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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



		Agenda Item	2.3 (iii)
Freedom of Information Status		Open	
Reporting Committee	Performance and Finance Committee		
Author	Liz Stauber, Head of Corporate Governance		
Chaired by	Reena Owen, Independent Member		
Lead Executive Director (s)	Darren Griffiths, Interim Director of Finance		
Date of last meeting	28 July 2020		
Summary of key matters considered by the committee and any related decisions made.			
<p>- Performance Report</p> <p>Members noted that the content of the report was heavily influenced by the health board's response to Covid-19. As the focus of the health board was on its response to Covid-19, the report was not RAG (red, amber, green) rated due to the impact on performance. A draft operational dashboard had been incorporated which aligned performance to the four quadrants of harm identified within the operational plans. Attendances at the emergency departments were starting to increase but not quite to the levels of pre-Covid-19. GP referrals for planned care had started to increase. Extended waits continued for outpatient appointments and treatment due to reduced services. Urgent suspected cancer performance for May 2020 was 91.7% with June 2020 estimated around mid-80%s. Performance in relation to <i>staph.aureus</i> and <i>clostridium difficile</i> infections was becoming challenging. Assurance was provided that there was confidence that the increasing unscheduled care pressures could be managed and that all patients waiting for elective care had received a letter providing contact details for a helpline.</p> <p>- Quarter One Tracker</p> <p>Delivery progress for the quarter one operational plan was discussed and it was noted that the majority of the actions were either completed or on track. In addition, the capital programme had been re-evaluated due to the expenditure needed as part of the response to Covid-19 and some schemes would need to be delayed or scaled down. A further report on capital would be received by the board in September 2020.</p> <p>- Continuing Healthcare Performance Report</p> <p>Some cohorts had been affected by Covid-19 as had the progress to implement the national framework following consultation. All breaches in the cases which were being managed centrally, had now been resolved and the health board currently had 20 live retrospective claims which would be reviewed in July 2020. The judicial review had concluded that health boards would be required to meet increased costs and a national action plan was to be developed. It had been a difficult period for the care home sector, with one deregistering in quarter four, but alternative placements had been identified for residents. The fragility of the service was being escalated to Welsh Government. Two task and finish groups were to be established to gain grip and control and modernise the arrangements, into which the KPMG recommendations would feed, with savings potentially to be made.</p>			

Key risks and issues/matters of concern of which the board needs to be made aware:**- Financial Position**

The original financial plan for 2020-21 was a year-end deficit of £24.4m, predicated on £5.4m investment and £23m savings. Month three was an overspend of £16.3m which was after receipt of £19.9m for field hospital establishment and £6.8m for Covid-19 related staffing costs from Welsh Government. Quarter one had seen inflated workforce costs of £7.3m (offset by the monies from Welsh Government) and the changes needed to be understood to ensure they did not become recurrent. The current year-end forecast was a deficit of £100.68m following receipt of Welsh Government funding with more anticipated in quarter two.

Delegated action by the committee:

The committee approved its terms of reference (attached as appendix one for ratification) and its annual report, subject to minor amendments.

Main sources of information received:

In addition to the above, the committee also noted its work programme and the monthly financial monitoring report submission.

Highlights from sub-groups reporting into this committee:

No reports were received from sub-groups.

Matters referred to other committees

No matters were referred to other committees.

Date of next meeting

22 September 2020



Performance and Finance Committee

Terms of Reference

1. INTRODUCTION

The Swansea Bay University Local Health Board (the health board) standing orders provide that *“The board may and, where directed by the Welsh Government must, appoint committees of the health board either to undertake specific functions on the board’s behalf or to provide advice and assurance to the board in the exercise of its functions. The board’s commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees”*.

In line with standing orders (and the health board’s scheme of delegation), the board shall nominate a committee to be known as the **Performance and Finance Committee**. The detailed terms of reference and operating arrangements set by the board in respect of this committee are set out below.

2. CONSTITUTION AND PURPOSE

The board has resolved to establish a Performance and Finance Committee which will allow appropriate scrutiny and review to a level of detail not possible in board meetings in respect of performance relating to:

- financial planning and monitoring, including delivery of savings programmes;
- activity and productivity including operation efficiency and effectiveness; and

The committee will provide:

- evidence-based and timely advice to the board to assist it in discharging its functions and meeting its responsibilities with regard to agreed elements of financial and non-financial performance management arrangements, identifying risks and opportunities and ensuring these are managed; and
- assurance to the board in relation to the arrangements for developing and improving its financial and non-financial performance management arrangements to ensure the organisational aims and objectives are achieved. In doing this it will seek assurance from executives and others that appropriate actions are in place to improve performance.

It will also ensure that evidence-based and timely interventions are implemented to drive forward improved performance thereby allowing the health board to achieve the requirements and standards determined for NHS Wales and as outlined within the health board’s annual plan.

3. SCOPE AND DUTIES

Role and Responsibilities of the Performance and Finance Committee

The committee will, in respect of its provision of advice to the board, have responsibility to continually scrutinise, measure and challenge the health board’s financial and service performance. It will work with the Chief Executive and executive team to consider the opportunities and risks for implementing change and reallocating resources to support good financial stewardship and performance improvement. In doing so, the committee will also engage with senior clinical leaders

and managers to deliver required change and performance improvement. It will monitor the in-year performance against the financial and performance activity agreed by the board, discussing and agreeing corrective action where necessary. In addition, it will monitor the development of key performance indicators across all parts of the organisation.

The committee will undertake 'deep dives' of specific areas and these will be supported by appropriate benchmarking information to ensure all services are striving to achieve optimum performance.

