NHS 24

Planning and Performance Committee

Terms of Reference

1   Introduction

1.1   The Planning and Performance Committee is a statutory Committee of the NHS 24 Board. The approved Terms of Reference and information on the composition and frequency of the Committee will be considered as an integral part of the Standing Orders.

1.2   The Planning and Performance Committee is established in accordance with NHS 24 Board Standing Orders and Scheme of Delegation.

1.3   The Standing Orders for the Proceedings and Business of the NHS Board shall apply, where relevant, to the conduct of business of all Standing Committees of the NHS Board.

2   Purpose of the Committee

2.1   The Planning & Performance Committee is identified as a Standing Committee of the NHS 24 Board. The purpose of the Committee is to provide assurance to the NHS 24 Board that systems and procedures are in place to monitor, manage and improve performance.

2.2   This will include to consider financial matters, to consider the Corporate Plan and business cases, to support the development of performance management systems and reporting, to promote efficiency, productivity and ensure best value is achieved from resource allocation, to review risks falling with the Finance and Performance remit and to assume oversight for Information Technology, Cyber Security, safety & security, and service continuity issues.

3   Membership

3.1   The Committee is established by the full NHS 24 Board and is composed of 4 Non-Executive Members.

3.2   The Chief Executive, the Executive Director of Finance, and the Executive Director of Transformation Strategy, Planning and Performance will be in attendance at every meeting with other Executive Directors attending as appropriate.

3.3   The NHS 24 Board Chair will appoint the Committee Chair and members of the Committee.

3.4   Non-Executive Directors are welcome to attend by invitation or on request.

3.5   Committee membership will be reviewed at least annually.

3.6   The Committee may co-opt additional advisors as required.

4   Arrangement for Conduct of Business

4.1   Chairing the Committee

4.1.1   The Chair and Vice Chair of Committees of the Board shall be nominated by the NHS 24 Board Chair and approved annually at the meeting of the NHS Board in April or at a meeting to be held as soon as convenient thereafter.

4.1.2   In the event of the Chairperson of the Committee being unable to attend for all or part of the meeting, another Non-Executive Member of the Committee will be nominated to chair the meeting.

4.2   Quorum

4.2.1   Meetings will be considered quorate when 3 Non-Executive Directors of the NHS 24 Board are present. The Director of Finance and the Director of Transformation Strategy, Planning and Performance or their agreed Deputy(s) should be present at all meetings.

4.3   Voting

4.3.1   Majority agreement shall normally be reached by a consensus without a formal vote. Should a vote need to be taken, all of the voting members of the Committee shall be allowed to vote, either by a show of hands, or a ballot. Voting members are the named Board members for each committee.

4.4　Frequency of Meetings

4.4.1　The Committee will normally meet four times each financial year. Additional meetings may be arranged at the discretion of the Committee Chair.

4.5　Declarations of Interest

4.5.1　Declarations of Interest will be a standing agenda item. If any member has an interest, pecuniary or otherwise, in any matter, is present at the meeting at which the matter is under discussion, and considers the objective test is met, they will declare that interest as requested at the start of the meeting and shall not remain in the meeting nor participate in any way in those parts of meetings where they have declared an interest. Should the member consider that the objective test has not been met, they do not require to declare the interest and can participate in the discussion and decisions made.

4.5.2　All declarations of interest will be minuted.

4.5.3　Any actions taken outside the meeting will be reported and minuted at the next available meeting of the Committee.

4.6　Administrative Support

4.6.1　Administrative support for the Committee will be provided by Director of Transformation Strategy, Planning and Performance.

4.6.2　The administrative support to the Committee will attend to take the minutes of the meeting, maintain a log of actions and a Committee Annual Workplan, provide appropriate support to the Chair and Committee members, and support the preparation of an Annual Report on the work of the Committee for presentation to the Board.

4.6.3　The agenda and supporting papers will be sent to members at least five working days before the date of the meeting.

5　Duties of the Committee

5.1　Remit of the Committee

5.1.1　The remit of the Planning and Performance Committee is to scrutinise the following key areas and provide assurance to the NHS Board. This includes approval of the areas as outlined in the Scheme of Delegation

5.1.2　Ensure that systems and procedures are in place to monitor, manage and improve organisational performance and liaise with relevant Governance Committees.

