

Agenda item 4.i

Report to:	Board of Directors	Date: 1 May 2025
Report from:	Chair of the Performance Committee	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board of Directors on discussions at the Performance Committee (Part 1) on 24 April 2025	
Board Assurance Framework Entries	678, 1021, 2829, 2904, 2985, 3009, 3074, 3223, 3433, 3536, 3649	
Regulatory Requirement	Well Led/Code of Governance:	
Equality Considerations	None believed to apply	
Key Risks	To have clear and effective processes for assurance of Committee risks	
For:	Information	

1. Significant issues of interest to the Board

Finance. We ended the year positively with a small surplus and with activity finally meeting the national target of 108% of pre-Covid levels, although the imposition of the elective income cap prevented us from reaping the full financial benefit.

CIP was achieved for 24/25 and discussion focused on the pipeline for 25/26. By the beginning of the financial year, we have historically had a pipeline of plans totalling 100% of our CIP target. At the same point this year, we have a significant pipeline shortfall of £2.3m. There are a range of projects identified (including reductions in agency spend, especially in STA) to fill the gap, but these still require verification/risk assessment. While risk is therefore much higher this year given the current shortfall, we are nevertheless assured that there are robust processes in place to achieve the target.

Assurance: Adequate.

CT Backlog. The Committee received a verbal update on the longer-term outsourcing plans designed to deliver a sustainable solution, which is around 5-6 months' away. In the meantime, the LC insourcing contract has expired and, as a result of operational failings, no alternative stop-gap had been put in place to review CT scans. Accordingly, the backlog has been allowed to increase. We understand that an alternative will be put in place within days. The Committee expressed its disappointment with the position and has escalated to Q&R a review of any patient harm. While a lessons learned review would be welcomed by the Committee, it was agreed that this should be delayed until after a sustainable solution has been effectively delivered.

Assurance: Inadequate.

Elective Care Priorities. The Committee discussed the statement in the pack that "The improvement actions developed and currently progressing via the Access Board have a risk-assured trajectory of reaching 67.9% by the end of March 2026." The Committee noted that this was only 5% above current performance, which seemed rather disappointing given the ambition to achieve 82% by March 2027. It was explained that, much like CIP, this reflects a risk-based assessment of the projects currently verified in the pipeline. As the year progresses, it is expected that more projects will be added to the pipeline and verified, increasing expected performance by the year end. The Committee was reassured that the teams are showing no lack of ambition. Given the backlog in RTT performance attributable to

the RSSC sleep service, this is unsurprisingly a principal source of risk (relating to clinical admin and rostering constraints on team availability).

Assurance: Inadequate (Note that this rating reflects the project's early stage, pending development of robust reporting and delivery, and does not cast doubt on the work currently being done across the Trust.)

PIPR has remained amber this month, but with two areas of improvement: Safe moving from red to amber, and Finance moving from amber to green. Effective and Responsive remain red. The Committee discussed the need for more detailed reporting of 52-week breaches to include both time taken to treatment once referred to RPH, and time at which treatment ultimately takes place or is scheduled to take place.

2. Key decisions or actions taken by the Performance Committee

None

3. Matters referred to other committees or individual Executives

Review of patient harm due to recent increase in CT reporting backlog escalated to Q&R.

4. Other items of note

None

5. Recommendation

The Board to note the contents of this report.