

Agenda Item: 14a

Governing Body

REPORT

Subject	Sub Committee Report for the Finance and Performance Committee - 26 April 2017
Date	4 May 2017
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Executive Summary

This note provides an update to the Governing Body of the agenda and discussion of the Finance and Performance Committee meeting of 26 April 2017.

Recommendation

The Governing Body is asked to note the report.

Links to the business and risks

Relevant Strategic Objectives 2016/17 (please mark in bold)

1. Systematically implementing prevention, early diagnosis and early intervention
2. Commissioning services that deliver evidence-based care, in the right place and at the right time, including promoting self-care and empowering patients to manage their own conditions.
3. Making sure that care is high quality, safe and sustainable, that it improves health outcomes and wellbeing and provides a good patient experience.
4. Using the statutory framework with best practice governance and transparency principles to be fully accountable to our population in commissioning and operating as a part of the wider health system
- 5. Ensure that the CCG commissions and operates in a financial manner consistent with the regulatory framework, long terms sustainability and best use of public money.**
6. We will work in close partnership with all the organisations who commission or provide care for our population, to integrate services where it makes sense and to achieve seamless transitions of care for patients where services remain separate.
7. Embedding member, public, patient, carer, staff and other stakeholders' views through meaningful engagement into decision-making processes and commissioning intentions.

Links to Board Assurance Framework / Corporate Risk Register

The registers for Finance, Contract, IM&T and information Governance are reviewed in detail, escalations are added and discussed on the Corporate Risk Register by the Governing Body and Executive.

	<p>No contract, IM&T and IG risks have been evaluated as high.</p> <p>Finance Strategic Risk 5 - Failure to develop and maintain an effective resource allocation model to deliver business priorities in 16-17</p> <p>Corporate Risk 74 - As a result of potential Acute over performance and limited investment to provide savings there is a risk of increased spend that would result in the CCG being unable to meet its financial targets.</p> <p>Corporate Risk 90 - As a result of a CCG agreed £25.531m QIPP target for 2017/18, there is a risk that the sum of the savings opportunity in the 45+ projects is less than the £25.531m ambition, which may result in failure to achieve the QIPP target and subsequent financial and reputational damage.</p>
Details of additional risks associated with this paper (may include NHS England Assurance Framework / NHS Constitution)	1. risks in relation to closing down the final position with the acute providers.
Financial Implications / impact	N/A
Legal Implications / impact	N/A
Partnership work / public engagement implications / impact	N/A
Committees / groups where this has been discussed before	Sub groups of the Finance and Performance Committee
Other options available and their pros and cons	N/A
Background papers	N/A

This note provides an update to the Governing Body of the agenda and discussion of the Finance and Performance Committee meeting of 26 April 2017.

The items discussed, and the key points of discussion and action are summarised below.

2. Financial performance. The Committee discussed the latest information contained in the month 12 finance report. It was reported that the £9.1m target surplus had been achieved with additional cost pressures in the acute trusts offset by savings elsewhere augmented by the receipt of some additional support from the regulator in respect of a number of non-recurrent items. The surplus was further boosted to £14.4m by the release of a 1% non-recurrent reserve in line with national policy. The Committee noted the significant achievement by the CCG in delivering its target surplus position. The report is elsewhere on the Governing Body agenda. The Committee discussed and noted the risks in relation to closing down the final position with the acute providers.
3. QIPP. The Committee noted the strong performance reported at Month 12 for the year and the improvement on the previous month. The final outturn was 92% of the planned QiPP

target. This was noted as a significant achievement. The Committee also discussed the QIPP proposals for 2017/18.

4. Financial plan 2017/18. The report on the financial plan for 2017/18 was deferred until the May Committee meeting pending finalisation of a number of areas. The progress to date & the outstanding areas where risks were identified were noted. It was recommended that the final report be presented to the next Committee meeting.
5. Procurement Steering Group update. The Committee received an update on the latest meeting of the Procurement Steering Group, in particular noting the current position on the Community Health Services procurement process. The Committee agreed to receive further updates on this procurement.
6. Contract performance report. The Committee received and discussed a report on the current performance of the key contracts of the CCG, including acute and non-acute, NHS and non-NHS contracts.
7. Risk Registers. The Committee received a report on the risk registers for finance, contracts, information technology and information governance. The Committee discussed these reports.
8. The Committee also reviewed its terms of reference and agenda plan for the next 12 months.

A number of actions arise from the discussions noted above, and these will be followed up by the Committee in future meetings.