report</b>	<p>The Board asked for further assurance to be provided in future reporting including explicitly outlining percentage terms on recurrent and non-recurrent savings; clarity on discussion with the ICS regarding recovery of financial position and further clarity provided on the action plan to deliver the CIP.</p>	<p>December CIP paper will include an in-depth review of the Agency CIP Delivery Plan in addition to the emerging 5 year rolling CIP plan.</p>	Phillip Easthope Pat Keeling	Nov 22
Action 7	28/09/22	Item 17	<b>Risk of delay in accessing community services</b>	<p>Future reporting to include areas identified during Board discussion: assessment of safety whilst on waiting lists, workforce and service user co-production, risk action plans, engagement with voluntary sector.</p> <p>SPA and EWS waiting time trajectories to be include in the Transformation portfolio report</p> <p>Continued monitoring of the risks and mitigations related to waiting lists to be highlighted through the AAA reports from Quality Assurance Committee</p>	<p>Improvement plans report will include areas identified by Board for presentation to QAC in January 23 (all actions to be reflected)</p>	Beverley Murphy	Jan 23
Action 8	28/09/22	Item 19	<b>Infection Prevention Control Annual Report</b>	<p>The Board asked for focus on sharps and waste management to be maintained.</p> <p>It was agreed a six-monthly report should be provided to Board following receipt at Quality Assurance Committee due to statutory obligations.</p>	<p>Immediate improvement plan for sharps and waste management in place with weekly oversight of delivery by Director of Quality. Sharps safety group to be implemented as part of plan, reporting into Infection Control Committee. <b>Action proposed to be closed.</b></p> <p>Infection Prevention and Control report 6-monthly review has been added to the Board work plan for receipt to Board in March 2023. And following a report to QAC in February 2023. <b>Action</b></p>	Beverley Murphy  Amber Wild	Nov 22

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<b>Action 9</b>	28/09/22	Item 20	<b>Workforce Standards</b>	Include benchmarking and demonstrate links with the ICS in future WRES reports Include update of disparity ratio targets in EDI report to Board in November	The request regarding future WRES reports has been noted. The disparity ratio target progress was reported in the September EDI update to the People Committee and a detailed report on the Disparity Ratio has been requested for the ED report to People Committee in January. The Annual Equality and Human Rights Report includes reference to the Disparity Ratio. <b>Action proposed to be closed</b>	Caroline Parry	Nov 22
<b>Action 10</b>	28/09/22	Item 21	<b>Freedom to Speak Up Guardian Annual report</b>	Future reporting to include case study examples of positive FTSU scenarios.  Amend the use of the word "perceived" in the report in section 1.4 and 1.7, prior to publication	Noted.  Wording has been amended prior to the publication of the report. <b>Action closed.</b>	Deborah Lawrenson (Wendy Fowler)	Nov 22
<b>Action 11</b>	28/09/22	Item 22	<b>Procurement Strategy</b>	Consideration to be given to feedback received around areas of further assurances required in ongoing monitoring and delivery  Review photographs used in the strategy document prior to publication to ensure there is no duplication with other key external documents.  Review benchmarking on non-pay spend	Action items are noted for inclusion in the Procurement Strategy. <b>Action proposed to be closed</b>	Phillip Easthope	Dec 22
<b>Action 12</b>	28/09/22	Item 26	<b>Annual Board declaration EPPR</b>	Review workplan to ensure timing of report for receipt at ARC and onward reporting to Board are reflected.	Note for ARC forward plan for receipt July 2023. <b>Action proposed to be closed</b>	Beverley Murphy/ Amber Wild	Nov 22
<b>Action 13</b>	28/09/22	Item 28	<b>Governance Report</b>	Amend NED attendance record to Quality Assurance Committee for Richard Mills to show correct attendance  Amend objectives for People Committee to include the objective relating to data quality to be circulated to Board members	Attendance record for QAC has been checked against confirmed minutes for QAC and the attendance record has been amended. <b>This element of the action is closed.</b>  Data quality will be included in the objectives and circulated to People Committee not to Board. <b>Action proposed to be closed for Board.</b>	Amber Wild  Caroline Parry	Nov 22

