

**Finance and Performance (F&P) Committee
Chairs Summary Report**

**Public Board
24 September 2026**

Presented for:	Alert, Advice and Assurance
Presented by:	Mike Baker, Non-Executive Director and Member of the F&P Committee
Author(s):	Mark Burton, Non-Executive Director and Chair of the F&P Committee, and, Victoria Hewitt, Trust Board Administrator
List of meeting dates:	30 July and 26 August 2026

Freedom of Information Act (FOIA) Exemption	☐ YES (restricted from the FOIA) ☒ NO (available to the public under the FOIA)
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Link to Strategic Objective	Outcomes – being outstanding now and in the future.
Link to Provider Capability Assessment	Governance, risk and regulatory
Link to CQC Well-led Statement	Governance, Management and Sustainability
<u>Regulatory Impact</u>	Regulation 12: Safe care and treatment Regulation 17: Good governance

Key points:	
This report provides a summary of the key highlights from the F&P Committee meeting and seeks to alert, advice and provide assurance to the Board on the areas discussed.	Alert, Advice and Assurance

<u>Risk Appetite Framework</u>			
Level 1 Risk	Level 2 Risks	(Risk Appetite Scale)	Impact
Clinical Risk	Capacity Planning Risk - We will ensure that capacity is planned to meet the demand for elective and non-elective (acute) admissions to our hospitals, managing this risk to provide safe treatment and care to our patients.	Cautious	Operating outside
Financial Risk	Financial Management & WRP - We will deliver sound financial management and reporting for the Trust whilst seeking to deliver against Waste Reduction targets but always with a focus on maintaining and enhancing patient safety.	Cautious	Operating within

1. Introduction

Following its last meeting the Committee has considered significant issues and key areas to highlight to the Board under three key categories Alert, Advice, Assurance (AAA):

- Alert - areas which the Committee wishes to escalate as potential areas of non-compliance, that need addressing urgently, or that it is felt Board should be sighted on.
- Advice - any new areas of monitoring or existing monitoring where an update has been provided to the Committee and there are new developments.
- Assurance - specific areas of assurance received warranting mention to Board.

2. Alert

- At its July meeting, the Committee focussed on the financial position, noting that the month three results had been reported to the Board on 30 July 2026. The Committee had identified pay expenditure as a significant area of variance and explored in greater detail. Whilst Agency spend was in line with plan, Bank spend was above plan due to winter capacity and under-delivery against the Waste Reduction Programme (WRP). Additional controls had been introduced for roster sign-off and shift approval, however the Committee noted limited assurance of the consistent application of vacancy controls. An escalation made to the People Committee for further scrutiny.
- At its August meeting, the Committee received an escalation from the People Committee concerning overtime expenditure within theatre staffing and the need to assess the relationship between whole-time equivalent (WTE) overtime costs, theatre productivity, and Last-Minute Cancelled Operations (LMCOs). The Committee requested that these areas be addressed through the quarterly Productivity Report.

3. Advice

- Following an escalation from the Audit Committee regarding a recommendation arising from the Pharmacy Procurement Internal Audit Review, the Committee agreed to receive an annual Medicines Expenditure Report. This would provide enhanced oversight of high-value medicines and nationally mandated procurement routes. This has been added to the Committee's Forward Plan.
- The Committee received a Staff Story on a WRP initiative relating to Loan Kits at Chapel Allerton Hospital theatres. The initiative had strengthened control and visibility, improved equipment-loan processes and delivered financial benefits. The Committee explored the importance of clinical engagement and the potential for wider application across the Trust.
- Within the month four Constitutional Standards Assurance, the Committee noted that Referral to Treatment (RTT) performance had deteriorated to 67.8%. Contributing factors included elective capacity, sustained pressures, critical-care capacity, and the configuration of the LGI estate. An increase in Last-Minute Cancelled Operations (LMCOs) was associated with full theatre lists and overrunning sessions. The Committee requested that the scheduled RTT deep dive be brought forward to examine these challenges and seek assurance regarding the associated mitigations and recovery actions.
- The Committee received a deep dive on performance against the Emergency Care Standard. ECS performance was currently at 75.6%, against a planned trajectory of 82.2%. The position had been impacted by increased emergency-department attendances, which had included lower-acuity self-presenting patients, and was

