

Document title:	Performance Committee of the Board
	of Directors: Terms of Reference

Document number: TOR007

Staff involved in Development (job titles)	Director of FinanceChief Finance Officer Trust Secretary
Document author/owner:	Chief Executive Officer
Directorate:	Chief Executive's Office
Department:	Chief Executive's Office
Review due:	March 2019 2020

This is a controlled document. Whilst this document may be printed, the electronic version maintained on the Trust's Intranet is the controlled copy. Any printed copies of this document are not controlled. ©Royal Papworth Hospital NHS Foundation Trust. Not to be reproduced without written permission.

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.



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 for the Board on any matters which in the view of the Committee affect the overall business, performance and reputation of the Trust, including for illustrative purposes:
 - 1. Service Cost Improvement Programme (SCIP);
 - 2. Workforce matters;
 - 3. In-year patient activity (actual v plan);
 - 4. Business cases of over £500k.

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-Year Performance (financial and service performance):
 - Review variance and identify remedial action to support achievement of year- end and recovery plan targets;
 - Review recovery plans for achievement of targets;
 - Monitor delivery of annual SIP CIP plans;
 - Review performance on other key parameters.
- 4.2 Capital Investment:
 - Agree capital plan;
 - Monitor in-year performance;
 - Receive report from Investment Group.
- 4.3 Planning and Service Development:
 - Review budget proposals, including identification of key risks, and make recommendation to the Board of Directors;
 - Review of significant transactions.
- 4.4 Monitor and review the Board Assurance Framework (BAF) and action those



areas that fall within the remit of the Committee.

4.5 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:

Voting Membership

- 5.1 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

Chief Executive

Director of Finance Chief Finance Officer

Chief Operating Officer

Director of Workforce and OD

5.3 In Attendance

Other Executive Directors as required

Deputy Director of Finance Chief Finance Officer

Trust Secretary

Other members of Trust staff will be invited to attend as business requires Assistant Directors to be invited with the agreement of the Chair Clinical Directors could be invited to present to the Committee

Quorum

5.4 The Committee shall be deemed quorate if there is representation of a minimum of 3 members, including 4-two Non-executive Directors and 1 Executive Director.

Membership Attendance Requirements

- 5.4 The Committee will be required to have an overall attendance level of 50% from members in a rolling twelve month period.
- 5.5 Attendance will be recorded during the year and reported in the annual report.

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 Trust Secretary; this may be by electronic copy.

TOR007 Performance Committee of the Board of Directors: Terms of Reference Pg.3 of 5 Version 45 Review Due: March 20192020



<u>Lengths of Term of Committee Chair and Members (excluding posts filled by Royal Papworth Hospital staff)</u>

5.9 The Committee will review its membership annually as part of a general review of its terms of reference. This review will be reported to the Board of Directors through the Committee's minutes.

6 **Meetings**:

- In the event of the Chair of the Committee being unable to attend, the remaining members should elect a remaining NED as Chair for the meeting.
- 6.3 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.



Further document information

Approved by Executive Director/local committee	Performance Committee
(required for all documents):	
Approval date (this version):	22 February 2018 31 January 2019
Approved by Board of Directors or Committee of the Board (required for Strategies and Policies only):	Board of Directors
Date:	2 August 2018
This document supports: standards and legislation – include exact details of any CQC & NHSLA standards supported	NHSI in year and Annual reporting
Key related documents:	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
Counter Fraud 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	

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).