

**Agenda item 4.i.a**

<b>Report to:</b>	<b>Board of Directors</b>	<b>Date: 5 September 2024</b>
<b>Report from:</b>	<b>Chair of the Performance Committee (C Conquest)</b>	
<b>Principal Objective/ Strategy and Title</b>	<b>GOVERNANCE: To update the Board of Directors on discussions at the Performance Committee on 25 July 2024</b>	
<b>Board Assurance Framework Entries</b>	678, 1021, 2829, 2904, 2985, 3009, 3074, 3223, 3261	
<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**

**Thoracic and Ambulatory Division Presentation on Cancer Services:** We had an excellent presentation from Thoracic Oncology team and senior leadership for the Division.

For background: The thoracic oncology service at Royal Papworth Hospital provides an investigation, diagnostic and treatment service for patients with suspected lung cancer. Currently the multi-disciplinary team investigates around 1,400 patients a year. The emphasis of the thoracic oncology service is on the investigation of suspected thoracic cancers, particularly lung cancer and malignant mesothelioma.

The team was able to outline the work being carried out to improve collaboration between providers to minimise the risk to not be able to deliver the 31 and 62-day cancer pathways, as well as patients being on the pathway for more than 104 days. The Cancer Transformation programme (which is overseen by the Cancer Transformation Board) has begun to make a positive impact by reviewing diagnostics and bundling them into one visit for the patient, looking at the reasons for late referrals and collaborating with the providers. It is also hoped that having a dedicated Cancer Manager will also be effective. The Committee looks forward to hearing of the progress through performance reporting.

**BAF:** The Committee challenged whether the new BAF risk 3536 “Trust’s ability to recover from a digital incident” which had been assessed as a 9 should be higher. This will be reviewed and taken to Board.

As mentioned in the Chair’s report in June, the terms of reference for a new Risk Oversight Committee (ROC) is to be reviewed by the Quality & Risk Committee (Q&R) with assurance of the process to come to Performance Committee via Q&R Chair’s report In September.

**Finance:** As the financial position for Month 3 was favourable with a year to date of £0.5m the focus of the discussion at the Committee was the Capital revised plan to utilise the additional £1m allocation and the risks around the CIP deliveries.

It was noted that over a third of the additional capital had been allocated to minimise the risk on Cyber security which seems sensible given the heightened risks in this area.

There is a concern that the positive start we had on the ratio of recurrent to non-recurrent CIPs is now deteriorating as schemes are refined and that there is still an outstanding balance to be identified of circa £0.5m. The Committee has been assured that work is taking place with the relevant Divisions to bring the plans back into line. The Committee will be monitoring this closely. **Assurance on delivery of CIP total: Substantial**

**PIPR: Remained at red** (noting that Finance moved from Green to Amber as a result of being ahead on the capital plan – think that this needs to be reviewed.).

Industrial Action in July, as expected, had impacted particularly on Effective and Responsive domains.

Under Safe, it was noted that swift action on the CPE outbreak had contained the outbreak with lower positive cases being reported.

**TAVI:** The spotlight on TAVI detailed recovery on access to the service to within 12 weeks although a deadline was not given for this achievement as dependant on the Demand and Capacity review which has not yet commenced. Monitoring of any harm to patients due to unintended consequences as a result of the rapid increase of seeing patents is being conducted to ensure patient safety. **Assurance: limited pending delivery.**

**CT Backlog:** The spotlight indicated that some progress had been made in reducing the waiting list but the Committee requested more substantial evidence with the data and the sustainability of the progress. **Assurance: limited pending delivery.**

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.