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				Amend attendance record for MHLC to show the number of meetings attended against the number of meetings held	MHLC attendance record has been amended to show the total number of meetings held. <b>This element of the action is closed.</b>	Amber Wild	
				Amend organogram for FPC to include the CIP programme Board	Organogram has been amended to show the CIP programme Board <b>This element of the action is closed.</b>	Amber Wild	
				Share the cleansed committee terms of reference with Board	This element of the action remains open	Amber Wild	
<b>Action 14</b>	27/7/22	Item 7	<b>Chief Executive's Briefing</b>	Review of LeDer Report and progress report on the Learning Disability transformation programme to be received at the September Board.	The LeDer report was scheduled to be received in September and is being received in November following the presentation of the Learning Disability Transformation report to Board in September. <b>Action closed</b>	Dr Mike Hunter	Nov 2022
<b>Action 15</b>	27/7/22	Item 10	<b>Controlled Drugs Accountable Officer (CDAO) Annual Report</b>	Data to be included in IPQR on controlled drugs medication errors, with percentages provided against total administration levels to support understanding of the true impact	Reflected in the IPQR to be received in November. <b>Action proposed to be closed.</b>	Dr Mike Hunter	Nov 2022
<b>Action 16</b>	27/7/22	Item 16	<b>Ockendon Report and Paterson Review</b>	Board development session to be put in place with the Lived Experience and Co-production Assurance Group	Reflected On Board development planner for February - <b>action closed.</b>	Deborah Lawrenson	Nov 2022
				Actions to be mapped across to the Back to Good programme and to Board Committees to provide clarity on governance arrangements.	It is proposed the original action plan which shows where actions are monitored will be shared back with the Board <b>and that when received action should be closed.</b>	Beverley Murphy	
<b>Action 17</b>	27/7/22	Item 17	<b>Complaints Annual Report</b>	Future reporting to include further detail on feedback from learning from complaints.	A separate section 'Learning from Complaints' was included in the Lessons Learned Q1 report presented to QAC in October. <b>Action closed.</b>	Beverley Murphy	Oct 2022
				Consideration to be given to include more interaction with service users through board visits programme	Proposal on a revised approach and schedule to Board visits to be available December 2022 with an aim to commence January 23. <b>Proposed target date to be changed to</b>	Beverley Murphy	Nov 22

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					December 22.		
Action 18	27/7/22	Item 18	People Plan Update	In relation to staff benefits it was confirmed that the staff newsletter "Connect" had a recent feature on staff benefits.	The range of staff benefits and links to these on Jarvis to be circulated to the Board. <b>Action open information I to be shared with Corporate Assurance team for circulation</b>	Caroline Parry	Sept 2022
Action 19	27/7/22	Item 20	Estates Strategy Update	It was discussed that the acute wards SOC plan will be flexible agile and deliverable, and that it should include timelines for delivery of targets	SOC, including timelines for delivery of targets is on the Board planner for Board workshop in December and Public BoD in January 2023. Date for opening the new build acute ward development is now forecast to be 2027. <b>Action proposed to be closed.</b>	Pat Keeling	Sept 2022
Action 20	27/7/22	Item 21	Governance Report	Committees' annual reports and review of effectiveness to be presented to Board in September 2022 Updated Terms of Reference post consistency checking to be received at the September Board	Quality Assurance Committee, Finance and Performance Committee, Mental Health legislation Committee and People Committee received the updated terms of reference for consistency checking at their meetings in September. Audit and Risk Committee received Annual Reports and Terms of reference from all Board subcommittees in October. Remuneration Committee review of effectiveness and TORs was due to be received in November. Whilst the TOR has been updated and reviewed at Remuneration and Nomination Committee further work is taking place to benchmark with best practice. The updated TORs are now expected to be received at Board in January 2023. <b>Action open for this element.</b>	Deborah Lawrenson and Executive Leads	Nov 2022
Action 21	25/05/22	Item 13	Q4 Mortality Review Report	Following on from the Service User story received at Board it was agreed more detail will be included in future reports on communication with families.	On agenda for receipt at November Board <b>Action closed.</b>	Mike Hunter	Sep-22
Action 22	23/03/22	Item 10	Integrated Performance and Quality Report (IPQR)	Update to be given to BoD on the date when the EDI work will be included in the IPQR.	Key KPIs from the EDI dashboard have been selected and will be implemented w.e.f. December 2022. <b>Propose target date amended to Dec 22</b>	Phillip Easthope	Dec22

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<b>Action 23</b>	23/03/22	Item 20	<b>Sustainability Strategy</b>	Strategy to be re-circulated in final form.	Strategy emailed to all Board members 28 <sup>th</sup> Sept 22. <b>Action closed</b>	Phillip Easthope	Jul-22
<b>Action 24</b>	26/01/22	PBoD 26/01/22 Item 19	<b>Safer Staffing – Clinical Establishment Review</b>	Quality dashboard to be presented as part of safer staffing report that triangulates safer staffing figures on one page, and for this to be added to the workplan. Safer staffing report to be added to the Board work plan for reporting more than once a year	Regular safer staffing reports are on the Board forward plan. <b>Action proposed to be closed.</b>  It was advised previously that the Quality dashboard cannot be delivered within this same time period as it is undergoing testing via a pilot with CERT and will be brought back to Board. This section on the action will remain open on the action log	Beverley Murphy	July -22

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