

Public Finance & Performance Committee

Wed 21 June 2023, 14:00 - 16:00

Agenda

14:00 - 14:10 **1. Standing Items**
10 min


Michael Imperato

1.1. Welcome and Introductions

1.2. Apologies for Absence

1.3. Declarations of Interest

1.4. Minutes from the Finance and Performance Committee meeting – 17 May 2023

 1.4 Draft Public Finance & Performance Minutes 17.05.23 MD.pdf (10 pages)

1.5. Action log following the Finance and Performance Committee meeting held on 17 May 2023

 1.5 Public Finance and Performance Action LogMD.pdf (2 pages)

1.6. Chair’s Actions since previous meeting

14:10 - 15:20 **2. Items for Review and Assurance**
70 min

2.1. Financial Report – Month 2

Catherine Phillips Robert Mahoney

 2.1 Public Finance Committee SUMMARY Finance Position Report for Month 2.pdf (10 pages)

2.2. Operational Performance Report

Paul Bostock

 2.2 Operational Performance report cover paper.pdf (3 pages)

 2.2a Operational Performance - Finance and Performance Committee 21 06 23.pdf (17 pages)

2.3. Business Cases with No Funding Options

Catherine Phillips Andrew Gough

 2.3 Public Finance Committee Business cases with No Funding 21 June 2023.pdf (2 pages)

 2.3a Draft Capital Approval Plan 2023-24 for 21 June 2023 Finance Committee review.pdf (6 pages)

2.4. Board Assurance Framework

James Quance

 2.4 Board Assurance Framework – Capital Assets and Financial Sustainability.pdf (2 pages)

Mohamed Saleh
14/06/2023 12:31:21

 2.4a Finance & Performance BAF June 2023.pdf (5 pages)

2.5. Q4 report of the Regional Integration Fund

Abi Harris Meredith Gardiner

 2.5 Regional Integration Fund Q4 reports 2022-23.pdf (2 pages)

2.6. BREAK - 10 Minutes

15:20 - 15:20 3. Items for Approval / Ratification

0 min

No items

15:20 - 15:25 4. Items for Information and Noting

5 min

4.1. Monthly Monitoring Returns – Month 1

Catherine Phillips Robert Mahoney

 4.1.1 WG month 1 MMR Covering Report.pdf (2 pages)

 4.1.1a CV Financial Monitoring Returns 2023-24 - Month 1.pdf (7 pages)

 4.1.1b 2023-24 MMR Template - Cardiff Vale UHB Month 1.pdf (6 pages)

4.2. Monthly Monitoring Returns - Month 2

 4.1.2 WG month 2 MMR Covering Report.pdf (2 pages)

 4.1.2a CV Financial Monitoring Returns 2023-24 - Month 2.pdf (7 pages)

 4.1.2b 2023-24 MMR Template - Cardiff Vale UHB Month 2.pdf (7 pages)

15:25 - 15:25 5. AOB

0 min

15:25 - 15:25 6. Review and Final Closure

0 min

6.1. Items to be deferred to Board / Committee

6.2. Date, time and venue of the next Committee meeting:

Wednesday 19th July 2023 at 2pm via MS Teams

Mohamed Sarah
14/06/2023 12:31:21

**Unconfirmed Minutes of the Public Finance and Performance Committee Meeting
Held On 17th May 2023 at 2 pm
Via MS Teams**

Chair:		
Michael Imperato	MI	Independent Member – Legal
Present:		
John Union	JU	Independent Member – Finance
David Edwards	DE	Independent Member - ICT
In Attendance:		
Charles Janczewski	CJ	UHB Chair (<i>left the meeting at 15:10</i>)
Abigail Harris	AH	Executive Director of Strategic Planning
Angela Hughes	AHu	Assistant Director of Patient Experience
Catherine Phillips	CP	Executive Director of Finance
Robert Mahoney	RM	Deputy Director of Finance (Operational)
Andrew Gough	AG	Deputy Director of Finance (Strategy)
Paul Bostock	PB	Chief Operating Officer
James Quance	JQ	Interim Director of Corporate Governance
Suzanne Rankin	SR	Chief Executive Officer
Observers:		
Ashley Moturi	AM	Finance Management Trainee
Secretariat:		
Nathan Saunders	NS	Senior Corporate Governance Officer
Apologies:		
Ceri Phillips	CP	UHB Vice Chair
Keith Harding	KH	Independent Member – University

Item No	Agenda Item	Action
FPC 23/05/001	Welcome & Introduction The Committee Chair (CC) welcomed everyone to the meeting.	
FPC 23/05/002	Apologies for Absence Apologies for Absence were noted. The Finance Committee resolved that: a) Apologies for Absence were noted.	
FPC 23/05/003	Declarations of Interest No Declarations of Interest were noted.	
FPC 23/05/004	Minutes of the Finance and Performance Meetings held on 22.03.2023 and 19.04.2023	

