

ANNUAL STATEMENT OF ASSURANCE FOR THE FINANCE, PERFORMANCE & RESOURCES COMMITTEE 2023/24

1. Purpose of Committee

- 1.1 The purpose of the Committee is to keep under review the financial position and performance against key non-financial targets of the Board, and to ensure that suitable arrangements are in place to secure economy, efficiency and effectiveness in the use of all resources, and that these arrangements are working effectively.

2. Membership of Committee

- 2.1 During the financial year to 31 March 2024, membership of the Finance, Performance & Resources Committee comprised:

Alistair Morris	Chair / Non-Executive Member
Wilma Brown	Non-Executive Stakeholder Member (to October 2023)
Cllr David Graham	Non-Executive Stakeholder Member (to August 2023)
Alastair Grant	Non-Executive Member
Aileen Lawrie	Non-Executive Stakeholder Member
John Kemp	Non-Executive Member
Margo McGurk	Director of Finance & Strategy
Dr Chris McKenna	Medical Director
Janette Keenan	Director of Nursing
Carol Potter	Chief Executive
Dr Joy Tomlinson	Director of Public Health

- 2.2 The Committee may invite individuals to attend the Committee meetings for particular agenda items, but the Director of Acute Services, Director of Health & Social Care, Director of Property & Asset Management, Director of Pharmacy & Medicines, Deputy Director of Finance and Board Secretary will normally be in attendance at Committee meetings. Other attendees, deputies and guests are recorded in the individual minutes of each Committee meeting.

3. Meetings

- 3.1 The Committee met on six occasions during the financial year to 31 March 2024, on the undernoted dates:

- Tuesday 9 May 2023
- Tuesday 11 July 2023
- Tuesday 12 September 2023
- Tuesday 14 November 2023
- Tuesday 16 January 2024
- Tuesday 12 March 2024

- 3.2 The attendance schedule is attached at Appendix 1.

4. Business

- 4.1 At each meeting the Finance, Performance & Resources Committee considers the most up-to-date financial position for the year, for both revenue and capital expenditure. This function

is of central importance, as the Committee provides detailed scrutiny of the ongoing financial position and on aspects of operational performance across NHS Fife activities, including those delegated to the Integration Joint Board. Considerable time was spent in meetings discussing and reviewing the significant financial pressures facing the Board, noting the need for £9.7m of brokerage for 2022/23 and ongoing financial challenges for 2023/24. The non-delivery of in-year savings against plan (in 2022/23, the Board achieved only £3m recurring of the £11.7m savings target), and consideration of the enduring financial consequences of the pandemic period, which continued to impact on achieving financial sustainability over the medium term, has been a large focus of discussion. The risk score for delivery of a balanced in-year financial position has remained high throughout the year, with the matter under regular review at an operational level by the Financial Improvement & Sustainability Programme Board.

- 4.2 The Medium-Term Financial Plan approved at the NHS Fife Board meeting on 28 March 2023 set out an underlying deficit of £25.9m, partly mitigated by a £15m cost improvement plan, with a projected residual gap of £10.9m. At the end of March 2023, the Scottish Government acknowledged the challenging position outlined in the Plan and advised the Board to undertake the following actions by 30 June 2023:
- provide an update on progress against actions set out in the financial recovery plan, including the work carried out in collaboration with the Integration Joint Board and regional partners;
 - develop a plan to deliver 3% recurring savings in 2023/24 and develop options to meet any unidentified or high-risk savings balance;
 - development of other measures to be taken to further reduce the financial gap;
 - review of key underlying drivers of the deficit and specific risks as presented within the Financial Plan; and
 - focus on addressing Covid-19 legacy costs, including additional bed capacity.
- 4.3 At their May 2023 meeting, members considered the approach taken to confirm the opening 2023/24 revenue budgets to budget holders, noting also the Grip & Control information provided to managers.
- 4.4 In September 2023 the Director of Finance & Strategy provided a detailed risk assessment and recovery options associated with the financial performance and financial sustainability of the Board based on the year-to-date spend at the end of July 2023. It was noted that the financial plan projected a year-end overspend position of £10.9m, however the paper confirmed that the overspend recorded at the end of July 2023 had already reached £10.9m, which was clearly a matter of some concern. Significant cost pressures, particularly around supplementary staffing, and the main cost areas driving the deteriorating position were outlined. It was noted that the Scottish Government have been updated following the Quarter 1 review and recognised the significant challenges. The level of risk in relation to delivering the planned year-end position was reported as very high, with the Executive Directors' Group in August 2023 exploring a series of actions to deliver potential recovery options. The Director of Finance & Strategy highlighted the current very limited progress with delivery against the Financial Improvement & Sustainability Programme. The main areas of cost reduction planned were significantly behind trajectory for delivery and the reasons why were discussed in some detail. The Chair noted his concern in relation to the deliverability of the planned year-end position given the level of risk described in the paper and the discussion at the meeting. The Committee agreed that assurance could be taken that EDG were continuing to pursue the current identified areas of cost reduction and exploring all options available to deliver additional cost reduction but acknowledged the level of challenge and risk around deliverability.
- 4.5 The main cost areas driving the deteriorating position continued throughout the financial year culminating in the year-end forecast being reported in November 2023 at an increased level of £23m overspend. This reflected continuing financial pressures within the Acute Services

Directorate and external healthcare providers, alongside limited progress across the cost improvement programme. Discussions were then ongoing with Scottish Government in relation to likely brokerage requirements.

