Sandwell and West Birmingham Hospitals

NHS Trust

Public Trust Board Action Log: 7th January 2021

Action		Assigned To	Due Date	Status/Response	
1.	TB (08/20) 010	Reach out to CCGs to investigate whether GPs are carrying out separate patient stratification work.	LK	Feb 2021	GP's at YHP have been keeping risk profiles of patients transferred to us and those that would normally attend the practice, but haven't. We have tried to engage other PCN's in the risk profiling but have had very little take up. Our Primary care liaison team is doing more work to understand what the position is, but as of yet is still unknown. What we do know is that we have a record of all patients referred to us and will remain on our tracker lists until treated or Discharged.
3.	TB (10/20) 007	Investigate the introduction of incentivisation into the eBike pilot scheme	RW		Complete Trial fully subscribed

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4.	ТВ (10/20) 010	Find out if the Trust offers support to patients suffering potential psychological harm because of having to endure very long waiting times (cases currently in Ophthalmology).	DC	Nov 2020	(01/12) DC to follow up with Ophthalmology in relation to the planned production of a longer- term plan to address this issue.	
5.	ТВ (12/20) 001	The Trust Board requested an update on the inclusion of ethnic minority representatives in recruitment processes from the [People and Diversity Committee].	FM	Feb 2021	Not yet due	
6.	ТВ (12/20) 001	Provide an update to Board on Freedom to Speak Up resource enhancement (administration support and additional Guardians)	KF	Dec 2020	(01/12) DMc reported that this still needed to be reviewed. Action ongoing.	
7.	ТВ (12/20) 015	Prioritise the Equality, Diversity and Inclusion action plan to identify key projects on which to focus and any scope to achieve quick wins. Articulate short-, medium- and longer-term expectations.	FM	Feb 2021	Agenda item	
8.	ТВ (01/21) 004	Collate data on non-COVID-19 work and determine whether this was at a higher or lower level than in previous years.	LK	Feb 2021	Both planned and unplanned Covid work is lower than what we would normally see, but if you include Covid admissions with non Covid then emergency activity is up on where we would normally be	

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