

Agenda item 2.a.i

Report to:	Board of Directors	Date:7 February 2019
Report from:	Chair of the Performance Committee	
Principal Objective/ Strategy and Title	GOVERNANCE: To update the Board on discussions at the Performance Committee meeting dated 31 st January 2019	
Board Assurance Framework Entries	678, 746, 833, 835, 836, 837, 838, 839, 840, 841, 843, 847, 849, 850, 852, 865, 866, 868, 869, 872, 873, 874, 875, 877, 882, 884, 1427, 1853,1854	
Regulatory Requirement	NHS Foundation Trust Code of Governance Committee ToR	
Equality Considerations	None believed to apply	
Key Risks	Insufficient information or understanding to provide assurance to the Board	
For:	Information	

1 **PIPR** is **Red** this month with 4 segments **Red**.

- a. We questioned the possibly optimistic Green assessment for the year end position of the much of the **Balance Scorecard**. A number of these forecasts are under review and may change.
- b. On **Caring** we discuss the “hair trigger” nature of our KPI’s giving an overall Red when CQC maintain their outstanding rating for the Trust in this category.
- c. The standout issue for December is in **Effective** and is the very low level of activity - 1535 – against an already seasonally lowered plan of 1963. We asked for a detailed breakdown of the short fall and, in the meeting, Jason was able to confirm that over half the lost activity was in thoracic directorate. Stephen confirmed Mike Davies was already working with the Exec team on root cause analysis -thought to be booking problems – and plans to correct.
- d. The Cath lab utilisation has been depressed by high levels of DNAs. We discussed how surprising it was that patients requiring these profound treatments in some cases choose to not show, we were reminded that these would not all be patient choice.
- e. Under **Responsive**, the news that we will fail the annual target for cancer waits on the new measuring system disappointed the committee. Some comfort was taken in our maintaining good performance under the old measures and that we are doing the right things for our patients; but there was acknowledgement of the unavoidable reputational impact of this reported failure.
- f. The committee congratulated the **RTT recovery team** for delivering consistently ahead of the plan and for the prospect of achieving an overall RTT compliance perhaps even a little earlier than planned.
- g. **People, Management and Culture** is Red driven by an uptick in voluntary turnover. OM reminded us that this will continue to be volatile as we move closer to the move and advised that the provisional January figures were much improved. Unfortunately, we have lost our long held net nurse recruitment position this month.

- h. On **Finance** we remain favourable to plan and although income is down, it is not down as much as activity which indicated the favourable mix of cases is helping us.
- 2 EM presented the Activity Recovery Plans. The actions are being progressed and completed but the activity is falling further behind plan.
 - 3 RC reported a number of wins in the Financial Recovery Plan notably the offer an MFF aligned with that of Addenbrookes. Main focus will be to re-baseline the recovery plan once the operational plan for next year is submitted.
 - 4 AJ and JH took us through papers covering the BAF risks falling under our responsibility and a review of the risk appetite for each. The committee was content that we are dealing with the right risks and that our appetite is set appropriately.
 - 5 A big part of the meeting was a deep dive into the draft Operational plan for next year. We endorse this high-quality document to the Board and recommend it for approval and for the proposed control total to be accepted provisionally. This biggest concern is the surfacing of some errors in the gateway 2 plans. Fixing these errors will consume some of our contingency but will also eliminate some of the unfunded cost pressures emerging in the Trust.
 - 6 The final item was the committee self -assessment. Overall, we rated ourselves **Adequate**, albeit very close to **Strong**. Searching for an area of improvement we settled on obtaining and using more external benchmark data which will help focus our improvement plans and add colour to our scrutiny processes.

Dave Hughes
Chair Performance Committee
31 January 2019