

Report to:	Trust Board
Title of report:	Finance Service Improvement and Delivery Committee Assurance Report to Board
Date of meeting:	26 June 2017
Chairperson:	Gill Ponder Non Executive Director
Author:	Jayne Warner Trust Secretary

Purpose	<p>This report summarises the assurances received and key decisions made by the Finance, Service Improvement and Delivery Committee (FSID). The report details the strategic risks considered by the Committee on behalf of the Board and any matters for escalation for the Board’s response. This assurance committee meets monthly and takes scheduled reports from all Trust operational committees according to an established work programme.</p>
Assurances received by the Committee	<p>Assurance in respect of SO 3.3.2 Issue: Contracting discussions Source of Assurance: Further contract meetings have taken place. 2016/17 clinical issues will be subject to an independent audit with result being binding to both parties. SUS/ SLAM issue reduced in value to £800k still seeking to resolve. 2017/18 improved conversations expected to reach agreement in July. Actions requested by the Committee: Committee sought further assurances and escalated to the Board to advise the Board of the possible need to revisit the financial plan if the enforcement notice contains significant new requirements.</p>
	<p>Lack of assurance in respect of SO 5.5.2 Issue: Performance against 18wk RTT within Lincoln Surgical Directorate. Risk of non delivery. Large number of vacancies. Source of Assurance: Deep dive by Committee with attendance from directorate Mitigation in place: Action plans in place and trajectory for improvement. Directorate highlighted the partnership working and improved communications. Actions requested by the Committee: A request for further assurance on theatre efficiency and benchmarking data to demonstrate optimum productivity.</p>
	<p>Lack of assurance in respect of SO 3.3.3 Issue: Fire Safety plans may be compromised by recent national focus on fire safety issues. Risk of shortage of contractors or increasing costs. Mitigation in place: Limited mitigation. Working to agree funding and secure contractors at earliest opportunity. Actions requested by the Committee: Escalation on risk register. Committee to receive continued assurance that on track against actions in</p>

	<p>remedial work plans.</p> <p>Lack of assurance in respect of SO 3.3.1 Issue: Agency reduction plans Mitigation in place: Agency spending being included in financial recovery plan. Quality impact to be considered. Actions requested by the Committee: Further review as part of financial recovery plans.</p>
	<p>Lack of assurance in respect of SO 6.6.1 Issue: Lack of delivery of financial position and financial efficiency plans and lack of plan to recover. Risk of financial special measures Mitigation in place: Trust subject to further increased performance monitoring by regulators. Additional support being brought in to organisation. Actions requested by Committee: Delivery of service line reporting at pace. A single plan and narrative for recovery. List of schemes to the Committee in July RAG rated to allow committee to hold to account.</p> <p>Improved assurance in respect of 5.5.2 Issue: Capacity to manage referrals in 5 specialties Mitigation in place: Further discussions with CCG to avoid closing waiting lists to new referrals working on action plans with CCG to manage demand. Actions requested by committee: assurance that actions are being taken to avoid future recurrence of situation.</p>
<p>Issues where assurance remains outstanding for escalation to the Board</p>	<p>Lack of assurance in relation to: A&E 4 hour wait performance. Committee asked for further consideration by the Board of whether focus should be on achievement of A&E performance.</p> <p>Lack of assurance in relation to: Financial position Committee asked for whole board and senior leadership focus on a clear statement from the Board on needing to bring the Trust to recovery of the £48m control total. NHSI will not accept a position less than this and failure to demonstrate this commitment may result in external intervention and removal of power from the Board.</p>
<p>Committee Review of corporate risk register</p>	<p>Decision made on new corporate risks escalated to Committee.</p> <p>The Committee agreed that risk 3888 environment Pilgrim medicine/stroke should be added to the corporate risk register. Risk score 20.</p> <p>The Committee agreed that risk 3881 A/C Grantham Critical Care should be added to the corporate risk register. Risk score 15. Further action requested by committee in respect of use of doors to create air flow.</p> <p>Decision made on proposed risks for removal from the corporate risk register</p> <p>There were no risks for removal from risk register.</p>

	The Committee agreed to complete a deep dive on two risks 311 health records and 361 water damage which dated to 2007 at its next meeting.
Matters identified which Committee recommend are escalated to SRR/BAF	<p>The Committee recommended that a risk relating to fire safety be added to the register. The Committee were concerned that the recent national focus on fire safety issues may create a risk to the organisation with lack of available contractors to complete planned works and a risk of increasing costs created by this shortage. This would impact on existing plans and timescales for remedial works</p> <p>Concerns were raised about the updates being provided to the SRR/BAF and a further request was made for review by Exec Directors.</p>
Committee position on assurance of strategic risk areas that align to committee	<p>Further assurances had been sought in respect of SO 3.3.1 Failure to deliver change/ transformation SO3.3.3 Failure to maintain premises in line with statutory legal duties SO 3.3.2 Failure to maintain effective partnerships SO 5.5.2 Failure to maintain operational performance</p> <p>The Committee were not assured in respect of SO6 Failure to achieve financial sustainability</p> <p>The Committee agreed to complete a deep dive in to SO 3.3.1 Failure to deliver change/ transformation at the July meeting.</p>
Areas identified to visit in dept walk rounds	Committee Chair would make visit to Lincoln Surgery at end of September to confirm that actions have been successful in delivering improved performance.

Attendance Summary for rolling 12 month period

Voting Members	M	J	J	A	S	O	N	D	J	F	M	A
Gill Ponder Non Exec Director	X	X										
Paul Grassby Non Exec Director	X	A										
Sarah Dunnett Non Exec Director	A	A										
Deputy Chief Executive	X	X										
Director of Finance and Corporate Affairs	X	X										
Chief Operating Officer	X	D										
Director of Estates and Facilities	D	X										
Medical Director	A	X										

X in attendance A apologies given D deputy attended