

Agenda item 2ai

Report to:	Board of Directors	4 October 2018
Report from:	Chair of the Performance Committee	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board on discussions at the Performance Committee meeting dated 27 September 2018	
Board Assurance Framework Entries		
Regulatory Requirement		
Equality Considerations	None believed to apply	
Key Risks	Non-compliance resulting in financial penalties	
For:	Information OR Approval	

1. The Chief Operating Officer (COO) and Chief Finance Officer took the Committee through the **Activity Recovery Plan**. This is lock step with the **RTT recovery plan** and is conservatively forecast to close the revenue/activity gap by over £2m. We agreed to monitor the progress on this on a monthly basis.
2. The COO took us through the latest report on **recovering the RTT position**. We don't yet have an overall signed off recovery plan across all services. We do have glide paths for Cardiology and Cardiac Surgery however. Once signed off we will review progress on a monthly basis. We discussed the root cause of the cardiac surgery problems which were not as apparent in March 2017. The team felt that the dip in capacity prudently engineered to de risk the Lorenzo implementation was part of the cause and together with sub optimal booking had created a back log that we will only fully overcome with the extra capacity provided by the new hospital.
3. **PIPR is RED overall and Safe is RED**. We discussed the proposal from Quality and Risk Committee to demote the **SI measure** to a below the line measure therefore not contributing to the overall score. This decision will go to Board. Overnight safer staffing levels have dropped. We questioned why this was given the success we have had achieving net positive recruitment each month. Apparently we are recruiting unevenly across the trust so some departments like Critical Care are fully staffed whereas others are struggling.
4. **Thoracic Directorate** is particularly challenged with staffing just now with shortages of nursing staff and junior doctors. The Medical Director explained the Deanery NHS process for recruiting junior doctors. We discussed the need for Papworth to develop a

forward resource plan to deal with what is expected to be a tighter junior doctor supply. The team will bring this plan back to the Committee in the next few months.

5. **People Management and Culture is Amber.** The Committee was concerned at the latest pulse survey results showing our less than half our people would recommend Royal Papworth as a place to work. The Director of Workforce and OD felt that this was driven by the sheer level of change the organisation is going through just now.
6. The Committee considered and gave financial scrutiny to the following Month 5 2018/19 reports:
 - Financial Report
 - Access & Data Quality
 - Financial Recovery Plan
 - Financial Strategy Risk Assessment
7. **Histopathology interim solution procurement case** was presented and approved by the Committee.

Dave Hughes
Chair Performance Committee
27th September 2018