- 4.6 In January 2024 the Committee were advised that the forecast outturn of £23m, which was £12.1m above the level of deficit identified in the approved 2023/24 financial plan in March 2023, remained the quantified position. Following the quarter two financial performance review in November 2023 the Committee was also advised that the Scottish Government has advised of their concern about the deteriorating position, particularly after receipt of additional NRAC sustainability and new medicine funding and indicated that a Board-wide effort was required to reduce and manage the deficit. A number of actions were agreed following both the quarter 1 and 2 reviews, which Scottish Government followed up in the quarter 3 review in February 2024. The Director of Finance & Strategy also advised that she had requested support from the national Finance Delivery Unit (FDU) to support us take forward these actions and provide comparable data to enable us to benchmark against other boards. A meeting took place of the Scottish Government National Planning and Performance and Oversight Group on the 15 November 2023 to discuss NHS Board financial positions on the recently published NHS Scotland Support and Intervention Framework. Due to the scale of the forecast deficit within NHS Fife and the significant movement from plan, NHS Fife was assessed as being at level two of the framework. The Committee noted that this did not represent formal escalation but did signal enhanced scrutiny at Scottish Government level.
- 4.7 In January 2024, as part of increased grip and control, the Committee reviewed the detail of four proposed new staff posts, supporting only the recruitment to the clinical positions (Paediatric Middle Grade post, Clinical Risk Nurse/Midwife and Orthopaedic Advanced Nurse Practitioner), due to their criticality for the safe running of the respective services.
- 4.8 The forecast financial position did improve in February 2024 as a consequence of very late Scottish Government additional funding to all territorial Boards. Members noted the improved forecast outturn position at the March 2024 meeting (the year-end deficit then estimated to be £12.8m, some £2m more than the planned deficit forecast in the original Financial Plan). This improved forecast, however, was based on external developments and reflected receipt of funding following confirmation of additional consequential funding provided by HM Treasury to the Department of Health & Social Care. The additional funding which for NHS Fife was £10.3m, was provided to all territorial health boards on a non-recurring basis. A reduction in the Board's CNORIS contribution was also confirmed, of £2.1m. A total financial benefit for 2023/24 to NHS Fife was noted of £12.4m.
- 4.9 The three-year Medium-Term Financial Plan for 2024/27, and the high level assumptions within, was also scrutinised in March 2024, prior to approval by the Board, with the Committee noting that the financial challenge over the next three years is unprecedented, requiring a focused whole system response to achieve financial sustainability. Some 7% of savings is required to reach a sustainable position of financial balance and the plan, in conjunction with the 'Re-form, Transform, Perform' Framework, sets out initial workstreams to achieve that. The Committee endorsed the Medium-Term Financial Plan for Board approval, noting that further discussion with Scottish Government would continue on the achievability of the targets within. Further updates have been given to the Board directly, both at formal meetings and at Board Development Sessions, as financial plans have been considered and then formally approved.
- 4.10 The Financial Improvement & Sustainability Programme Board, which reported during part of 2023/24 into the Committee, is not solely focussed on saving opportunities, but is also working closely with colleagues to increase productivity and capacity, reviewing on a frequent basis the ability to deliver the financial grip and control targets. In July 2023, members considered a detailed update from the Programme Board, outlining the delivery progress of cost

improvement plans and the challenges experienced in these achieving the predicted targets (estimated at the start of the year at being £19.5m savings per annum, for the next five years). Key areas of pressure at that mid-year point included reduction in surge capacity, spend on supplementary staffing and the vacancy factor, further details on which have also been considered in-year by the Staff Governance Committee. Saving opportunities highlighted included further work around medicines optimisation and refinancing one of the Board's major PFI contract. The cost of living crisis affecting the whole economy, plus the removal of Covid-related financial support to health boards, have created additional challenges, particularly in the area of procurement. The situation has generally been reflective of the activity pressures experienced throughout the year and the resultant workload on staff. Further updates on the trajectory of performance were received at the Committee's meeting in November 2023, with the target to reduce spend, particularly on supplementary staffing, showing significant slippage. There were also several funding changes, specifically in relation to the service level agreement for out-of-area treatment at Stracathro Hospital, Planned Care activity and diabetic pumps, which added significantly to the overall challenge. Whilst a recent funding allocation for new medicines has been welcomed, the Acute prescribing costs has been continuing to increase beyond the level of funding available.

- 4.11 In order to address the substantial financial challenges facing the Board and NHS Scotland in general, in January 2024 members discussed the creation and implementation of a 'Re-form, Transform, Perform' (RTP) Framework, detailed in a presentation given by the Chief Executive. It was recognised that the Executive Team and colleagues across NHS Fife have a wide set of skills and expertise to support a multi-professional approach to delivering a response and recovery plan, the core purpose of which is to deliver a sustainable financial position. Ben Hannan has been seconded from his post as Director of Pharmacy & Medicines into the position of Director of Reform & Transformation, to help support the development of the Framework at pace. The importance of retaining the organisation's values and commitment to delivery of quality and safe care as the core of the approach was acknowledged. An update was delivered to members in March 2024, with focus on the first tranche (3%) of savings to be delivered. Members' comments and feedback were given, informing the presentation delivered to the Board later in March 2024.
- 4.12 The Committee has had input into the Board's Annual Delivery Plan for 2023/24, which has been aligned to the strategic priorities within the Board's own Population Health & Wellbeing Strategy, whilst also addressing the specific requirements of the Scottish Government guidance. Members were pleased to endorse the plan to the Board at their meeting in July 2023. In September 2023, the Committee took assurance from the fact that the Scottish Government's review process had concluded and the Plan had been formally approved. A separate financial review process would continue in tandem. A performance report on the delivery of the various improvement actions aligned to the Annual Delivery Plan was considered at the Committee's November 2023 meeting, utilising the Red Amber Green (RAG) status of reporting methodology prescribed by the Scottish Government template, noting the linkages to the regular IPQR performance metrics and the Population Health & Wellbeing Strategy delivery reporting. Members were pleased to note that, at September 2023, 69% of actions were marked as being on track for delivery by their stated deadline. Scrutiny took place on those actions which had either fallen behind schedule or were at risk of non-delivery. Following thereon, at their meeting in January 2024, the Committee received a mid-year report on the delivery of the Population Health & Wellbeing Strategy, noting the work that had been completed during the first six months of the Strategy's implementation period and the priorities for the year ahead. An annual report covering the first year of the Strategy's lifespan is to follow in May 2024. The linkages between reporting progress against the Board's organisational strategy and the Annual Delivery Plan was highlighted, to avoid duplication of effort.

