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Bwrdd Iechyd Prifysgol  
Aneurin Bevan  
University Health Board

# **Finance & Performance Committee**

## **Annual Report for 2023-24**

### **February 2024**

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## **Chair's Foreword**

I am pleased to present the Finance and Performance Committee's (the Committee's) Annual Report for the year ended 31 March 2024.

In this report we provide an overview of the work of the Committee in the ongoing development of an improving performance culture and acknowledge the significant financial challenges faced by the Health Board in 2023/24, which will continue into 2024/25.

I would like to express my personal appreciation to all who contributed to the finance and performance agenda and the development of the Finance and Performance Committee.

Diolch yn Fawr / Thank you.

Richard Clark  
Chair  
Finance and Performance Committee

## 1. Introduction

- 1.1 Section 1 of the Standing Orders of the Aneurin Bevan University Health Board (referred to throughout this document as 'ABUHB, the Board' or the 'Health Board') provides 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 its business extends equally to the work carried out on its behalf by committees".*

- 1.2 The Term of Reference of the Finance and Performance Committee (referred to throughout this document as 'F&PC' or the 'Committee') were approved by the Board in March 2022 (see **Appendix 1**). These were not changed during the reporting year.
- 1.3 The purpose of the **Finance & Performance Committee** is to advise and assure the Board and the Accountable Officer of improvement in all aspects of the health board's business, in line with the Board's Performance Management Framework. The Committee will also seek assurance that arrangements for financial management, and financial performance are sufficient, effective, and robust.
- 1.4 This report describes how the F&PC discharged its role and responsibilities during the period 1 April 2023 to 31 March 2024.

## 2. 2023-24 Work Programme

- 2.1 ABUHB Standing Orders require the Board Secretary to produce an Annual Plan of Board business. This should incorporate formal Board meetings, regular Board Development sessions and, as appropriate, planned activities of the Board's Committees and Advisory Groups. The Work Programme adopted for F&PC in 2023-24 is attached to this report (see **Appendix 2**).
- 2.2 A Work Programme is designed to align to its terms of reference and the requirement for it to seek information to be able to give advice or gain assurance for itself and on behalf of the Board. The Work Programme is, however, a framework rather than a prescriptive agenda. This gives F&PC flexibility to identify changing priorities or any need for further assurance or information.

The F&PC focuses on both assurance in respect of organisational performance management and financial management and performance. The monitoring of this is set out as follows:

## **Assurance in respect of financial management and performance:**

- **Financial Recovery 2023-24**

The Committee routinely monitors the financial position of the Health Board through the provision of quarterly financial performance reports and specific focussed reports on efficiency and savings opportunities and delivery. The ABUHB IMTP submitted by the Board to Welsh Government (March 2023) included a financial plan for 2023/24 which presented a deficit of £112m and an ambitious savings requirement of £51m.

Financial risks and opportunities are presented quarterly to each committee meeting. During the year the Board, Executives, budget holders and staff have engaged in a rigorous and thorough review of the opportunities to improve the financial forecast for 2023/24.

Following the mid-year review a forecast deficit of £145m was reported, this was reflective of previously reported risks coming to fruition. The organisation undertook a significant exercise to consider further mitigations to improve the financial position including the establishment of a Quality Impact Assessment forum to assess patient implications, the focus of improvement has been to deliver better outcomes for patients while reducing costs in line with the core principles of Value-Based healthcare.

The Board received additional in year funding from Welsh Government of £88m which allowed a revised forecast to be reported of £57m. The funding is subject to improving the financial forecast towards a deficit control total of £13m.

The Board considered achievement of a £13m deficit was unlikely without significant service impact and patient harm risk, however, the Health Board continues to review and re-examine all savings options and further opportunities.

The CEO wrote an accountability letter to the Director General for NHS Wales on 16th October 2023 outlining the likely forecast position of £57m and confirming a continued focus to mitigate this further and develop a long-term plan for financial sustainability.

The Committee noted that the Executive Team had established the Value and Sustainability Board in September 2023, replacing the Efficiency Board, as part of the Health Board's enhanced financial recovery arrangements. The key focus of this Board is to identify opportunities to mitigate the financial deficit and challenge and support delivery. Thematic groups have been established to facilitate cross division working and align with Welsh Government thematic work.

Thematic areas include:

Workforce, Non-Pay, Prevention, CHC, Medicines Management, Digital & Service Redesign.