In respect of its provision of support to the board, the committee will provide advice on aligning service, workforce and financial performance matters into an integrated whole systems approach, as well as scrutinise and monitor the performance of the organisation and individual delivery units in the following areas to ensure the trajectories and plans set out in the annual plan are achieved:

- unscheduled care;
- cancer;
- referral to treatment times (RTT);
- infection control; and
- finance.

To achieve this, the committee's programme of work will be designed to ensure that:

- there is clear, consistent strategic direction, strong leadership and transparent lines of accountability;
- risks are actively identified and robustly managed at all levels of the organisation;
- organisational decisions are based upon valid, accurate, complete and timely data and information.

Items to be placed on the agenda can come from several sources such as those below but are not limited to these:

- the committee's own scrutiny of finance, performance and workforce data within the integrated performance dashboards;
- Chair, Vice Chair and other members of the Board; Executive team;
- Recovery and Sustainability Programme Board;
- Audit Committee;
- Investment and Benefits Group;
- Capital Management Group.

Sub-Committees

The committee may, subject to the approval of the board, establish sub-committees or task and finish groups to carry out on its behalf specific aspects of committee business.

4. AUTHORITY

The committee is authorised by the board to:

- Investigate or have investigated any activity within its terms of reference and in performing these duties, shall have the right, at all reasonable times, to inspect any books, records or documents of the health board. It can seek any information it requires from any employee and all employees are directed to co-operate with any request made by the committee;
- Obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers this necessary, subject to the board's budgetary and other requirements;
- By giving reasonable notice, require the attendance of any officers or employees and auditors of the board at any meeting.

5. MEMBERSHIP

A minimum of seven members, comprising:

- Three independent members;
- Director of Finance;
- Director of Strategy;
- Chief Operating Officer;

The membership of the committee shall be determined by the board, based on the recommendation of the Chair, and subject to any specific requirements or directions made by the Welsh Government.

Members' terms of office will be reviewed annually by the committee and a member may resign or be removed.

The Chairman and Chief Executive will attend meetings at their discretion and the Director of Corporate Governance will routinely attend meetings, ensuring governance support and advice is available to the committee chair.

The committee chair may invite other executive directors or health board officials to attend all or part of a meeting to assist it with its discussions on any particular matter (except when issues relating to their personal remuneration and terms and conditions are being discussed).

6. COMMITTEE MEETINGS

Quorum

At least four members must be present to ensure the quorum of the committee, two of whom must be independent members.

Chair

An independent member shall chair the committee.

Secretariat

The Director of Corporate Governance/Board Secretary will determine the secretarial and support arrangements for the committee.

Frequency of Meetings

Meetings shall be held on a monthly basis.

Committee Meetings

A standard agenda must be used as the basis for discussion at each meeting. Minutes prepared following a meeting shall be circulated to members and retained by the Director of Corporate Governance as formal record of the decision making for a period of seven years.

Withdrawal of individuals in attendance

The committee may ask any member or individual who is normally in attendance but who is not a member to withdraw to facilitate open and frank discussion of any particular matter.

7. RELATIONSHIP AND ACCOUNTABILITIES WITH THE BOARD AND ITS COMMITTEES/GROUPS
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Although the board has delegated authority to the committee for the exercise of certain functions as set out within these terms of reference, it retains overall responsibility and accountability in relation to its role as corporate trustee.

The committee is directly accountable to the board for its performance in exercising the functions set out in these terms of reference. Through its chair and members, it will work closely with the board's other committees and groups to provide advice and assurance to the board.

Also, it shall embed the health board's corporate standards, priorities and requirements, for example equality and human rights, through the conduct of its business.

8. REPORTING AND ASSURANCE ARRANGEMENTS
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The committee chair shall:

- report formally and on a timely basis to the board on the committee's activities, in a manner agreed by the board. This includes verbal updates on activity and written reports, as well as the presentation of an annual report;
- bring to the board's specific attention any significant matter under consideration by the committee;
- ensure appropriate escalation arrangements are in place to alert the health board Chair, Chief Executive or chairs of other committee of any urgent or critical matters that may affect the operation and reputation of the health board;
- act in a structured way to escalate appropriate issues through the following stages:

- **Stage 1** – Discussion, Review and Scrutiny. This is the Committee’s everyday practice. In this stage the Chair of the committee will make known any concerns to the Chief Executive who will ensure that there is clear accountability and delivery by the Executive Team.
- **Stage 2** – Recovery Plan. The Committee requires the responsible Director to set out a plan and a profile to recover the performance and hit the target.
- **Stage 3** – If the Recovery Plan is not delivered to target or the profile is missed, the Committee will require the Director to attend each meeting and account for the management of the issue until it is resolved. At this stage the Chair of the Committee will raise the concerns directly to the Chief Executive.
- **Stage 4** – Continued poor performance will be formally referred to the Chairman and Chief Executive in order that the matter becomes a Board issue.

The Director of Corporate Governance, on behalf of the Board, shall oversee a process of regular and rigorous self assessment and evaluation of the committee’s performance and operation, including that of any sub-committees established.

The committee shall provide a written annual report to the board on its activities, which will also record the results of the committee’s self assessment and evaluation.

9. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS

The requirements for the conduct of business as set out in the health board’s standing orders are equally applicable to the operation of the committee, except in the following areas:

- quorum;
- Distribution of papers
- notice of meetings;
- notifying the public of meetings; and
- admission of the public, the press and other observers.

10. REVIEW

These terms of reference and operating arrangements shall be reviewed at least annually.

Annual review date: April 2020