- 4.13 The draft Corporate Objectives 2023/24 were presented to the Committee in May 2023, after initial consideration in March 2023. The objectives as a whole describe what NHS Fife aims to achieve in-year, and are linked also to the Chief Executive's own objectives and those of each Executive Director. Assurance was provided that there was appropriate linkage to the Board's Population Health & Wellbeing Strategy and to the Health & Social Care Partnership's strategic priorities. The objectives are framed under the four key strategic priorities of the Board, as aligned to national programmes, and reference the strategy delivery work undertaken in this reporting year. Each Board Committee has had a role in reviewing the objective from their own specific perspective. Following review, the Committee were pleased to endorse the Corporate Objectives for onward submission to the Board for formal approval.
- 4.14 The Committee scrutinised operational performance at each meeting through review of the Integrated Performance & Quality Report (IPQR), specifically those measures that fall within its own remit (related to financial reporting and waiting times targets). Linkages to the Annual Delivery Plan trajectories have also been included. The enduring impact of the Covid pandemic on traditional key performance measures monitored by the Committee remains significant, particularly in relation to Treatment Times Guarantee measures, long waits within the Emergency Department, numbers of new referrals and diagnostic performance. In general, efforts to tackle the resultant backlog from the pause of services during the height of the pandemic remains a significant focus of the Committee going forward. In year, members have welcomed improvements in the percentage of bed days lost to standard delays, with the introduction of Care Home coordinators supporting the timely transfer of individuals from the hospital setting to the care sector. A new day surgery treatment centre at Queen Margaret Hospital, which formally opened in November 2023, has created additional capacity in the system, releasing a surgical theatre for use.
- 4.15 Demand for unscheduled care services has continued to exceed expectation for much of the year, leading to significant pressures, particularly at the front-door of the Emergency Department. As detailed to members in May 2023, further improvement work to maximise the use of the rapid triage unit in support of Admissions Unit 1 has been undertaken, in addition to the establishment of a single admission pathway designed to support flow and improve the four-hour access target. Complementary work in the Partnership, reducing the percentage of bed days lost to delay, has been welcomed, though this has come under pressure once again during the Winter period, due to illness-related closure of care homes. In January 2024, it was confirmed that the Flow & Navigation Centre has now transitioned to the Acute Services Directorate from the Health & Social Care Partnership, with work ongoing to review methods through which flow and navigation can reduce demand at the front door, ensuring patients are seen at the right place, the right time and by the right person.
- 4.16 In addition to the reporting within the IPQR, a separate Financial Performance & Sustainability Report has been produced, to allow for detailed scrutiny into the monthly financial position throughout the year. In July 2023, discussion focused on the additional £8.3m NRAC funding received (increasing the Board's total allocation to £9.3m) and how this could be best applied to areas that could bring a positive impact for patients or to improve overall performance. In September 2023, members discussed the concerning situation of the predicted £10.9m overspend, noting the main cost area driving the deteriorating position was supplementary staffing. At that point in the year, there had been limited progress in achieving the targets of the Financial Improvement & Sustainability Programme, pushing potential delivery pressures into the latter half of 2023/24. Noting the challenges, the Committee were supportive of a concentrated focus on the saving areas detailed in the Financial Plan, plus the rapid development of pipeline schemes to bring overall resilience to the cost improvement plans.
- 4.17 The Committee has considered a bi-annual update (in May and November 2023) around the status of General Policies & Procedures, noting that considerable work has been undertaken during the reporting year to improve the follow-up processes (including escalation to EDG for

persistently outstanding reviews) and to enhance the guidance available to staff, which is now readily accessible on StaffLink. The format and content of the policy status report to the Committee has also been enhanced, to provide clearer detail and assurance around areas that require further follow-up work and to highlight risks of key policies remaining overdue for review. Members have previously been supportive of efforts to move to a more streamlined review process, utilising electronic software solutions where appropriate, though a decision remains to be made on the best way to take forward procurement of any software solution. However, dedicated staff resource secured to assist with the general administration and review of General Policies has helped to improve compliance and an improved position is now being reported.

- 4.18 The Committee has considered updates on the Capital Programme for 2023/24, noting also the final Capital Expenditure Outturn for 2022/23 (of £30.709m, expended across a range of capital projects). The Committee has also considered progress in relation to the following capital schemes:
- National Treatment Centre Fife Orthopaedics (delivered in line with budget and formally opened March 2023, as detailed in a final post-project briefing paper discussed with members at the May 2023 meeting);
 - Kincardine & Lochgelly Health Centres (positive feedback received on Outline Business Cases but currently paused due to a lack of central capital funding);
 - Laboratory Information Management System (LIMS) (milestone payments carried forward from 2022/23 into 2023/24).
 - Hospital Electronic Prescribing & Medicines Administration (HEPMA) (contractual progress made in current year); and
 - Statutory Compliance / Backlog Maintenance (c.£5m spend, including therein energy efficiency projects).

A significantly reduced level of capital funding (of £7.764m formula capital only) has been made available for 2023/24, and details of the schemes to be funded was discussed at the May 2023 meeting. As reported to the Committee in September 2023, the total anticipated capital budget for 2023/24 is £11.165m, reflecting a Capital Resource Limit as advised by the Scottish Government plus anticipated allocations for a number of specific capital projects.

- 4.19 At the Committee's May 2023 meeting, members endorsed the proposal to proceed to Board approval for signing the HEPMA contract. A further update was given in September 2023, noting that, following lengthy negotiations and significant engagement from CLO, the HEPMA contract was then in the final stages of drafting and would shortly be presented to National Services Scotland Contract Approval Board for signature on behalf of NHS Fife. Development of design and build solutions for Integrated Discharge Letters and Medicines Reconciliation have been progressing meantime, and the Committee were pleased to take an improved level of assurance from the work then underway to implement the new contract.
- 4.20 Given the challenging financial situation, and reflecting especially the reduction in capital funding available across NHS Scotland, a new corporate risk is in the process of being created through Fife Capital Investment Group and Executive Directors' Group. This will reflect the situation whereby the planned Mental Health Estates project (which planned to consolidate all mental health services onto the one physical site) requires to be paused, following a recent instruction from Scottish Government to Boards to immediately stop any project development work on all Capital Business Cases that have not already been approved. This instruction reflects the extremely constrained capital settlement announced in the Scottish Government financial budget in December 2023. As reported to the Committee at its January 2024 meeting, an interim programme of improvement to service areas, which commenced during the current financial year, will continue in a reduced manner, to take forward enhancements to the existing estate to improve its safety and condition, within existing budgets. The Committee supported

the development of a new risk on the Corporate Risk Register, to ensure that the mitigating actions receive regular scrutiny at Board level.

