

DECISION & ACTION SUMMARY FROM THE HOSPITAL EXECUTIVE COMMITTEE

HELD ON TUESDAY 22nd NOVEMBER 2011

Min.No.	ACTION/DECISION	Responsibility	DEADLINE
2011.6.2A	Surge/Capacity/Escalation Plan: Meet for final approval of amalgamated all encompassing document and upload to intranet as a live policy/plan.	IDoO/B McElroy/ K Malpass	20/12/11
2011.6.3A	Review of Care Received by Elderly Patients Undergoing Surgery: Develop governance guidelines and principles for Centre Chiefs to embed within centres as a standardised part of ongoing governance arrangements in treating elderly patients, and monitor clinical activity against these measurables.	MD	20/12/11
2011.6.4E	Medicines Review: Report on outcomes and findings of drug charts and medicine codes audit back to HEC.	B McElroy	Jan 2012
2011.6.7E	FCHS Update: Meet to discuss and clarify position regarding Ophthalmology access on PRH site. Verbal update to HEC.	DoS / E Craig	20/12/11
2011.6.8B	Private Patient Strategy: Progress update of steering group and action plan required for December HEC.	T Fox	20/12/11
2011.6.8JA	AOB: Investigate the possibility of a shared learning & education portal to enable streamlined and more efficient clinical training/learning. Report back to HEC.	WD	22/11/11
2011.7.3D	18 Weeks RTT: Discuss and agree change of payment (additional clinical activity) and the deferral of payment change date from January to April. Update V Maher with outcome.	T Fox & P Moreau	22/11/11
2011.7.2A	Accrual of general public holidays during maternity/paternity/adoption & parental leave: The Committee AGREED to proceed with option 3.	NA	NA
2011.7.3A	Blood Transfusion Regulations And Compliance: - Discuss report statistics and poor compliance data at Centre team meetings, addressing all lack of training and weak areas respectively - Bring same report (quarterly) back to HEC to show change/progress	All CC's N Tufft	Immediate 21/2/12
2011.7.4A	Performance Report: Discuss and agree improvement plans with CC's around optimum utilisation of slots, backlog clearance and remapped admission tree (with minimised paperwork). Implement throughout centres.	T Fox / M Cheetham	20/12/11
2011.7.5A	HCAI Update: - Ensure risks associated with loss of isolation areas are incorporated into the Phase 2 Bed Closure Plans - Present to HEC same paper highlighting risks attached to bed closure plan in two months to highlight any change - Investigate bed closure/loss of isolation scenarios, risks and responses and incorporate into the Trust's Business Continuity Plan	P O'Neill / IDoO P O'Neill MD / IDoO / DQS	20/12/11 24/1/12 20/12/11

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2011.7.6A	PMO Monthly Report: Take PMO forward to the ODG agenda as regular item, to engage & involve Centre management; invigorating and creating a more dynamic ownership of initiatives from within the Centres.	A Green	20/12/11
2011.7.7D	RSH Dedicated Trauma Unit Business Case: Proceed with TU submission but explore further the additional costs identified in the baseline assessment against TU standards and opportunities for absorbing costs through the redesign of existing services. Bring update back to HEC February.	IDoO / K Malpass	21/2/12
2011.7.7A	Policy For Medical Appraisal And Revalidation: Set up steering group dedicated to exploring & resolving issues and queries, particularly around time allotted to the delivery of appraisals. Once agreed bring Policy back to HEC for final approval before implementing.	MD	20/12/11
2011.7.7B	Business Continuity Plan: Final version with given amendments APPROVED and AGREED to implement.	NA	NA
2011.7.7C	Revised Policies For Ratification: The following revised policies were all RATIFIED : <ul style="list-style-type: none"> • Policy for the Development and Management of Organisation-wide Documents • Policy on the management of external agency reviews • Clinical records management policy • Management of Corporate and Local Induction • Risk Management Training Policy • An Organisation-wide Training Policy for the use of Medical Devices • Hand Hygiene • Prevention and management of needlestick injuries (including inoculation incidents/ exposures to blood borne viruses) • Dignity at work • Health Record Keeping Standards • Consent Policy (minor amendment of in date policy) • Transfer Policy • Discharge Policy (minor amendment of in date policy) • Incident Reporting and Investigation • Claims Policy • PALS Policy • Learning from Adverse Events • Policy for the dissemination, implementation and monitoring of NICE guidance • National Confidential Enquiries Policy • Management of Medical Devices 	NA	NA