



**NOT PROTECTIVELY MARKED**

<b>Public Board Meeting</b>		<b>29 September 2021</b> <b>Item 04</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> There are 7 matters arising recommended for removal.	

**MEETING:** Scottish Ambulance Service Board – September 2021

REF Mtg/Pg/Item	SUBJECT	ORIGINATION DATE	ACTION/RECOMMENDATION	RAG	TARGET DATE	COMMENTS
184/7/6iii	Corporate Register Risk	November 2020	<b>Director of Finance, Logistics &amp; Strategy</b> - Risk Manager - to consider the inclusion of a risk dashboard for Board reporting.		September 2021	Complete - Risk Dashboard included in September Board paper (Agenda Item 06)
188/6/6	Corporate Register Risk	May 2021	<b>Director of Finance, Logistics and Strategy</b> – Risk Manager to progress the actions requested by Board members related to risks 4368, 4369 and to consider if a risk issues log should be developed to sit alongside the Corporate Risk Register.		September 2021	Risk Manager has progressed the action through the PPSG and is planning to test the concept within West Region which will report back to PPSG, Audit Committee and Board.
190/5/6	Corporate Register Public Risk	July 2021	<b>Director of Finance, Logistics &amp; Strategy and Risk Manager</b> – (i) to review the wording of Risk IDs 4638 and 4651 with the risk owners to ensure there was sufficient clarity of why these were recorded as two separate risks and (ii) to strengthen the mitigating actions on Risk ID 4639 to draw out the controls that focused on recovery from a cyber attack, applying the learning from recent events experienced by other services.		September 2021	Complete
190/6/8	SFIs and Scheme of Delegation	July 2021	<b>Board Secretary</b> – to review the wording in Section 9 to record that the Remuneration Committee reported to the Staff Governance Committee.		September 2021	Complete
190/7/10	Risk Management Policy – Revised	July 2021	<b>Risk Manager</b> – prior to publication, amend the policy to reflect the requested changes from Board members to		September 2021	Complete

			<ul style="list-style-type: none"> <li>review the glossary to include the Just Culture definition.</li> <li>Update the culture section on page 10 to reflect that it was everyone's responsibility to manage risk within their roles supported by a culture that allows staff to speak up when they have concerns.</li> </ul>			
190/8/12i	Person Centred Care	July 2021	<b>Chair, Clinical Governance Committee and Medical Director</b> – 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	
190/8/12ii	Person Centred Care	July 2021	<b>Director of Care Quality and Professional Development</b> – Head of Corporate Affairs and Engagement to provide Board members with further information on the timelines related to SPSO case (Datix 4331).		September 2021	Complete – Email sent to Board members on 30 July 2021.
190/8/13	Patient and Staff Safety HAI	July 2021	<b>Chair, Clinical Governance Committee</b> – will seek more detailed assurance at the Committee meeting in August to ensure there was no direct patient impact from the outstanding deliverables from 2020/21 being transferred to the 2021/22 programme of work.		September 2021	Complete