Report to:	Board of Directors	Date: 3 February 2022
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 meeting on 27 January 2022	
Board Assurance Framework Entries	678, 841, 1021, 1853, 1854, 2829, 2904, 2985, 3009	
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

BAF. The Committee discussed the review of risk appetite and the extent to which both risk appetite and Target RR were necessary. It was agreed that what is important is how the metrics are used in practice and the need not to over-complicate the analysis.

PIPR remained at amber this month. The Committee noted the challenging context in the month of December, including: high numbers of ECMO/devices patients which, together with transplant patients, accounted for 50% of CCA beds; exceptionally high demand for emergency cardiac services; very high staff sickness absence; and the need to support the vaccination hub. These circumstances naturally had an acute impact on theatre/cath lab utilisation, with the greatest impact felt on cardiac surgery RTT. The Committee discussed the focus on IHUs to deal with the IHU backlog and the treatment of emergency cardiology patients at the expense of elective surgery and acknowledged the need to better understand how such decisions are balanced and taken. The Committee also discussed the consistent high turnover rate (19% this month), and the relevance of "lack of opportunity" to decisions to leave. OM emphasised the role of the Compassionate and Collective Leadership programme and especially improvement in IPR systems in addressing these concerns.

Activity Restoration. The Committee thanked EM for the helpful further narrative and data provided to explain the context for the priority coding charts. The Trust managed largely to maintain outpatient performance notwithstanding the redeployment of outpatient staff to support the vaccination hub. Radiology faced particular staffing challenges and prioritised CT over MRI (despite the extra detail provided by MRI, it is less critical for early diagnosis). The Committee discussed the key concerns relating to cardiothoracic surgery patients while the volume of surgery is limited by critical care capacity, and the delays in treatment suffered by thoracic patients caused by Philips CPAP supply issues

Finance. The financial position in-month remains strong while CIP is on track to meet the year-end target. The increase in risk in BAF from 8 to 12 reflects the risk of not achieving our CIP target in

2022/23 given the significant work that remains to be done and was considered appropriate by the Committee.

Financial planning for 2022-23. TG presented a paper discussing the Trust's financial planning for 2022-23 in light of the Operating guidance released on Christmas Eve 2021. It is clear that significant uncertainty persists, including uncertainty around payment mechanisms and incentives to maximise elective recovery as well as system pressures in light of the large deficit forecast for the ICS. TG explained how RPH may be able to recover from its underlying deficit once Covid block funding is removed. A lot will depend not only on those new funding mechanisms, but also the ability of the Trust to meet and even exceed elective and diagnostic targets (110% and 120% of pre-pandemic levels) and whether it is able to recover activity as effectively as it did during Summer 2021. The Committee thanked TG for his clear paper and agreed on the need to continue to monitor developments closely and be an active voice in discussions at system level.

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

None

5.   Recommendation

The Board to note the contents of this report