	<p>The minutes of the meetings held on 22.03.2023 and 19.04.2023 were received.</p> <p>The Finance Committee resolved that:</p> <p>a) The minutes of the Finance and Performance Committee meetings held on 22.03.2023 and 19.04.2023 were held as a true and accurate record of the meeting.</p>	
FPC 23/05/005	<p>Action Log following the Finance and Performance Committee meeting on 19th April 2023.</p> <p>The Action Log was received.</p> <p>The Finance Committee resolved that:</p> <p>a) The Action Log for the Finance and Performance Committee was noted</p>	
FPC 23/05/006	<p>Chairs Action since previous meeting</p> <p>There had been no Chair's Actions taken since the last meeting.</p>	
	Items for Review and Assurance	
FPC 23/05/007	<p>Financial Report – Month 1</p> <p>The Financial Report – Month 1 was received.</p> <p>The Operational Deputy Director of Finance (ODDDF) presented the Financial Report – Month 1 to the Committee.</p> <p>It was noted that the Health Board was reporting a £8.896m overspend in Month 1 and that the financial plan had forecast an £88.4m deficit at year end, once £32m of savings had been achieved.</p> <p>The DDDF added that at Month 1, there were still unidentified savings components to the saving programme for the year and one twelfth of the unidentified savings components represented £1.446m.</p> <p>It was noted that there was a small operational deficit that had funded last year's outturn broadly in terms of delegated positions to address unforeseen cost pressures.</p> <p>It was noted that the Health Board was holding reserves for inflation and some Covid costs, as well as other components of the plan and additional spend. Therefore an operational deficit was not expected to be seen at this point in the year.</p> <p>The DDDF advised the Committee that the more concerning figure presented was the £1.446m which meant that there was still a lot of work to be done to identify savings programmes and that the Welsh Government (WG) had asked the Health Board to firm up some of those plans to demonstrate the credibility of the £32m of savings.</p>	

Mohamed Sarah
14/06/2023 12:31:24

<p>Mohamed, Sarah 14/06/2023 12:31:21</p>	<p>The UHB Chair advised the Committee that it was a disappointing start for Month 1 and noted that although the overspend of £0.083m did not sound like a lot of money, it did not bode well for future months.</p> <p>He asked that a tracking graph be provided for the next meeting to show how much the Health Board's finances were drifting off course each month so that the Committee could keep track.</p> <p>The DDDF noted that the Health Board's Key Performance Indicators (KPIs) would probably remain similar throughout the year but that it would be monitored and the £32m savings were expected to be delivered.</p> <p>He added that it was planned to remain within the Capital Resource limit and noted that the Health Board had been successful in achieving that in previous years.</p> <p>The CC asked if decisions or ideas would be made for the following month which would produce further savings and could be reported to the Committee.</p> <p>The ODDDF responded that further on in the received report, a table could be found which outlined the request on the progress on the savings summary.</p> <p>The Strategic Deputy Director of Finance (SDDDF) responded that the savings tracker was a live position, updated daily across all Clinical Boards and that a "red pipeline" was maintained within the tracker of live ideas that would progress to "amber and/or green pipelines".</p> <p>He added that it was important for that red pipeline to be brimming with ideas from the Clinical Boards.</p> <p>The UHB Chair noted that he was hopeful that the Health Board would not stay in the modus operandi of broad comments like those seen at the top of the received report and added that broad comments were unhelpful statements because the Committee needed to understand how money would be recovered and in what timeframe.</p> <p>The SDDDF responded that a monthly operational finance meeting was held with all of the Clinical Boards to discuss the operational variants and noted that the disappointment with the Month 1 position was highlighted to each of the Clinical Boards.</p> <p>The CEO added that the first Sustainability Programme Board meeting was being held that week and consisted of cross organisational leadership teams reviewing all of the financial data, in particular around the 3% operational grip and control savings programme alongside the corporate savings programme.</p> <p>The Independent Member – ICT (IMICT) advised the Committee that in relation to savings programme, it appeared that the total amount of</p>	<p>CP/RM</p>
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	<p>savings had been divided by 12 to create a monthly figure and noted that he would prefer to see a genuine profile of the monthly savings in line with the comment from the UHB Chair regarding receiving accurate data.</p> <p>The Executive Director of Finance (EDF) advised the Committee that how the position would be presented to the Committee would be looked at for future meetings.</p> <p>She added that the Finance team had discussed how to present the position and noted that any savings that had not been identified would be divided by the 12, as it was unknown what would be done at that stage.</p> <p>The ODDDF presented the Committee with the remainder of the Financial Report which included:</p> <ul style="list-style-type: none"> • Table 3 - Financial Performance for the period ended 30th April 2023 <p>It was noted that the Health Board planned to recover the adverse operational variance of £0.083m at Month 1 as the year progressed.</p> <p>The ODDDF added that the forecast assumed that the Health Board would successfully identify and deliver further savings schemes to cover the planning assumptions detailed in the financial plan.</p> <ul style="list-style-type: none"> • Table 4 - COVID 19 Expenditure <p>It was noted that Health Protection, Local Response, Dental Income and PPE were no longer funded by WG and, as such, were included in the Health Board's Financial Plan.</p> <ul style="list-style-type: none"> • Table 5 - Summary Financial Position for the period ended 30th April 2023 <p>The ODDDF advised the Committee that the position outlined £8.896m overspend at Month 1, between Income, Pay and Non Pay.</p> <ul style="list-style-type: none"> • Table 6 – Risks <p>It was noted that the key risk which fed into the Health Board's Corporate Risk Register was the failure of the Health Board to deliver a breakeven position by 2023-24-year end with a current planned deficit of £88.4m.</p> <ul style="list-style-type: none"> • Table 7 - Savings Schemes <p>The Committee was advised that at Month 1, the Health Board was forecasting £14.495m of savings to deliver against the £32m savings target which left a further £17.505m (55%) schemes to identify.</p> <p>The ODDDF noted that the Health Board was expected to manage the balance of savings plans required to deliver the forecast deficit of £88.4m</p>	CP/RM
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Mohamed Sarah
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	<ul style="list-style-type: none"> Public Sector Payment Compliance <p>It was noted that the Health Board's Public Sector payment compliance performance was above the target of 95% and performance for the month to the end of April 2023 was 97.45%.</p> <p>The UHB Chair noted that the Finance team had worked incredibly hard and congratulated the whole team on its strong performance.</p> <p>The Finance Committee resolved at Month 1:</p> <ol style="list-style-type: none"> The reported year to date overspend of £8.896m and the forecast deficit of £88.400m was noted The year to date financial impact of forecast COVID 19 costs which was assessed at £46.420m was noted The Month 1 operational overspend against plan of £0.083m was noted; and The progress against the savings target with £14.495m (45%) of schemes identified at Month 1 against the £32.000m target was noted. 	
<p>FPC 23/05/008</p>	<p>Operational Performance Report</p> <p>The Operational Performance Report was received.</p> <p>The Chief Operating Officer advised the Committee that the report received would be last time it would be received in that current format.</p> <p>He added that the new look report for the following month would report:</p> <ul style="list-style-type: none"> The progress against the 16 Ministerial Priorities Monitoring on quadruple aims that were set out as part of the NHS Performance Framework <p>It was noted that the report contained data from both February 2023 and March 2023 and that it was as up to date as it could have been given the publishing schedule.</p> <p>The COO identified areas for noting which included:</p> <ul style="list-style-type: none"> The Emergency Unit (EU) had become busier in March 2023 by 12% more than previous months which had continued into April and May 2023 and as a result of some of the pressure, the Health Board were still doing well against 12 hour waits and ambulance handovers but a dip had been observed against the data from February 2023. There had been significant improvement in ambulance handover times which had led to an improvement in the total number of lost hours and the volume of crews waiting greater than 4 hours to handover. 	