Focussed reports have been provided to the Committee periodically across the range of themes.

Benchmarking is a key tool to identify opportunities and the committee receives comparative reports on a regular basis, including a whole system review captured through the ABUHB efficiency opportunities compendium. Analysis of the national benchmarking publications highlighted significant efficiency opportunities in several key service areas, with a calculated worth/benefit totalling £17m. Considerable opportunities for efficiency improvements were identified to address deterioration in performance, in terms of reduction in bed days, improving outpatient services, reduction in both GP referrals and cancelled operations and theatre productivity.

The Committee has received the report for Value Based Healthcare in ABUHB, presenting the key service areas and patient groups benefitting from the use of patient related outcome measures.

Throughout the year, quarterly updates on Efficiency Opportunities were received, providing details of efficiency opportunities identified through:

- Medicines management efficiency opportunities were progressed through the Medicines Management Programme Board.
- Estates rationalisation efficiency opportunities were identified through the Capital and estates governance structure.
- The Welsh Government Utilisation Group,
- through national costing return exercises and,
- other proposals for identification of possible savings.

The Committee noted that data from Getting it Right First Time (GIRFT) reports were used to support actions to improve cost comparisons and service benchmarking. GIRFT reviews on specific specialities were presented throughout the year, identifying key performance improvements. Updates to the Committee included the Health Boards response to the data informing best practice in GIRFT Programme National Speciality Report on Ear, Nose and Throat Surgery 2019, the Health Board commissioned GIRFT assessment of its Stroke services in 2022.

The efficient use of capital has also been considered by the Committee, including opportunities to leverage leased estates opportunities and support revenue cost savings.

Improved governance training and user tools have been developed and shared with the committee including on-line budget holder training pack and Governance Operational Control self-assessment checklists. This has demonstrated an improving trend.

The revised forecast for 2023/24 is presenting an achievement of a £49m deficit.

### **Assurance in respect of organisational performance and management:**

Quarterly updates on organisational performance were received through the Performance Overview reports, with exception reporting in identified areas. The Committee was informed of the improvements made throughout 2023/24, including the maintenance of childhood immunisation rates, an increase in Primary Care contracts, improvements in some areas of urgent care performance, and the reduction in the number of patients waiting over 52 weeks for treatment. The challenges around organisational performance were noted. These included the sustained operational pressures throughout 2023/24, challenges within the delivery of mental health interventions, sustainability of Primary Care access and increased pressure in urgent and emergency care.

During the year, the following exception reports were presented for assurance: -

- An update on overall performance against Ministerial Priorities for Planned Care was presented to the Committee in June 2023. This update highlighted that the Health Board did not achieve the Ministerial priorities by the June 2023 target. However, an update was provided to the Committee in September 2023, assuring members that a plan had been submitted to achieve all targets by the end of September 2024.
- The Stroke Improvement Plan, including progress against recommendations from the Getting It Right First Time (GIRFT) review in 2022 was presented, providing an overview of the ABUHB Stroke Improvement Plan. Progress and focus on GIRFT recommendations were presented, noting the actions that have been taken to implement specific recommendations have shown improvements in many key performance indicators that are indicative of good Stroke care across the pathway.
- An update on the Radiology Informatics Systems Procurement (RISP) Programme was provided, outlining the benefits of changing

systems and the financial implications of the overlap of systems resulting in a dual cost for the Health Board.

- An update on IT systems outlined the shortfall for funded and part funded digital schemes, and the associated risk with delays in national digital programmes. The Committee was advised that a Digital, Data and Technology Group would be set up and would provide quarterly assurance reports on progress, risks, and issues.
- A report on the Quality of Coding was presented, outlining the coding targets aligned to the Integrated medium-term plan (IMTP) and the recommendations of the *Quality of Coding* report. The Committee noted that to achieve the national clinical coding compliance targets, the service had maximised opportunities to code electronically, however, challenges were noted due to the significant backlog of case notes awaiting scanning. The Committee received a proposed structure for delivery for the improvement of coding services was presented, to enable the clinical coding services deliver a more modern and flexible service for the Health Board.
- A report on the Outpatient Transformation Programme was presented, describing a number of transformational schemes implemented, their impact, along with the programme plan for 2023/24. The programme of work was linked to the Health Boards Planned Care Recovery Programme. The Committee was assured that See on Symptom (SOS) and Patient Initiated Follow Ups (PIFU) approaches were introduced to assist with reducing the number of people on the follow-up waiting lists and working towards more sustainable ways of managing patients care. The Committee noted that Health Board had reduced the number of Did Not Attends (DNAs) from 6.9% in 2022/23 to 5.8% for 2023/24, improving towards achieving the WG target of 5% (as at June 2023). A Clinically Led Speciality Outpatient Guide (GIRFT) and subsequent action plan was shared with Divisions and noted that progress against the agreed recommendations continues to be monitored through the Outpatient Steering Group.
- Following an Internal Audit report on Robotic Process Automation (RPA) undertaken in 2022, the Committee received a detailed report on costing and benefits realisation detail on cost and benefit of the Robotics Process Automation (RPA) before the expansion of RPA provision could be considered. The Committee also noted that this matter had been submitted to the Executive Committee for additional resource in March 2023.