- 4.21 Regular reports on the work of the Fife Capital Investment Group have been considered at Committee meetings, with the paper reviewed in September 2023 detailing the anticipated allocations in addition to core funding. These largely relate to several Digital & Information Projects, including HEPMA, Laboratory Information Management System replacement and other ongoing projects. Additional monies were also secured, including £0.504m for equipment following successful bids to the National Infrastructure and Equipping Board over the summer period, £0.150m for a Greenspace project, and £0.486m to support decarbonising our commercial fleet (further details on the latter were considered at the Committee's January 2024 meeting). In November 2023, funding awarded from NHS Education for Scotland, to support the ScotCOM medical degree programme in partnership with the University of St Andrews, was welcomed, with the majority to be received in 2024/25. In January 2024, members received assurance that processes were underway to ensure that all capital equipment purchases were in train and would be received by the end of the financial year.
- 4.22 The Committee has previously been supportive of a proposal for the senior debt re-financing of the PFI Phase 3 Victoria Hospital project, with members noting in March 2023 the options under consideration by the Board. An update was provided at the September 2023 meeting, where the Board's specialist advisers attended and explained the proposed contractual changes. Noting the potential for savings initially in the range of c.£1m (and £600k recurrently), the Committee endorsed the refinancing proposal for subsequent Board approval. Confirmation of the successful refinancing was received at the Committee's January 2024 meeting. Related to the PFI estate, the annual Public Private Partnership Monitoring Report for 2022/23, covering the sites of St Andrews Community Hospital and Phase 3 of the Victoria Hospital in Kirkcaldy, was considered by the Committee in November 2023, with members also gaining assurance from the positive content detailed therein. Also in reference to Phase 3 of the Victoria, an update on progress in delivering Project Hydra (involving the replacement of Medium Temperature Hot Water pipes at the site) was given to members in March 2024, noting the trajectory of completing the work by March 2025.
- 4.23 Members reviewed a refreshed Whole System Property & Asset Management Strategy (PAMS) for 2023/24 at its September 2023 meeting, to address the annual requirement to provide a data response for the State of the NHS Scotland Assets & Facilities Report. Submission of the data allows NHS Scotland Assure to establish a position regarding the NHS estate across Scotland. The data also allows individual Boards to understand the position regarding their own estate, which in turn allows a plan to be developed in the form of a PAMS. The refresh of the document allows for it to be fully aligned and embedded as an integral part of the organisational Population Health & Wellbeing Strategy, describing how the NHS Fife estate will help deliver and support strategic ambitions. The document also provides the strategic context in which to develop the Board's Whole System Initial Agreement for our estates infrastructure, which is likely to be instructed by Scottish Government soon.
- 4.24 Covered within the updated document is reference to work to support the Board's Anchor Institution ambitions and working closer to share office-related accommodation with our partners, particularly Fife Council, to address the challenges of an ageing estate, balanced against a challenging capital funding backdrop. Also included within the Strategy are detailed plans on how the Board expects to meet the challenge to reduce our carbon emissions to net zero by 2040. Carbon zero 'road maps' for nine of the Board's sites have been created, with a further three in progress at the time of writing. In addition, decarbonisation scheme funding has been won to complete £1.8m of investment projects in FY2022/23 and it is planned that we will make further significant applications over the next three years. Members greatly welcomed the detail of the new document, noting its strategic focus across the wider organisation has direct relevance to the work underway in delivering the ambitions of the

organisational strategy. It also provides a context for the review of future infrastructure investment proposals / business cases, to ensure strategic intent in the development of estates-related initiatives. Members were pleased to endorse the Strategy to the Board for formal approval.

- 4.25 The Committee has in previous years considered a number of reports around the Primary Care estate, including the Transfer of Third-Party Leases from GP practices and an ongoing Primary Care Premises review, the purpose of which are to help support GP sustainability and are an important cornerstone of the work being undertaken to review the NHS Fife property / asset needs and requirements over the longer term. In May 2023, an update report on the conclusions of a tender process for three 2C Board-managed GP practices in Fife was considered by members. An external procurement process had recently concluded, with notes of interest being assessed before the formal decision-making process was undertaken. The Committee was pleased to endorse the award of the contract to the successful bidder, taking assurance from the procurement process undertaken and the scoring of the successful tender bid. In September 2023, members considered the final report from the recent Primary Care Premises Review, which aims to help practically achieve the national ambition for GPs to cease owning their own premises and to transfer the physical asset, or their lease, to the Health Board. Detail on the number of GP sustainability loans applied for was detailed, along with improvement works undertaken at premises thus far. The Committee were supportive of the transfer of third-party leases to the Board and also endorsed the conclusions of the Review report, to be utilised as an enabler for the overall Property & Asset Management Strategy. A paper in Private Session at the September 2023 meeting also provided an update on the planning for long-term solutions to two GP practices transferring to the Board, as a result of recent retirements of GP partner and termination of the respective GMS contracts (a further proposal related to one of these practices was considered in March 2024). The Primary Medical Services Committee and Primary Care team in general continue to consider all options for sustainable service delivery, to ensure continuity of service for the patient lists of relevant practices.
- 4.26 At its May 2023 meeting, the Committee received an update on a Community Asset Transfer request, submitted under the Community Empowerment Act 2015, by a charity body seeking a long-term lease of mainly agricultural land adjacent to the Stratheden Hospital site. An appeal against the Board's earlier refusal of the application subsequently concluded in favour of the charity body, overruling the Board's previous decision, as described in a briefing to the Committee in May 2023. The formal negotiations for a lease of the requested land has taken place over 2023/24. In September 2023, a briefing updated members on the current position, noting that two leases had been drafted by the Board's legal advisers (one covering the agricultural land and another for the disused mortuary building) and that, following Board approval, these would be issued to the charity body along with the updated Decision Notice in October, following Board approval thereof. Negotiations for concluding these leases have taken place over the last six months and are still continuing at the time of writing, with an update due to the Committee in May 2024.
- 4.27 A briefing on the provision of automated prescription locker boxes within Fife, and the possibility of legal challenge to the Board, was previously given to members at the November 2022 meeting, noting the possibly financial implications of a likely judicial review. The case was concluded in September 2023, with the Court of Session ruling in favour of the Board, as detailed in a report to the Committee's November 2023 meeting. Legal costs were also awarded in favour of the Board, to be borne by the petitioner.
- 4.28 In May 2023, the Committee considered a series of twelve Key Performance Indicators for the Procurement service, agreed as part of the extant Procurement Strategy, in order to assess the service's performance against its key strategic ambitions and aid oversight of financial controls. As of 31 March 2023, the overall validated procurement saving for Health Board