Mohamed Sarah
14/06/2023 12:31:21

<p>Mohamed Sarah 14/06/2023 12:31:21</p>	<p>It was noted that the number of ambulance handovers waiting 4 hours had reduced from 230 in September 2022 to 0 in February and 2 in March 2023.</p> <p>The COO added that the teams were now giving the same focus to patients waiting 2-hours for an ambulance handover.</p> <ul style="list-style-type: none"> Performance against the standards within the National Falls and Fragility Fracture Audit Programme (FFFAP) had shown some improvement and in February 2023 2.6% of patients with a nerve block were admitted to a specialist ward within 4 hours, with a significant reduction in the median time patients were waiting to move to the ward. <p>The COO added that in February, 63.6% of patients had received surgery within 36 hours, which was reflective of the general trend during 2022, but a small reduction when compared to October 2021 performance (64.6%). It was noted that the Health Board's performance was above the national average of 56% over the last 12 months.</p> <ul style="list-style-type: none"> Stroke performance remained below the standards set out in the Acute Stroke Quality Improvement Measures and The Sentinel Stroke National Audit Programme (SSNAP), but February 2023 saw an improvement in the thrombolysis rate and door to ward performance. There continued to be an improvement against the Single Cancer Pathway and the backlog trajectories agreed with the Delivery Unit. <p>The COO added that the Health Board was not delivering against the 75% single Cancer pathway standard, but noted that the Health Board had not said that it would be delivering against it and that actually the end of quarter one was what the Health Board had signed up to do as part of the Integrated Medium-Term Plan (IMTP).</p> <p>It was noted that February 2023 saw another improvement of 6% compared with January with 61.5% of patients receiving treatments within 62 days.</p> <ul style="list-style-type: none"> The total number of patients waiting for planned care and treatment, the Referral to Treatment (RTT) waiting list was 122,708 as of March 2023. <p>The COO added that the Ministerial expectations had changed in terms of absolute numbers or percentage of compliance at certain dates of the year.</p> <p>He added that the Health Board was not expecting, at the moment, to deliver the 30 specialties measured against and it was not expecting to deliver the planned care standards. The Health Board</p>	
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	<p>had been asked to revise some of the trajectories and to explain what it would cost to make a further improvement.</p> <p>It was noted that the volume of greater than eight-week Diagnostic waits had increased to 4,782 at the end of March 2023 from 4,421 in February, largely driven by increased waits in Radiology.</p> <p>The COO added that greater than eight-week waits for a diagnostic endoscopy had increased and remained high.</p> <ul style="list-style-type: none"> • The Health Board's community teams continued to provide valuable services to the residents of Cardiff and the Vale and the teams worked to care for patients in the community and also to provide timely and supportive discharges from secondary care. • Demand for adult and children's Mental Health services remained significantly above pre-Covid levels, with referrals for the Local Primary Mental Health Support Service (LPMHSS) at 1523 referrals in March 2023. <p>The COO noted that the demand increase included an increased presentation of patients with complex mental health and behavioural needs and noted that significant work had been undertaken to improve access times to adult primary mental health and Child and Adolescent Mental Health Services (CAMHS).</p> <p>The UHB Chair asked why the CAMHS performance figures on Part 1B of the Mental Health Measure were not available within the report.</p> <p>The COO responded that it was an oversight and that they would be included in future reports.</p> <p>The UHB Chair advised the Committee that the COO had referred to new asks from the Minister and noted that they were forming part of a letter which he had received from the Minister.</p> <p>He added that he would share those with Independent Member colleagues and that they would be discussed at the May 2023 Board in line with the Health Board's Annual Plan revisions</p> <p>The Finance Committee resolved:</p> <ul style="list-style-type: none"> a) The year to date position against key organisational performance indicators for 2022-23 and the update against the Operational Plan programmes were noted. 	
	Items for Approval / Ratification	
<p>FPC 23/05/009</p>	<p>Regional Cataracts Expansion – Cardiff Implications Business Case</p> <p>The Regional Cataracts Expansion – Cardiff Implications Business Case was received.</p>	