- An update on the Health Board's Discharge Programme and Delays, including an update on the progress and impact of the Integrated Discharge Hub, as part of the Six Goals Programme structure was presented. This highlighted the delays outlined, programme governance, work undertaken to improve discharge by the Patient Safety Team and an update of goals 5 and 6 Discharge Improvement, optimising patient flow framework. The Committee also noted the wider system impact and the plans to mitigate risks.

### **3. F&P Committee Meetings and Membership**

- 3.1 During 2023-24, the F&PC met four times via Microsoft Teams- June 2023, September 2023, December 2023, and March 2024. Details of the Members and lead Executive Directors who attended these meetings is provided at **Appendix 3**.
- 3.2 The Committee comprised the following Independent Members:
- Richard Clark (Chair)
  - Iwan Jones (Vice Chair)
  - Dafydd Vaughan
  - Shelley Bosson
- 3.3 In accordance with the Public Bodies (Admissions to Meetings) Act 1960 the organisation is required to meet in public. Following the pandemic, the Committee has continued during the current year to meet virtually, and this has therefore meant that the Health Board has not complied with its Standing Orders in this regard, and this will be a key consideration as part of the Improving Board Business action plan.

To ensure business was conducted in as open and transparent manner as possible during this time the meeting agenda packs have been published to the Health Board's [website](#) in advance of meetings.

### **4. F&PC Reporting Arrangements**

- 4.1 Following each meeting, the F&PC submits an Assurance Report to the following Board meeting, outlining topics discussed, areas of concern and areas of risk. All Board papers can be accessed via the following [link](#)

### **5. Self-assessment and Evaluation**

5.1 The Board has undertaken an overall assessment of its effectiveness during 2023/24 using the NHS England and NHS Improvement (NHSE and NHSI) Well-led Framework for Leadership and Governance Developmental Reviews.

The Well-led Framework supports boards to maintain and develop the effectiveness of their leadership and governance arrangements and has a strong focus on integrated governance and leadership across quality, finance, and operations as well as an emphasis on Organisational culture, improvement and system working.

The outcome of the current years self-assessment that was reported to the Committee on 14<sup>th</sup> March 2024 confirms that, the results of the individual self-assessment, combined with the analysis of the three completed self-assessments determined that the Committee is effective and meeting the standards.

Rating	Definition	Evidence
2	Meeting standards	The Finance and Performance Committee is performing to the required standard in this area. There may be room for improvement, but the Finance and Performance Committee can be seen to be discharging its responsibilities effectively.

In addition, all of the respondents confirmed that the Committee was either meeting or exceeding the standard for the effectiveness of this Committee.

Then main areas for improvement identified as part of the self-assessment are shown below:

Specific Actions to deliver improvements in the Committee's effectiveness			
Section	Area of Focus requiring attention	How & by When	Action Holder

<p><b>Section 1</b>  <b>Committee Processes: Composition, Establishment, and Ways of Working</b></p>	<ul style="list-style-type: none"> <li>• Report template to be reviewed and training on report writing to be delivered.</li> <li>• Inclusion of reflection section at the end of each Committee agenda.</li> <li>• Consideration of required Executive attendees.</li> <li>• Consider increasing number of Independent Members on the Committee</li> <li>• Consider frequency of meetings and or briefings specific for this committee to enable greater scrutiny.</li> </ul>	<p>All actions to inform the development of an overarching Board Business Improvement Plan – March 2024 for Board approval.</p>	<p>Director of Corporate Governance with Head of Board Business</p>
<p><b>Section 2</b>  <b>Financial Management and Financial Performance</b></p>	<ul style="list-style-type: none"> <li>• Explore ways that future updates include wider scrutiny opportunities of Capital budgets.</li> </ul>	<p>To be strengthened within Committee Workplan 2024/25 – April 2024</p>	<p>Head of Board Business with the Director of Strategy, Planning and Partnerships</p>