retained spend was £479k, comprising £405k for direct cash-releasing cost savings and £74k for cost avoidance. It was noted that these savings were, however, offset by the significant cost pressures being experienced as a direct result of market changes across the economy, resulting in a net cost pressure of £25k. In-Year monitoring of Procurement performance is undertaken by the Procurement Governance Board, and work is ongoing to review all opportunities to deliver a financial cost reduction in our procurement spend. A further update on Procurement KPI performance was given in November 2023 and March 2024, with members taking a robust level from assurance from the positive performance reported. Members have also taken account of the Annual Procurement Report for 2022/23, considered at the Committee's January 2024 meeting, taking significant assurance from enhanced capability within the team overall, delivering a significantly improved position on procurement activity compared to the previous year.

- 4.29 After initial consideration by the Board's Audit & Risk Committee, at their meeting in July 2023, the Committee considered the findings of the Annual Internal Audit report, with particular reference to the section on Financial Governance matters and the national challenges across NHS Scotland Boards in deliverability of financial and performance targets. Progress and improvements in the Board's internal governance processes were welcomed by members, noting the largely positive opinion of the Chief Internal Auditor on the Board's internal control framework, including those controls around quality of care, corporate governance and management of risk. The Committee also had sight of the Internal Control Evaluation report from Internal Audit, providing information on the mid-year position, at their January 2024 meeting. The report contained a full review of all areas of governance, including coverage of financial sustainability, and sought to provide early warning of any issues that might impact the Board's governance statement and would need to be addressed by year-end. The financial challenges facing NHS Scotland overall were fully highlighted within the report.
- 4.30 In September 2023, the Committee received the annual report on the Laboratories Managed Service Contract, focused on performance, noting the successful transition to a new contract and that increased demand for some laboratory tests was being closely monitored through demand management processes.
- 4.31 The Finance, Performance & Resources Committee is the standing governance committee that has oversight of the Board's performance in delivering any Directions formally issued by the Fife Integration Joint Board (IJB). In March 2024, the Committee received robust assurance that the IJB Direction issued to the Health Board in May 2023, to implement changes for the permanent re-provision of palliative care services in Fife, has been successfully delivered, within the existing service budget. The enhanced service model ensures that patients are cared for in their preferred setting, to better meet the evolving needs of patients and those of their families and carers. Members were pleased to note that there have been no complaints relating to specialist palliative care service over this time period the new model has been running. Patients, families and carers continue to share their very positive feedback on their individual care experience via Care Opinion and other such services, which provides robust and independent assurance to the Committee that the changes have been patient-centred and effective.
- 4.32 In September 2023, members considered a paper providing assurance that there was a recovery plan to support the process of applications for new pharmacy contracts across Fife, to deal with a backlog of applications then in train (25 in number, largely as a result of the pause in the process during Covid). Regulatory reform of the application process has been agreed by Scottish Government, but there is no timescale as yet for this to be acted upon. Members agreed the process to manage the current volume of applications at present, noting the challenges upon the Primary Care team in working through the backlog.

- 4.33 Minutes of Committee meetings have been approved by the Committee and presented to Fife NHS Board. The Board also receives a verbal update at each meeting from the Chair, highlighting any key issues discussed by the Committee at its preceding meeting. The Committee maintains a rolling action log to record and manage actions agreed from each meeting, and reviews progress against deadline dates at subsequent meetings. The format of the action log has been enhanced, to provide greater clarity on priority actions and their due dates. The Committee's workplan is presented to each meeting, detailing any delays to agenda items and providing information on delivery dates, to increase the visibility over the completion of each Committee's annual schedule of business.

5 Best Value

- 5.1 The Financial Improvement & Sustainability Programme in operation 2023/24 builds on the aims of the previous organisational Best Value Framework (2018). Their combined impact facilitates a more effective triangulation of workforce, operational and financial planning, which supports the promotion and delivery of best value across all of our resource allocation. The Committee supported both these initiatives and throughout 2023/24 received progress reports and plans for consideration. The Committee were able to take ongoing assurance that the organisation had the plans and processes in place to promote and deliver best value.
- 5.2 Appendix 2 provides evidence of where and when the Committee considered the relevant best value characteristics during 2023/24.

6 Risk Management

- 6.1 In line with the Board's agreed risk management arrangements, the Committee has considered risk through a range of reports and scrutiny activity, including oversight on the detail of the Corporate Risk Register covering the delegated risks to the Committee in the areas of: Delivery of a Balanced In-Year Financial Position; Delivery of Recurring Financial Balance over the Medium-Term; Prioritisation & Management of Capital Funding; Whole System Capacity; Access to Outpatient, Diagnostic and Treatment Services; and Cancer Waiting Times Progress, and appropriate actions were noted. Some minor changes to the risk descriptors and mitigating actions have been agreed during the year, with the risk on Delivery of a Balanced In-Year Financial Position updated to reflect the increasing level of challenge during the reporting year. The finance-related risks have remained rated as 'high' throughout the year, with no in-year movement. Linkages to the Board's overall risk appetite have been discussed with members, noting that for those individual metrics currently facing a risk profile in excess of the Board's agreed appetite, a degree of tolerance has been agreed, given the scale of external challenges at this time.
- 6.2 In addition to the summary presentation of the aligned risks at all meetings during the reporting year, members have received deep-dive information on their assigned risks. Deep dives allow for greater scrutiny of the root causes of risks and discussion on the effectiveness of management actions in place to reduce risk levels. Deep dives have previously been undertaken on the medium-term financial position (January 2023) and the access to outpatient, diagnostic and treatment services risk (March 2023). A deep dive into Bank & Agency Programme, which is routinely monitored by the Staff Governance Committee, was also considered by members at the May 2023 meeting, given the significance of the spend in this area and overall impact on the financial position, in addition to the potential negative impact on the quality of patient care and patient safety arising from an over reliance on bank and agency staff. A further update was given to the July 2023 meeting (which was also shared with the Staff Governance Committee), detailing the ongoing work of the Programme Board and the likelihood of delivery of savings in this area during FY2023/24. Members have recognised that the move to framework agencies, supported by an overall reduction in agency

staffing, will take some time to impact upon the financial position, and that savings are not likely to be fully realised until FY2024/25.

