



**NOT PROTECTIVELY MARKED**

<b>Public Board Meeting</b>		<b>January 2020</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 5 matters arising recommended for removal.	

**MEETING: Scottish Ambulance Service Board – January 2020**

REF Mtg/Pg/Item	SUBJECT	ORIGINATION DATE	ACTION/RECOMMENDATION	RAG	TARGET DATE	COMMENTS
176/3/10	Person Centred Care	September 2019	<b>Executive Team</b> - to consider options in relation to providing an estimated time of arrival to patients and keep the Board informed of progress.		January 2020	Through the Ambulance Association of Chief Executives work is being undertaken on this. This has been tested in East Midlands and the Service is intending to learning from this and then develop practice within the Service. The Board is requested to extend the target date to March 2020.
176/5/5(i)	Towards 2020 Taking Care to the Patient and Quality Improvement	September 2019	<b>Director of Care Quality &amp; Strategic Development</b> - to arrange for a trajectory to be included in the See, Treat and Referral charts for future reports.		November 2019	This is being progressed by the MI team and Regional Directors. The Board is requested to extend the target date to March 2020.
176/5/5(ii)	Towards 2020 Taking Care to the Patient and Quality Improvement	September 2019	<b>Director of Finance, Logistics &amp; Strategy</b> - to refer to the Digital and ICT Steering Group the 2 ICT outstanding actions raised at the Clinical Governance Committee (from the 2018/19 Annual Infection Prevention and Control Programme) to advise how these were being prioritised. Agreed at Board in November 2019 to extend target date to March 2020		March 2020	This is being progressed by the Director of Finance, Logistics and Strategy.
177/4/5	Towards 2020 Taking Care to the Patient and Quality Improvement	November 2019	<b>Madeline Smith and Martin Togneri</b> - in their respective roles as Chair of the Clinical Governance Committee in NHS 24 and the Service, would arrange a review of the governance arrangements in relation to hear and treat.		March 2020	

177/6/6	Board Quality Indicators Performance Report	November 2019	<b>Board Secretary</b> - to circulate the Service's Resource Escalatory Action Plan (REAP) plan to Board members.		January 2020	The plan was emailed to Board members on 27 November 2019.
177/7/7 (i)	Corporate Risk Register - public	November 2019	<b>Director of Finance, Logistics &amp; Strategy</b> - Risk Manager to amend the Corporate Risk Register to include timescales for the mitigating actions.		March 2020	This action is being progressed with risk owners.
177/7/7 (ii)	Corporate Risk Register - public	November 2019	<b>Director of Finance, Logistics &amp; Strategy</b> - Risk Manager to add the Staff Governance Committee to the list of Assurance Committee/Groups for Risk 4641.		January 2020	Complete.
177/7/7 (iii)	Corporate Risk Register - public	November 2019	<b>Director of Finance, Logistics and Strategy</b> - Risk Manager to amend page 5 of the report to reflect the correct date of the Audit Committee as 22 January 2020.		January 2020	Complete.
177/8/12	Person Centred Care Update	November 2019	<b>Director of Care Quality and Professional Development</b> - to include more narrative in future papers about how the Service responded to the feedback it received through its social media channels.		March 2020	This action will be reflected in the report from March 2020.
177/8/13	Patient and Staff Safety - HAI report	November 2019	<b>Director of Care Quality and Professional Development</b> - to remove the numbers from the data points in the charts for future reports to ensure consistency in the way the Service reported its data.		January 2020	Complete.
177/9/14	Good Governance Action Plan update	November 2019	<b>Board Secretary</b> - to arrange a meeting with Chair and Chairs of Governance Committees to review progress on the specific actions related to Committee business.		January 2020	Meeting held on 14 January 2020 and plan updated to reflect discussion.