EXECUTIVE SUMMARY

1 Purpose and Key Issues

The purpose of this paper is to present the draft minutes of the Trust Board meeting held on 26 February 2013 [minute numbers 021/13 to 040/13].

Key issues include:

- Item 034/13 – A revised Organisational Development Strategy was presented to the Board for discussion.
- Item 035/13 – An update on the Trust’s arrangements for Equality and Diversity was provided.

2 Supporting Information

The minutes are attached.

3 Controls and Assurances

The minutes of the meeting are considered by the Trust Board for accuracy. Following discussion, amendments may be recorded as appropriate. The minutes are then formally approved by the Board. An accurate record of the proceedings of the meeting is required in order to ensure that the Board meets its duties in accordance with the Trust’s Scheme of Delegation, Standing Orders and Standing Financial Instructions.

The arrangements and actions of the Trust Board are reviewed by the Audit Commission and are reported in the Annual Audit Letter. The Board is also assessed by Internal Audit as a part of the annual Head of Internal Audit Opinion based upon the Chief Executive’s annual Statement on Internal Control.

4 Legal Implications

The legal implications have been considered and none have been identified.

5 Equality and Diversity Implications

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. No adverse or positive impacts have been identified from the Board’s actions.
6 **Patient, Public and Staff Involvement**

Board meetings are widely publicised in the local media. They are open to the patients, the public and staff who may ask questions or raise concerns following the formal business of the meeting at the discretion of the Chair. Copies of the minutes are available on the Trust's website or may be requested from the Chair’s office.

7 **Cost Implications**

There are no cost implications.

8 **Potential Risk to the Organisation**

If the minutes are not approved, the Trust will be at medium risk of not acting in accordance with the organisation's Standing Orders.

9 **Board Prompts**

- Has the Board had an opportunity to raise questions or concerns with the Chairman of the Trust Board?

10 **Recommendations**

The Board is asked to **APPROVE** the minutes of the Board meeting held on 26 February 2013.

11 **References**

Not applicable.

12 **Strategic Objectives**

The Trust's Strategic Objectives were reviewed by the Board in February 2012.

<table>
<thead>
<tr>
<th>X</th>
<th>Highest quality</th>
<th>Flexible and multiskilled workforce</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sustainable services</td>
<td>Efficient and effective</td>
</tr>
<tr>
<td></td>
<td>Integrated health and social care</td>
<td>Local provider of choice</td>
</tr>
</tbody>
</table>

13 **Principal Risks**

The Principal Risks have been identified through the Trust’s risk management processes. They are updated as and when required.

<table>
<thead>
<tr>
<th>Financial planning &amp; management</th>
<th>Clinical records management</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategic &amp; business planning</td>
<td>X Leadership &amp; management</td>
</tr>
<tr>
<td>Workforce numbers</td>
<td>Unsafe behaviour</td>
</tr>
<tr>
<td>Workforce skills</td>
<td>External demands</td>
</tr>
<tr>
<td>X Procedural management</td>
<td>Partnership arrangements</td>
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<tr>
<td>Equipment &amp; facilities arrangements</td>
<td>Communication</td>
</tr>
</tbody>
</table>
Minutes of a meeting of the Trust Board held in the Boardroom, Chichester House, North Devon District Hospital on Tuesday 26 February 2013

PRESENT:  
Mr Roger French  Chairman  
Dr Alison Diamond  Medical Director  
Mrs Pauline Geen  Non-Executive Director  
Mrs Jac Kelly  Chief Executive  
Mr Nick Lewis  Non-Executive Director  
Ms Kate Lyons  Director of Operations  
Mrs Carolyn Mills  Director of Nursing  
Ms Jane Reynolds  Non-Executive Director  
Mr Andy Robinson  Director of Finance and Performance  
Mr Andy Ibbs  Commercial Director  
Mr Iain Roy  Director of Facilities  
Ms Maureen Bignell  Director of Personnel & Development  
Mr Tim Douglas-Riley  Associate Non-Executive Director  
Ms Keri Storey  Assistant Director, Health & Social Care  
Dr Juliet Cross  Head of Corporate Governance  
Clare Luxton  PA to Chairman  
IN ATTENDANCE:  
The Chairman noted that there were two members of the public in attendance.

