

ACTION LOG FOR LANARKSHIRE NHS BOARD FROM JANUARY 2014

	<u>MINUTE REF YR/MONTH/ITEM</u>	<u>SUBJECT</u>	<u>ACTION</u>	<u>LEAD PERSON</u>	<u>PROGRESS TO DATE</u>
1.	2016/08/76	Patient Notification Exercise	Update Board Members when feedback on the Lanarkshire Incident Management Team report is received from the UK Advisory Panel for Healthcare Workers Infected with Bloodborne Viruses.	Gabe Docherty, Interim Director of Public Health	<p><u>Update January 2018</u></p> <p>The recommendations have been agreed with the UK Advisory Panel. The redaction of patient identifiable data is almost complete, and the report will be discussed at the March 2018 HQIAC meeting.</p>
2.	2017/05/65	Joint Inspection of Services for Adults in North Lanarkshire	Bring further reports on the progress and the outcome of the Inspection to the NHS Board.	Janice Hewitt, Chief Accountable Officer, North Lanarkshire Health & Social Care Partnership	<p><u>Update January 2018</u></p> <p>Professional Discussion meetings concluded. Inspectors met with CEO's and CAO on 18 January 2018. There has been a delay in publication from Care Inspectorate / HIS, but is anticipated that an embargoed version will be available to circulate to PP&RC Members for discussion at the 28th February 2018 meeting.</p>
3.	2017/05/71	Waiting Times and Delayed Discharges	Clarify the implications of the Redirection Policy for patients, and the arrangements for the management of any associated risk.	Heather Knox, Director of Acute Services / Craig Cunningham, South Lanarkshire Health and Social Care Partnership	<p><u>Update January 2018</u></p> <p>The Director of Acute Services has formed a review group for re-direction. Anticipated review will be complete in March 2018.</p> <p>The November audit is now complete, and the group will meet in February 2018 to assess the impact of changes.</p>

ITEM 4

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6.	2017/08/93	Duty of Candour	Arrange a briefing for Board Members to make clear the Board's responsibilities and how these are being addressed.	Lesley Anne Smith, Director of Quality, with Irene Barkby, Director for Nurses, Midwives and Allied Health Professionals	<u>Update January 2018</u> To be arranged for the Seminar immediately after the PP&RC meeting on 28 February 2018. Additional topic of Safe Staffing levels to be considered also.
7.	2017/08/102	Risk	Review the corporate risks relating to Cyber Security and the structural sustainability of Monklands Hospital.	Carol McGhee, Corporate Risk Manager	<u>Complete</u> Updated in November 2017 as part of wider review of MRRP Risk Register.
8.	2017/09/124	Suicides	Provide summary of initiatives and prevalence to Board Members in advance of Lived Experience / Patient Story at January 2018 Board Meeting	Janice Hewitt	<u>Complete</u> The paper was prepared but not circulated as the family are unable to attend the January 2018 Board meeting. New dates offered. To be sent to Board Members separately for information only at this stage.
9.	2017/09/124	Development Events	Add Actions arising to Board Action Log	Paul Cannon, Board Secretary	<u>Complete</u>
10.	2017/09/124	Patient Safety Walk Rounds review	Share outcome with Board Members	Lesley Anne Smith, Director of Quality	<u>Complete</u> Sent to HQAIC Members in January 2018, will be endorsed by HQAIC on 8th March, and thereafter shared with all Board Members

ITEM 4

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11.	2017/09/124	Healthcare Associated Infection Report	Update report to include data on deaths, and clarify issue around national requirements for reporting only 15 year old and above patients.	Irene Barkby, Director for Nurses, Midwives and Allied Health Professionals	<u>Complete</u> Narrative included in the January 2018 report.
12.	2017/09/136	Access Performance Report	a) Psychological Therapies – provide further data on performance metrics b) Share Driver Diagrams with Board members	Ms Hewitt, Chief Accountable Officer, North Health & Social Care Partnership	<u>Complete</u> Sent to Board Members on 26 October 2017