The COO advised the Committee that he would take the paper as read and noted that the Business Case had been through a number of internal processes before being received by the Committee.

He added that the Business Case was a test of regional working and the opportunity to work regionally with the Cataract business case.

It was noted that there was no real financial risk to the Health Board as it was to be funded from the £50m recovery fund and that other Health Boards had agreed their allocation of the capacity.

It was noted that it would be an extension of the Vanguard Theatres that were already located at the University Hospital of Wales (UHW). The benefits of retaining the Vanguard Unit included the stability of staff and retaining the well trained and experienced staffing group, the ability to treat more complex patients, the training opportunities available across the region would increase and would also provide a solid foundation for the second sustainable phase of the Cataracts expansion.

The COO advised the Committee that there was a potential risk that Cardiff and Vale patients could wait a little longer for surgery, but noted that it was likely that the outpatient waiting times would be lower than the predicted 78 weeks and whilst not achieving 52 weeks the volumes would be significantly lower.

The CC noted that the business case outlined an estimated financial commitment of £2.3m and asked if that came out of the fund mentioned.

The COO responded that it was the Health Board's share of the regional fund.

The EDF added that the Health Board was bidding for the money centrally and that should it be awarded, the £15m had been allocated and so should Cardiff and Vale have more patients and another Health Board had less or vice versa, no individual Health Board should hold that financial risk.

The Finance Committee resolved that:

It was recommended that the Board:

- a) Approve the Regional Cataracts Expansion Case subject to sign off of formal Memorandum of Understanding between the 3 Health Boards which mitigates Cardiff and Vale financial risk (to be agreed through the Regional Oversight Board);
- b) Note the benefits and risks associated with the Regional Cataracts Expansion Business Case; and
- c) Note the implications specific to Cardiff and Vale University Health Board.

Mohamed Sarah
14/06/2023 12:31:21

<p>FPC 23/05/010</p>	<p>Development of Replacement Orthopaedic Theatres at UHL Business Case</p> <p>The Development of Replacement Orthopaedic Theatres at UHL Business Case was received.</p> <p>The COO advised the Committee that the business case had been through a number of internal processes and that the existing theatres were in a poor state and that approval of the case would replace those theatres and offer improvement.</p> <p>The EDF added that it would replace the theatre and allow a lot more activity at the University Hospital Llandough (UHL).</p> <p>The CC asked what the bottom line was in terms of extra cost.</p> <p>The EDF responded that the issue was around the theatres being a capital asset and noted that it would cost a further £0.400m in terms of additional space.</p> <p>She added that the Health Board would look to increase activity in those theatres and to be more productive to ensure that the Health Board could afford it.</p> <p>It was noted that the work and analysis had been undertaken at the Outline Business Case stage and that the teams were satisfied to send the case to WG on the basis that it would be achieved.</p> <p>The Finance Committee resolved that:</p> <ul style="list-style-type: none"> a) The contents of the OBC were noted. b) It was recommended that the Board approve the submission of the OBC to Welsh Government with a recommendation for approval to progress to the next stage - Full Business Case. 	
	<p>Items for Information and Noting</p>	
<p>FPC 23/05/011</p> <p>Mohamed, Sarah 14/06/2023 12:31:21</p>	<p>Month 12 2022/23 Monitoring Returns</p> <p>The Month 12 2022/23 Monitoring Returns were received.</p> <p>The EDF advised the Committee that the returns were received as a way of ensuring that they were consistent with the reports received by the Committee and that Committee members had the opportunity to scrutinise and comment if required.</p> <p>The Finance Committee resolved that:</p> <ul style="list-style-type: none"> a) The extract from the UHB's draft Monthly Financial Monitoring Return was noted. 	
	<p>Agenda for Private Finance Committee Meeting</p>	