These findings will be used to inform a comprehensive annual assessment of the Board’s effectiveness. An overarching Board Business Improvement Plan will be developed, informed by the assessment of the Board and its Committees and other feedback such as Structured Assessment, for delivery in 2024/25. The effectiveness of the Board’s Business function is reported through the Annual Governance Statement, enabling a focus on the work undertaken with the Board’s Committees, interconnectedness of the committees and escalation to the Board, as well as the culture between the Health Board and its auditors, regulators, and partners.

## 6. Key Areas of focus in 2024-25

- 6.1 To maintain focus on financial planning and performance for 2024/25, organisational performance, with attention to risk-based exception reporting. The forward workplan has been updated to include a:
- Achieving Ministerial priorities
  - standing item on Strategic Risk and Assurance,
  - Capital budgets and the inclusion of benefits realisation.

## **7. Conclusion**

- 7.1 This report provides a summary of the work undertaken by the F&PC during 2023-24 and demonstrates that the Committee has complied with its Terms of Reference as approved in March 2022.



# **Finance and Performance Committee**

## **Terms of Reference – 2022/23**

Version: Approved  
Date: March 2022

<b>Document Title:</b>	Finance and Performance Committee Terms of Reference – 2022/23
<b>Date of Document:</b>	March 2022
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## 1. INTRODUCTION

- 1.2 Section 2 of the Standing Orders of the Aneurin Bevan University Health Board (referred to throughout this document as 'ABUHB, the Board' or the 'Health Board') provides 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 its business extends equally to the work carried out on its behalf by committees".*

- 1.3 In-line with Standing Orders and the Board's Scheme of Delegation and Reservation of Powers, the Health Board has established a committee to be known as the **Finance and Performance Committee** (referred to throughout this document as 'the Committee'). The Terms of Reference and operating arrangements set by the Board in respect of this committee are set out below.
- 1.3 The scope of the Committee extends to the full range of ABUHB responsibilities. This encompasses the delivery and performance management of all directly provided and commissioned services.

## 2. PURPOSE

- 2.1 The purpose of the Finance & Performance Committee will be to provide advice and assurance to the Board on the achievement of the Board's aims and objectives as set out in its Integrated Medium-Term Plan, in accordance with the standards of good governance determined for the NHS in Wales. In doing so, the Committee will seek assurance that there is ongoing development of an improving performance culture which continuously strives for excellence and focuses on improvement in all aspects of the health board's business, in line with the Board's Performance Management Framework. The Committee will seek assurance that arrangements for financial management and financial performance are sufficient, effective and robust.

### 2.2 **ADVICE**

The Committee will provide accurate, evidence based (where possible) and timely advice to the Board and its committees in respect of the ongoing development of an improving performance culture which continuously strives for excellence and focuses on improvement in all aspects of the health board's business, in line with the Board's Performance Management Framework.

### 2.3 **ASSURANCE**

In respect of the achievement of the Boards' strategic aims, objectives and priorities, the Committee will seek assurances:

- a. on timely and appropriate access to health care services to achieve the best health outcomes within agreed targets, for directly provided and commissioned services.
- b. that services are improving efficiency and productivity, and financial plans are being delivered;
- c. risks are suitably identified, mitigated and residual risks controlled, and corrective actions are taken as required to sustain or improve performance.

