

REPORT TO BOARD OF DIRECTORS (BoD)

Report title: Matters Arising from the Minutes on 9 October 2025

Meeting date: 4 December 2025

Board sponsor: Annette Doherty, Chair

Paper Author: Board Support Secretary

Appendices:

None

Executive summary:

Action required:	Approval		
Purpose of the Report:	The Board is required to be updated on progress of open actions and to approve the closing of implemented actions.		
Summary of key issues:	An open action log is maintained of all actions arising or pending from each of the previous meetings of the BoDs. This is to ensure actions are followed through and implemented within the agreed timescales.		
	The Board is asked to note the updates on the action log.		
Key recommendations:	The Board of Directors is asked to NOTE the action log, NOTE the updates on actions, actions for future meeting, and APPROVE the eight actions recommended for closure.		

Implications:

Links to Strategic Theme:	 Quality and Safety Patients People Partnerships Sustainability
Link to the Trust Risk Register:	None
Resource:	N
Legal and	N
regulatory:	
Subsidiary:	N

Assurance route:

Previously considered by: None



MATTERS ARISING FROM THE MINUTES ON 9 OCTOBER 2025

1. Purpose of the report

1.1. The Board is required to be updated on progress of open actions and to approve the closing of implemented actions.

2. Background

- 2.1. An open action log is maintained of all actions arising or pending from each of the previous meetings of the BoDs. This is to ensure actions are followed through and implemented within the agreed timescales.
- 2.2. The Board is asked to note the updates on the action log as noted below:

Action No.	Action summary	Target date	Action owner	Status	Latest Progress Note (to include the date of the meeting the action was closed)
B/19/25	Explore feasibility of using digital system to provide regular text messages to patients providing operation progress updates.	Dec-25	Chief Strategy and Partnerships Officer (CSPO)	To Close	Will be explored as part of the work being done with the patient portal (timescales to be determined). Action for agreement for closure at 04.12.25 Board meeting.
B/20/25	Present progress update against operational standards improvements to Finance and Performance Committee (FPC) providing assurance around clearer projections on performance trajectories and delivery against targets.	Dec-25	Chief Operating Officer (COO)	To Close	Referred to FPC for monitoring of implementation. Action for agreement for closure at 04.12.25 Board meeting.
B/21/25	Provide update with assurance of the actions to ensure patients kept safe whilst waiting in the Emergency Departments (EDs).	Dec-25	Deputy Chief Nurse (DCN)/Chief Nursing and Midwifery Officer (CNMO)	To Close	Verbal update to be provided at December 2025 BoD meeting (ongoing assurance of actions). Action for agreement for closure at 04.12.25 Board meeting.
B/22/25	Explore and recommend additional measures around the inclusion of	Dec-25	CSPO	Open	CSPO liaising with the Associate Director of Patient Experience on 27.11.25 on this. Hopes to have an update the following week to provide a



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	more qualitative metrics to better capture patient experience in the Integrated Performance Report (IPR), and deep dive review into Friends and Family Test (FFT) feedback to understand areas actively utilising this information to make improvements around themes.				verbal update at the 04.12.25 Board meeting.
B/23/25	Identify date to provide a refresher session on Statistical Process Control (SPC) at a future BoD Strategic Session.	Dec-25	Director of Corporate Governance (DCG)	To Close	Added to list of items for future BoD Strategic Sessions. Action for agreement for closure at 04.12.25 Board meeting.
B/24/25	Review the new NHS Oversight Framework (NOF) framework and metrics, aligning these with the Integrated Improvement Plan (IIP) and IPR reporting to ensure a single, coherent reporting structure, along with reviewing performance trajectories and providing progress updates against year-end targets.	Dec-25	CSPO	Open	Review of the Integrated Performance Report (IPR) to be undertaken in December 2025.
B/25/25	Identify date to deliver cyber security annual deep dive risk review and risk appetite review and refresh at future BoD Strategic Session.	Dec-25	DCG	To Close	Cyber security deep dive risk review referred to FPC for a future FPC meeting. Risk appetite added to January 2026 BoD Strategic Session. Action for agreement for closure at 04.12.25 Board meeting.
B/26/25	Include Martha's Law reporting as part of the regular Quality Governance	Dec-25	DCN/CNMO	To Close	At the Quality & Safety Committee (Q&SC) meeting on 18.11.25, a comprehensive update was received on the management of the



	Compliance reports presented to Trust Management Committee (TMC).				deteriorating patient, which included a section on the implementation and performance of Martha's Law. Fuller information will be provided in the next Q&SC Chair Assurance report from the November Q&SC meeting to the next Board meeting to be held in 2026. Action for agreement for closure at 04.12.25 Board meeting.
B/27/25	Revisit and provide progress update on implementation of the outstanding actions from the 2022 Higher-Level Responsible Officer (HLRO) visit.	Feb-26	Chief Medical Officer (CMO)	Open	Item for future BoD meeting.
B/28/25	Schedule Sexual Safety Charter training at a future BoD Strategic Session.	Dec-25	DCG	To Close	Added to list of items for future BoD Strategic Sessions. Action for agreement for closure at 04.12.25 Board meeting.
B/29/25	Initiate further discussions with KMPN in collaboration with the relevant care group to assess the optimal structure for phlebotomy services to determine whether phlebotomy should be integrated into the network or remain separate. Bring back Pathology Network for Decision.	Dec-25	CSPO	To Close	The Diagnostics, Cancer and Buckland (DCB) Care Group are undertaking a review of phlebotomy services across EKHUFT. Action for agreement for closure at 04.12.25 Board meeting.