

Report to:	Trust Board
Title of report:	Finance Service Improvement and Delivery Committee Assurance Report to Board
Date of meeting:	16 January 2018
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>Lack of assurance in respect of SO 6.6.1 Issue: Financial position Source of assurance: The committee received the month 8 financial position. Financial position remained off plan. Actions requested by the Committee: The Committee challenged whether the Trust remained on track against the capital expenditure position and were advised that the Trust was tracking £1m of risk in fire capital. Additional financial trend data and comparisons to the same period last year would be provided in future financial reports. Agreement of the timing of reporting to accommodate new year committee dates needed to be addressed.</p>
	<p>Lack of assurance in respect of SO 6.6.1 Issue: Cash position continued to deteriorate Mitigation The committee received a cash report detailing the actions being taken by the Trust to improve the Trust cash position. The Trust had maximised the loans available. The Trust was talking to partners and managing relationships with creditors. Actions requested by the Committee: The Committee noted the active steps being taken the Board would be asked to agree a re-forecast position at its January meeting.</p>
	<p>Lack of assurance in respect of SO 6.6.1 Issue: Failure to achieve financial recovery plan Mitigation in place: FTG considering further punitive actions to minimise spend within Trust priorities and quality impacts Actions requested by Committee. Committee asked to see further work on 2018/19 planning to ensure that actions taken do not impact on the starting position for new financial year. Paper to go to Trust Board to describe services which were not sustainable. Push for SLR to be brought to the Committee in March.</p>
	Assurance in respect of SO 3.3.2

	<p>Issue: Meeting fire enforcement actions Mitigation in place: Capital programme on hold. Actions: Positive progress continued to be seen with fire enforcement actions. Continued focus to be given to training.</p>
	<p>Assurance in respect of SO 5.5.2 Issue: Delivery of Cancer performance. Mitigation in place: Plans in place to recover trajectory Actions requested by Committee: Committee noted improving position and requested updates on improving clinical engagement with plans.</p>
	<p>Lack of assurance in respect of SO 5.5.2 Issue: Failure to deliver Urgent Care performance. Mitigation in place: Cancelling non urgent elective care. Working with wider health system. Additional actions being supported by A&E Board including 7 day working social care department Actions requested by Committee: Consideration of getting better support and engagement with GPs in community to support A&E actions.</p>
	<p>Assurance in respect of SO Issue: 2021 Strategy Mitigation in place: Draft strategy with TB in May. Reference groups being established. Senior leaders engaged. Actions requested by committee: Assurance on future milestones to allow committee to measure progress.</p>
Issues where assurance remains outstanding for escalation to the Board	<p>Lack of assurance in relation to: Cash Position. Committee not assured that cash position would be resolved. NHSI made aware.</p> <p>Lack of assurance in relation to: Achievement of financial recovery plan agreed with NHSI. Start to consider the 2018/19 planning.</p> <p>Lack of assurance in relation to : Operational Performance. Site status at the time of meeting led to lack of operational attendance at meeting. This meant that outliers was not discussed and clinical directorate presentation was deferred.</p>
Committee Review of corporate risk register	<p>Decision made on new corporate risks escalated to Committee.</p> <p>There were no new risks for consideration by the committee.</p> <p>Decision made on proposed risks for removal from the corporate risk register.</p> <p>There were no proposed risks to close for the committee to consider.</p> <p>The Committee conducted deep dives on estates risks and the risk in relation to health records. The Committee requested assurances to a future meeting that business case for health records digitalisation was progressing and on the scale of capital investment required for the estate as services were reconfigured.</p> <p>The Committee requested a report on key themes from corporate risk register to enable assurance to be sought on read across to strategic risk register.</p>

Matters identified which Committee recommend are escalated to SRR/BAF	Updates made to the SRR/BAF following the deep dives were noted by the Committee. The Committee were assured that the SRR/BAF was reflective of the key risks in respect of the strategic objectives of the organisation.
Committee position on assurance of strategic risk areas that align to committee	Further assurances had been sought in respect of SO 6.6.1 Failure to achieve financial sustainability SO 5.5.2 Failure to maintain operational performance The Committee were not assured in respect of SO6.6.1 Failure to achieve financial sustainability SO 5.5.2 Failure to maintain operational performance
Areas identified to visit in dept walk rounds	No specific areas identified during meeting.

Attendance Summary for rolling 12 month period

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

X in attendance A apologies given D deputy attended