

Boards in Common Paper F4

UHN Finance, Investment and Performance Committee		Date of committee meeting: 26 th May 2026	
Reporting Group Chair: Damien Venkatasamy			
Agenda Item	Description and summary discussion	BAF references	Assurance level *
CFO Report – Month 1	The committee noted that Month 1 financial performance is in line with plan; however, the committee draws the Boards' attention to the following material risks to delivery: - A developing gap in Cost Improvement Programme (CIP) delivery from quarter 2 onwards. - A challenging cash position across both organisations requiring continued reliance on external support and enhanced working capital controls. - Associated risks to supply chain continuity if cash pressures persisted.	UHN16 financial plan delivery	Reasonable
Medium Term Financial Plan	The committee noted a verbal update on the financial plan which remained subject to further discussion with NHS England. The committee noted: • The potential for increased savings requirements • The current 7% CIP requirement is already at the upper limit of deliverability. • The need to identify clear routes to deliver additional in-year savings.	UHN16 financial plan delivery	Limited
Workforce Productivity	The committee notes workforce as a strategic and financial risk. Key issues include: • Continued reliance on bank staffing with limited net reduction in workforce costs • Workforce levels remain above planned establishment.	UHN19 workforce plan	Limited
Integrated Performance Report	The committee highlights sustained operational pressures and their direct impact on performance and financial recovery highlighting: • Demand remains above plan across both sites. • Prolonged OPEL 4 status, particularly at Northampton, indicating sustained system pressure. • Performance improvements remain constrained by capacity and flow limitations. • Delayed discharges remain significantly above system expectations. This is constraining bed capacity, patient flow and financial recovery. There is limited evidence of sufficient system wide response. • Ongoing challenges with patient transport services are contributing to failed and delayed discharges. This is impacting both operational flow and patient experience.	UHN15 demand and capacity	Limited

*The Committee will indicate the level of assurance it is able to provide to the Boards of Directors using the definitions below. **Committee Chairs will be asked to determine the level of assurance the committee is able to provide following the conclusion of discussion of each item.**

Substantial Assurance	There is evidence of a clear understanding of the matter or issue to be addressed; there is evidence of independent or external assurance; there are plans in place and these are being actively delivered and there is triangulation from other sources (e.g. patient or staff feedback)
Reasonable Assurance	There is evidence of a good understanding of the matter or issue to be addressed; there are plans in place and these are being delivered against agreed timescales; those that are not yet delivered are well understood and it is clear what actions are being taken to control, manage or mitigate any risks; where required there is evidence of independent or external assurance.
Limited Assurance	There is partial clarity on the matter to be addressed; some progress has been made but there remain a number of outstanding actions or progress against any plans so will not be delivered within agreed timescales; independent or external assurance shows areas of concern; there are increasing risks that are only partially controlled, mitigated or managed
No Assurance	Management cannot clearly articulate the matter or issue; something has arisen at Committee for which there is little or no awareness and no action being taken to address the matter; there are a significant number of risks associated where it is not clear what is being done to control, manage or mitigate them; and the level of risk is increasing