## **3. DELEGATED POWERS AND AUTHORITY**

3.1 With regard to specific powers delegated to it by the Board, the Committee will play a key role in monitoring the achievement of the Board's strategic aims, objectives and priorities and will:

- A. Seek assurance that arrangements for **financial management** and **financial performance** are sufficient, effective and robust, including:
  - the allocation of revenue budgets, based on allocation of funding and other forecast income;
  - the monitoring of financial performance against revenue budgets and statutory financial duties;
  - the monitoring of performance against capital budgets;
  - the monitoring of progress against savings plans, cost improvement programmes and implementation of the efficiency framework;
  - the monitoring of budget expenditure variance and the corrective actions being taken to improve performance;
  - the monitoring of activity and financial information for external contracts to ensure performance within specified contract terms, conditions and quality thresholds;
  - the monitoring of arrangements to ensure efficiency, productivity and value for money, including delivery of the Health Board's Efficiency Framework; and
  - the monitoring of delivery against the agreed Discretionary Capital Programme

B. Seek assurance that arrangements for the **performance management** and **accountability** of **directly provided** and **commissioned services** are sufficient, effective and robust, including:

- the implementation of the Board's Performance Management Framework, enabling appropriate action to be taken when performance against set targets deteriorates, and support and promote continuous improvement in service delivery;
- the monitoring of performance information against the Board's Priorities and Objectives and associated outcomes;
- the monitoring of performance information against National Outcome Frameworks, including the NHS Wales Outcomes Framework, the Public Health Outcomes Framework and the Social Services Outcomes Framework, developed in-line with the Wellbeing of Future Generations Act and the Social Services Wellbeing Act;
- the monitoring of performance information across directly provided services including scheduled care, urgent and emergency care, medicine, family and therapies, primary, community care and mental health services;
- the monitoring of performance information across commissioned services including Primary Care Contractors, complex care, specialist mental health and CAMHS services, WHSCC, EASC and NHS Wales Shared Services Partnership;
- the monitoring of poor performance through effective and comprehensive exception reporting, including trajectories for improved performance; and
- the review of performance through comparison to best practice and peers and identifying areas for improvement.

C. Seek assurance that arrangements for **information management** are sufficient, effective and robust, including:

- the monitoring of information related objectives and priorities as set out in the Board's IMTP and Annual Priorities;
- the monitoring of the implementation and application of information related legislation, policies and standards, including GDPR and Freedom of Information;
- the review of arrangements to protect the integrity of data and information to ensure valid, accurate, complete and timely data and information is available for use within the organisation;
- the reporting of data breaches, incidents and complaints, ensuring lessons are learned;
- the recommendations arising from national and local audits and self-assessments, including assessment against the Caldicott Standards; and
- the monitoring of arrangements to support the continued development of business intelligence and capacity.

- D. Seek assurance that arrangements for the **performance management of digital and information management and technology (IM&T) systems** are sufficient, effective and robust, including:
- the monitoring of digital related objectives and priorities as set out in the Board's IMTP and Annual Priorities; and
  - the monitoring of the annual business plan for IM&T.
- E. Seek assurance that arrangements for the **performance management of capital, estates and support services related standards and systems** are sufficient, effective and robust, including:
- the monitoring of capital and estates related objectives and priorities as set out in the Board's IMTP and Annual Priorities;
  - the monitoring of compliance with Health Technical Memorandums;
  - the monitoring of progress in delivery Board-approved capital business cases and programmes of work.
- 3.2 The Committee will consider and recommend to the Board for approval those policies reserved for the Board and delegated to this Committee for review, in-line with the Board's Policy Management Framework and Scheme of Delegation and Reservation of Powers.
- 3.3 The Committee will seek assurances on the management of strategic risks delegated to the Committee by the Board, via the Corporate Risk Register.

### **Authority**

- 3.4 The Committee is authorised by the Board to investigate or have investigated any activity within its terms of reference. In doing so, the Committee shall have the right to inspect any books, records or documents of the Health Board relevant to the Committee's remit and ensuring patient/client and staff confidentiality, as appropriate.

The Committee may seek any relevant information from any:

- employee (and all employees are directed to cooperate with any reasonable request made by the Committee); and
- any other committee, subcommittee or group set up by the Board to assist it in the delivery of its functions.

- 3.5 The Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary (subject to the Board's procurement, budgetary and any other applicable standing requirements).

### **Access**

3.6 The Head of Internal Audit shall have unrestricted and confidential access to the Chair of the Committee.

3.7 The Chair of the Committee shall have reasonable access to Executive Directors and other relevant senior staff.

### **Sub Committees**

3.8 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.

### **Committee Programme of Work**

3.9 Each year the Board will determine the Committee's priorities for its annual programme of work, based on the Board's Assurance Framework and Corporate Risk Register. This approach will ensure that the Committee's focus is directed to the areas of greatest assurance needs. This will therefore mean that these Terms of Reference are provided as a framework for the Committee's annual programme of work and is not an exhaustive list for full coverage. This approach recognises that the Committee's programme of work will be dynamic and flexible to meet the needs of the Board throughout the year.

