

Performance Governance Committee Terms of Reference

1. Introduction

- 1.1 The Performance Committee is established as a Committee of the NHS Board as described in the Board's Standing Orders. The approved Terms of Reference and information on the composition and frequency of the Committee have been informed by the Board's Standing Orders with specific reference to Section 9 Committees.
- 1.2 The Terms of Reference will be reviewed annually and submitted to the NHS Board for approval.

2. Remit

- 2.1 To provide assurance to the NHS Board that systems and procedures are in place to monitor, manage and improve overall performance and best value is achieved from resources.

3. Duties

- 3.1 To scrutinise the overall performance of NHS Ayrshire & Arran across the following functions of the NHS Board:
 - Resource allocation
 - Performance management
 - Strategic planning
- 3.2 To provide scrutiny and challenge on the progress and achievement of the NHS Ayrshire & Arran Transformational Change Programme.
- 3.3 To ensure that systems and procedures are in place to monitor, manage and improve performance, across the whole system, and liaise closely with relevant Governance Committees (Staff, Healthcare, Information and Audit and Risk) to ensure appropriate remedial action takes place.
- 3.4 Consider financial plans and approve annual budget proposals and business cases for submission to the NHS Board.
- 3.5 The Performance Governance Committee would consider:
 - Annual Operational Plan performance targets
 - Investment Scrutiny
 - Benefits Realisation
 - Post Project Evaluation
 - Finance and Service Performance

- 3.6 To support the development of a performance management and accountability culture across NHS Ayrshire and Arran.
- 3.7 Receive annual reports and quarterly updates from any sub-committees established by the Performance Governance Committee in order to provide assurance and accountability.
- 3.8 To monitor and review risks falling within its remit.
- 3.9 To review internal audit reports aligned to the Committee, to ensure that recommendations are reported, monitored and reviewed.

4. Authority

- 4.1 Committee is authorised to investigate any matters which fall within its Terms of Reference and obtain external professional advice.
- 4.2 The Committee may establish sub-committees to support its functions.
- 4.3 Committee is authorised to seek and obtain any information it requires from any employee, whilst taking account of policy and legal rights and responsibilities.
- 4.4 The Committee will have the authority to require the attendance of any employee of NHS Ayrshire & Arran, as may be required.

5. Committee Membership

- 5.1 The Committee shall be established by the full NHS Board and be composed of six Non-Executive Board Members.
- 5.2 The NHS Board shall appoint the Chair and approve membership of the Committee.
- 5.3 A Vice Chair will be proposed by the Committee Chair and agreed by the Committee
- 5.4 Committee membership will be reviewed-annually or as required, by the Board Chair.

6. Quorum

- 6.1 Three Non-Executive members will constitute a quorum.

7. Attendance

- 7.1 The Director of Finance, Chief Executive, Executive Medical Director, Executive Nurse Director, Director for Transformation and Sustainability and the Director of Pharmacy will attend meetings in an *ex-officio* capacity to provide information and advice.
- 7.2 The Committee may co-opt additional advisors as required.

- 7.3 With the prior approval of the Chair the Director for Transformation and Sustainability and the Executive Director of Finance can provide deputies on an exceptional basis.

8. Frequency of Meetings

- 8.1 The Committee will normally meet bi-monthly but will meet at least five times per annum.
- 8.2 The Chair may at any time convene additional meetings of the Committee.
- 8.3 Performance Governance “Light” meetings will take place throughout the year to allow members to review the Financial Management Report before it is considered by the Board where there is no Performance Governance Committee meeting beforehand.

9. Conduct of Meetings

- 9.1 Meetings of the Committee will be called by the Committee Chair.
- 9.2 The agenda and supporting papers will normally be available to members at least five working days before the date of the meeting.

10. Reporting Arrangements

- 10.1 A minute will be kept of the proceedings of the Committee. A draft minute of the meeting will be circulated, normally within ten working days, to the Chair of the Committee. Once the Chair has approved, the draft minute will be shared with committee members for information, not for comment, prior to consideration at a subsequent meeting of the Committee.
- 10.2 The Chair of Committee shall provide assurance on the work of the Committee. A summary of key points from each meeting and the approved minute will be submitted to the NHS Board meeting for information.
- 10.3 Committee will conduct an annual review of its role and function by completing a self-assessment checklist and providing this and an annual assurance report to the NHS Board each year.
- 10.4 Items requiring urgent attention by the NHS Board can be raised at any time at NHS Board Meetings, subject to the approval of the Chair.

Version:	Date:	Summary of Changes:	Approved by
01.0	07/05/2019	New template used	PGC 07/05/2019
01.1	7/05/2020	Section 10.2 – Board to receive approved minutes Section 8.5 – HEAT targets replaced with AOP performance targets	Board 17/08/20
02.0	17/08/2020	Review by PGC 12/01/2021	

02.1	12/01/21	Old section 5.3 – to be removed. This was added to give SG a forum to engage with the Board about recovery planning and is no longer relevant. Old section 8.3 – inclusion of Information Governance Committee	NHS Board 29/03/2021
03.0	10/03/2021	Amendments to deliver a standard approach to Governance Committee ToR. <ul style="list-style-type: none"> Sections reordered to bring committee business together, ie. Remit/Duties/Authority Duplication removed if referred to in Board Standing Orders Introduction amended to note that ToR are informed by the Board standing orders and the requirement for an annual review. Reporting arrangements amended to 10 days for draft minute to be available and ensuring approved draft shared with members. Inclusion of requirement for annual self-assessment checklist in addition to the Annual Report. No change to Remit Section 3.3 amended to correct Governance Committee titles 	NHS Board 29/03/2021
03.1	14/04/2021	Formatting update. Conduct section was not in agreed order as approved standard format. Moved to section 9. No change to wording or content.	Change made by Head of Corporate Governance 14/04/2021
03.2	20/01/2022	Annual Review of Terms of Reference – no changes made	NHS Board 28/03/2022
04.0	19/01/2023	Annual Review of Terms of Reference – 3. Duties: added statement on monitoring of internal audit recommendations	NHS Board 28/03/2023
04.1	18/01/2024	Annual Review of Terms of Reference – Section 8.2 addition to include PGC “Light” meetings to consider the Financial Management Report	NHS Board 26/03/2024
05.0	06/03/2025	Annual review of Terms of Reference - 7.1 Attendees updated to add the Executive Medical Director, Executive Nurse Director and the Director 8.3 addition of Performance Governance “Light” meetings throughout the year	NHS Board 31/03/2025