



# Performance and Finance Committee Annual Report 2017-18



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### 1. Introduction

The Performance and Finance Committee was established in June 2017. Prior to this, the health board had a Performance Committee, which commenced in October 2014, but in March 2016, the board agreed to temporarily suspend it while its role was reviewed. The arrangement was kept under consideration by the Chairman's Advisory Group and at the May 2017 board meeting, it was agreed to re-establish the forum as the Performance and Finance Committee.

The Performance and Finance Committee's principle remit is to scrutinise 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
- workforce metrics.

It also ensures 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.

During 2017-18, the committee met its responsibility by fulfilling its role as outlined in its terms of reference, and through the delivery of its work programme. A summary of key issues discussed was presented to the board following each committee meeting. The annual report summarises these.

### 2. Committee Structure

The membership of the Performance and Finance Committee during 2017-18 comprised:

## **Independent Members**

- Andrew Davies, chairman of ABMU Health Board (committee chair until February 2018):
- Emma Woollett, vice-chair of ABMU Health Board (member from October 2017 and committee chair from March 2018);
- Martin Sollis, independent member;
- Jackie Davies, independent member (from October 2017):
- Maggie Berry, independent member (from March 2018);
- Charles Janczewski, vice-chair of ABMU Health Board (until September 2017);
- Ceri Phillips, Independent Member (until October 2017).

## **Executive Directors**

- Siân Harrop-Griffiths, Director of Strategy;
- Kathryn Jones, Interim Director of Human Resources;
- Lynne Hamilton, Director of Finance (from August 2017);
- Chris White, Interim Chief Operating Officer (from December 2017);
- Tracy Myhill, Chief Executive (from February 2018 until April 2018);
- Alex Howells, Interim Chief Executive (until February 2018);

- Rory Farrelly, Acting Chief Operating Officer/ Director of Nursing and Patient Experience (until December 2017);
- Paul Gilchrist, Acting Director of Finance (for the June 2017 meeting).

Meetings were also attended by the Steve Combe, Director of Corporate Governance (until November 2017) and Pam Wenger, Director of Corporate Governance (from January 2018), as well as assistant directors of finance, Sam Lewis and Val Whiting, and Darren Griffiths, assistant director of strategy.

In addition, Rob Royce, director of recovery and sustainability was part of the committee between September 2017 and January 2018, with Dorothy Edwards, deputy director of recovery and sustainability joining in January 2018.

Committee support in terms of the circulation of the meeting papers and minute taking was undertaken by the corporate governance function to ensure continuity with other board committees. The secretaries to the committee were Wendy Penrhyn-Jones, head of corporate administration and Liz Stauber, committee services manager.

The terms of reference required the committee to meet bi-monthly however at a discussion at its September 2017 meeting, it was agreed to increase the frequency to provide a dedicated focus to critical areas. During 2016-17, the committee met on 11 occasions.

# 3. Reports Received

The committee received a range of reports which have been summarised below according to their categories:

# **Performance**

# Performance Reviews

Reports were received providing an overview of the outputs from the quarterly and end-of-year annual performance reviews held with service delivery units. It was agreed that review dates would be circulated to independent members in order to give them an opportunity to attend future reviews.

# Board Performance Reports

The committee received and considered the integrated performance report prior to it being discussed at the board meetings in public. As part of the committee's development for 2018-19, discussions are ongoing as to agree a format for performance reporting that will allow the committee to scrutinise performance in an effective manner.

## • Targeted Intervention

Updates were provided to the committee following each targeted intervention meeting with Welsh Government.

# • Workforce Metrics

The committee received a performance report outlining progress against workforce metrics on a bi-monthly basis.

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# Continuing Healthcare

A quarterly report was received regarding compliance and performance in relation to continuing healthcare.

# Business Intelligent Unit Update

Updates were provided as to the establishment of a business intelligent unit which included a demonstration of a digital scorecard which encompassed finance, workforce, customer/stakeholder quality and operational performance.

# Review of Impact of Long Waiting Planned Care Patients

An oral update regarding of the impact of long waiting planned care patients was received. The committee heard that the NHS Wales Delivery Unit was due to undertake a review of the quality and safety outcomes for patients waiting for elective procedures for a long period of time.

### Escalation Areas

The committee received, as part of its scrutiny of the targeted intervention areas, regular performance exception reports for unscheduled care, planned care (referral to treatment [RTT]), delayed follow-ups and cancer.

# Medical Agency Cap

Following the introduction of a national cap for medical agency spending, a standing agenda item was introduced to report the health board's compliance and performance against the cap.

# • Performance Trajectories

In March 2018, the committee considered the performance trajectories to be included in the annual plan for 2018-19 and agreed it would receive an update on progress against these at each meeting going forward.

# **Finance**

# Financial Position

A standing agenda item was included to apprise the committee of the monthly financial position.

# Capital Programme

A report was received outlining the capital programme. The committee heard that it was important that the capital programme took into account the health board's priorities while acknowledging that reduced levels of funding would be available in the coming years from the all-Wales fund.

# • Investments and Benefit Group

The committee was advised of the establishment of the Investments and Benefits Group and received updates as appropriate.

## Action Plan to £36m

In the latter stages of the year, a regular report was received by the committee outlining the actions being taken to achieve or better the forecast deficit financial

position of £36m. In March 2018, the committee received the financial plan for 2018-19 to meet the forecast deficit of £25m.

# Recovery and Sustainability

It was agreed that the recovery and sustainability programme would provide regular updates to the committee following each programme board meeting.

# Governance

# • Terms of Reference

The committee discussed its terms of reference at its inaugural meeting in June 2018 and agreed a revised version in August 2018. Following discussions throughout the year, the terms of reference were revised in April 2018 to reflect the change in meeting frequency but also to remove the chairman and chief executive from the membership in order to attend 'at their discretion'. The assistant directors of finance and strategy were then added into the membership.

# 4. Conclusion

This report demonstrates that the committee fulfilled its responsibilities through the reports it had received during the year from various services and sources.