## **4. MEMBERSHIP**

### **Members**

4.1 Membership will comprise:

Chair	Independent member of the Board
Vice Chair	Independent member of the Board
Members	2 x Independent member of the Board

The Committee may also co-opt additional independent 'external' members from outside the organisation to provide specialist skills, knowledge and expertise.

### **Attendees**

4.2 In attendance: The following Executive Directors of the Board will be regular attendees:

- Director of Finance, Procurement and VBHC
- Director of Planning, Performance, Digital & IT

#### 4.3 By invitation:

The Committee Chair extends an invitation to the ABUHB Chair and Chief Executive to attend committee meetings.

The Committee Chair will extend invitations to attend committee meetings, dependent upon the nature of business, to the following:

- other Executive Directors not listed above;
- other Senior Managers and
- other officials from within or outside the organisation to attend all or part of a meeting to assist it with its discussions on any particular matter.

### **Secretariat**

4.4 The Office of the Director of Corporate Governance will provide secretariat services to the Committee.

### **Member Appointments**

4.5 The membership of the Committee shall be determined by the Board, based on the recommendation of the Chair of ABUHB - taking account of the balance of skills and expertise necessary to deliver the Committee's remit and subject to any specific requirements or directions made by the Welsh Government.

4.6 Members shall be appointed to hold office for a period of one year at a time, up to a maximum of their term of office. During this time a member may resign or be removed by the Board.

4.7 Terms and conditions of appointment, (including any remuneration and reimbursement) in respect of co-opted independent external members are determined by the Board, based upon the recommendation of the Chair of ABUHB.

### **Support to Committee Members**

4.8 The Director of Corporate Governance, on behalf of the Committee Chair, shall:

- arrange the provision of advice and support to committee members on any aspect related to the conduct of their role; and
- ensure the provision of a programme of development for committee members as part of the Board's overall Development Programme.

## **5. COMMITTEE MEETINGS**

### **Quorum**

- 5.1 At least **three** members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair or Vice Chair.
- 5.2 Where members are unable to attend a meeting and there is a likelihood that the Committee will not be quorate, the Chair can invite another independent member of the board to become a temporary member of the Committee.

### **Frequency of Meetings**

- 5.3 The Chair of the Committee shall determine the timing and frequency of meetings, which shall be held no less than **Quarterly**, and in line with the Health Board's annual plan of Board Business.
- 5.4 The Chair of the Committee may call additional meetings if urgent business is required to be taken forward between scheduled meetings.

### **Openness and Transparency**

- 5.5 Section 3.1 of ABUHB Standings Orders confirms the Board's commitment to openness and transparency in the conduct of all its business and extends equally to the work carried out on its behalf by Committees. The Board requires, wherever possible, meetings to be held in public. The Committee will:
  - hold meetings in public, other than where a matter is required to be discussed in private (see point 5.6);
  - issue an annual programme of meetings (including timings and venues) and its annual programme of business;
  - publish agendas and papers on the Health Board's website in advance of meetings;
  - ensure the provision of agendas and minutes in English and Welsh and upon request in accessible formats, such as Braille, large print, and easy read; and
  - through ABUHB's website, promote information on how attendees can notify the Health Board of any access needs sufficiently in advance of a proposed meeting, e.g., interpretation or translation arrangements, in accordance with legislative requirements such as the Equality Act 2010 and Welsh Language Standards 2018.

### **Withdrawal of individuals in attendance**

- 5.6 There may be circumstances where it would not be in the public interest to discuss a matter in public, e.g., business that relates to a confidential matter. In such cases the Chair (advised by the Director of Corporate Governance where appropriate) shall schedule these issues accordingly and require that any observers withdraw from the meeting. In doing so, the Committee shall resolve:

*That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960 (c.67).*

In these circumstances, when the Committee is not meeting in public session it shall operate in private session, formally reporting any decisions taken to the next meeting of the Committee in public session.

## **6. RELATIONSHIP & ACCOUNTABILITIES WITH THE BOARD AND ITS COMMITTEES/GROUPS**

- 6.1 Although the Board has delegated authority to the Committee for the exercise of certain functions (as set out within these terms of reference), the Board retains overall responsibility and accountability for all matters relating to performance and resources.

