



**NOT PROTECTIVELY MARKED**

<b>Public Board Meeting</b>		<b>July 2019 Item 03</b>
<b>THIS PAPER IS FOR APPROVAL</b>		
<b>MATTERS ARISING/PENDING FROM PREVIOUS MEETINGS</b>		
<b>Lead Director Author</b>	Pauline Howie, Chief Executive Lindsey Ralph, Board Secretary	
<b>Action required</b>	The Board is asked to  1. <b>Note</b> the update provided against each of the matters arising or pending from previous meetings. 2. <b>Approve</b> the removal of each of those actions annotated as complete.	
<b>Background</b>	A log is maintained for all matters arising or pending from each of the previous meetings. No action is deleted from the listing until reported as complete and approved for removal.	
<b>Status</b>	The attached appendix contains a status update against each of the matters arising or pending.  Actions are annotated in the RAG status update as follows:  <ul style="list-style-type: none"><li>● Task completed – to be removed from listing</li><li>● No identified risk to action target completion date</li><li>● Target completion date extended and rationale provided for movement</li><li>● Target completion date exceeded with further explanation required and/or to be provided at meeting</li></ul> 3 matters arising have been completed and are recommended for removal from the listing.	

**MEETING: Scottish Ambulance Service Board – July 2019**

REF Mtg/Pg/Item	SUBJECT	ORIGINATION DATE	ACTION/RECOMMENDATION	RAG	TARGET DATE	COMMENTS
171/9/14	Person Centred Care	March 2019	<b>Director of Care Quality and Strategic Development</b> to consider more quantitative measures for patient experience.		July 2019 September 2019	The Director has progressed work to provide both quantitative and qualitative data. A survey has been developed which asked 4 questions about patient experience of SAS. In 7 days, over 700 patients completed the survey with mainly positive results.  This will be incorporated in to the Board report in September 2019.
173/6/8	Property and Asset Management Strategy – Interim Update 2019	May 2019	<b>Board Secretary</b> to include an update on Fleet to the Board Development schedule for 2019/20.		March 2020	This has been added to the Board Development schedule for 2019/20.
173/9/14	Chief Executive's verbal update	May 2019	<b>Board Secretary</b> to include an update on the Service's work to improve the experience of LGBT patients and staff in the Board Development schedule for 2019/20.		March 2020	This has been added to the Board Development schedule for 2019/20.
174/3/3	External Audit Annual Report 2018/19	June 2019	<b>Director of Finance and Logistics</b> to progress the amendments suggested by Board members with Grant Thornton before finalisation of the report.		July 2019	Action completed.
174/4/5	Letter of Representation	June 2019	<b>Director of Finance and Logistics</b> to amend the wording in the letter of representation to reflect it was the Board that approved the letter of representation and this would be reflected in the minutes at the Board meeting on 26 June 2019.		July 2019	Action completed.

174/4/7	2018/19 Annual Report – Feedback, Comments, Concerns and Complaints	June 2019	<b>Director of Care Quality &amp; Strategic Development</b> to amend the report with the requested changes from Board members prior to publication.		July 2019	Action completed.
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