- 6.3 There has been significant activity by services in responding to the Scottish Government's directions on the use of agency staffing. In parallel with the work to reduce reliance on agency staffing, several initiatives to increase our substantive nursing staff levels have taken place. These include the work of the International Recruitment Oversight Group, the Healthcare Support Worker and Assistant Practitioner (Band 2-4) Career Development Framework Group, and a block recruitment event, supporting the unregistered staff pools that have been created within the Planned Care and Emergency Care directorates to support underlying long-term vacancies. In November 2023, a briefing to the Committee noted the work underway to reduce usage, recognising that whilst medical staffing had reduced (for both locum doctors and junior doctor rota compliance), nursing rotas continue to be challenged. Concern was expressed that limited progress in meeting the planned savings target would negatively impact the year-end position.
- 6.4 In September 2023, further detail on the Planned Care Programme Plan sought to give members assurance that there were a range of activities underway to address diagnostic waiting times, given a deterioration in the risk level in-year. Key priorities were explained, including work to address long waits; protecting diagnostic capacity, to support urgent suspicion of cancer referrals; and productive opportunities to transform services, utilising waiting list monies to address activity targets across Outpatients, Inpatient and Day Case procedures and working with the Centre for Sustainable Delivery to maximise the use of local capacity. Nevertheless, the risk of not being able to deliver the full waiting times activity remained high at the time of reporting, and members carefully scrutinised the reasons for that.
- 6.5 A deep-dive on cancer waiting times was undertaken at the Committee's November 2023 meeting, which sought to provide a reasonable level of assurance to the Board via the progress and activities outlined in the management actions. A deterioration in cancer waiting times for 62 day and 31 day performance was discussed, noting an increase in patient referrals and increasing complexity around cancer treatment pathways, as a result of stratified models of care. There are an increasing number of patients living with a cancer diagnosis, with care more akin to long-term disease management, which places a strain on the capacity required for ongoing and follow-up care (outpatient, inpatient and diagnostic capacity). Activity is focused around optimising current capacity (including surgical and theatre capacity) and pathways to tackle the levels of demand, noting the importance of the Board's overall organisational strategy in seeking to improve the overall population health, to address the c.40% of cancer cases that are avoidable through better lifestyle choices.
- 6.6 In January 2024, members undertook a deep dive on Prioritisation and Management of Capital Funding, noting that reasonable assurance could be provided, due to the controls then in place and those under development. Given the limited capital funding available, and demand for investment, members recognised it is vitally important that funding is prioritised to mitigate operational risks, whilst delivering change to meet strategic objectives. Employing the correct governance, processes and procedures also helps to mitigate the risk that the Board may fail to maximise the benefit from the capital allocation it receives.

7 Self-Assessment

- 7.1 The Committee has undertaken a self-assessment of its own effectiveness, utilising a questionnaire considered and approved by the Committee Chair. Attendees were also invited to participate in this exercise, which was carried out via an easily accessible online portal. A report summarising the findings of the survey was considered and approved by the Committee at its March 2024 meeting, and action points are being taken forward at both Committee and Board level.

8. Conclusion

- 8.1 As Chair of the Finance, Performance and Resources Committee, I am satisfied that the integrated approach, the frequency of meetings, the breadth of the business undertaken and the range of attendees at meetings of the Committee has allowed us to fulfil our remit as detailed in the Code of Corporate Governance. As a result of the work undertaken during the year, I can confirm that adequate financial planning, monitoring and governance arrangements were in place throughout NHS Fife during the year, including scrutiny of aspects of non-financial performance metrics. The challenging financial position will remain under close scrutiny by the Committee as the new financial year gets underway.
- 8.2 I would pay tribute to the dedication and commitment of fellow members of the Committee and to all attendees. I would thank all those members of staff who have prepared reports and attended meetings of the Committee.

Signed: 

Date: 7 May 2024

Alistair Morris, Chair

On behalf of the Finance, Performance & Resources Committee

Appendix 1 – Attendance Schedule

Appendix 2 – Best Value

**FINANCE, PERFORMANCE & RESOURCES COMMITTEE
ATTENDANCE SCHEDULE 2023/24**

	09.05.23	11.07.23	19.09.23	14.11.23	16.01.24	12.03.24
Members						
A Morris , Non-Executive Member (Chair)	✓	✓	✓	✓	✓	✓
W Brown , Non-Executive Stakeholder Member	✓	x	✓			
Cllr D Graham , Non-Executive Stakeholder Member	✓	✓				
A Grant , Non-Executive Member	✓	x	x	✓	✓	✓
J Kemp , Non-Executive Member	✓	✓	✓	✓	✓	✓
A Lawrie , Area Clinical Forum Representative	x	✓	x	✓	x	✓
M McGurk , Director of Finance & Strategy (Exec Lead)	✓	x	✓	✓	✓	x
C McKenna , Medical Director	✓	✓	✓	✓	✓	✓
J Keenan , Director of Nursing	✓	✓	x	x	✓	✓
L Parsons , Non-Executive Stakeholder Member				x	✓	✓
C Potter , Chief Executive	✓	✓	✓	✓	✓	✓
J Tomlinson , Director of Public Health	✓	✓	x	✓	✓	✓
In attendance						
K Booth , Head of Financial Services & Procurement	✓ Item 7.2			✓ Item 5.5		
N Connor , Director of H&SC	✓	✓	x	✓	✓	✓
H Close , Head of Pharmacy			✓ Deputising			
P Cumming , Risk Manager		✓ Item 5.2				
C Dobson , Director of Acute Services	✓	x	✓	✓	✓	x
F Forrest , Deputy Director of Pharmacy				✓ observing		
S Fraser , Associate Director of Planning & Performance					✓	
B Hannan , Director of Pharmacy & Medicines	✓	✓	x	✓	✓	✓
J Lyall , Chief Internal Auditor					✓ Item 6.2	
P Kilpatrick , Board Chair						✓ observing
G MacIntosh , Head of Corporate Governance & Board Secretary	✓	✓	✓	✓	✓	✓
N McCormick , Director of Property & Asset Management	✓	x	✓	✓	✓	✓