	<i>i. Approval of Private Finance Committee Minutes – 22.3.2023</i> <i>ii. Approval of Private Finance Committee Minutes – 19.4.2023</i> <i>iii. Radiology Informatics System Procurement Business Case (Commercially Sensitive)</i>	
FPC 23/05/012	Any Other Business No Other Business was discussed.	
	Review and Final Closure	
FPC 23/05/013	Items to be referred to Board / Committee No Items to be referred to Board / Committee.	
	Date & time of next Meeting Wednesday 21 st June 2023 at 2pm via MS Teams	

Mohamed Sarah
14/06/2023 12:31:21

Public Action Log

Following Finance and Performance Committee Meeting
17 May 2023
(For the Meeting 21 June 2023)

Completed actions					
REF	SUBJECT	AGREED ACTION	ACTIONED TO	DATE	STATUS/COMMENTS
FC 19/04/010	Update on other measures within Stroke	To provide an update on other measures within Stroke	Paul Bostock	17 May 2023	COMPLETED Update provided in May meeting.
Actions in progress					
REF	SUBJECT	AGREED ACTION	ACTIONED TO	DATE	STATUS/COMMENTS
FC 22/03/009	Business cases with no funding	To discuss business cases with no funding.	Catherine Phillips Rob Mahoney	21 June 2023	Update to be provided in June meeting.
FC 19/04/008	Unforeseen Cost Pressures	To update the Committee quarterly on unforeseen Cost Pressures.	Catherine Phillips Rob Mahoney	23 August 2023	Update to be provided in August meeting.
23/05/007 <i>Mohamed Sarah 14/06/2023 12:31:21</i>	Financial Report	To produce a graph to track progress against planned deficit.	Catherine Phillips/Rob Mahoney	21 June 2023	Update in June 2023.

		To consider how to present savings data to Committee			
Actions referred to Board/Committees					

Mohamed Sarah
14/06/2023 12:31:21



Report Title:	Finance Report for the Period Ended 31 st May 2023			Agenda Item no.	2.1
Meeting:	Finance and Performance Committee	Public	<input checked="" type="checkbox"/>	Meeting Date:	21 st June 2023
		Private	<input type="checkbox"/>		
Status <i>(please tick one only):</i>	Assurance	<input checked="" type="checkbox"/>	Approval	<input type="checkbox"/>	Information
Lead Executive:	Executive Director of Finance				
Report Author (Title):	Deputy Director of Finance (Operational)				
Main Report					
Background and current situation:					

Summary

At month 2 the Health Board (UHB) is reporting an overspend of £17.183m. This is comprised of £2.524m deficit on the Savings Programme, (£0.075m) of operational underspend and the planned deficit of £14.733m (two months of the annual planned deficit of £88.4m set out in 2023/24 financial plan).

Table 1: Month 2 Financial Position 2023/24

	Forecast Month 2 Position £m	Forecast Year-End Position £m
Planned deficit	14.733	88.400
Savings Programme	2.524	0.000
Operational position (Surplus) / Deficit	(0.075)	0.000
Financial Position £m (Surplus) / Deficit £m	17.183	88.400

Financial Plan Approved by Board and submitted to Welsh Government

- Brought forward underlying deficit of £40.3m
- Local Covid Consequential costs of £34.2m
- Additional energy costs of £11.5m
- 23/24 Demand and cost growth and unavoidable investments of £48.8m
- Allocations and inflationary uplifts of £14.4m
- A £32m (4%) Savings programme

This results in a 2023-24 planning deficit of £88.4m.

Core Financial Plan – Month 2 Position

The UHB is reporting a month 2 overspend of £17.183m. £14.733m of this being two months of the annual planned deficit. £2.524m deficit on the Savings Programme is two months of red schemes and unidentified savings totaling £2.505m and £0.019m underachievement of identified savings. (£0.075m) is an operational underspend in delegated and central positions.

Summary Financial Table

The following table analyses the £17.183m overspend at Month 2, between Income, Pay and Non Pay.

Table 2: Summary Financial Position for the period ended 31st May 2023

Income/Pay/Non Pay	Memorandum Annual Budget £m	Current Period Actual £m	Operational Variance (Fav)/Adv £m
In Month			
Income	(1,699.679)	(148.816)	0.200
Pay	780.509	72.242	(0.765)
Non Pay	919.170	77.494	1.485
Sub Total £m	0.000	0.920	0.920
2023/24 Planned Deficit	88.400	7.367	7.367
Variance to Plan £m	88.400	8.287	8.287
Cumulative			
Income	(1,699.679)	(287.561)	(0.275)
Pay	780.509	141.785	(1.260)
Non Pay	919.170	148.226	3.985
Sub Total £m	0.000	2.450	2.450
2023/24 Planned Deficit	88.400	14.733	14.733
Variance to Plan £m	88.400	17.183	17.183