Ongoing	6
Complete	6
Total	12



Board Development Day Action Plans

2017 – 2018

	Outcome Sought	Actions Planned	Lead Responsible	Progress January 2018
1.	Finance 2018/19 Forecast required	Provide a further Finance update to the Board after 14th December 2017 allocation announcements	Director of Finance	<u>Complete</u> Update on 2018/19 financial assumptions in the Finance Report to the Board - 31 January 2018
2.	Service Development Palliative Care	Take forward the decision making process with IJBs and assurance to the NHS Board	Chief Officer, South HSCP	<u>Complete</u> Decisions ratified by IJBs and paper to NHS Board (31 January 2018) on assurance issues
3.	Governance Progress with implementation of Review	Provide final comments on the governance review	All	<u>Update</u> Preparations for the new Committee and revised Terms of Reference being taken forward. Revised Terms of Reference to be included in the Code of Corporate Governance to go to the Board in March 2018
4.	Structure Secure date for follow up session	A March 2018 date to be sought for a further Board session with more time for discussion on Achieving Excellence implementation	Board Chair / Board Secretary / Head of Organisational Development	<u>Update</u> Date set for Tuesday 20 March 2018 (9.00am – 1.00pm). Venue to be confirmed

2016 – 2017

	Outcome Sought	Actions Planned	Lead Responsible	Progress January 2018
1.	<p>Strategy Effective implementation of change, including Achieving Excellence (AE), whilst sustaining performance. This will involve Board members:</p> <ul style="list-style-type: none"> • being clear about the overall change programme; including infrastructure, key deliverables and governance arrangements for coming year • sustaining pace around implementation and focus on governance so that balance is achieved between managing key issues and driving strategic delivery 	<p>Successful conclusion and agreement of the Achieving Excellence with final draft strategy prepared for Board agreement and timeously submitted to Scottish Government</p> <p>Board Members fully informed on the programme infrastructure and strategic deliverables for 2016 – 2017</p> <p>Sustained Board seminar format and one-off summits as needed to support Board member understanding, planning and decision making</p>	Chief Executive / Director of Strategic Planning and Performance	<p><u>Complete</u> The Cabinet Secretary for Health and Sport approved the Strategy in April 2017.</p> <p>The infrastructure needed to deliver the ambitions of Achieving Excellence was established in spring/summer 2017.</p> <p>The first performance report on the Key Deliverables was considered by the NHS Board in October 2017.</p> <p>Further briefing and discussion on the main elements of work necessary to deliver the ambitions of Achieving Excellence will be part of the Board development session on 29th November 2017.</p>
2.	<p>Structure A Board approved programme infrastructure structure, decision making process and governance arrangements in place to enable</p>	As above, Board members will maintain their awareness of the programme infrastructure and strategic deliverables for 2016 – 2017. These include Achieving Excellence, Strategic Commissioning Plans and the Local Delivery	Board Chair / Chief Executive	<p><u>Complete</u> The approval of the healthcare strategy “Achieving Excellence” by the Cabinet Secretary signalled the beginning of the work to implement</p>

