**Summary of Actions from the Board meeting on 10 June 2020**

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| **Relevant Item** | **Action** | **Responsibility:** |
|  | **Actions from 10 June 2020** |  |
| BOD 39/20(b) | **Guidance on wearing of face masks**  To circulate a briefing for all staff on wearing of face masks, once further guidance received.  ***Status:* *complete* –** *email sent to all staff via Comms 12 June 2020 with updated guidance to all staff on wearing of masks* | MC |
| BOD 40/20(c) | **Equality, Diversity & Inclusion**  To use a Board Seminar to discuss innovative ways to involve staff groups more in decision-making and to empower staff to take issues forwards.  ***Status: scheduled*** *– can use the Board Seminar on 14 October 2020 and the slot already scheduled for Equality, Diversity & Inclusion.* | TB/HS |
| BOD 40/20(e) | **Action on race equality**  The Board to review the draft action plan coming out of the work on race equality by Joyce Fletcher, Strategic Nurse Advisor.  ***Status:* *complete* –** *presented to the Board session in private on 24 June 2020.* | MC |
| BOD 40/20(e) | **COVID-19 recovery programme – workstream on leadership development**  To discuss inclusion of a workstream on leadership development within the recovery programme.  ***Status:* *tbc in meeting*** | MW/TB |
| **Actions from 29 January 2020** | | |
| BOD 07/20(j) | **Data on average waiting times or longest waiting times**  As access rates did not necessarily correspond with patient experiences in CAMHS and Adult Services, data on average waiting times or longest waiting times to be provided (potentially out-of-session) so that the statistics presented could be better understood.  ***Status: to be progressed*** *– in the interim, the Performance Report to the Board (see paper BOD 42/2020) continues to provide data on urgent and emergency waits.* | MW |
| BOD 08/20(b) | **Agency usage data to be disaggregated into occupational staff groups**  Chris Hurst cautioned against over-reliance on averages and noted that it may be helpful to disaggregate the data into occupational staff groups, especially if a different cost-weighting could be applied to the different occupational groups. The Chief Nurse agreed that it would be useful to consider the data at a profession-specific level. Bernard Galton noted that this could potentially be considered in more detail through the People, Leadership & Culture Committee.  ***Status: to be progressed*** | TB/BG |
| BOD 09/20(e) | **Consistency in the data sets used in reporting in the HR report and the Safer Staffing report**  Bernard Galton commented upon the need for a single consistent data set in reporting, noting that he had raised this before as the trends in this report on Safer Staffing did not match those in the HR report. The Chief Nurse and the Director of HR agreed to review this again.  ***Status: to be progressed*** | MC/TB |
| BOD 09/20(f) | **Inpatient Safer Staffing – Trust target of 85% fill rates**  To review the 85% target fill rates to ensure still optimal in the Trust’s current circumstances and financial situation (and not super-optimal and therefore more expensive than may be needed).  ***Status: tbc in meeting*** | MC |
| BOD 12/20(d) | **Quality Committee – update on progress to achieve CQC actions**  The Trust Chair noted that it would be useful for the Board to receive an update or report from the Quality Committee about progress to achieve the CQC actions, in due course.  ***Status: in progress -*** *the Quality Committee meeting on 13 May received at paper QC 17/2020 an update from the ‘Improving Care: 5 Questions’ (IC5) group on progress against CQC actions. It was noted that the CQC have suspended all scheduled inspection activity until the end of September 2020, due to the impact of COVID-19. The Quality Committee received a further update report at its meeting on 08 July (paper QC 37/2020) and will receive further updates in September 2020.* | MC/JAsb |
| **Actions held over from 04 December 2019** | | |
| BOD 140/19 (f)-(g) | **Performance report**  To:   * provide additional information to analyse areas of underperformance which had remained unchanged; for example, for how many months or years performance had been red-rated, what the average rate of performance had been and whether or how underperformance had impacted upon patients e.g. through waiting times; and * distinguish between performance issues which may be linked to funding or resourcing deficits and those for which the Trust may be responsible.   ***Status: in progress*** *– as reported into the Board meeting on 29 January 2020, the second bullet point had been completed and included in the Performance Report to the meeting. However, work was ongoing in relation to the*  *first bullet point to analyse areas of unchanged underperformance and the impact upon patients.* | MW |
| BOD 141/19 (b) | **Patient Story (two patients who had been treated for pressure ulcers)**  As the recording of the patients had been summarised rather than played to the Board, due to technical issues, the Patient Experience & Involvement Team Manager would circulate a version later for the Board.  ***Status: to follow up*** | DMcK/MC |
| BOD 142/19 (e) | **Workforce Race Equality Standards (WRES) and Cultural Ambassadors**  To give Cultural Ambassadors an opportunity to present at a meeting in public; and for the Board to also demonstrate its commitment to the WRES actions.  ***Status: on hold*** *– but there could be an opportunity to link this into the Board Seminar on 14 October 2020 and the slot scheduled for Equality, Diversity & Inclusion (however, Seminars are held in private). Opportunity can still be provided for a presentation to a meeting in public, upon request.* | TB |