

Report to:	Trust Board
Title of report:	Finance, Performance and Estates Committee Assurance Report to Board
Date of meetings:	18 January 2019 and 24 January 2019
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, Performance and Estates Committee (FPEC). 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.</p> <p>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 2d Issue: Financial position</p> <p>Source of assurance: The Committee received details of the Trust financial position. The Trust were reporting a year to date deficit of £66.3m this was £12.4m worse than the planned position. Income was below plan and expenditure was above plan.</p> <p>Actions requested by the Committee: The Committee noted that the Trust were now reporting on the variance from the newly agreed Financial Recovery Plan, with an outturn deficit of £89.4m. In December, there was a favourable variance of £0.8m against the year to date forecast of £67.1m, but this was mainly due to slippage and one-off benefits. Therefore, the underlying position was in line with the FRP.</p> <p>The Committee were asked to support the escalation of the approval of new borrowing to the Trust Board to the value of £7.761 revenue borrowing and £5.813m capital borrowing for March 2019. The Committee gave its support.</p> <p>Lack of assurance in respect of SO 2d Issue: Capital spend</p> <p>Source of assurance: Financial report showed that the Trust had spent £11.9m less than plan and, therefore, there was a significant risk that the Trust would not spend all the Capital available by the end of 18/19, due mainly to slippage in some of the fire enforcement work. The Committee were advised that a request had been made to defer £6.6m of capital borrowing for fire enforcement work into 2019/20.</p> <p>Actions requested by the Committee: The Committee asked for assurance that despite the slippage the Fire Service were still content that the Trust were making satisfactory progress with the fire enforcement notice actions. This was confirmed.</p>

	<p>The committee also reiterated its request for a plan, showing how the remaining unspent capital would be spent before the end of the year.</p> <p>Lack of assurance in respect of SO 2d Issue: Financial Efficiency Plans</p> <p>Source of assurance: The Committee received the updated Financial Efficiency Plan report. The Trust had delivered £8.7m of efficiencies in the year to date against the original plan of £16.4m to Month 9.</p> <p>The FRP included delivery of £15.1m of efficiency savings in this financial year. Actual savings were £88k higher than the year to date forecast position, but efficiency schemes continued to be reliant on income maximisation, rather than cost reduction.</p> <p>Lack of assurance in respect of SO 2d Issue: CQUIN Achievement</p> <p>Source of Assurance: The committee received a report detailing the risks to the achievement of the 2018/19 CQUIN income. It was noted that the forecast position had deteriorated, however it remained within the assumptions in the financial recovery plan.</p> <p>Actions requested by the committee: The Committee asked that the CQUIN position be reviewed again at its February meeting and asked that the focus continue to be on those schemes where the greatest impact could be achieved in the remaining months of the year.</p> <p>Lack of assurance in respect of SO 2d Issue: Financial Recovery Plan</p> <p>Source of Assurance: The Committee received the FRP. The plan had been amended to take account of the additional funding to support the Pilgrim ED. The plan had been accepted by NHSI.</p> <p>Actions requested by the Committee: The Committee again requested a longer term, high level financial plan and asked when this could be achieved.</p>
	<p>Lack of assurance in respect of SO 2e Issue: H&S Compliance Standards</p> <p>The Committee had convened an extraordinary meeting to allow it to consider a deep dive in to those areas where responsibility for assurance had transferred from the QGC.</p> <p>Actions requested by the Committee: The Committee asked for quarterly updates on the journey which the Trust was taking to achieve British Safety Council and ISO 45001 Accreditation, specific assurance in relation to actions arising from legal cases relating to health and safety and a dashboard of measures for the committee to monitor, including levels of violence to staff, site-based measures and management responsibilities for providing and maintaining safety at work.</p>
	<p>Assurance in respect of SO 2b</p>

	<p>Issue: Information Governance</p> <p>Source of Assurance: The Committee received assurances that the Trust would be substantially compliant with IG Standards by March 2019, but IG training remained a concern. There was an opportunity for success against these standards if 95% of staff completed the IG training.</p> <p>There was also a risk from high levels of subject access requests resulting in delays in responding within required timescales.</p> <p>Actions requested by the Committee: The Committee asked the Executive Team to discuss what more could be done to achieve 95% training completion. The Committee also agreed to alert the Board to the risk associated with delayed responses to subject access requests and referred core training compliance to the Workforce and Transformation Committee.</p>
	<p>Lack of assurance in respect of SO 5.5.2 Issue: Failure to deliver Cancer Standards</p> <p>The Committee were advised that the position for the Trust on the 62 day cancer standard had deteriorated. 80% of the issues were in oncology and urology, so improvement plans were focusing on those areas.</p> <p>Actions requested by Committee: The Committee requested that the improvement plan be brought to the February meeting.</p>
	<p>Lack of assurance in respect of SO 5.5.2 Issue: Failure to deliver Urgent Care performance.</p> <p>The Trust continued to struggle to deliver satisfactory performance in delivering the 4 hour A&E standard, due to attendances, insufficient staffing and high bed occupancy, with the Pilgrim site causing greatest concern. The Committee were advised that risk summit actions would be shared in a paper to the Trust Board, along with an improvement plan and the full capacity protocol.</p>
	<p>Lack of Assurance in respect of SO 5.5.2 Issue: RTT Performance</p> <p>The Committee noted that the incomplete waiting list was below the March 2019 target, so there was confidence that this standard would be achieved.</p> <p>52 week waiters had reduced to 7 and the aim was to achieve zero by the end of March. There was a high level of confidence that there would be no 52 week waiters due to lack of capacity by then, but concerns remained about the potential for 52 week waiters due to data quality. This risk was being mitigated by targeted validation of waiters over 40 weeks.</p>
<p>Issues where assurance remains outstanding for escalation to the Board</p>	<p>The Committee were alerted to the potential contracting risks for 2019/20 and the ongoing work to achieve a readjustment to the creation of system contracts, plans and control totals. Despite the commitment of the parties involved, this remained a risk to which the Board should be</p>

	<p>alert.</p> <p>The Committee were alerted to the fact that the Trust was struggling to address the level of subject access requests being received and this created a risk to compliance with GDPR and IG Governance standards.</p>
Items referred to other Committees for Assurance	<p>Following a discussion around the compliance with core training for IG which was hindering the Trust in achieving the Data Security and Protection Toolkit standards, the Committee asked for the Workforce and OD Committee to seek further assurance that core training continued to be a focus for the organisation.</p>
Committee Review of corporate risk register	<p>Corporate risks were noted.</p>
Matters identified which Committee recommend are escalated to SRR/BAF	<p>The Committee were assured that the SRR/BAF was reflective of the key risks in respect of the strategic objectives of the organisation. Assurances received were noted and updates were made to the BAF control gaps and mitigations.</p>
Committee position on assurance of strategic risk areas that align to committee	<p>Areas without assurance recorded above.</p>
Areas identified to visit in dept walk rounds	<p>None</p>

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

Attendance Summary for rolling 12 month period

X in attendance A apologies given D deputy attended