

Public Board of Directors

Report Title:	Trust Board Action Chart
Executive/NED Lead:	Nick Hulme, Chief Executive
Report author(s):	Denver Greenhalgh, Director of Governance
Previously considered by:	Board of Directors at each meeting.

 Approval

 Discussion

 Information

 Assurance

Executive Summary

The Trust Board action chart collates all actions arising from meetings and enables monitoring to point of closure. Action chart summary:

Number of actions	8	
Status	Blue	4
	Green	4
	Amber	0
	Red	0

The Board is asked to note that the Blue RAG items will not feature on future iterations of this report.

Action Required of the Board of Directors

The Trust Board is asked to note the Trust Board action tracker status

Link to Strategic Objectives (SO)		Please tick
SO1	Keep people in control of their health	<input type="checkbox"/>
SO2	Lead the integration of care	<input type="checkbox"/>
SO3	Develop our centres of excellence	<input type="checkbox"/>
SO4	Support and develop our staff	<input type="checkbox"/>
SO5	Drive technology enabled care	<input type="checkbox"/>
Risk Implications for the Trust <i>(including any clinical and financial consequences)</i>		If action is not taken and evidenced on board decisions, the board will not be assured that it has taken place.
Trust Risk Appetite		Compliance/Regulatory: The board has a minimal risk appetite when it comes to compliance with regulatory issues. It will meet laws, regulations and standards unless there is strong evidence or argument to challenge them
Legal and regulatory implications <i>(including links to CQC outcomes, Monitor, inspections, audits, etc)</i>		Failure to have robust governance in place may lead to regulator sanctions.
Financial Implications		There are no financial implications associated with this paper.
Equality and Diversity		There are no equality, diversity of inclusion implications associated with this paper.

REPORT TO THE BOARD MEETING IN PUBLIC – Action Chart

Blue	Completed and will be removed from chart for next iteration.
Green	Status updated and on track within the timescale.
Amber	Status not updated/completed and the deadline passed.
Red	Status not updated/completed and deadline passed by more than one month.

Minute Reference	Item	Agreed action	Responsibility	Deadline for completion of action	Item for future Board meeting	Action status	RAG
3 September 2019							
P50/20	Patient Story	The Board requested that thanks were passed to Ashley and Gillian for sharing their stories of care at ESNEFT.	HT / MD			Letter from Trust Chair sent to Gillian and Ashley via Interim Chief Nurse 3 Sep 2020	Blue
P53/20	Integrated Assurance Committee CKI	Mr Khatib questioned whether solutions were being worked up for August to improve the 2ww for cancer. The Managing Director stated that the figures for August were not yet available but that he would be happy to share the data with Mr Khatib outside the meeting.	NM			Emailed to HK on 21 Sept 20	Blue
P58/20	Public Questions	Ms Inga Lockington noted that in the minutes of the last Board meeting she had been informed that there were 5 e-charging points at Ipswich whilst on the website it was stated that there were only 2. The Director of Estates & Facilities apologised for any inaccurate information provided and advised that the information would be reviewed and the website would be corrected, noting that as one of the planning conditions for the UTC build five additional e-charging points would be added at Ipswich.	PF			Complete	Blue
P58/20	Public Questions	In her role as local councillor Ms Lockington advised that she had been contacted by a person who had been admitted to the hospital during the pandemic who had commented that when staff handed over at the end of their shifts there was only a very brief hand over conversation and asked that this was fed back to staff. The Interim Chief Nurse advised that this comment would be taken back to staff for them to reflect on, but that some conversation often took place between staff away from the patient.	MD			MD discussed at Sisters and Matrons to confirm the process ensuring confidentiality and a thorough handover.	Blue

Minute Reference	Item	Agreed action	Responsibility	Deadline for completion of action	Item for future Board meeting	Action status	RAG
1 August 2019							
P49/19	Quality issues from the Integrated Performance Report (IPR)	Board Seminar on Maternity to be arranged.	MD / DG		Yes	Maternity Board Seminar has been added to the forward planner and liaising with the LMS to attend. Provisionally arranged for later in the year 2020 / early 2021.	Green
7 November 2019							
P73/19 (a)	Quality Priorities 2019/20 Mid-Year Report	Board Seminar on GIRFT to be scheduled.	DG		Yes Board Seminar	Added to Board forward planner for later in year 2020 / early 2021.	Green
30 January 2020							
P11/20	Nursing and Midwifery Workforce update	Update on the workforce to be brought to the Board in 6 months with an annual comprehensive review report.	MD		September 2020 / Annual report	Will be updated via IAC CKI	Green
P13/20	Staff Survey Update	Full report to be provided to the Board in March.	LH			Action plan for 19/20 delayed due to covid19. Key aspects picked up in the People Strategy going to Board November 2020 Will review again post 20/21 results.	Green