ACTION

021/13 ATTENDANCE BY UNION REPRESENTATIVES

A number of Union Representatives attended the start of the Open Board session. Trudie Brailey, Unison Convenor and Staffside Chair, spoke on behalf of the Union Representatives and asked the Board: ‘We again ask you to withdraw from the South West Pay Consortium. The Unions have consulted with staff members and feedback shows that staff/members will support what is on offer from national negotiations’.

The Chairman replied that the Board’s stance had not changed as it was awaiting the Consortium’s business case which it has been advised should be available late February/early March and which the Trust Board will then consider. The Trust remains committed to engaging with staff and local unions throughout the period in which the full business case is produced and beyond.

The Union Representatives left the meeting.

022/13 APOLOGIES

There were no apologies to note.

023/13 REGISTER OF INTERESTS

The Chairman advised that the Register of Interests was a public document and was available for anyone to see at any time in the PA to the Chairman’s Office. There were no changes to the Register to be noted.
024/13 MINUTES OF THE MEETING HELD ON 22 JANUARY 2013

The minutes of the meeting held on Tuesday, 22 January 2013, numbers 001/13 to 020/13 were considered and one query was raised relating to item 008/13 Patient Story. The Board was advised that feedback from the clinicians was still outstanding although a meeting had been timetabled for April. The Board requested an update at the next Board meeting. Subject to this comment, the minutes were APPROVED.

025/13 MATTERS ARISING

The Board reviewed the Action Grid attached to the minutes that had been updated with the latest information.

**Action 3 – 185/12 - Board Assurance Report Quarter 1 2012-13**
The Board noted that the revised report was on the agenda.

Action complete.

**Action 4 – 207/12 – Winter Resilience**
The Board was advised that a Flash Report on new Strategic Health Authority guidelines regarding status “Black” and the requirement to report to STEIS was ready for sending.

Action ongoing.

**Action 5 – 225/12 – Employee Engagement Strategy**
The Board noted that the Employment Engagement Strategy was on the agenda.

Action complete.

**Action 6 – 001/13 – Attendance by Unison Representatives**
The Board was advised that a copy of the Staff Express letter from the Chairman regarding the South West Pay Consortium had been forwarded to Trudie Brailey, Chair of Staffside.

Action complete.

**Action 7 – 004/13 – Minutes of the Meeting held on 27 November 2012**
The Board noted that the revised wording of the bullet points in relation to Item 220/12 Patient Story was yet to be received.

Action ongoing.

**Action 8 – 011/13 – Health and Social Care Tests of Change, Improved Outcomes, Risks and Opportunities**
The Board was advised that the Health and Social Care Tests of Change, Improved Outcomes, Risks and Opportunities Quarterly Report would be presented to the Board in April.

Action complete.

**Action 9 – 016/13 – Emerging Issues (Response Time to Complaints)**
The Board was advised that work is underway regarding the possibilities of accessing patient experience through the Covalent System.
Action complete.

The Board NOTED the Action Grid.

026/13 CHAIRMAN’S ANNOUNCEMENTS

The Chairman reported on the following:

FT Readiness Meeting - Monday 28 January 2013
The Chairman advised that members of the Board met with representatives from the NHS South Strategic Health Authority and NHS Trust Development Authority as part of the Foundation Trust application process. He advised that Board members were faced with challenging questions relating to the business and financial plans for the organisation over the next five years. The feedback received indicated that the Trust is in a strong position to go forward as a Foundation Trust once commissioner convergence had been achieved.

