NOT PROTECTIVELY MARKED

Public Board Meeting	**24 November 2021** **Item 04**

THIS PAPER IS FOR APPROVAL

MATTERS ARISING/PENDING FROM PREVIOUS MEETINGS

Lead Director **Author**	Pauline Howie, Chief Executive Lindsey Ralph, Board Secretary
Action required	The Board is asked to 1. **Note** the update provided against each of the matters arising or pending from previous meetings. 2. **Approve** the removal of each of those actions annotated as complete.
Background	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.
Status	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: ● Task completed – to be removed from listing ● No identified risk to action target completion date ● Target completion date extended and rationale provided for movement ● Target completion date exceeded with further explanation required and/or to be provided at meeting There are 6 matters arising recommended for removal.

MEETING: Scottish Ambulance Service Board – November 2021						
REF Mtg/Pg/ Item	**SUBJECT**	**ORIGINATION DATE**	**ACTION/RECOMMENDATION**	**RAG**	**TARGET DATE**	**COMMENTS**
190/8/12i	Person Centred Care	July 2021	**Chair, Clinical Governance Committee and Medical Director –** to arrange for the Clinical Governance Committee to undertake a review of the complaints process to determine if complaints could be themed and categorised.	■	November 2021	Verbal update provided at Clinical Governance Committee on 15 November 2021 and Director of Care Quality and Professional Development will keep the Committee appraised of the national review work as it progresses.
191/2/1	Patient Story	September 2021	**Head of Corporate Affairs and Engagement –** for training purposes, to arrange for videos to include a timeline of events from receipt of call until the ambulance arrived on scene.	■	November 2021	Complete
191/6/5	Board Quality Indicators and Performance Report	September 2021	**Director of Workforce –** to include reference to the demand and capacity recruitment plans, with data on the resources in place against target numbers in the Board performance data.	■	January 2022	
191/6/6	Corporate Risk Register (public)	September 2021	**Director of Finance, Logistics and Strategy -** Risk Manager to include risk appetite levels in the dashboard and consider the presentation of these, and the risk levels, in a column rather than a line graph format.	■	November 2021	Complete
191/6/7	Sustainability Strategy	September 2021	**Board members –** to provide any feedback on the draft strategy to the Director of Finance, Logistics and Strategy for this to be reflected in the final version presented to the Board in early 2022.	■	January 2022	
191/7/8	Patient Experience Annual Report 2020/21	September 2021	**Director of Care Quality and Professional Development –** to include reference in Section 5 to the work that the Service had progressed during the reporting year related to learning from events.	■	November 2021	Complete

191/7/9	SAS Framework Document	September 2021	**Director of Finance, Logistics & Strategy** – to include reference to Integrated Joint Boards and Health and Social Care Partnerships in the framework document	███	November 2021	The framework document has been updated and is pending clearance from Scottish Government
191/8/11	Patient and Staff Safety – HAI update	September 2021	**Director of Care Quality and Professional Development –** to provide Francis Tierney with further information about the patient participation group in Uist.	███	November 2021	The Director has requested the Patient Experience Manager to provide further information for her to share with Francis Tierney.