

Joint Finance and Performance Committee Terms of Reference

Document Owner: Joint Director of Corporate Affairs and Communications

Related Documents:
Trust Constitution
Standing Orders
Scheme of Reservation and Delegation
Standing Financial Instructions

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1. Constitution

The Committee is established as a Committee of the Group Board of Directors of Wirral University Teaching Hospital NHS Foundation Trust and Wirral Community Health and Care NHS Foundation Trust in order to ensure effective governance is in place to monitor and deliver the financial and operational targets and trajectories both in year and as planned for future years. As part of this, the Committee will review and receive reports on the Trusts' estates, backlog maintenance, capital programme, and other associated initiatives such as sustainability.

2. Authority

The Committee is authorised by the Group Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.

Matters for consideration by the Committee may be nominated by any member of the Committee or Executive Director of the Trust.

The Committee is authorised to instruct professional advisers and request the attendance of individuals authorities from outside the Trust with relevant experience and expertise if it considers it necessary or expedient to the exercise of its functions.

In addition, the Committee is authorised to request that another Committee or the Board review, monitor, or approve any item that may be better suited to, or overlap with, their responsibility.

3. Objectives and Duties

The Committee will deliver the following objectives, along with any others that are assigned by the Group Board during the course of the year:

- 3.1 Strategy and Policy**
 - 3.1.1 To review and approve both Trust's Finance Strategies and monitoring their effectiveness on an ongoing basis.
 - 3.1.2 To review and approve both Trusts' Estates management strategies, including the Green Plan
 - 3.1.3 To approve the Trusts' Health and Safety plans, recommending them to the Board for final approval.
 - 3.1.4 To approve and recommend to the Board the strategy for capital works, and to monitor the implementation of the capital strategy and annual capital plan.
 - 3.1.5 To review the policies and risks associated with estates related to maintenance, health and safety, fire, security, and other related areas.
 - 3.1.6 Approve WCHC trust-wide policies associated with finance and operational
- 3.2 Regulation**
 - 3.2.1 Monitor compliance with all relevant regulatory standards
- 3.3 Risk and Assurance**
 - 3.3.1 Review all high-level organisational risks associated with finance, operations, and estates performance and monitor mitigations, controls and progress on strategic risks through the BAF, recommending new risks as required
 - 3.3.2 To monitor internal financial, operational, and estates related performance indicators on behalf of the Group Board and report to the Board via the integrated performance report and on an exception basis;
 - 3.3.3 To monitor the progress against internal audit report recommendations as are deemed relevant to this Committee
 - 3.3.4 To consider and seek further assurance regarding any potential financial, operational, or estates related impacts arising from Trust activities, as referred by other Committees
 - 3.3.5 To review, monitor and seek assurance on the achievement of value for money through use of benchmarking data, including reference costs and the work of the model hospital.
- 3.4 Finance**
 - 3.4.1 To review the Financial Plans, both Annual and longer term, in accordance with agreed timescales and in line with the Trusts' strategic objectives, making appropriate recommendations to the Board of Directors.
 - 3.4.2 To review and approve the annual capital programme, making appropriate recommendations to the Board of Directors
 - 3.4.3 To review and ensure effective due diligence has taken place for business cases, including alignment to Trust strategies, approving those within the financial limits delegated and referring those in excess of delegated limits to the Board with recommendations.
 - 3.4.4 To monitor and seek assurance on provider to provider and third party contractor SLA's that present a material risk to the organisation.
 - 3.4.5 To consider future options for all non NHS income and ensure that income derived from activities related to the Trusts' principal purpose meets the limits as set by national governing bodies.
 - 3.4.6 To oversee the Trusts' overall cash position, by:
 - a) reviewing the cash forecasts, the current cash position, and seeking assurance on the reasons for that position;
 - b) reviewing and monitoring the management of financial risk and the availability of cash to meet operational requirements;
 - c) reviewing the cash impact of capital investments and any approved business cases within the delegated limits of this Committee; and

- d) reviewing the cash impact of any expenditure outside of the Board approved Financial Plan.

3.5 Operations

- 3.5.1 To monitor the operational performance on access targets, diagnostic standards, productivity, and related trajectories, and agree corrective action, as necessary.
- 3.5.2 To monitor the implementation of the efficiency programme, and to receive assurance that any potential impact of that programme has been risk assessed with mitigations identified. Any areas of impact that are considered a concern may be referred to another relevant Board Committee for further assurance.

3.6 Estates

- 3.6.1 To consider any findings of major investigations of internal control over safety critical matters

4. Equality and Diversity

The Committee will seek to promote and enhance equality, diversity, and inclusion across the Trust, both in the discharge of its duties and decision making processes, and in representing these values in all areas it touches.

The Committee will also have regard for the NHS Constitution and ensure that it complies with relevant legislation and best practice in the conduct of its duties.

5. Membership

The Committee shall consist of:

- 3 Non-Executive Directors (to include the Chair of the Committee)
- Joint Chief Finance Officer (Lead Executive)
- Joint Executive Managing Director
- Joint Chief Medical Officer
- Joint Chief People Officer
- Joint Chief Integration and Partnerships Officer

All members should aim to attend all scheduled meetings with attendance being reviewed annually. Attendance below 80% may result in discussions with the Committee Chair.

Where Executive members are unable to attend, they should send a designated nominated deputy.

6. Attendance

Meetings of the Committee may, at the request of the Chair, be attended by:

- Joint Director of Corporate Affairs and Communications
- Deputy Chief Finance Officers (WUTH and WCHC)
- Directors of Operations (WUTH)
- Deputy Chief Operating Officer (WCHC)
- Associate Director of Productivity, Efficiency & PMO
- Governor Representatives

The Committee may invite other persons to attend a meeting as required.

7. Conflicts of Interest

Notwithstanding the definition of material interests applicable to Directors as set out in the constitution, due consideration of interests will be regularly monitored and recorded in the minutes.

8. Quorum and Frequency

A quorum shall be at least four members, including 2 Non Executive Directors and 2 Executive Directors.

Meetings shall be held as necessary and at least 4 times annually. Meetings may be added, stood down, or rescheduled with the approval of the Chair.

9. Reporting

The minutes of all meetings shall be formally recorded and the Committee will report to the Group Board following each meeting via a Chair's report.

The Committee will also update the Council of Governors on recent Committee activity.

10. Conduct of Committee Meetings

The agenda and supporting papers will be sent out at least four working days prior to the Committee, unless there are exceptional circumstances authorised by the Chair.

Presenters of papers can expect all committee members to have read the papers and should keep to a verbal summary outlining the purpose of the report and its recommendations. Committee members may question the presenter.

Any disputes will be escalated to the Board of Directors where votes may be taken.

11. Performance Evaluation

As part of the board's annual performance review process, the committee shall review its collective performance each year.

12. Review

The terms of reference of the committee shall be reviewed by the board when requested but at least annually.