

Report to:	Trust Board
Title of report:	Finance Service Improvement and Delivery Committee Assurance Report
	to Board
Date of meeting:	28 November 2017
Chairperson:	Gill Ponder Non Executive Director
Author:	Jayne Warner Trust Secretary

Purpose	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.
Assurances received by the Committee	Lack of assurance in respect of SO 6.6.1 Issue: Financial position Source of assurance: The committee received the month 7 financial position. Significantly off plan. Actions requested by the Committee: Further challenge to directorates on efficiency plans. Moving focus to 2018/19.
	Lack of assurance in respect of SO 6.6.1 Issue: Cash position Mitigation The committee received a cash report detailing the actions being taken by the Trust to improve the Trust cash position. NHSI aware of risks. Actions requested by the Committee: The Committee noted the active steps being taken but asked that the risk to the cash position for January be escalated to Trust Board.
	Lack of assurance in respect of SO 6.6.1 Issue: Production of financial recovery plan agreed with NHSI. Focus on plan and not delivery. Mitigation in place: Monitoring tool for FRP and savings agreed. Income being tracked weekly. Grip and control measures being reviewed. Actions requested by Committee. Committee needed to see plan having effect in month 8 position. Start to consider the 2018/19 planning.
	Lack of assurance in respect of SO 3 Issue: International recruitment Actions: The Committee had requested in response to a request from the Trust Board a paper to demonstrate the return on investment. Report was presented but further work required to bring back in January.
	Assurance in respect of SO 3.3.2 Issue: Meeting fire enforcement actions Mitigation in place: Capital programme on hold. Actions: The Committee received assurances that the fire service had

	There were no proposed risks to close for the committee to consider.						
	Decision made on proposed risks for removal from the corporate risk register.						
	There were three new risks for the committee to consider. The Committee challenged the detail provided for each risk and asked that these were referred back to the risk handler for review and strengthening of mitigating actions.						
Committee Review of corporate risk register	Decision made on new corporate risks escalated to Committee.						
	agreed with NHSI. Focus on plan and not delivery. Committee needed to see plan having effect in month 8 position. Start to consider the 2018/19 planning.						
Board	Lack of assurance in relation to: Production of financial recovery plan						
for escalation to the	support needed.						
Issues where assurance remains outstanding	Lack of assurance in relation to: Cash Position. Committee not assured that cash position would be resolved for January. NHSI made aware						
	staffing. Actions requested by Committee: Further report in 3 months to confirm that actions have been taken and progress on implementation can be seen.						
	Mitigation in place: Committee received deep dive presentation from Pilgrim Medicine and Lincoln Surgical Directorates. Presentations described theatres optimisation plans to improve efficiency. Focus on reduction of cancellations. GP Streaming, discharges and substantive						
	Assurance in respect of SO 5.5.2 Issue: Failure to deliver operational performance.						
	recovery plan and details in January on ambulance handover delays and impact of outliers.						
	other Trusts. Actions requested by Committee: Committee requested trajectory						
	streaming should be seen in January reports. Data now consistent with						
	met. Internal Winter Resilience Forum being established. Weekly escalation with NHSE. Slight improvement in performance. Impact of						
	Issue: Failure to deliver Urgent Care performance. Mitigation in place: Trajectory plan for recovery in place but not being						
	about the continued failure to achieve cancer performance. Lack of assurance in respect of SO 5.5.2						
	Mitigation in place: Daily escalation taking place. Harm reviews in place. Actions requested by Committee: Escalate to Board the concerns raised						
	Lack of assurance in respect of SO 5.5.2 Issue: Failure to deliver Cancer performance.						
	first stage of the notice was due to expire, request had been made for extension.						
	given positive feedback about the progress being made with actions. The						

	The Committee commented that there were still areas requiring review in the Corporate Risk Register and that these needed to be addressed by the risk handlers at the earliest opportunity. It was noted that the capacity in the risk team continued to be an issue. 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.
Matters identified which Committee recommend are escalated to SRR/BAF	Updates made to the SRR/BAF following the deep dive on SO 5.5.2 and SO 4.4.1 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 6.6.1Failure 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		J	J	Α	S	0	N	D	J	F	М	Α
Gill Ponder Non Exec Director		Χ	Χ	Χ	Χ	Χ	Χ					
Paul Grassby Non Exec Director		Α	Α									
Geoff Hayward Non Exec Director			Х	Χ	Α	Χ	Χ					
Chris Gibson Non Exec Director					Х	Χ	Χ					
Deputy Chief Executive		Χ	Х	Χ	Χ	Α	Χ					
Director of Finance and Corporate Affairs		Χ	Х	Χ	Α	Χ	Χ					
Chief Operating Officer	Х	D	Х	Χ	Α	D	D					
Director of Estates and Facilities		Χ	Х	Χ	Χ	Χ	Χ					
Medical Director		Χ	Χ	Χ	Χ	Α	Α					

X in attendance A apologies given D deputy attended