

Cover Sheet

Council of Governors Meeting: Thursday 5 February 2026

CoG2026.02

Title: **Performance, Workforce and Finance Committee Report**

Status: **For Information**

History: **Report from PWF to Council**

Lead: **Committee Chair**

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Confidential: **No**

Key Purpose: **Assurance**

Performance, Workforce and Finance Committee Report

1. Purpose

- 1.1. This paper forms part of the Performance, Workforce and Finance Committee's regular reporting to Council of Governors, providing Council with a summarised report highlighting key Committee business and issues arising from its meetings.

2. Background

- 2.1. The remit of the Committee is to consider, for the Council of Governors, matters concerning the performance of the Trust against key standards and how the Trust Board obtains assurance about this; matters concerning the planning and development of the Trust's workforce and how the Trust Board obtains assurance about this; and matters concerning the Trust's financial position and planning and how the Trust Board obtains assurance about this.
- 2.2. Since the last meeting of the Council of Governors the Committee held a meeting on 30 January 2026 which focussed primarily on ensuring that the Committee was briefed on the Trust's annual plan submission.

3. Annual Plan Submission for 2026/27

- 3.1. The Committee received a comprehensive briefing on the Trust's annual plan submission in line with NHS England requirements. The planning process was being led by the Chief Operating Officer and commentary was also provided by the Chief Finance Officer.
- 3.2. The plan this year covers a three-year period with a five-year narrative and incorporates capital planning alongside finance, workforce, activity, and performance domains. Two formal submission deadlines are in place, with the first completed in December 2025 and the final submission due in February 2026.
- 3.3. Key features of the planning process included challenge and triangulation across domains, a Board Assurance self-assessment, and consideration of commissioner requirements. The Committee was informed that while feedback on the initial submission had been received, further feedback and close monitoring were expected on the second submission. The Trust Board had reviewed the plan prior to this committee meeting, and delivery of the plan was now the critical focus for the Board.

- 3.4. The Committee heard that the Chief Operating Officer planned to issue a one-page internal staff communication summarising the annual plan and that this would also be shared with governors.
- 3.5. The Committee discussed the principal risks and gaps associated with the annual plan, including:
- Workforce Reductions: The plan includes further reductions in temporary and substantive staffing, though OUH's agency usage was already low compared with external benchmarks. Targeted increases in staffing in priority areas, such as surgical capacity, were planned. The phasing of changes was designed to be realistic and safe.
 - Morale: Concerns were raised about the impact of the plan and financial constraints on staff morale. The Committee noted that the plan was structured as required by NHS England and focused on workforce numbers and financial figures, but that Trust leadership was committed to supporting staff through change.
 - Financial Risks: Significant levels of CIP (Cost Improvement Plan) savings were required to meet financial targets, with a substantial proportion of savings in the current year being non-recurrent. The underlying deficit for the following year was therefore larger than previously anticipated, increasing the level of challenge.
 - Constitutional Standards: The submitted plan does not meet all constitutional standards, notably in areas such as RTT and cancer targets. The Board had discussed whether additional funding would resolve these gaps and agreed with the approach taken by the executive team, noting that in many cases capacity constraints could not currently be resolved by additional funding.
 - System Change and Uncertainty: The Committee noted uncertainties around future NHS structural changes (e.g., Integrated Health Organisations, ICB restructuring) and the impact these might have on planning and delivery. While these risks were recognised and included in the Board's risk assessment, formal contingencies could not be included in the submission.
 - Capital Planning: The Committee noted that while capital allocations were increasing, the unpredictability and late arrival of funding complicated planning and efficient resource utilisation.
- 3.6. On all these issues, the Committee was assured that risks had been openly discussed and were reflected where appropriate in the plan and supporting documents.

- 3.7. The Committee benefited from the presence of non-executive directors, who provided their perspectives on the annual plan and associated risks. NEDs had been involved in reviewing the plan in December and January and participated in detailed discussions at the most recent Trust Board meeting. Their contributions included assurance on the robustness of workforce planning, financial risk management, and the approach to constitutional standards.

4. Other Matters

- 4.1. The Committee noted that Andy Lawrie had been appointed to the role of Deputy Chair and supported the proposal that he and Jeremy Hodge would swap roles so that Dr Hodge would act as Deputy with Mr Lawrie in the Chair role.
- 4.2. There was debate about the impact of a proposal to remove charitable funding for staff parties. Opinions were split, with some favouring continued support for morale-boosting events and others preferring a focus on equipment and environment. The issue was to be considered by the Board of Trustees of the Oxford Hospitals Charity.
- 4.3. The Committee noted that new non-executives had joined the Board and that regular attendees at the Committee in the future would be confirmed shortly.
- 4.4. The Committee noted that this was Claire Flint's final meeting of the Committee and thanked her for her contributions to its work.

5. Recommendations

- 5.1. The Council is asked to note this report and the assurance provided that the Committee has been fully briefed on the Trust's annual plan submission, including current risks and gaps, and has engaged with non-executive directors to ensure robust oversight and governance.