



AGENDA ITEM

2.1

PLANNING, PERFORMANCE & FINANCE COMMITTEE

**FINANCE, PERFORMANCE & WORKFORCE COMMITTEE
SELF ASSESSMENT QUESTIONNAIRE – ACTION PLAN**

Date of meeting	21/12/2020
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Kathrine Davies, Corporate Governance Manager
Presented by	Cally Hamblyn, Assistant Director of Governance & Risk
Approving Executive Sponsor	Director of Corporate Governance
Report purpose	FOR DISCUSSION / REVIEW

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome

ACRONYMS

FP&W	Finance, Performance & Workforce Committee
CTMUHB	Cwm Taf Morgannwg University Health Board

1. SITUATION/BACKGROUND

- 1.1 The Chair of the Planning, Performance & Finance Committee is required to present an annual report outlining the Committee business through the financial year to the Health Board to provide an assurance on the monitoring and scrutiny undertaken of Cwm Taf Morgannwg University Health Board (CTMUHB) performance in relation to planning, performance and Finance. As part of this process the Committee are required to undertake an annual self-assessment questionnaire.
- 1.2 The Committee, at its last meeting held on 20 October 2020 received the results of the self-assessment that had been undertaken electronically via Survey Monkey outside of the meeting.
- 1.3 The Committee agreed at the meeting that an Action Plan should be developed with the Chair following the meeting in order to address some of the responses received within the survey that required further action to strengthen awareness and assurance with timescales and leads.
- 1.4 The Action Plan is attached as **Appendix 1**.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 Members of the Planning, Performance & Finance Committee are asked to discuss, review and approve the Action Plan.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 The publication of the Annual Report demonstrates compliance with Standing Orders, which stipulates that each Advisory Group is required to submit an annual report to the Board through the Chair within three months of the end of the reporting year setting out its activities during the year and detailing the results of a review of its performance and that of any sub-groups it has established. As part of this process the Committee are required to complete an annual self-assessment questionnaire.



4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outlined in this report.
Related Health and Care standard(s)	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
Equality impact assessment completed	No (Include further detail below)
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care

5. RECOMMENDATION

5.1 The Committee are being asked to:

5.2 **DISCUSS** and **APPROVE** the attached self-assessment Action Plan at **Appendix 1**.