

Agenda item 2.a.i

Report to:	Board of Directors	Date: 3 March 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 24 February 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. Although there is continuing financial uncertainty for 2022/23, it was agreed that there is no merit updating the BAF risk until the financial position is clearer. The Committee noted the continued high level of Cyber risk.

PIPR remained at amber this month.

The Committee noted that the main challenge during January was staff absence due to sickness/self-isolation and lack of agency staff for similar reasons, severely reducing activity levels. The Committee was pleased however to hear that staff absence had improved substantially during February and the number of Covid ECMO patients continued to decline.

The Committee discussed the new Meridian productivity programme commissioned for theatres and cath labs, which had identified a 10% capacity uplift opportunity. EM will report their initial diagnosis back to the next meeting. It was agreed that now that Covid and staff absences are declining and CCA bed capacity constraints are easing, it was the right time to look at theatre capacity constraints to make sure the Trust can make the most of the opportunity to recover activity. It was noted that Length of Stay will remain high until clinicians can work through their waiting lists to treat P3 and P4 patients, although there is some optimism that rapid progress could be made. Although RTT had continued to deteriorate during January, there had not been a dramatic fall, while there had been some improvement in cardiology. The cardiac surgery waiting list remained the greatest cause for concern.

The Committee thanked OM for the longer-term turnover data and agreed that it is difficult to discern patterns in light of the upheaval caused by the hospital move and the pandemic. OM agreed to provide an analysis of turnover based on ethnicity. The Committee discussed the actions that could be taken to address HSW and APST turnover in particular.

Finance. The Committee was pleased to see the strong CIP position for 2021-22 (although noted the importance of Corporate divisions also being seen “to do their bit”) and that work on the pipeline for 2022-23 had already started (with, so far, a larger proportion of recurrent savings).

The Committee received assurance that capital spend targets would be met by year-end and that the step-up in spend in M11 and M12 did not present value for money concerns as it involves items that had been long planned by e.g., the Medical Devices Group.

TG agreed to hold a further specific meeting for NEDs on financial planning for 2022-23 so that they could devote the time that the topic deserves.

Cyber risk. The Committee discussed the latest quarterly report, including particular risks around phishing and the number of users with identical passwords. In order for assurance to be enhanced, the Committee asked AR to consider reformulating the report so that it more directly addresses the key risks and mitigations for those risks, and better reflects the ICT team’s annual planning. Assurance was particularly important at this time, given the elevated nature of cyber risk in light of the crisis in Ukraine.

Self-assessment. In view of the multiple sources of assurance received by the Committee (including PIPR, Activity Restoration and Access & Data Quality reports, Finance Report, and Divisional presentations) and the triangulation that was possible as a result, the Committee rated both its assurance and its performance as Strong.

2. Key decisions or actions taken by the Performance Committee

ToR for 2022-23 recommended for approval. Self-assessment rated as Strong.

3. Matters referred to other committees or individual Executives

None (although it was noted that the Trust’s Surgical Site Infection performance would be more appropriately scrutinised by Q&R to avoid duplication)

4. Other items of note

None

5. Recommendation

The Board to note the contents of this report