Public Board of Directors OPEN Action Log For receipt at the March 2025 Board

Item Systems and partnership 12 update Item Lived experience report 12 Lived experience report	 committees will be numbered rising from 1. This will begin with s It was requested that the timing and governance arrangements in relation to the development of the joint committee arrangements for eating disorders between the partners in the South Yorkshire MHLDA provider collaborative is reflected in the Trust constitution and standing financial instructions in due course. It was agreed that key areas of focus would be reported back to the Board through the lived experience report. Include insights from Healthwatch into future lived experience reports Take forward three areas of focus, as discussed in the experience story Assurance about the care opinion piece to be included in future reporting The carer experience story will be invited back to the Board in 12 months to reflect on what has changed Extend the feedback February to include the Council of 	An update on the joint committee arrangements will be received at the confidential Board following which any required changes will be reflected in the Trust constitution. This has been noted for update report scheduled for July 2025 and this has been noted on the Board work programme.	DP/JD CJ	March 2025 July 2025
12 update Item Lived experience report 12 Lived experience report	 arrangements in relation to the development of the joint committee arrangements for eating disorders between the partners in the South Yorkshire MHLDA provider collaborative is reflected in the Trust constitution and standing financial instructions in due course. It was agreed that key areas of focus would be reported back to the Board through the lived experience report. Include insights from Healthwatch into future lived experience reports Take forward three areas of focus, as discussed in the experience story Assurance about the care opinion piece to be included in future reporting The carer experience story will be invited back to the Board in 12 months to reflect on what has changed 	arrangements will be received at the confidential Board following which any required changes will be reflected in the Trust constitution. This has been noted for update report scheduled for July 2025 and this has been noted on the Board work programme.		2025 July
12 Item Lived experience report	 to the Board through the lived experience report. Include insights from Healthwatch into future lived experience reports Take forward three areas of focus, as discussed in the experience story Assurance about the care opinion piece to be included in future reporting The carer experience story will be invited back to the Board in 12 months to reflect on what has changed 	scheduled for July 2025 and this has been noted on the Board work programme.	Cl	
	Extend the feedback Eebruary to include the Council of			
12	Governors	Feedback February was included at the Council of Governors meeting on 25 February 2025	CJ	Feb 2025
Item 8 Chief Executive's report	In reference to the Trust becoming an anti-racist organisation, it was confirmed that there are a number of initiatives that were taking place in the Trust. It was agreed that an action will be taken to bring a more structured update back to the Board to include the significant work taking place relating to workforce as well as the patient and carer race equality framework (PCREF) and reducing restrictive practice work.	Timing for this has been confirmed on the work programme for April 2025	DP	April 2025
Item Integrated Performance 14 and Quality Report	The Chair noted that the narrative on the front sheet in relation to PDR states that compliance was at 68.1%, and this does not match the narrative in the IPQR report which states that 90% of staff have received a PDR in the last 12 months. It was agreed that CP would email the Board with clarification of the figures relating to PDR.	There are two targets one for 6 weekly supervisions (80%) and one for PDRs (90%). It has been confirmed that PDR compliance is 68.1% of staff which is below the target aim of ensuring that 90% of staff have received a PDR in the last 12 months	СР	March 2025
Item 29 Jan 2025 19	The Chair noted the South Yorkshire Mental Health, Learning Disability and Autism (MHLDA) Provider Collaborative Board meeting notes were attached to the report and the collaborative annual report will be circulated to the Board and to the governors, following an amendment required.	has been resubmitted and as soon as it is received it will be added to the agenda.	DP	May 2025
lter 19	n 29 Jan 2025	In a duality hopertthis does not match the narrative in the IPQR report which states that 90% of staff have received a PDR in the last 12 months. It was agreed that CP would email the Board with clarification of the figures relating to PDR.m29 Jan 2025The Chair noted the South Yorkshire Mental Health, Learning Disability and Autism (MHLDA) Provider Collaborative Board meeting notes were attached to the report and the collaborative annual report will be circulated to the Board and to the governors, following an amendment required.	this does not match the narrative in the IPQR report which states that 90% of staff have received a PDR in the last 12 months. It was agreed that CP would email the Board with clarification of the figures relating to PDR. The Chair noted the South Yorkshire Mental Health, Learning Disability and Autism (MHLDA) Provider Collaborative Board meeting notes were attached to the report and the collaborative annual report will be circulated to the Board and	In a data wy reportthis does not match the narrative in the IPQR report which states that 90% of staff have received a PDR in the last 12 months. It was agreed that CP would email the Board with clarification of the figures relating to PDR.data with (90%). It has been confirmed that PDR compliance is 68.1% of staff which is below the target aim of ensuring that 90% of staff have received a PDR in the last 12 monthsm29 Jan 2025The Chair noted the South Yorkshire Mental Health, Learning Disability and Autism (MHLDA) Provider Collaborative Board meeting notes were attached to the report and the collaborative annual report will be circulated to the Board and to the governors, following an amendment required.Still awaiting the annual report. A request has been resubmitted and as soon as it is received it will be added to the agenda.DP