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<b>Approving Committee</b>	Performance Committee
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<b>Equality Impact Assessment completed</b>	Yes
<b>This Document Supports:</b> <i>standards and legislation – include exact details of any CQC</i>	NHSI in year and Annual reporting CQC Regulation 17: Good governance
<b>Key Associated Documents:</b>	DN142 Standing Orders DN140 Standing Financial Instructions DN137 Scheme of Delegation TOR002 Quality & Risk Committee Terms of Reference TOR001 Audit Committee Terms of Reference TOR018 Strategic Projects Committee Terms of Reference
<b>Keywords</b>	Performance, Activity, Business Case, Cost Improvement Programme, Investment, Budget, Significant Transactions
<b>Counter Fraud</b> in creating/revising this document, the contributors have considered and minimised any risks which might arise from it of fraud, theft, bribery or other illegal acts, and ensured that the document is robust enough to withstand evidential scrutiny in the event of a	

criminal investigation. Where appropriate, they have sought advice from the Trust's Local Counter Fraud Specialist (LCFS).

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### Key points of this document

- Terms of Reference for the Performance Committee of the Board of Directors.
- These terms of reference will be available on the Trust's intranet.

### Version Control table

Date Ratified	Version Number	Status
02/05/2024	110	Approved

## 1 Constitutional Authority

- 1.1 The Performance Committee is a Committee of the Board of Directors. The Committee has no powers, other than those delegated in these terms of reference.

## 2 Purpose/Objectives

- 2.1 Provide appropriate scrutiny and assurance for the Board on any matters which in the view of the Committee affect the overall business, performance and reputation of the Trust, including:
1. Financial sustainability;
  2. Cost Improvement Programme (CIP);
  3. In-year patient activity and access standard performance: (actual v plan);
  4. Environmental sustainability;
  - 3-5. Cyber security;
  - 4-6. Business cases of over £500k and agreement of profit or revenue or other share of intellectual property with Trust employees where the expected value is over £500k.

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## 3 Delegated Authority

- 3.1 The Performance Committee is authorised by the Board of Directors to investigate any activity within its terms of reference, and to seek any information it requires from staff, who are requested to co-operate with the Committee in the conduct of its inquiries.
- 3.2 The Investment Group reports to this Committee.

## 4 Duties

- 4.1
- In-~~y~~Year performance (financial and service performance, including cyber security): review variances and remedial action plans to support achievement of year-end and recovery plan targets;
  - Review recovery plans for achievement of targets;
  - Monitor financial sustainability and delivery of annual CIP plans;
  - Monitor environmental sustainability plans for achievement of targets;
  - Review performance across key parameters on a ~~an~~ holistic basis.
- 4.2 Capital ~~i~~nvestment:
- Agree capital plan;
  - Monitor in-year performance;
  - Receive reports s from Investment Group.
- 4.3 Planning and ~~s~~Service ~~d~~evelopment:
- Review budget proposals, including identification of key risks, and make ~~recommendation~~recommendations to the Board of Directors;
  - Review of significant transactions as determined by the Executive Team or the Performance Committee (or the Board of Directors if a determination exceeds the Committee's delegated authority).

- Monitor and review the Board Assurance Framework (BAF) and action those areas that fall within the remit of the Committee.

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cm

- 4.4 To receive regular reports on the action being taken to remove or mitigate the principal risks on the Corporate Risk Register that fall within the remit of the Committee.

## **5 Membership/Attendance**

### **5.1 Voting Membership**

The Chair and members of the Performance Committee shall be appointed by the Board of Directors.

- 5.2 The Committee shall be made up of at least six Board Members.  
Chair: A nominated Non-executive Director  
Two further nominated Non-executive Directors (to include an Associate Non-executive Director)  
Chief Executive  
Deputy Chief Executive  
Chief Finance & Commercial Officer  
Chief Operating Officer  
Director of Workforce and OD  
Chief Nurse  
Medical Director

### **5.3 In Attendance**

Other Executive Directors as required  
Deputy Chief Finance Officer  
Associate Director of Corporate Governance  
Two Governors (attending as observers)

All Non-Executive Directors are invited to attend for divisional presentations.

Other members of Trust staff will be invited to attend as business requires.

Deputy or Assistant Directors to be invited with the agreement of the Chair.

Each clinical division will be invited to present to the Committee at least once a year.

### **5.4 Quorum**

The Committee shall be deemed quorate if there is representation of a minimum of 3 members, including two Non-executive Directors and 1 Executive Director.

### **5.5 Membership Attendance Requirements**

The Committee will be required to have a minimum attendance level of 50% from members in a rolling twelve-month period.

Attendance will be recorded during the year and reported in the annual report.

### **5.6 Attendance**

Only members of the Committee have the right to attend Committee meetings; however other staff will be invited, as necessary.

A full set of agenda papers will be sent to all members of the Board and Associate Director of Corporate Governance; this may be by electronic copy.