Table 3: Finance - Key Performance Indicator Dashboard at May 2023

STATUS REPORT					
Measure	April 2023	RAG Rating	Latest Trend	Target	Time Period
Deliver 2023/24 Draft Financial Plan	£17.183m deficit at month 2. £14.733m planned deficit, £2.524m savings gap and (£0.075m) operational surplus.	R	↓	Deliver 2023/24 £88.4m Planned Deficit	M2 2023-24
Remain within capital resource limits.	The UHB expects to remain within it's Capital Resource Limit	G	⦿	Remain within approved planned expenditure	M2 2023-24
Delivery of recurrent £32m savings target	£27.714m Green, Amber and Red schemes identified at month 2.	R	↓	£32m	M2 2023-24
Creditor payments compliance 30 day Non NHS	97.66% at the end of May	G	↑	95% of invoices paid within 30 days	M2 2023-24
Remain within Cash Limit	The UHB's working capital requirement will be discussed with Welsh Government following finalisation of the draft plan @ Q1	A	⦿	To remain within Cash Limit	M2 2023-24
Maintain Positive Cash Balance	Cash balance = £3.019m	G	⦿	To Maintain Positive Cash Balance	End of May 2023

Financial Performance of Clinical Boards

Budgets were set in the anticipation that they were sufficient to deliver the UHB's plan. Financial performance for month 2 by Clinical Board is shown in Table 4.

Table 4: Financial Performance for the period ended 31st May 2023

Clinical Board	Operational Position (Surplus) / Deficit	Non Delivery of Savings	Total (Surplus) / Deficit	Prior Month (Surplus) / Deficit
Cumulative	Variance £m	Variance £m	Variance £m	Variance £m
Clinical Diagnostics & Therapeutics	30	0	30	44
Children & Women	36	4	40	100
Capital Estates and Facilities	114	13	127	32
Executives	(231)	2	(230)	(12)
Genomics	(10)	0	(10)	(8)
Medicine	(40)	0	(40)	34
Mental Health	105	0	105	68
PCIC	(10)	0	(10)	(12)
Specialist	(45)	0	(45)	(55)
Surgery	49	38	87	62
Sub-Total Delegated Position	(2)	56	55	252
Central Budgets	2		2	17
Commissioning	(75)	0	(150)	
Cost Improvement Themes		2,468	2,468	1,260
Total (Surplus)/Deficit	(75)	2,524	2,450	1,529
Planned Deficit			14,733	7,367
Total Operational (Surplus)/Deficit	(75)	2,524	17,183	8,896

The UHB has recovered the month 1 adverse operational variance of £0.083m and is reporting a (£0.075m) cumulative operational surplus at month 2.

The forecast assumes that the UHB will successfully identify and deliver further savings schemes to cover the planning assumptions detailed in the financial plan.

The UHB continues to face a significant challenge as it improves elective throughput from an operational footprint that is still dealing with Covid patients. This is coupled with difficulties in discharging patients to appropriate support packages in the community whilst experiencing increased emergency demand. This in turn has restricted the UHB's ability to deliver a full elective output when contractual obligations to recover to pre pandemic activity levels has re-introduced financial performance arrangements for under delivery of patient activity. In particular, WHSSC commissioned specialties operate to sensitive contract parameters that include high marginal rates for under and over performance.

The savings programme deficit at month 2 continues to represent a risk. The central focus of the Sustainability Board and Executive Performance Reviews with Clinical Boards will be on ensuring operational pressures are addressed and managed and further progress is made in identifying and delivering recurrent savings schemes that in turn will de-risk the financial plan.

COVID 19 Expenditure

The expenditure for Month 2 is summarised in Table 5 below.

Table 5: Summary of Month 2 COVID 19 Net Expenditure

	Month 2 £m	Forecast £m	Funded by WG or Financial Plan £m	Variance to Plan/Funding £m
Health Protection	0.944	8.800	8.800	0.000
PPE	0.060	2.900	2.900	0.000
Long Covid	0.050	1.144	1.144	0.000
Nosocomial	0.087	0.520	0.520	0.000
Anti-Viral	0.017	0.100	0.100	0.000
Sub Total WG Funded Covid Expenditure	1.157	13.464	13.464	0.000
Included in Financial Plan - COVID Local Response	5.664	31.200	34.200	(3.000)
Total COVID Expenditure £m	6.821	44.664	47.664	(3.000)

Local Response expenditure is no longer funded by Welsh Government and as such is included within the UHB's Financial Plan.

The forecast cost at Month 2 is a reduction of £3m against the £34.2m included within the Financial Plan and is included within the UHB's savings plans.

Welsh Government is funding Health Protection, PPE, Long Covid, Nosocomial and Anti-Viral with expenditure forecast to meet funding anticipated.

Risks

Table 6 summarises the Finance Department's Risk Register. The key risk which feeds the UHB Corporate Risk Register is the failure of the UHB to deliver a breakeven position by 2023-24 year end with a current planned deficit of £88.4m.