	<p>the effective implementation of strategic change</p>	<p>Plan.</p> <p>Providing Board Members with an opportunity to continually review and reflect on governance across the system will be built in through Board meetings, seminars and summits as described above.</p> <p>A prioritised work programme and process to enable collective decision making and integrated planning will be developed.</p> <p>The role and focus of the PPRC in supporting strategic direction and implementation while managing performance is key and will be remain a key element of the infrastructure going forward.</p>	<p>Board Chair / Chief Executive</p> <p>Director of Strategic Planning and Performance</p> <p>Board Chair / Chief Executive</p>	<p>the ambitions it described.</p> <p>A whole-system group was established, the Strategy Delivery Team, which has a remit to take an operational overview of the 100+ key deliverables which form the AE implementation plan.</p> <p>Jointly chaired by the Chief Executive and Chief Officers, the SDT is a large multi-professional group which includes all health and social care leaders with the NHS Lanarkshire and both IJBs.</p> <p>The SDT has established a range of Short Life Working Groups to deliver the objectives of AE, and the work plans for each are considered at each quarterly meeting of the SDT. This then forms the basis for the performance reports on AE made to the PP&RC and the respective IJB performance committees.</p>
<p>3.</p>	<p>Integration Board is clear on whole system success indicators and integrated planning needs for coming year in order to support the delivery of agreed outcomes for patients, service users and the wider community</p>	<p>Strategic Commissioning Plans in place, underpinned with success indicators that align to whole system.</p> <p>As above, Board seminar format and one-off</p>	<p>Chief Officers</p>	<p><u>Complete</u> North and South Lanarkshire Strategic Commissioning Plans are both in place with relevant aspects threaded through Achieving Excellence programme.</p> <p>There have been opportunities to</p>

		summits will be provided as needed to support Board member understanding, planning and decision making.		discuss through the year but integrated planning and what it means will remain a focus going forward.
4.	<p>Culture and Engagement The creation of an environment that enables excellent service delivery, change management and improvement.</p> <p>Staff and other key stakeholders on board with the change programme.</p>	<p>CMT to revisit stakeholder map and refine communications, engagement and organisational development plans for coming year including;</p> <ul style="list-style-type: none"> a focus on clinical engagement Board Member visibility and proactive support across the organisation and community Leaders and managers supported in implementing the change programme 	<p>Board Chair / Chief Executive</p> <p>Medical Director / Director of NMAHPs / HR Director / Head of Communications</p>	<p>Ongoing There has been significant clinical engagement around the Monklands programme, through the short life working group membership infrastructure supporting Achieving Excellence and through existing committee and group arrangements and communications.</p> <p>The need to strengthen engagement further will continue into implementation in 2018 and beyond. A further report will be made to the PPRC in February 2018 on engagement (public and clinical)</p> <p>There have been consistent opportunities across the year for Board members to be visible across the organisation. Examples include: Back to the Floor; Patient Safety Walkrounds; support for Partnership initiatives; enhanced member profile through range of communications methods including Pulse, Social Media, Staff Awards</p> <p>Leaders and managers are supported</p>

				through the programme infrastructure, having attended briefings and received information. More specific needs will be met where they are identified in the coming months as implementation progresses.
5.	<p>Execution</p> <p>In the coming year :</p> <ul style="list-style-type: none"> The 2016 T&O changes will be embedded Preparations for new Monklands OBC will be made Implementation arrangements for AE will be operational There will be examples of the enhanced use of digital technology/e-health delivery 	<p>Ensure resources to facilitate the work programme and arrangements to monitor performance are in place</p> <p>Infrastructure agreed, populated and active.</p> <p>Board Members will sustain their focus on health inequalities and continue to seek out innovative approaches going forward.</p>	<p>Director of Planning and Performance / Acute Director</p>	<p><u>Complete</u> Phase 1 – Safety and Sustainability - changes to T&O were completed.</p> <p><u>Ongoing</u> Planning is now in progress for phase 2 – creating centres of excellence for planned orthopaedics and trauma – is in planning stage (more detail on 29th November).</p> <p><u>Complete</u> Approval of the MRR Project IA received in October 2017, and OBC is programmed for submission in summer 2019</p> <p><u>Complete</u> Arrangements in place as described above.</p> <p><u>Complete</u> The Technology Enabled Care (TEC) programme is being implemented in community service across Lanarkshire, with positive benefit to</p>

ITEM 4

				patients, carers and staff. Roll-out is underway for new information systems for pharmacy/prescribing and laboratory services (FBC on Board agenda 31 January 2018)
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