5.1.3 Monitor, seek evidence and give assurance on the implementation of the revised performance management framework arrangements for the organisation.

5.1.4 ==Monitor, seek evidence and give assurance on organisational resilience, including emergency planning.==

5.1.5 Support the development of effective performance management, business intelligence and systems and reporting across NHS 24.

5.1.6 Approval of the Strategy and Operational Plans including the Financial Plan, Business cases and horizon scanning.

5.2 Strategic Planning & Resource Allocation

5.2.1 Review and provide assurance on the development of the Board's Strategic Plan and supporting Operational Plans.

5.2.2 Review and provide assurance on the development of the Board's Financial Strategy and Annual Financial Plan and recommend approval to the Board.

5.2.3 Undertake scrutiny of individual topics/ projects / work-streams that may have a material impact on the Board's financial performance.

5.2.4 Oversee the Boards use of non-recurrent funds and reserves to ensure the medium to long term sustainability of the Board.

5.2.5 Oversee the arrangements that are put in place by management to ensure that NHS 24 remains a going concern over the long term, in service and financial terms with due regard to changes in population, the demand for healthcare services, environmental, ==climate emergency== and sustainability responsibilities and the trends in the Board's income and expenditure.

5.2.6 In delivering all of the above consider the Board's Strategic and Integrated Business Planning activities, ensuring that strategic planning objectives are aligned with the Board's overall objectives, strategic vision, and direction.

5.3 Service Development (STP and Service Delivery)

5.3.1 Conduct scrutiny on the service development proposals recommended through the SPRA process with specific focus on best value, return on investment, operational feasibility, and affordability.

5.3.2 Conduct scrutiny of business cases for submission to the NHS 24 Board and the Scottish Government Health & Social Care Directorate with

specific focus on alignment with the Board's strategy and the benefits realisation ambitions from these developments, ensuring that they have been impact assessed and support NHS 24 to meet its duties with regard to health inequalities, equality and patient engagement.

5.3.3   Seek evidence through scrutiny and provide assurance that efficiency and productivity opportunities are appropriately considered in the development and redesign of existing services and the development of new services.

5.4   Data, Information Management, Digital and Technology Strategies

5.4.1   Conduct scrutiny and provide assurance on the emerging strategies and plans with a focus on best value, return on investment, operational feasibility, and affordability.

5.5   Property and Asset Management

5.5.1   Ensure that the Property & Asset Management Strategy is aligned with the Organisational Strategy and is supported by affordable and deliverable Business Cases and detailed Project Plans.

5.5.2   Ensure there is a robust approach to property rationalisation and oversee the management of risk associated with individual projects.

5.6   Risk Management

5.6.1   As part of the Board's system of risk management, provide particular oversight to the risks associated with the Board's responsibilities for financial governance, including the delivery of the key performance targets, statutory financial targets, and the Financial Plan.

5.7   Cyber Security

5.7.1   As part of the Board's proactive management of cyber security, the Planning & Performance Committee should provide oversight to the Board's security posture ensuring there is a robust approach to the management of cyber security risks for the organisation, whilst in parallel ensuring compliance with its legal responsibilities under all relevant legislation.

5.8   Conduct of the Committee

5.8.1   All members will have due regard to and operate within the NHS 24 Board's Standing Orders, Standing Financial Instructions, and the Code of Conduct for Members.

5.9   Reporting Arrangements

5.9.1   The Planning and Performance Committee will report to the NHS 24 Board.

5.9.2   The draft minute of the Committee will be reviewed by the nominated Executive Lead prior to clearance by the Chair of the Committee normally within five working days, and distribution to the Committee within five working days thereafter, for ratification at the next Committee meeting. The ratified minutes of the Committee will be presented to the next NHS 24 Board Meeting to ensure NHS 24 Board members are aware of issues considered and decisions taken.

5.9.3   In addition, the NHS 24 Board Meeting will receive a Committee Highlight Report, which summarises the key issues considered at the most recent meeting of the Committee.

5.9.4   The Planning and Performance Committee will produce an Annual Report to be presented to the NHS 24 Board.

5.10   Review of Terms of Reference

5.10.1   The Terms of Reference shall be reviewed on a 12-month cycle.

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