Table 6: Risk Register at May 2023

	Risks	Rating	Comment
Key Corporate Risk	Approved Three year Financial plan (IMTP)	20	Due to a planned deficit of £88.4m for 2023/24 there is a risk of failure to achieve an Approved Three year Financial plan (IMTP) with potential for additional escalation and intervention arrangements following Enhanced Monitoring arrangements being imposed by Welsh Government.
	Revenue Funding Limit.	20	The UHB has submitted a £88.4m deficit plan and therefore will breach breakeven duty in 2023-24. There is a high risk that this will not be recovered in years two and three of the rolling performance measure.
	Capital Funding - Three Year Rolling Breakeven Duty	12	The current 2023-24 UHB Capital Plan is structured to remain within the Capital Resource limit

Financial Performance	Failure to adequately manage budget pressures.	12	The 2022-23 Financial plan has funded 2022-23 out-turns in most delegated positions alongside the ability to call down
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			<p>appropriate and Covid consequential funding from dedicated UHB Reserves. This has reduced the risk of delegated positions overspending against core budgets .</p> <p>Monthly tripartite finance meetings are held between the COOs Office, Clinical Board Management teams and senior Finance Officers to monitor respective decisions and explore escalation actions where required.</p>
	Failure to deliver 2023-24 Savings Programme	16	At month 2 the unidentified schemes against the total savings target was £4.286m (13%). The ability to meet the UHB savings target for 2023-24 remains a major challenge that is being supported by escalation meetings with programme/theme leads and finance support teams.
	<p>Management and reduction of COVID-19 Response costs</p> <p>WG indicated no funding will be provided for Local Covid Response costs, of which £34.2m is included in the financial plan.</p>	16	Welsh Government have confirmed that there will not be any Covid Response or Covid consequential cost funding in 2023-24 and consequently this has contributed to the 2023-24 planned deficit.
	2023-24 One Year LTA framework in NHS Wales	12	The 2023-24 all Wales LTA framework has agreed an enhanced 5% tolerance for underperformance moving from 10% in 2022-23. This reflects the expectation that activity levels will continue to recover in 2023-24 and that the enhanced tolerance level should be reduced.