The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.

- 6.2 The Committee will work closely with the Board's other committees, joint and sub committees and groups to provide advice and assurance to the Board through the:
- joint planning and co-ordination of Board and Committee business;
  - sharing of appropriate information; and
  - applicable escalation of concerns.

in doing so, this contributes to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance framework.

- 6.3 The Committee shall embed the Health Board's agreed Values and Behaviours, as set out in the Board's Values and Behaviours Framework, through the conduct of its business.

## **7. REPORTING AND ASSURANCE ARRANGEMENTS**

- 7.1 The Committee Chair shall:
- report formally, regularly and on a timely basis to the Board on the Committee's activities. This includes verbal updates on activity, and the submission of Committee minutes and written reports;

- bring to the Board’s specific attention any significant matters under consideration by the Committee;
  - ensure appropriate escalation arrangements are in place to alert the Chair of ABUHB, Chief Executive or Chairs of other relevant committees/groups of any urgent/critical matters that may affect the operation and/or reputation of the Health Board.
- 7.2 The Board may also require the Committee Chair to report upon the Committee’s activities at public meetings, e.g., Annual General Meeting, or to community partners and other stakeholders, where this is considered appropriate, e.g., where the committee’s assurance role relates to a joint or shared responsibility.
- 7.3 The Director of Corporate Governance shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee’s performance and operation including that of further committees established.
- 7.4 The Committee shall provide a written annual report to the Board on its activities. The report will also record the results of the Committee’s self-assessment and evaluation.

## **8. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS**

- 8.1 The requirements for the conduct of business as set out in ABUHB’s Standing Orders are equally applicable to the operation of the Committee, except in the following areas:
- Quorum
  - Issue of Committee papers

## **9. CHAIR’S ACTION ON URGENT MATTERS**

- 9.1 There may, occasionally, be circumstances where decisions which would normally be made by the Committee need to be taken between scheduled meetings, and it is not practicable to call a meeting of the Committee. In these circumstances, the Chair of the Committee, supported by the Director of Corporate Governance as appropriate, may deal with the matter on behalf of the Committee - after first consulting with at least two other Independent Members of the Committee. The Director of Corporate Governance must ensure that any such action is formally recorded and reported to the next meeting of the Committee for consideration and ratification.

9.2 Chair's action may not be taken where the Chair has a personal or business interest in the urgent matter requiring a decision.

## **10. REVIEW**

10.1 These Terms of Reference shall be reviewed annually by the Committee. The Committee Chair will report any changes to the Board for ratification.

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## Appendix Two

Matter to be Considered by Committee	Frequency	Responsible Lead	Scheduled Committee Dates 2023/24						
			21 June 2023	7 Sept 2023	21 Dec 2023	14 Mar 2024			
<b>Preliminary Matters</b>									
Attendance and Apologies	Standing Item	Chair	✓	✓	✓	✓			
Declarations of Interest		All Members	✓	✓	✓	✓			
Minutes of the Previous Meeting		Chair	✓	✓	✓	✓			
Action Log and Matters Arising		Chair	✓	✓	✓	✓			
<b>Committee Requirements as set out in Standing Orders</b>									
Development of Committee Annual Programme of Business 2023/24	Annually (date tbc)	Chair & Director of CG							
Review of Committee Programme of Business	Standing Item	Chair			✓	✓			
Committee Strategic Risk Report	Standing Item	Director of CG			✓	✓			
Annual Review of Committee Terms of Reference 2023/24	Annually	Chair & Director of CG							
Annual Review of Committee Effectiveness 2023/24	Annually	Chair & Director of CG							
Committee Annual Report 2023/24	Annually	Chair & Director of CG	✓						
<b>Assurance in Respect of Organisational Performance Management</b>									
Performance Overview Report with Exception Reporting	Standing Item	Director of Strategy, Planning and Partnerships	✓	✓	✓	✓			
Outpatient Transformation Update	Annually	Chief Operating Officer	✓						