5.7 Lengths of Term of Committee Chair and Members (excluding posts filled by Royal Papworth Hospital staff)

The Committee will review its membership annually as part of a general ~~review of its~~ review of its terms of reference. It will consider whether there is any need for change in membership and make recommendations to the Board. This review will be reported to the Board of Directors through the Committee's minutes.

**6 Meetings**

- 6.1 In the event of the Chair of the Committee being unable to attend or having a conflict of interest in matters on the agenda, the remaining members should elect a remaining NED as Chair for the meeting.
- 6.2 The Committee shall meet at least ten times per financial year. Additional meetings may be called by the Chair or any two of the other members of the Committee.

**7 Equality Statement**

The Committee will ensure that these terms of reference are applied in a fair and reasonable manner that does not discriminate on such grounds as age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race including nationality and ethnicity, religion or belief, sex, or sexual orientation.

**8 Monitoring/Reporting**

Minutes of Committee meetings should be formally recorded and distributed to Committee Members and Attendees. The Chair will present a written Chair's Report to the Board. Subject to the approval of the Chair, the Minutes will be submitted to the Board of Directors at its next meeting and may be presented by the Committee Chair.

The Chair of the Committee or Executive Lead shall draw to the attention of the Board of Directors any issues that require disclosure to the full Board of Directors or require executive action.

**9 Relationships with Board Committees**

All Board Committees have a shared responsibility to provide assurances to the Board of Directors. As such Board Committees need to work collaboratively, to ensure that all aspects of governance are covered and that the Board receives comprehensive assurances on Royal Papworth Hospital's activities.

## Monitoring Table

What key element(s) need(s) monitoring as per local approved policy/ procedure or guidance?	Who will lead on this aspect of monitoring? Name the lead and what is the role of the multidisciplinary team or others.	What tool will be used to monitor/check/ observe/assess/ inspect/ authenticate that everything is working according to this key element from the approved policy/ procedure?	How often is the need to monitor each element? How often is the need complete a report? How often is the need to share the report?	Who or what committee will the completed report goes to.  How will each report be interrogated to identify the required actions and how thoroughly should this be documented in e.g. meeting minutes.	Which committee, department or lead will undertake subsequent recommendations and action planning for any or all deficiencies and recommendations within reasonable timeframes?	How will system or practice changes be implemented the lessons learned and how will these be shared?
Element to be monitored	Lead	Tool	Frequency	Reporting arrangements	Acting on recommendations and Lead(s)	Change in practice and lessons to be shared
All	Chief Finance & <del>Commercial</del> Officer <del>(CFCO)</del> <u>Chief Operating Officer and</u> Associate Director of Corporate Governance	N/A	Annually	Performance Committee	Performance Committee	Any changes in practice and lessons shall be shared with the relevant internal stakeholders

## Rapid Equality Impact Assessment Tool

When looking at the impact on the equality groups, you must consider the following points in accordance with General Duty of the Equality Act 2010:

In summary, those subject to the Equality Duty must have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation;
- advance equality of opportunity between different groups; and
- foster good relations between different groups

EQUALITY IMPACT ASSESSMENT – WHAT IS THE IMPACT TO DIFFERENT GROUPS IN SOCIETY?		
<p>If you believe there has been No impact or a Positive impact, please choose <b>Yes</b> for Negative impact please choose <b>No</b>. Please provide supporting comments, both on positive and negative impacts. You may be asked to complete a FULL EQUALITY IMPACT ASSESSMENT to understand the impact further.</p>		COMMENTS
<b>Age:</b> Consider and detail across age ranges on old and younger people. This can include safeguarding, consent and child welfare.	Yes	N/A
<b>Disability:</b> Consider and detail on attitudinal, physical and social barriers.	Yes.	N/A
<b>Race:</b> Consider and detail on difference ethnic groups, nationalities, Roma gypsies, Irish travellers, language barriers.	Yes	N/A
<b>Sex:</b> Consider and detail on men and women	Yes	N/A
<b>Gender reassignment:</b> (including transgender) Consider and detail on transgender and transsexual people. This can include issues such as privacy of data and harassment	Yes	N/A
<b>Sexual orientation:</b> Consider and detail on heterosexual people as well as lesbian, gay and bi-sexual people.	Yes	N/A
<b>Religion or belief:</b> Consider and detail on people with different religions, beliefs or no belief.	Yes	N/A
<b>Pregnancy and maternity:</b> Consider and detail on working arrangements, part-time working, and infant caring responsibilities.	Yes	N/A
<b>Marriage and civil partnership status</b>	Yes	N/A
<b>Environment:</b> Consider impact on transport, energy and waste	Yes	N/A
<b>Other identified groups:</b> Consider and detail and include the source of any evidence on different socio-economic groups, area inequality, income, resident status (migrants) and other groups experiencing disadvantage and barriers to access.	Yes	N/A
<b>Were any NEGATIVE impacts identified?</b>	No	
<p>If YES, you will need to complete a full Equality Impact Assessment. Please contact the Equality, Diversity and Inclusion team <a href="mailto:papworth.edi@nhs.net">papworth.edi@nhs.net</a> for the full assessment template.</p>		N/A