Board Briefing - Tuesday 5 February 2013
The Chairman advised that a Board Briefing had been held on Tuesday 5 February 2013. The session included:

- A review of the current assessment of the Unitary Board assessment and agreement on the next steps.
- A discussion following the feedback from the Foundation Trust Readiness meeting.
- A review of the Francis Report and agreement that this will be reviewed in detail by the Executive Team for future discussion at a Board Briefing session.
- A discussion on how Health Outcomes are measured and monitored and how this information is used by the organisation to improve quality of care and patient safety.

Board Briefing – Tuesday 19 February 2013
A further Board Briefing session was held on Tuesday 19 February 2013. The session included further discussion on the feedback from the Foundation Trust Readiness meeting and ways to support the Board for future challenging assessments and to share the details of the Integrated Business Plan with key staff.

There had also been a session on the review of the proposals for establishing a Council of Governors and the supporting groups to enable the Governors to carry out their statutory duties. This included proposals for a comprehensive induction and development programme and a discussion on ways to support good working relationships between the Council and the Board of Directors.

NHS South of England Chairs and Chief Executives Meeting – Thursday 21 February 2013
The Board noted that the Chairman and Chief Executive had attended the NHS South of England Chairs and Chief Executives meeting on Thursday 21 February 2013, where the discussion had been on Board performance and the Francis Report.

027/13 CHIEF EXECUTIVE’S ANNOUNCEMENTS

There were no Chief Executive announcements.
028/13  PATIENT STORY

Carolyn Mills, Director of Nursing, presented the patient story which took the form of a DVD. The DVD showed a relative’s perspective of patients with dementia receiving care at North Devon District Hospital.

The Board was advised that:

- This DVD was part of a series of four patient stories which had been recorded with patients or carers, who were happy to share their experiences;
- The DVD had been shared with the relevant ward to ensure that they were aware of the positive feedback and areas identified for improving the patient’s experience;
- The DVD highlighted the importance of our staff engaging with family and the existing support networks of patients during admissions to hospital;
- Implementation of the “This is Me” document for patients with dementia is well embedded throughout the Trust;
- A Peer Review had been undertaken on the Dementia arrangements and the verbal feedback had been very positive as it showed that the care of dementia patients had become embedded throughout the organisation and that there had been an increase in staff awareness of how to manage dementia patients;
- The Dementia Action Plan is being implemented across the whole Trust including in Community Hospitals; and
- The Assistant Director of Nursing will be starting as he nominated clinical lead for dementia in April 2013.

The Board RECEIVED the patient story.

029/13  QUALITY ASSURANCE COMMITTEE

Chris Snow, Chair of the Quality Assurance Committee and Non-Executive Director, presented the minutes of the Quality Assurance Committee meeting held on 8 January 2013. He advised that a verbal report on the meeting on the key issues discussed had been presented to the January Trust Board meeting and there were no further updates to add.

The Board was advised that:

- The Safer Care Delivery Committee had noted a reduction in the number of staff completing face to face dementia training. This will be investigated together with the ways staff are accessing other forms of training.
- The Learning from Patient Experience Group had noted that following poor patient feedback, via patient surveys on a couple of wards, the findings had been fed back to staff on the day.
- It was noted that patients are receiving safe clinical care. The findings of the recent patient feedback indicated improvement.

The Board RECEIVED the minutes of the Quality Assurance Committee meeting held on 8 January 2013.

The Board was advised that:

Section 1 Monitor Governance Risk Assessment Indicators

- Cancer Waiting Time – There is an improved achievement of the 62 Day Referral Indicator.
- Third Parties Assessment – Green i.e. Zero.
- Key Performance Indicators = Green i.e. Zero
- The Trust remains RAG rated as Green. The Trust is awaiting feedback from the Care Quality Commission visit to Moretonhampstead Community Hospital. However, verbal feedback received suggests there are no areas of concern.

