

COMMITTEE ALERT, ADVICE, ASSURANCE REPORT TO BOARD

<b>Committee:</b>	<b>FINANCE, PERFORMANCE &amp; COMMISSIONING COMMITTEE</b>
<b>Meeting Date:</b>	<b>19<sup>th</sup> July 2021</b>
<b>Chair/Report Author:</b>	<b>NIGEL WOOD</b>

**KEY ITEMS DISCUSSED AT THE MEETING**

1. Domination of work load amongst execs heavily influenced by “reactionary” Covid 19 matters.
2. Built on work of committee through good and purposeful, open communication – feeling of trust on committee – very pleasing
3. Need to differentiate between assurance and support – although consideration of timing in greater scheme of things is important
4. Horizon scan – approval of catch up fund – will enable manager to also consider strategic improvements to processes, (Breast cancer, mental health and inpatient procedures)
5. KPI’s – align with CQC (in accordance with DHSC wishes) – produce data once and validate – avoid plethora of reporting – item noted but more meaningful stats (owned by author or care group) by September
6. Talk to ease pressure providing helpful anecdotal evidence and discussion surrounding PPU options.
7. CIP update – accepted
8. Management accounts noted (including improved format)
9. Budget process progressing – need to differentiate between, budget, prediction of outturn and targets.
10. DHSC to be provided with what we consider to be best information
11. Expensive patient procedures – explored tension regarding contingency and providing for liabilities that may not arise – but in need of good citizen solution. Perhaps Healthcare Transformation Partner KPMG may have views? Tammy would report back in September. Approach Treasury with solution. Important to establish rules surrounding any possible application.
12. Consider “Renewable agenda” and develop thoughts using information in public domain – seek ways in which guidance and access to funding could be developed. Discussion of DOI being our service provider re Vehicles and Buildings. Seek opportunity to demonstrate commitment

**TO ALERT** (Alert the Board to areas of non-compliance or urgent matters or new risks or issues that need to be escalated to DHSC or other IoM departments)

Issue	Committee concern	Action required	Timescale

**ASSURE** (Detail here any areas of assurance that the Committee has received)

Issue	Assurance Received	Action	Timescale
CIP Progress	CIP Update Plan	Accepted – monthly updates required	Ongoing
Financial Performance	Management Accounts	Accepted	Ongoing
Budget Setting 22/23	Budget Update and Draft Budget Prepared	Accepted and to be reported to Board for Assurance	July
Risk Register	Report received detailing movements – limited assurance provided	Accepted but further development and review required	September
Expensive patient procedures	Report on modelling received	Reporting to be further developed to propose funding solution	September
IPR	Noted improvements in quality of data but acknowledged further work to be done – limited assurance received	Reporting to be further developed to be in line with CQC structure	September

<b>The following existing risks were identified during the meeting:</b> (if none please state “none”)	<b>Risk:</b>	<b>CRR/BAF N°:</b>	<b>Risk Score: L x C =</b>
	<b>Risk:</b>	<b>CRR/BAF N°:</b>	<b>Risk Score: L x C =</b>
	<b>Risk:</b>	<b>CRR/BAF N°:</b>	<b>Risk Score: L x C =</b>