## Agenda item 2ai

<table>
<thead>
<tr>
<th>Report to:</th>
<th>Board of Directors</th>
<th>Date: 26 March 2020</th>
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<tbody>
<tr>
<td>Report from:</td>
<td>Chair of the Performance Committee</td>
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<tr>
<td>Principal Objective/Strategy and Title</td>
<td>GOVERNANCE: To update the Board on discussions at the Performance Committee meeting dated 26 March 2020</td>
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<tr>
<td>Board Assurance Framework Entries</td>
<td>678, 841, 843, 865, 873, 874, 875, 1021, 1853, 1854, 2145, 2146, 2147, 2148, 2149, 2163, 2225, 2249</td>
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<tr>
<td>Regulatory Requirement</td>
<td>Well Led/Code of Governance:</td>
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<tr>
<td>Equality Considerations</td>
<td>To have clear and effective processes for assurance of Committee risks</td>
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<tr>
<td>Key Risks</td>
<td>None believed to apply</td>
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<td>For:</td>
<td>Insufficient information or understanding to provide assurance to the Board</td>
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### 1. Significant issues of interest to the Board

1.1 EM provided an update on COVID-19 from the national and hospital perspective from the Gold call earlier that morning.

1.2 The Committee agreed on the importance of ensuring that, in its response to the COVID-19 pandemic, the Trust also minimises the harm to patients that fall within the residual 35% of the hospital's activity. EM reassured the Committee that a lot of work is being done to scrutinise waiting lists and manage outpatients to ensure effective treatment and minimise harm wherever possible. Further consideration will be given as to how the Committee can receive assurance on this (as current targets and benchmarks are not meaningful in current circumstances), but without over-burdening the management team.

1.3 The Committee identified the following as the main risks during the outbreak, which the updated BAF will reflect:

- Severe constraints in workforce availability with reduced availability of staff due to sickness and shielding.
- Stress/wellbeing of staff, especially due to changes in roles and models of care.
- Availability and appropriate use of PPE.
- Access to equipment, e.g. ventilators.
- Financial sustainability and cash flow.
- Risk of Cyber-attack with new ways of working and increased home working.
1.4 The Committee welcomed the Finance Action plan as an excellent basis both to ensure correct action was being taken and for the Committee to monitor actions. Particular attention should be paid to local counter fraud during the pandemic response. The finance department will prepare financial forecasts, including cash, as more clarity emerges over coming weeks, and which will be especially important when the Trust moves into the recovery phase.

1.5 The right focus for the Committee was discussed. While PIPR and Access & Data Quality Reports would continue to be generated (partly due to statutory reporting requirements), it was acknowledged that many of the metrics are not meaningful during the pandemic response, where normal activity is reduced by 65%, but would provide a baseline when the Trust moves into recovery. The Committee would instead focus on:

- Scrutinising effectiveness of residual hospital activity
- Monitoring the risks identified above
- Ensuring financial sustainability and effective financial governance

SP, SH and EM will discuss and revert to the Chair before the next meeting with thoughts on how the Committee can obtain assurance on these items, but without introducing disproportionate burdens which would distract from their management of the operational response to during this challenging period.

2. Key decisions or actions taken by the Performance Committee

None.

3. Matters referred to other committees or individual Executives

None.

4. Other items of note

4.1 The next meeting will take place at Papworth (with NEDs joining remotely) rather than Huntingdon as planned.
4.2 AJ will look into video conference facilities for future Committee (and Board meetings) so they can be more effective, although clinical needs are being rightly prioritised.

5. Recommendation

5.1 The Board of Directors is asked to note the contents of this report.