

Meeting Title	Board of Directors		
Date	12/09/2019	Agenda item	Bo.7.19.21

A report from the Chair of the Finance and Performance Committee (Performance)

Presented by	Laura Stroud, Non-Executive Director
Author	Jacqui Maurice, Head of Corporate Governance
Lead Directors	Sandra Shannon, Chief Operating Officer
Purpose of the paper	This paper is to provide the Board of Directors with an overview of the work of the Finance and Performance Committee in July 2019
Key control	This paper is a key control for the strategic objective to deliver our financial plan and our key performance indicators
Action required	To note

Background

The purpose of the Finance and Performance Committee is

- to maintain a detailed overview of the Trust's assets and resources in relation to the achievement of financial targets, business objectives and the financial stability of the Trust
- to provide detailed scrutiny of performance matters

and if necessary, raise concerns or make recommendations to the Board of Directors.

The Finance and Performance Committee uses the assurance presented throughout its meeting, which is aligned to key controls for identified risks associated with delivering the Trust's strategic objective

- To deliver our financial plan and our key performance indicators

in combination with a review of the relevant risks on the strategic risk register to review the Trust's Board Assurance Framework. It was agreed that for the Board Assurance Framework the strategic objective is split into two (2a: to deliver our financial plan and 2b: to deliver our key performance indicators. Following each meeting consensus is achieved in relation to the assurance level and associated statement. This is presented in the Board Assurance Framework.

Key Matters Discussed

1. Strategic Objective 2b: To deliver our key performance indicators

1.1 Risk: Strategic Risks relevant to the Committee

The Committee reviewed strategic risks related to the above strategic objective, for which it has an assuring role, at the meeting, and was assured that the mitigation described was proportionate and appropriate. Following consideration of the assurance received and the confidence level held with regard to the delivery of the plan; the Committee recommends that this should move from 'Amber' to 'Green'.

1.2 Strategy: Performance Dashboard

The Committee reviewed the Performance Dashboard in the context of the information contained in the Performance Report. The Committee discussed in detail the risk appetite and confirmed the recommendation to the Board to change to 'Open' from 'Cautious'.

1.3 Performance Report

The Performance Report was used by the Committee to contextualise the strategic risks related to delivery of key performance targets and the data presented in the Performance dashboard. The Committee specifically considered risks and assurance in relation to:

- **Emergency Care Standard:** The Committee was assured that the measures in place continue to support the delivery of the ECS, in particular through the continued focus on strengthening navigation, streaming and the major's consultant roles to ensure better flow within the department.
- **Ambulance Handovers:** The Committee was assured by the collaborative meetings in place with YAS to ensure dedicated handover coordination is consistently in place.

Meeting Title	Board of Directors		
Date	12/09/2019	Agenda item	Bo.7.19.21

- **Long Length of Stay (Stranded Patients):** The Committee was assured by the measures in place which continue to support improvements and identify further improvement opportunities.
- **Cancer standards:** The Committee was assured that overall the delivery of the cancer recovery plan continues to be effective. In particular, the Committee was assured by the pathway improvements to be implemented to improve future IPT performance.
- **Referral to Treatment:** Whilst the Committee noted the marginal deterioration in the Trust's end of month position it was assured by the overall improved performance in relation to the national average.
- **Diagnostic waiting times:** The Committee was assured by the improvement actions in place to support delivery in particular, the implementation of actions resulting from the Endoscopy summit and plans for improving performance with regard to Cystoscopy.

1.4 Planned Care Improvement Programme Update.

The Committee was assured by the update provided on the progress of the Planned Care Improvement Programme's key objectives and the specific focus on sustainable delivery of Referral to Treatment (RTT), Cancer and Diagnostic access standards alongside general improvements in waiting times for all other patients.

1.5 Informatics Performance Report.

The Committee was assured that all risks with regard to Clinical Informatics, Business Intelligence, Information Technology and the Going Digital Programme were being appropriately managed. The Committee noted that the 'Digital maturity of NHS Trusts', assessed by NHS England, has recently been published with the Trust being ranked seventh in the country.

Recommendation

The Board of Directors is requested to note the work of the Finance and Performance Committee in scrutinising the Foundation Trust's financial matters: maintaining a detailed overview of the Trust's assets and resources in relation to the achievement of financial targets, business objectives and the financial stability of the Trust and providing detailed scrutiny of performance matters.

It is also asked to note the assurance level and statement agreed by the Committee which is provided on the Board Assurance Framework.

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers			g			
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors						
Agreed General risk appetite (G)						

Meeting Title	Board of Directors		
Date	12/09/2019	Agenda item	Bo.7.19.21

Risk Implications (see section 4 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	▪	
Quality implications	▪	
Resource implications	▪	
Legal/regulatory implications	▪	
Diversity and Inclusion implications		▪

Regulation, Legislation and Compliance relevance
NHS Improvement: Risk assessment framework, quality governance framework, code of governance , annual reporting manual
Care Quality Commission Domain: <i>Safe, caring, effective, responsive, well led</i>
Care Quality Commission Fundamental Standard:
Other (please state):

Relevance to other Board of Director's Committee:					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
	▪				