Matter to be Considered by Committee	Frequency	Responsible Lead	Scheduled Committee Dates 2023/24						
			21 June 2023	7 Sept 2023	21 Dec 2023	14 Mar 2024			
Performance against Ministerial Priorities for Planned Care	Annually	Director of Strategy, Planning and Partnerships		✓					
Digital and information management and technology (IM&T) systems	Annually	Director of Digital			✓				
Capital and estates related objectives and priorities as set out in the Board's IMTP	Annually	Director of Strategy, Planning and Partnerships				✓			
Compliance with Health Technical Memorandums	Annually	Director of Strategy, Planning and Partnerships				✓			
Capital Business Cases and programmes of work	Annually	Director of Strategy, Planning and Partnerships				✓			
Commissioned Services	Annually	Director of Strategy, Planning and Partnerships				✓			
Performance Management and Accountability Framework Update	Standing Item	Director of Strategy, Planning and Partnerships			✓	✓			
<b>Assurance in Respect of Financial Management and Performance</b>									
Monthly Finance Report and Monitoring Returns	Standing Item	Director of Finance, Procurement and Value	✓	✓	✓	✓			
Efficiency Opportunities	Standing Item	Director of Finance, Procurement and Value	✓	✓	✓	✓			

Matter to be Considered by Committee	Frequency	Responsible Lead	Scheduled Committee Dates 2023/24						
			21 June 2023	7 Sept 2023	21 Dec 2023	14 Mar 2024			
Value Based Healthcare Report 2022/23	Annually	Director of Finance, Procurement and Value	✓						
Financial Outlook for 2024/25, including Revenue Budget Allocation letter 2024/25	Annually	Director of Finance, Procurement and Value							
Review of Savings and Action Plans	Annually	Director of Finance, Procurement and Value		✓					
Benefits Realisation with exception reporting	Annually	D of S,P&P/ D of F&P				✓			
<b>Items requested by Committee members/internal stakeholders</b>									
ASSURANCE IN RESPECT OF ORGANISATIONAL PERFORMANCE MANAGEMENT To receive a report on the quality of Coding	Ad-hoc	Director of Digital		✓					
ASSURANCE IN RESPECT OF ORGANISATIONAL PERFORMANCE MANAGEMENT audiology Informatics System Procurement (RISP) Programme Update	Ad-hoc	Director of Digital		✓					
ASSURANCE IN RESPECT OF ORGANISATIONAL PERFORMANCE MANAGEMENT Robotic Process Automation- cost and benefit realisation (ARAC action)	Ad-hoc	Director of Digital		✓					
ASSURANCE IN RESPECT OF ORGANISATIONAL PERFORMANCE MANAGEMENT Stroke Reconfiguration Update (Action 1101/3.2)	Ad-hoc	Director of Therapies and Health Sciences			✓				

Matter to be Considered by Committee	Frequency	Responsible Lead	Scheduled Committee Dates 2023/24						
			21 June 2023	7 Sept 2023	21 Dec 2023	14 Mar 2024			
ASSURANCE IN RESPECT OF ORGANISATIONAL PERFORMANCE MANAGEMENT Performance Overview Report with Exception Reporting to include an update on the progress and impact of the Integrated Discharge Hub (Action 2106/02.2)	Ad-hoc	D of S,P&P/Director of Nursing			✓				
ASSURANCE IN RESPECT OF ORGANISATIONAL PERFORMANCE MANAGEMENT An update on the Discharge Programme and delays, including reporting against the new national data sets. (Action 2106/02.3.1)	Ad-hoc	Director of Nursing			✓				
ASSURANCE IN RESPECT OF FINANCIAL MANAGEMENT & PERFORMANCE To Receive an Update of IT Systems- Action taken from November 2023 Board	Ad-hoc	Director of Finance & Procurement/ Director of Digital			✓				
Clinical Audit Activity Assurance on management of contracts that were scheduled to end (Item PQSOC 1312/3.4)	Ad-Hoc	Director of CG				✓			

## Appendix Three

### Finance and Performance Committee: Attendance at meetings in 2023-24

**Attended** **Did Not Attend** **Not a Member/Required Attendee**

Meeting Dates	21 <sup>st</sup> June 2023	7 <sup>th</sup> September 2023	21 <sup>st</sup> December 2023	14 <sup>th</sup> March 2024 (tbc)
<b>Independent Members</b>				
Richard Clark	✓	✓	✓	
Iwan Jones	x	✓	✓	
Dafydd Vaughan	✓	✓	✓	
Shelley Bosson	✓	✓	x	
<b>Executive Directors</b>				
Director of Finance & Procurement	✓	✓	✓	
Director of Strategy, Planning and Partnerships	✓	✓	✓	
Director of Corporate Governance	✓	✓	✓	