	09.05.23	11.07.23	19.09.23	14.11.23	16.01.24	12.03.24
Members						
M Michie , Deputy Director of Finance	✓	✓	✓	✓	✓	✓
D Miller , Director of Workforce	✓ Item 5.2.1			✓ Item 5.1		
K Reith , Deputy Director of Workforce		✓ Item 5.2.1				
H Thomson , Board Committee Support Officer	✓ Item 5.3					
M Watts , Emergency Care General Manager						✓ Item 5.1

BEST VALUE FRAMEWORK

Vision and Leadership

A Best Value organisation will have in place a clear vision and strategic direction for what it will do to contribute to the delivery of improved outcomes for Scotland’s people, making Scotland a better place to live and a more prosperous and successful country. The strategy will display a clear sense of purpose and place and be effectively communicated to all staff and stakeholders. The strategy will show a clear direction of travel and will be led by Senior Staff in an open and inclusive leadership approach, underpinned by clear plans and strategies (aligned to resources) which reflect a commitment to continuous improvement.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
Resources required to achieve the strategic plan and operational plans e.g. finance, staff, asset base are identified and additional / changed resource requirements identified.	Financial Plan Workforce Plan Property & Asset Management Strategy	FINANCE, PERFORMANCE & RESOURCES COMMITTEE STAFF GOVERNANCE COMMITTEE BOARD	Annual Annual Annual Bi-annual Bi-monthly	Annual Delivery Plan Financial Plan Workforce Plan Property & Asset Management Strategy Integrated Performance & Quality Report
The strategic plan is translated into annual operational plans with meaningful, achievable actions and outcomes and clear responsibility for action.	Annual Delivery Plan	FINANCE, PERFORMANCE & RESOURCES COMMITTEE CLINICAL GOVERNANCE COMMITTEE BOARD	Annual Bi-monthly Bi-monthly	Annual Delivery Plan Minutes of Committees Integrated Performance & Quality Report

GOVERNANCE AND ACCOUNTABILITY

The “Governance and Accountability” theme focuses on how a Best Value organisation achieves effective governance arrangements, which help support Executive and Non-Executive leadership decision-making, provide suitable assurances to stakeholders on how all available resources are being used in delivering outcomes and give accessible explanation of the activities of the organisation and the outcomes delivered.

A Best Value organisation will be able to demonstrate structures, policies and leadership behaviours which support the application of good standards of governance and accountability in how the organisation is improving efficiency, focusing on priorities and achieving value for money in delivering its outcomes. These good standards will be reflected in clear roles, responsibilities and relationships within the organisation. Good governance arrangements will provide the supporting framework for the overall delivery of Best Value and will ensure open-ness and transparency. Public reporting should show the impact of the organisation’s activities, with clear links between the activities and what outcomes are being delivered to customers and stakeholders. Good governance provides an assurance that the organisation has a suitable focus on continuous improvement and quality. Outwith the organisation, good governance will show itself through an organisational commitment to public performance reporting about the quality of activities being delivered and commitments for future delivery.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
Board and Committee decision-making processes are open and transparent.	Board meetings are held in open session and minutes are publicly available. Committee papers and minutes are publicly available	BOARD COMMITTEES	On going	NHS Fife website
Board and Committee decision-making processes are based on evidence that can show clear links between activities and outcomes	Reports for decision to be considered by Board and Committees should clearly describe the evidence underpinning the proposed decision.	BOARD COMMITTEES	Ongoing	SBAR reports EQIA section on all reports

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
NHS Fife conducts rigorous review and option appraisal processes of any developments.	Business cases	BOARD FINANCE, PERFORMANCE & RESOURCES COMMITTEE	Ongoing	Business Cases

USE OF RESOURCES

The “Use of Resources” theme focuses on how a Best Value organisation ensures that it makes effective, risk-aware and evidence-based decisions on the use of all of its resources.

A Best Value organisation will show that it is conscious of being publicly funded in everything it does. The organisation will be able to show how its effective management of all resources (including staff, assets, information and communications technology (ICT), procurement and knowledge) is contributing to delivery of specific outcomes.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
NHS Fife understands and measures and reports on the relationship between cost, quality and outcomes.	Reporting on financial position in parallel with operational performance and other key targets	BOARD FINANCE, PERFORMANCE & RESOURCES COMMITTEE	Bi-monthly	Integrated Performance & Quality Report
The organisation has a comprehensive programme to evaluate and assess opportunities for efficiency savings and service improvements including comparison with similar organisations.	National Benchmarking undertaken through Corporate Finance Network. Local benchmarking with similar sized organisation undertaken where information available. Participation in National Shared Services Programme Systematic review of activity / performance data through use of Discovery tool	FINANCE, PERFORMANCE & RESOURCES COMMITTEE BOARD	Annual Bi-monthly Ongoing	Financial Plan Integrated Performance & Quality Report Financial overview presentations

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
Organisational budgets and other resources are allocated and regularly monitored.	Annual Delivery Plan Integrated Performance & Quality Report	FINANCE, PERFORMANCE & RESOURCES COMMITTEE	Bi-monthly	Integrated Performance & Quality Report SPRA Process
NHS Fife has a strategy for procurement and the management of contracts (and contractors) which complies with the SPFM and demonstrates appropriate competitive practice.	Code of Corporate Governance Financial Operating Procedures	FINANCE, PERFORMANCE & RESOURCES COMMITTEE	Reviewed annually	Code of Corporate Governance Financial Operating Procedures Procurement Annual Report
NHS Fife understands and exploits the value of the data and information it holds.	Annual Delivery Plan Integrated Performance & Quality Report	BOARD COMMITTEES	Annual Bi-monthly	Annual Delivery Plan Integrated Performance & Quality Report

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
Fixed assets including land, property, ICT, equipment and vehicles are managed efficiently and effectively and are aligned appropriately to organisational strategies.	Property and Asset Management Strategy	FINANCE, PERFORMANCE & RESOURCES COMMITTEE	Bi-annual Ongoing Bi-monthly Monthly	Property and Asset Management Strategy Report on asset disposals Integrated Performance & Quality Report Minutes of NHS Fife Capital Investment Group

PERFORMANCE MANAGEMENT

The “Performance Management” theme focuses on how a Best Value organisation embeds a culture and supporting processes which ensures that it has a clear and accurate understanding of how all parts of the organisation are performing and that, based on this knowledge, it takes action that leads to demonstrable continuous improvement in performance and outcomes.

