



Committee/Group 'Triple A' Chair's Report

Name of Committee/Group	PERFORMANCE COMMITTEE	Reporting to:	TRUST BOARD
Date of the meeting:	30 APRIL 2019	Parent Committee:	TRUST BOARD
Chair:	DAVID TEALE	Quorate (Y/N)	Y

Agenda Item:	RAG	Key Points	Actions Required	Action Lead	Expected Date for Completion
TCC – Financial Report (including Contingency Fund)		Delay to completion of the new Royal Hospital remains a significant risk. At this stage, no update has been received from the Department of Health on the possibility of additional funding to help mitigate the impact of the delay to CCC.	CCC has withheld the final £2.27m instalment of Haemato-Oncology surplus 'buy out' to the Royal as mitigation for non-recovery of costs incurred to date. The Committee were provided with assurance that there were no legal or contractual implications for CCC and supported this action.	JT	Completed
Performance Committee Risk Register		Concerns were raised regarding the existing processes for risk management, including inappropriate risks contained in the Performance Committee register and a lack of assurance that the right risks are being managed and mitigated appropriately.	Overall risk management processes are being reviewed, including the Board Assurance Framework. A revised approach will be presented to the Audit Committee and Trust Board in July 19. The first Risk Management Committee, chaired by the CEO, took place on 2 May 2019 and once embedded, this will also support key improvements.	LB/AW	17 July 19

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TCC – Financial Report (including Contingency Fund)		The Charity has reduced its target funding from £11.7m to £10.8m.	The possibility of increasing the contingency fund with the additional Provider Sustainability Funding (PSF) is being considered.	JT	31 May 19
Finance Report – Month 12		Capital Programme – the provision for £1.06m for Aria Licences was noted as a new requirement not accounted for within the financial plan.	Formal approval process to be carried out for the £1.06m for Aria Licences. This will be done via email to the Committee for approval.	JT	24 May 19
CQUIN – Clinical Utilisation Review (CUR)		2018/19 target met. However, although targets have been met, delays remain with the external supply of equipment and community and care assessments and allocations. These require resolution for the same target in 2019/20.	Work is in progress to review efficiency of referrals and engagement with external providers.	ZH	TBC
		The categorisation of ‘Home Leave’ for patients also requires review to ensure the correct definition is recorded on the system.	A review of cases will be conducted with a re-launch and education plan for medical staff then provided.	ZH	TBC
Operational Performance Report – Month 12		Following a further review of performance and appropriate governance, the new ‘Performance Review Group’ has been stood down. Monthly Directorate and quarterly Corporate Services performance reviews with the Executive Team will be initiated from May 2019. Issues will be escalated to the Committee as appropriate. Performance of subsidiaries will be presented directly to the Performance Committee.	Governance structure to be amended to reflect change prior to Trust Board on 29 May 2019.	AW	22 May 19
Finance Reporting – Proposals		JT presented future proposals for financial reporting to the Committee and Board. These were well received and the Committee approved, subject to some minor amendments.	New Financial Reporting approach to commence from Month 1, 2019/20.	JT	29 May 19

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Impact Assessment – Sulby Ward Closure Trial		<p>A proposal was presented to continue to operate the ward as a day care facility for a further 12 week period following the initial 8 week trial. This approach was agreed by the Committee based on minimal Risk.</p> <p>Consultation with staff regarding keeping the ward closed overnight going forward will commence, noting that in the new hospital, Sulby Ward will no longer exist. Staff are supportive of this approach.</p> <p>The significant improvements made for patients by the new Patient Flow Team were noted by the Committee. A request was made to understand the impact to staff workload as a result of these improvements and an update will be brought to the next meeting.</p>	<p>Paper will to be presented to the May Trust Board for formal approval of the recommendations.</p> <p>Management of Change process will be initiated.</p> <p>Impact to staff workload as a result of new Patient Flow Team to be provided at the next meeting.</p>	<p>JSp</p> <p>JSh/ZH</p> <p>JSh/JSp</p>	<p>29 May 19</p> <p>17 June 19</p> <p>30 June 19</p>
Report from Performance Review Group		<p><i>Business Intelligence Data</i> – Concern was raised that risks around accuracy of data was only being managed at a Directorate level.</p> <p><i>Clinical Dependency Unit (CDU)</i> –CDU activity is being coded as ‘outpatients’, following a specific direction by Commissioners. This may potentially impact on the overall financial position of Integrated Care as the activity is recorded and allocated to the Chemotherapy Directorate.</p>	<p>Committee agreed that the risks regarding Business Intelligence Data should be raised as a Corporate Risk.</p> <p>A review of activity coding will be undertaken.</p>	<p>JT/SB</p> <p>JT/JSp</p>	<p>31 May 19</p> <p>31 May 19</p>
Terms of Reference		<p>Revised ToR presented to the Committee.</p> <p>The Committee sought clarity around the level and type of information to be considered by the Committee, particularly around performance matters.</p>	<p>ToRs will be updated and circulated to Committee members for approval in advance of Trust Board on 29 May 2019.</p>	<p>AW</p>	<p>22 May 19</p>

	ALERT the Committee on areas of non-compliance or matters that need addressing urgently
	ADVISE the Committee on any on-going monitoring where an update has been provided to the sub-committee and any new developments that will need to be communicated or included in operational delivery
	ASSURE the Committee on any areas of assurance that the Committee/Group has received