### Appendix 6 – Resolved Actions

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<th>Accountability Session</th>
<th>Some of the issues highlighted in Trust presentations to the Committee</th>
<th>Resolved Actions</th>
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| **North Staffordshire Combined NHS Foundation Trust**  
Monday 5 September 2016 | • A shortage of resource and practice in Children and Young People services had been identified by the CQC. The Trust has since negotiated £1.5 million extra investment in Children and Young People Services.  
• There had been improvements in the way complaints were managed and the Trust had been working in partnership with Healthwatch Staffordshire  
• A shared care service had been opened jointly with UHNM. Due to funding constraints this service had not been supported next year but it was hoped that the model could be rolled out with the support of commissioners.  
• There were plans to move to an integrated care record across the whole of Staffordshire by 2018.  
• The Trust was on a journey of improvement.  
• The CQC had found that access to CAMHS, and Crisis Services, were inadequate.  
• The CQC would return on 12th September and it was hoped that the Trust's rating would improve. | • A copy of the findings of the Healthwatch peer review into the Trust's complaints and complaints handling be provided to the Committee when completed.  
• That the Committee consider undertaking further scrutiny into the impact of the funding withdrawal for the Sustain Service, on looked after children and young people.  
• More information about the Young Person's Council, including the aims, objectives and outcomes be provided by the Trust.  
• More information about the CAMHS Strategy be provided by the Trust.  
• That details of the number of people who have stayed in police cell as a place of safety to be provided by the Trust. |
| **South Staffordshire and Shropshire Healthcare NHS Foundation Trust**  
Wednesday 28 September | • The Trust was in income and expenditure balance.  
• There was a challenging cost improvement programme which represented £7.7 million or four percent of the Trust's annual turnover.  
• The Trust had received a good assessment from the first annual learning from mistakes league in March 2016.  
• The Trust received a 'good' CQC rating in all domains in July 2016.  
• The Trust was spending £700,000 to centralize all Section 136 cases onto the St George's Hospital site.  
• Two major issues for the Trust through the STP was the provision of enhanced primary care to keep people away from hospital, and emergency and crisis care.  
• There was disappointed with the decision on the cap on agency spend. The situation had been discussed with NHS Improvement.  
• The nurse vacancy rate was eleven percent. There was a national shortage in nurses and a redesign of the workforce was taking place to use unregistered practitioners in a different way to mitigate. | • The Trust informs the Committee of any future changes to Trust services. |
| **Staffordshire and Stoke on Trent Partnership NHS Trust**  
Monday 24 October | • Since Nov 2015 there had been a lot of work to address the CQC findings. A Quality Improvement Plan was in place.  
• The CQC had asked a number of Trusts to be part of a national mortality review. Four Community Trusts had been reviewed as part of this work and SSOTP had received positive verbal feedback.  
• Staff recruitment continued to be a challenge.  
• There was a much worse financial position for 2016-17, with a potential overspend of £18 - £23 million. | • The Trust would provide more details regarding the number of staff that had received training on falls and examples of how the Trust was adhering to best practice on falls.  
• The Committee would consider the proposals relating to Bradwell Hospital in more detail at the 7 November Healthy Staffordshire Select Committee meeting when North Staffordshire CCG would be represented. |
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<th>Community hospitals were an uncertain environment as the CCGs had transferred inpatient care for two of the Trust's hospitals - Bradwell Hospital and Cheadle Hospital to UHNM. The Trust could continue to provide the clinics and the services provided out of Bradwell Hospital however a hospital without inpatient beds would have to be run very differently.</th>
<th>Members should approach the Trust directly regarding any issues that arise in between Accountability Sessions.</th>
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| *West Midlands Ambulance Service NHS Foundation Trust Monday 31 October* | *In 2015/16 WMAS was the only ambulance Trust to meet each national emergency access target set by NHS England.*  
*WMAS had achieved its statutory financial duties and had delivered a surplus.*  
*The CQC report and rating were still awaited.*  
*The new Ambulance Hub would be on Festival Park.*  
*Chief Fire Officers were being encouraged to train fire fighters to become community first responders to strengthen existing teams and create new teams. This would provide an immediate first response in rural communities and it was hoped that the Chief Fire Officers would take up this invite.* | *A visit by Committee Members to the Trust would be considered.*  
*The Trust would alert the Committee to any future proposed changes to services.*  
*That the Trust would report back to the Committee on any issues in the local health economy that Members should be aware of.*  
*That future reports to the Committee include detail of hand over times at local hospitals outside of Staffordshire.* |
| *University Hospitals North Midlands NHS Trust Monday 28 November* | *Priorities for the Trust included stabilising the performance position so that better and quicker access could be delivered to patients and managing poor performance in Accident and Emergency Services.*  
*The Trust should be running at approximately eighty five percent capacity to move patients through the system efficiently but was running at around one hundred percent capacity most of the time.*  
*There were patients in beds who were medically fit for discharge.*  
*The Trust was participating in the Royal College of Pediatric and Child Health's Review of Emergency Care. A report would be available for public discussion in January 2017.*  
*The Trust was in the bottom ten Trusts for accident and emergency performance.*  
*Considerable amount of money had been spent on refurbishment and upgrade of stock.*  
*The Trust was working to address concerns raised by the CQC and there was an action plan in place.*  
*The winter plan involved all services working together to ensure safe and responsive services.* | *The process of reviewing the Trust’s response to complaints be shared with the Committee when determined.*  
*The Trust’s Action Plans including the Business Plan, the Financial Recovery Plan, the Accident and Emergency Recovery Plan be presented to the Committee early in 2017.*  
*More details regarding parking provision be shared with the Committee.* |