Section 2 Further Key Performance Indicators

- Stroke >90% stay on Unit North Acute – there were eleven breaches in January of which three were one day hospital Length of Stay. In January, there had been an increase in Stroke admissions and pressure throughout the hospital. Work is ongoing.
- Ambulance Handovers >2 hours – There were two breaches in January. This was due to multiple Road Traffic Accidents at the same time. The breaches have been reported to the Strategic Health Authority.
- There has been an increase in admissions for older patients. The Board was advised that:
  - The Trust will be re-launching the Urgent Care Forum and enabling specific workstreams i.e. Resilience. This will involve partners in a more structured and planned way.
  - The Trust is looking at increasing clinics at weekends. Extra pilots are being run e.g. 7 day discharge lounge, additional physiotherapy sessions, and enhancing pharmacy at the weekend. This may lead to 7 day working.
- RTT Waiting Time >52 Week Waiters – There was one breach in January. This was related to a very complex pathway and delay was also introduced by patient choice. The Trust is now taking a proactive approach to identifying patients at 35 weeks in order to review their pathway.
- Hospital Standardised Mortality Ratio (HSMR) – There is a six month differential as the HSMR is more current than the Summary Hospital Mortality Indicator (SHMI). There is ongoing work to look at the two sets of data.
  - Following publication of the Francis Report, there will be greater scrutiny of mortality rates and a Trust action plan will be presented to the March Board meeting.
  - There is ongoing work to try to understand the nature of the patients and there has been a spot check where a clinician has reviewed all patients in hospital on a specific day.
  - The latest Dr Foster report has identified a series of diagnosis to be reviewed which are low risk, as well as other specific conditions e.g. Chronic Obstructive Pulmonary Disease.
  - The trend continues downwards.
  - The Trust has requested independent scrutiny from the Strategic Health Authority NHS Trust Development Authority.
The Board was advised that there are no concerns over the quality of clinical care being provided. There are a number of initiatives across the Trust, which will contribute to the improving picture of the Mortality Rate.


031/13 WORKFORCE MONITORING REPORT – JANUARY 2013


The Board was advised that:

Section 1 Key Performance Indicators - Summary
- Despite there being a slight drop in the monthly sickness rate in December, the 12-month sickness figure had increased for the eighth successive month to 4.04%.
- The overall Trust appraisal rate showed only a slight improvement in January and remains well below target at 64.1%.

Section 2 Workforce Analysis (Percentage of budgeted WTE used)
- The percentage of budgeted WTE hours worked by contracted WTE staff currently sits at 92.5%, which was the lowest figure seen within the financial year to date. This figure includes maternity and sick leave, as well as long term sickness absence. This is being looked into in conjunction with the percentage of pay budget used, which showed the lowest percentage but the highest cost.
- The current month’s NHSP and Locum staff figure had increased to 2.4%, which was the highest seen in 2012/13 and represented an increase of 20% compared to last month.
- The Agency figure showed little change with the current figure standing at 1.8%.

Section 3 Workforce Reduction Plan
- The gap between the current budgeted posts and the year-end target workforce figure has improved over the last three months.
- There are approximately 77 less posts compared to the beginning of the year.
- The workforce plan of a reduction of 125 posts by year-end is unlikely to be achieved.

Section 4 Sickness Absence
- There continues to be high levels of long-term sickness absence.
- This trend is seen across the Region.
- An action plan to improve sickness absence rates has been circulated to the Board.

Section 5 Staff Turnover
- The annual substantive staff turnover has increased for the sixth month in succession and currently stands at 10.38%.
- Exit questionnaires are provided to staff when they leave, but they are not always completed. Actions to improve responses have been included in the Workforce Action Plan for next year.
- There is no evidence to suggest that the discussion around the South West Pay Consortium have had an impact on staff recruitment or retention.
Section 6 Appraisal Completion

- The Trust appraisal target was increased from 64% to 80% at the beginning of the 2012/13 financial year.
- Responsibility for appraisals lies with the line managers and action will be taken through the management line.

