

**Agenda item 2.a.i**

<b>Report to:</b>	<b>Board of Directors</b>	<b>Date: 2 December 2021</b>
<b>Report from:</b>	<b>Chair of the Performance Committee</b>	
<b>Principal Objective/ Strategy and Title</b>	<b>GOVERNANCE: To update the Board of Directors on discussions at the Performance Committee meeting on 25 November 2021</b>	
<b>Board Assurance Framework Entries</b>	678, 841, 1021, 1853, 1854, 2829, 2904, 2985, 3009	
<b>Regulatory Requirement</b>	Well Led/Code of Governance:	
<b>Equality Considerations</b>	None believed to apply	
<b>Key Risks</b>	To have clear and effective processes for assurance of Committee risks	
<b>For:</b>	Information	

**1. Significant issues of interest to the Board**

**BAF.** The Committee discussed the new risk 3074 NHS Reforms & ICS Strategic Risk and concluded that it is best scrutinised by one committee and that this is more appropriate for Performance rather than SPC. It was also agreed that this risk should be maintained separately to risk 2854 ICS Engagement (scrutinised by SPC) so as to ensure appropriate focus, subject to ensuring that the distinction between them is clear.

**Cardiology.** We received an excellent presentation from the Cardiology Division demonstrating how they are ahead of their CIP targets (although need to do more to increase recurrent savings); maintained RTT levels at 86.35%, are carefully prioritising patients in view of both clinical priority and waiting time; have managed a higher volume of acute/emergency activity (both in terms of number of patients and acuity); are working hard to improve staff training and engagement notwithstanding the enormous pressures on an exhausted workforce; whilst at the same time continuing to innovate in clinical practice and collaborate with system partners. The Committee thanked them for their excellent presentation and requested that their thanks be passed on to the division's staff for their enormous efforts.

**PIPR** remained at amber this month. The Committee had a detailed discussion about the operational choices and decisions taken to manage flow in light of the very significant pressures that the Trust continues to face, including high Covid patients and emergency activity, and staff sickness absence. While recognising the inherently operational nature of the decision-making, the Committee recommends that Q&R review the processes around the decision taken to step down elective activity to ensure safe staffing levels in CCA which was running very "hot"; not to second-guess management's judgment but to provide assurance to the Board as to how such important decisions are taken. While it was not possible to provide assurance that rostering practice is as effective as it could be, for example in CCA, a rostering review is being carried out and the feedback from that will be brought to the Committee as soon as possible. The Committee noted that even if improved rostering did not, for example, increase the number of CCA beds, it would make a critical difference to the pressures and work life balance of CCA staff.

EM explained that a deep dive has revealed that the two 52-week breach patients were not lost in migration to Lorenzo as first thought, but due to human errors in the old system prior to migration and which has now been replaced by Lorenzo. The Committee received assurance that sufficient work had been done to verify that there are no further patients “lost” in similar circumstances.

OM explained that a review of sickness absence disclosed that a high proportion of absence in Admin & Clerical staff was due to stress and this has led to a more detailed project to determine how this can be improved. Fundamentally, it is thought to be related to workload and job design.

**EPR Contract.** This was discussed and noted in a Part 2 confidential Chair’s Report.

**ICS Medium Term Financial Planning update.** The Committee reviewed the presentation given by the ICS Finance Community to Julian Kelly earlier in the month and noted its contents.

**Cyber risk.** The Committee discussed the latest quarterly report. The Committee received assurance that there were no obstacles to the seven actions identified in the report (including maximising password security to the extent possible) and subsequent reports will include timelines for implementation. The Committee requested that Executives bring the necessary assurance to a future meeting that effective business continuity plans and protocols in the event of a cyber breach are in place and updated on a regular basis.

## **2. Key decisions or actions taken by the Performance Committee**

The Committee recommends the Lorenzo EPR contract to the Board for approval.

## **3. Matters referred to other committees or individual Executives**

The Committee suggests that Q&R review processes around the recent decision to reduce elective activity to ensure safe staffing in CCA as an illustration of robust governance practice.

## **4. Other items of note**

## **5. Recommendation**

The Board to note the contents of this report