

## OPEN ACTION LOG AS AT OCTOBER 2018

Board Date	Minute Ref	Topic	Action	Lead	Due Date	Comment
27/09/18	O-123/2018	Quality Report and Learning from Mortality Reviews Q1 Report	A summary of the improvement work with patients developing sepsis whilst in hospital provided in future reports	ST	October	
27/09/18	O-125/2018	Performance Report	Include key data from the performance analysis in future reports	TS	October	
27/09/18	O-134/2018	Governors' Code of Conduct	Change wording from Trust Executives to Board members	AS	ASAP	Complete
27/09/18	O-133/2018	Board Assurance Arrangements	Review the TORs for the Executives' Remuneration and Appraisal and Nominations committees	LM	November	
26/07/18	O-100/18	Staff Story	<p>Improve recruitment and retention the following comments were noted:</p> <ul style="list-style-type: none"> <li>• Improve manager training</li> <li>• Focus on health and wellbeing</li> <li>• Managers should be more caring</li> <li>• More focus on Ashford workforce</li> <li>• Promote consistency of working on the wards</li> <li>• More access and insight into the challenges senior leaders face</li> </ul>	LM	FOR INFORMATION	To be considered at People Committee
26/07/18	O-107/18	Performance Report	Work with MAB and consider producing data to demonstrate the impact of bed and department occupancy on performance.	TS/MAB	CLOSED	TS and MAB received an analysis indicating the link between ED occupancy (minors and majors), bed occupancy and DTAs in ED at midday with ED

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						performance and ambulance handover performance. This provides useful additional data for the performance report and for operational management purposes.
26/07/18	O-108/18	Balanced Scorecard	Consider Masterclass on theatre utilisation.	JAT	OCTOBER	On the Masterclass Schedule await confirmation
27/09/18	O-125/2018	Performance Report	It was agreed to include key data from the performance analysis in future reports.	TS	OCTOBER	
26/04/18	O-43/2018	Health and Safety Report	The Chairman requested that near misses be included in the report going forward as recording of near misses was a good indicator of a robust health and safety culture.	SM	OCTOBER	On Agenda

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DUE AT A FUTURE MEETING						
27/09/18	C-134/2018	Board Assurance Arrangements	Review the TOR for the Executives' Remuneration and Appraisal and Nominations Committees.	LM	NOVEMBER	
31/05/18	O-73/2018	Balanced Scorecard	Rework and update the kite-mark on data quality assurance in line with the new Strategic Objectives.	SM	NOVEMBER	
30/03/18	O-30/2018	Annual Business Plan 2018/19	It was suggested that we provide a link to Pathology activity for next year and include a Divisional Report in the quarterly Business Plan Quarterly Progress reports.	SM	TBC	
CLOSED ACTIONS for REFERENCE						

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28/09/17	O-117/2017	<b>Quality Report Complaints Performance</b>	Update on the current work being undertaken to improve the methodology underpinning all complaints performance measures and determine what system and process modifications are needed to streamline the process.	ST	<b>CLOSED</b>	Work is ongoing and monitored through QPC.
28/09/17	O-130/2017	<b>Questions From The Public</b>	<i>Patient Concern</i> Review the wording of patient letters and improve the Trust's level of communication to patients. This work to be undertaken with our clinical office teams.	JAT	<b>CLOSED</b>	Work ongoing
26/07/18	O-100/18	<b>Staff Story</b>	Improve recruitment and retention the following comments were noted: <ul style="list-style-type: none"> <li>• Improve manager training</li> <li>• Focus on health and wellbeing</li> <li>• Managers should be more caring</li> <li>• More focus on Ashford workforce</li> </ul>	LM	<b>FOR INFORMATION</b>	To be considered at People Committee

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