Section 7 Statutory and Mandatory Training Completion

- A generally improving situation is evident with the greatest increases being seen within the Safeguarding Children Group 2 and Group 3 categories.
- An Action Plan is in place for training programmes.
- From 4 March 2013, staff will be able to book their training online via the new online booking system STAR.
- With regard to Mental Capacity Act and Deprivation of Liberty training, a six month appointment has been made to provide additional support to put the training in practice. The post holder will be working with clinical teams, including medical teams.
- A review of the training notes for Dementia and for the Mental Capacity Act will be undertaken to assess if the decrease in training figures are linked.

The Board RECEIVED the Workforce Monitoring Report – January 2013, and welcomed the new format of the report. However, it was NOTED that it is missing the comparison with other providers in terms of benchmarking, and the Director of Personnel and Development agreed to look into this.

032/13 FINANCE REPORT JANUARY 2013


The Board was advised that the key issues were:

- The overall Financial Risk Rating for the Trust remains 3.
- There is a retained deficit of £1,953k with no variance from the financial plan.
- There is an increase in the retained surplus target by £39k, against a total of £2,184k, to ensure the 1% retained surplus is achieved.
- There continues to be improvement in 85+ days aged debtors with a £1,115k decrease in-month.
- The Better Payment Code >95% target continues to be met.

The Board NOTED the current financial position of £1,953k cumulative deficit at the end of January showing no variance from the phased financial plan.

033/13 AUDIT AND ASSURANCE COMMITTEE

Jane Reynolds, Chair of the Audit and Assurance Committee and Non-Executive Director, gave a verbal report on the meeting of the Audit and Assurance Committee held on 12 February 2013.

The Board was advised that the key issues were:

- The Committee had noted one high risk Internal Audit Report regarding supervision with regard to lack of evidencing that it had taken place and there is inconsistency across the Trust. This is consistent with the findings from the Care Quality Commission’s findings.
• Progress had been made towards year end, with a Value For Money conclusion.
• The external audit of the Quality Account will be undertaken in parallel with the financial statements.

The Board NOTED the verbal report on the Audit and Assurance Committee meeting held on 12 February 2013.

034/13 ORGANISATIONAL DEVELOPMENT STRATEGY

Maureen Bignell, Director of Personnel and Development, presented the Organisational Development Strategy.

The Board was advised that:

• The content remained the same, but the format and presentation had been changed by the Communications Department.
• The Strategy had been refreshed to include feedback from the Foundation Trust application assessments and the Care Quality Commission, as well as to reflect the way the Trust works.
• It is clear from the report of the Mid Staffordshire NHS Foundation Trust inquiry that organisational culture is key.
• A refresh of the Trust’s values will need to be undertaken as they are valid but not owned by all staff.

Following discussion, the Board NOTED:

• Work is ongoing to translate the values into positive and negative behaviours to help staff ‘live the values’.
• The Trust will wait for the recommendations from the report into the Mid Staffordshire NHS Foundation Trust inquiry to be received by the government.
• The Trust will then take stock of what is currently happening in the organisation and it is likely that most of the relevant recommendations are already being acted upon based on the first report.
• The Strategy will be further revised and presented at the next Board meeting. MB

The Board NOTED the recommendations but DID NOT APPROVE the Organisational Development Strategy as further revision was required.

035/13 EQUALITY AND DIVERSITY BOARD UPDATE

Maureen Bignell, Director of Personnel and Development, presented the Equality and Diversity Board Update.

The Board was advised that:

• The paper sets out the background and work to date on Equality and Diversity, and described the duty on Public Sector Employers to comply with the Equality Act (2010).
• It included a set of Equality Objectives that had been developed with staff through the Partnership Forum and patient groups.
• An Equality and Diversity Action Plan had been developed and consulted via the Strategic Workforce Development Committee.
• The next step would be to translate into an Implementation Plan.
Following discussion, the Board:

- **AGREED** the Action Plan should be revised to refocus the Equality and Diversity arrangements in the Trust and bring back to the Trust Board for approval. **MB**
- **AGREED** that a Non-Executive Director should champion the Equality and Diversity work on behalf. Nomination of the champion will be made by the Chairman. **RF**
- **AGREED** that the role of the Strategic Workforce Development Committee should be revised to provide assurance that the Equality and Diversity programme is being delivered. **MB**

The Board **APPROVED** the Equality Objectives.