A Best Value organisation will ensure that robust arrangements are in place to monitor the achievement of outcomes (possibly delivered across multiple partnerships) as well as reporting on specific activities and projects. It will use intelligence to make open and transparent decisions within a culture which is action and improvement oriented and manages risk. The organisation will provide a clear line of sight from individual actions through to the National Outcomes and the National Performance Framework. The measures used to manage and report on performance will also enable the organisation to provide assurances on quality and link this to continuous improvement and the delivery of efficient and effective outcomes.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
<p>Performance is systematically measured across all key areas of activity and associated reporting provides an understanding of whether the organisation is on track to achieve its short and long-term strategic, operational and quality objectives</p>	<p>Integrated Performance & Quality Report encompassing all aspects of operational performance, AOP targets / measures, and financial, clinical and staff governance metrics.</p> <p>The Board delegates to Committees the scrutiny of performance</p> <p>Board receives full Integrated Performance & Quality Report and notification of any issues for escalation from Committees.</p>	<p>COMMITTEES</p> <p>BOARD</p>	<p>Every meeting</p>	<p>Integrated Performance & Quality Report</p> <p>Code of Corporate Governance</p> <p>Minutes of Committees</p>

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
The Board and its Committees approve the format and content of the performance reports they receive	The Board / Committees review the Integrated Performance & Quality Report and agree the measures.	COMMITTEES BOARD	Annual	Integrated Performance & Quality Report
Reports are honest and balanced and subject to proportionate and appropriate scrutiny and challenge from the Board and its Committees.	Committee Minutes show scrutiny and challenge when performance is poor as well as good; with escalation of issues to the Board as required	COMMITTEES BOARD	Every meeting	Integrated Performance & Quality Report Minutes of Committees
The Board has received assurance on the accuracy of data used for performance monitoring.	Performance reporting information uses validated data.	COMMITTEES BOARD	Every meeting Annual	Integrated Performance & Quality Report Annual Accounts including External Audit report

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
<p>NHS Fife’s performance management system is effective in addressing areas of underperformance, identifying the scope for improvement, agreeing remedial action, sharing good practice and monitoring implementation.</p>	<p>Encompassed within the Integrated Performance & Quality Report</p>	<p>COMMITTEES BOARD</p>	<p>Every meeting</p>	<p>Integrated Performance & Quality Report Minutes of Committees</p>

CROSS-CUTTING THEME – SUSTAINABILITY

The “Sustainability” theme is one of the two cross-cutting themes and focuses on how a Best Value organisation has embedded a sustainable development focus in its work.

The goal of Sustainable Development is to enable all people throughout the world to satisfy their basic needs and enjoy a better quality of life without compromising the quality of life of future generations. Sustainability is integral to an overall Best Value approach and an obligation to act in a way which it considers is most sustainable is one of the three public bodies’ duties set out in section 44 of the Climate Change (Scotland) Act 2009. The duty to act sustainably placed upon Public Bodies by the Climate Change Act will require Public Bodies to routinely balance their decisions and consider the wide range of impacts of their actions, beyond reduction of greenhouse gas emissions and over both the short and the long term.

The concept of sustainability is one which is still evolving. However, five broad principles of sustainability have been identified as:

- promoting good governance;
- living within environmental limits;
- achieving a sustainable economy;
- ensuring a stronger healthier society; and
- using sound science responsibly.

Individual Public Bodies may wish to consider comparisons within the wider public sector, rather than within their usual public sector “family”. This will assist them in getting an accurate gauge of their true scale and level of influence, as well as a more accurate assessment of the potential impact of any decisions they choose to make.

A Best Value organisation will demonstrate an effective use of resources in the short-term and an informed prioritisation of the use of resources in the longer-term in order to bring about sustainable development. Public bodies should also prepare for future changes as a result of emissions that have already taken place. Public Bodies will need to ensure that they are resilient enough to continue to deliver the public services on which we all rely.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
NHS Fife can demonstrate that it respects the limits of the planet’s environment, resources and biodiversity in order to improve the environment and ensure that the natural resources needed for life are	Sustainability and Environmental report incorporated in the Annual Accounts process.	FINANCE, PERFORMANCE & RESOURCES COMMITTEE BOARD	Annual	Annual Accounts

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE
unimpaired and remain so for future generations.				Climate Change Template

CROSS-CUTTING THEME – EQUALITY

The “Equality” theme is one of the two cross-cutting themes and focuses on how a Best Value organisation has embedded an equalities focus which will secure continuous improvement in delivering equality.

Equality is integral to all our work as demonstrated by its positioning as a cross-cutting theme. Public Bodies have a range of legal duties and responsibilities with regard to equality. A Best Value organisation will demonstrate that consideration of equality issues is embedded in its vision and strategic direction and throughout all of its work.

The equality impact of policies and practices delivered through partnerships should always be considered. A focus on setting equality outcomes at the individual Public Body level will also encourage equality to be considered at the partnership level.

REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE:
NHS Fife meets the requirements of equality legislation.		BOARD COMMITTEES	Ongoing	EQIA section on all reports
The Board and senior managers understand the diversity of their customers and stakeholders.	Equality Impact Assessments are reported to the Board and Committees as required and identify the diverse range of stakeholders.	BOARD COMMITTEES	Ongoing	EQIA section on all reports
NHS Fife’s policies, functions and service planning overtly consider the different current and future needs and access requirements of groups within the community.	In accordance with the Equality and Impact Assessment Policy, Impact Assessments consider the current and future needs and access requirements of the groups within the community.	BOARD COMMITTEES	Ongoing	Development of new Strategy EQIA section on reports

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REQUIREMENT	MEASURE / EXPECTED OUTCOME	RESPONSIBILITY	TIMESCALE	OUTCOME / EVIDENCE:
Wherever relevant, NHS Fife collects information and data on the impact of policies, services and functions on different equality groups to help inform future decisions.	In accordance with the Equality and Impact Assessment Policy, Impact Assessments will collect this information to inform future decisions.	BOARD COMMITTEES	Ongoing	EQIA section on reports