understood to reflect reduced access to urgent treatment services across the system. Minor illness services were affected by instability and delayed mobilisation as the incumbent supplier's contract ended. A new supplier was due to commence on 28 August 2026, following a period of shadowing. Implementation of the new national Extended Emergency Medicine Ambulatory Care pathway had been paused locally due to clinical concerns. A Project Group was supporting the work to respond with relaunch intended from 1 October 2026. Ongoing No Criteria to Reside pressures continued to affect flow, with weekly system meetings, a dashboard, and a recovery trajectory used to hold partners to account.

- The Committee received assurance regarding the revised approach to the 2026/27 capital programme, which had moved from percentage-share allocations to risk-based prioritisation. Increased restrictions on NHS capital funding meant that greater reliance would be placed on additional funding streams, including the National Estates Safety Fund and biddable funds for elective, diagnostic, urgent care, and digital projects. An overcommitment of £5.5 million had been agreed, to be managed through delivery marginally below committed levels and bids for additional in-year funding. The Committee supported the revised prioritisation methodology and governance arrangements, while noting ongoing work to address staff perceptions regarding the rejection of capital requests.
- In line with its delegated authority as defined within the Standing Financial Instructions (SFI) the Committee reviewed a number of Business Cases which included:
 - Pharmaceutical Wholesale Services Framework Agreement
 - Lincoln Wing Interventional Radiology Reconfiguration
 - Paul Sykes Urology Service
 - Electronic Prescribing and Medicines Administration
 - In addition, the Committee received an information update on the Clinical Diagnostic Centre Extension.

Full details on these approvals is restricted from the Public Domain due to commercial sensitivity however the full minutes have been provided to the Board.

4. Assurance

- The Committee received the Winter Planning Report which reviewed the 2025/26 response and lessons learned and set out priorities for winter 2026/27. At the time of reporting the plan remained subject to minor changes as further southern-hemisphere influenza data and regional and national planning outcomes became available. It was noted that the inpatient vaccination programme had been brought forward to October 2026. The Committee noted a potential adult-bed deficit in December and January, which could require surge-area expansion and use of the Decision Management Tool. An infection-prevention-and-control risk of bed closures was recognised but was not considered high because of the strength of the IPC Team and processes. The Trust was compliant with the winter-planning checklist, and Board sign-off of the Board Assurance Statement was supported subject to additional detail being provided within the Board report on the Decision Management Tool's trigger points, named owners, escalation routes, and cross-referencing against NHSE and national standards.
- The Committee continues to receive monthly oversight of the key outputs of the Turnaround Executive Meeting (TEx) which focussed on actions to support achievement of the financial plan. Recent meetings had considered cross-cutting themes such as overtime and annual leave accrual. The Committee noted that the medical e-rostering system had not yet been fully embedded, with full roll-out planned

by March 2027. The Committee received ongoing assurance from the oversight and actions reported through TEx.

5. Risk review

There were no items escalated from either meeting to the Corporate Risk Register or that would impact the Board's risk tolerance as defined within the Risk Appetite Framework.

The Board is requested to note that the Committee has agreed that the RTT deep dive would be received earlier than scheduled to respond to its deteriorating position and seek assurance on the mitigations and recovery actions.

6. Publication under the Freedom of Information Act

This paper has been made available under the Freedom of Information Act 2000.

7. Recommendation

The Board are asked to receive and note the content of this report and be assured that the F&P Committee is fulfilling its assurance function as delegated from the Board and as defined within its Terms of Reference.