**036/13 EMERGING ISSUES**

The Chairman asked if there were any emerging issues members of the Board wished to raise.

**Counter Fraud Qualitative Assessment**
The Director of Finance and Performance advised that the Trust had been rated as Green for the Counter Fraud Qualitative Assessment pilot. This demonstrates that the Trust's arrangements for the prevention and detection of fraud meet required standards.

**Apprentice Employer of the Year**
The Director of Personnel and Development advised that the Trust had received an award as the Apprentice Employer of the Year. The competition included both public sector and private organisations. The Trust has also been put forward for a national award.

**Improvement in Hospital Standardised Mortality Ratio (HSMR)**
The Medical Director advised that improvements to the HSMR continue.

**Runner up for the Patient Experience Network National Awards (PENNA)**
The Director of Nursing advised that the Trust had been the runner up for the PENNA award for its Mystery Shopper programme which is run in collaboration with the Patients Association. This provides a way of gaining patient feedback on their experiences of accessing Trust services.

**Hotel Services Contract**
The Director of Facilities advised that the tendering process for the Hotel Services Contract had been completed. This represents a year long project and involved staff engagement and was supported by key teams including Finance and HR.

**Trauma Unit Peer Review**
The Director of Operations advised that a Peer Review had been undertaken for the Trauma Unit and the verbal feedback was very positive. The next steps will be to carry out a gap analysis of the Trauma rehabilitation arrangements.

**Project Search**
The Chief Executive advised that the Trust had signed up to be a Project Search pilot site. This is an initiative aimed at providing placements for young adults with learning difficulties to acquire the necessary skills to enable them to secure future competitive employment.
Divisional General Manager and Clinical Director Induction Sessions
The Chairman advised that he was impressed with the Divisional General Manager and Clinical Director Induction Session that he had attended to discuss Board Expectations. It became apparent that there is a requirement for the Non-Executive Directors to be seen, which is part of the Patient Safety Walkarounds.

037/13 QUESTIONS FROM MEMBERS OF THE PUBLIC AND REPRESENTATIVES

Smoke Free Premises
A question was raised concerning the ongoing issue of patients and members of the public smoking on Trust premises, in particular by the Main Entrance. The Medical Director advised that the Trust has taken a number of initiatives, e.g. every patient, both outpatient and inpatient, is offered the opportunity to stop smoking. Work is in progress but it continues to be challenging.

Junior Doctors
A question was asked about the source of Junior Doctors. The Medical Director advised that a significant number, approximately 50%, of Foundation Year doctors came from the Peninsular Deanery and the rest from other medical schools.

038/13 DATE OF NEXT MEETING
The next meeting of the Trust Board will take place at 10:00 am on Tuesday 26 March 2013 in the Chichester Boardroom.

039/13 EXCLUSION OF PRESS / PUBLIC
It was formally MOVED by Chris Snow, SECONDED by Nick Lewis and unanimously RESOLVED that under the provision of Section 1, sub-section 2, of the Public Bodies (Admission to Meetings) Act 1960, that the public be excluded from the confidential section of the meeting on the grounds that publicity would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted.

040/13 CLOSE OF MEETING
There being no further business, the open meeting closed at 11.50 am.
<table>
<thead>
<tr>
<th>Item No.</th>
<th>Action</th>
<th>Lead</th>
<th>Due Date</th>
<th>Comment</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>058/12</td>
<td>1</td>
<td>ComPAS – The Director of Finance and Performance to bring a formal proposal re: marketing the ComPAS software back to the Board once a marketing partner has been appointed.</td>
<td>Al</td>
<td>May 13</td>
<td>Apr 12 – A proposal for marketing of ComPAS software will be reported to Board once a marketing partner has been appointed. July 12 – Ongoing. Contact has been made with NHS South West to look at the best way forward. Aug 12 – Andy Ibbs to update the September Board meeting on tendering for a partner for marketing the ComPAS software. Sept 12 – Deferred to January 2013. Nov 12 – Deferred to January 2013. Jan 13 – Deferred to May 2013. Feb 13 – Deferred to May 2013.</td>
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<tr>
<td>123/12</td>
<td>2</td>
<td>Update to be provided to the Board once the Business Continuity Policy has been finalised.</td>
<td>KL</td>
<td>27.11.12 Mar 13</td>
<td>Jul 12 – Update to be presented to September Board meeting. Sept 12 – Item deferred to November Board meeting. Oct 12 – An update on the key headings would be provided to the November Board meeting and the full plan would be</td>
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<td>Item No.</td>
<td>Action Lead</td>
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<td>23 October 2012</td>
<td>3</td>
<td>Flash Report on new SHA guidance regarding status “Black” and requirement to report to STEIS.</td>
<td>KL</td>
<td>Nov 2012</td>
<td>Nov 12 – Flash report being developed once Trust and Strategic Health Authority plans are aligned. Jan 13 – South Central SHA Guidance has not been localised. Flash Report on this year’s position to be circulated to the Board and an update sent when available. Feb 13 – Flash Report ready to be sent.</td>
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<tr>
<td>22 January 2013</td>
<td>4</td>
<td>Item 220/12 Patient Story – the wording of the second set of bullet points needed to be amended as they did not entirely capture the discussion at the November Board meeting. The Director of Nursing will supply the rewording.</td>
<td>CM</td>
<td>26.02.13</td>
<td>Feb 13 – Revised wording received and minutes amended.</td>
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<tr>
<td>26 February 2013</td>
<td>5</td>
<td>Item 008/13 Patient Story – an update on the feedback from clinicians was requested.</td>
<td>AD</td>
<td>26.03.13</td>
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<td>6</td>
<td>Section 2 – Further KPIs – a Trust Action Plan of mortality rates to be presented to the March Board</td>
<td>AD</td>
<td>26.03.13</td>
<td>Mar 13 – On March Board agenda.</td>
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<tr>
<td>Item No.</td>
<td>Action</td>
<td>Lead</td>
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<td>031/13 – Workforce Monitoring Report – January 2013</td>
<td>Section 7 – Statutory and Mandatory Training Completion - A review of the training notes for Dementia and for the Mental Capacity Act to be undertaken to assess if the decrease in training figures are linked.</td>
<td>MB</td>
<td>26.03.13</td>
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<td></td>
<td>The comparison with other providers in terms of benchmarking is missing, and needs to be looked into.</td>
<td>MB</td>
<td>26.03.13</td>
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<tr>
<td>034/13 – Organisational Development Strategy</td>
<td>Revise the Organisational Development Strategy.</td>
<td>MB</td>
<td>26.03.13</td>
<td>Mar 13 – Item deferred to April 13 meeting</td>
<td>Ongoing</td>
</tr>
<tr>
<td>035/13 – Equality and Diversity Board Update</td>
<td>Revise the Action Plan to refocus the Equality and Diversity arrangements in the Trust.</td>
<td>MB</td>
<td>26.03.13</td>
<td>Mar 13 – Item deferred to April 13 meeting</td>
<td>Ongoing</td>
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<td></td>
<td>A Non-Executive Director to champion the Equality and Diversity work on behalf of the Board. Chairman to nominate NED Champion.</td>
<td>RF</td>
<td>26.03.13</td>
<td>Mar 13 – Champion nominated.</td>
<td>Closed</td>
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<td></td>
<td>The role of the Strategic Workforce Development Committee to be revised to provide assurance that the Equality and Diversity programme is being delivered.</td>
<td>MB</td>
<td>26.03.13</td>
<td>Mar 13 – Discussion at Executive Directors group. Proposals to be presented to April Board meeting.</td>
<td>Ongoing</td>
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</tbody>
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