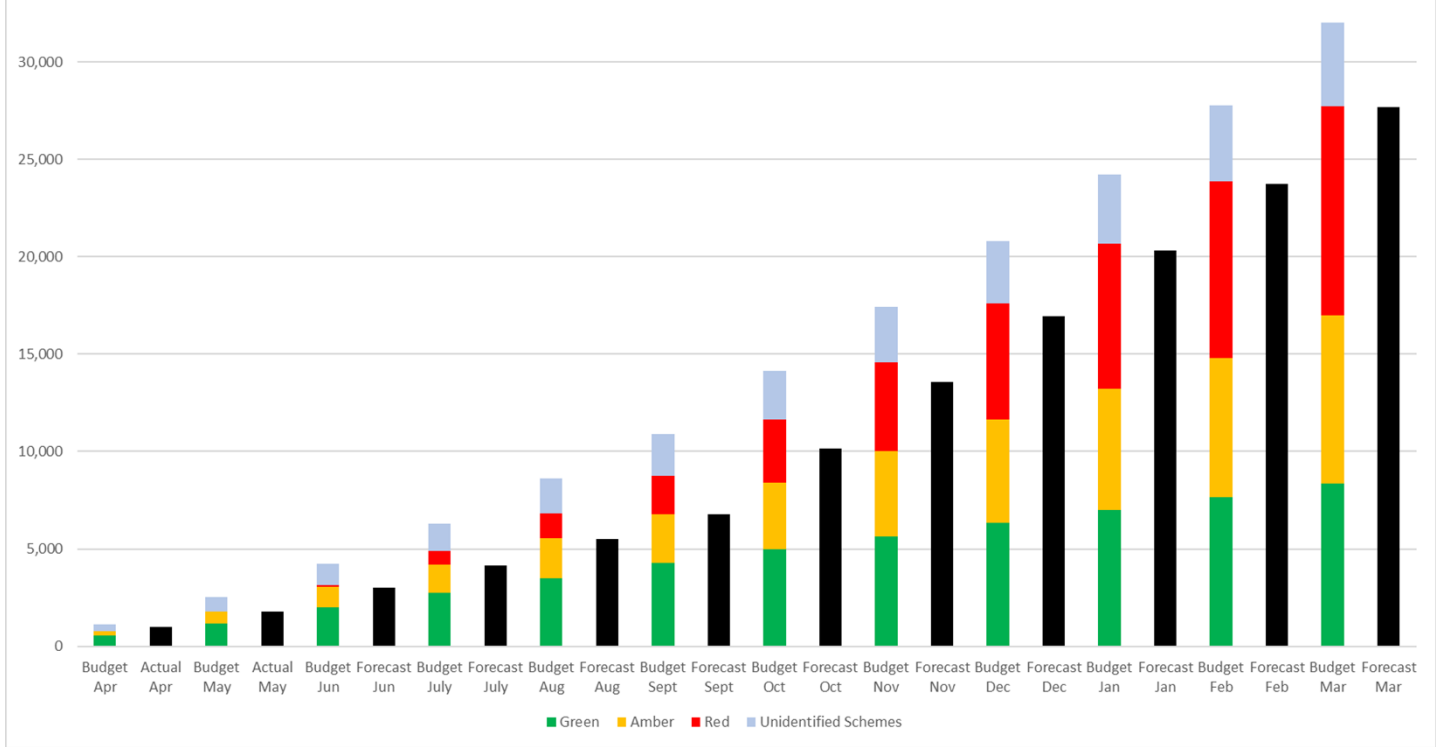
Savings Programme

At month 2, the UHB has identified £27,714m of green, amber and red savings against the £32m savings target leaving a further £4,286m (13%) schemes to be identified. The month 2 position includes a Savings Programme variance of £2.524m relating to a two month share of red schemes and unidentified schemes (£2.505m) and slippage against the green and amber schemes identified (£0.019m). The UHB expects to be able to manage the balance of savings plans required to deliver the forecast deficit of £88.4m with the risk of non-delivery of savings shown in Graph 1 below and the progress of reducing the risk via identification of schemes in Graph 2.

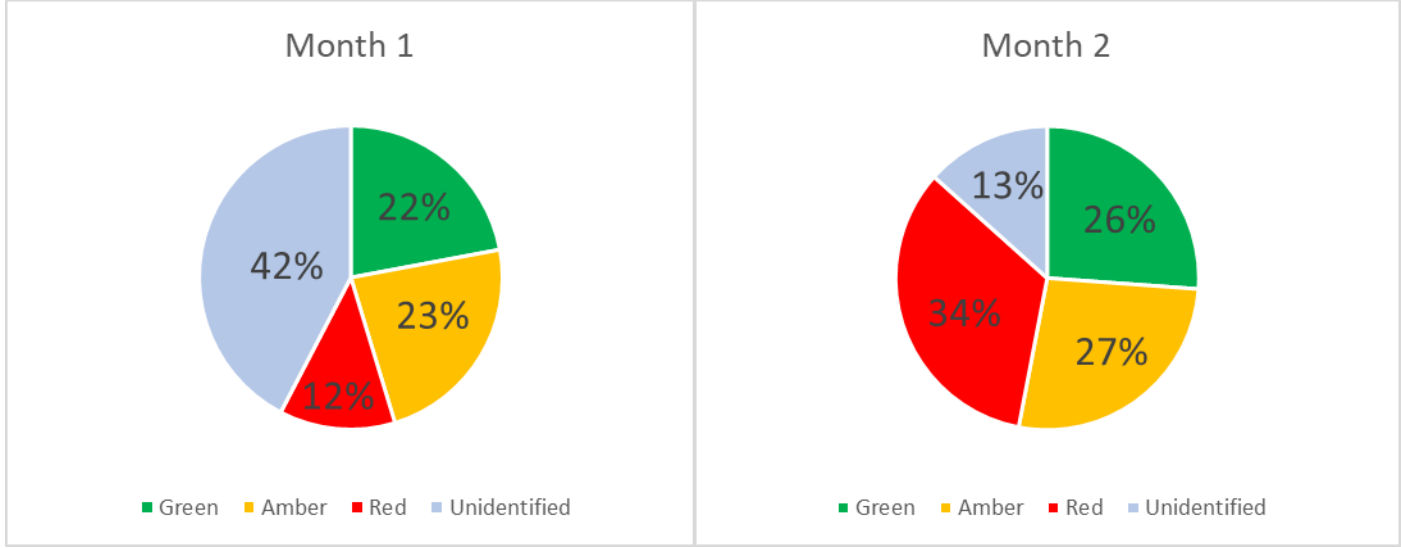
Graph 1 – Profile of Savings Delivery and Unidentified Schemes

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Profile of Savings Delivery and Unidentified Schemes



Graph 2 – Progress of Identification of Schemes



Overall progress in the identification of savings schemes is outlined in table 7 below:

Table 7: Savings Schemes

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2023-24 Savings Summary

2023-24 in-year plans

Clinical/Service Board	23-24 Target	Green	Amber	Red	Total Savings Identified	Savings Shortfall	Savings Shortfall
	£'000	£'000	£'000	£'000	£'000	£'000	%
Capital Estates and Facilities	631	666	0	3	669	-38	-6%
Children and Women	869	491	357	103	950	-81	-9%
Clinical Diagnostics and Therapeutics	799	545	255	141	940	-141	-18%
Corporate Executives	334	251	74	0	325	9	3%
Medicine	919	919	0	0	919	0	0%
Mental Health	719	225	495	0	720	-1	0%
Primary, Community and Intermediate Care	1,615	1,154	461	140	1,755	-140	-9%
Specialist Services	988	808	179	0	986	2	0%
Surgical Services	1,126	729	170	0	899	227	20%
Subtotal - Grip and Control	8,000	5,788	1,989	387	8,163	-163	-2%
Length of Stay	3,000	896	419	1,350	2,665	335	11%
Theatres Productivity	500	0	0	300	300	200	40%
Income Generation	500	100	0	280	380	120	24%
Medicines Management	2,000	0	243	0	243	1,757	88%
Continuing Healthcare	1,500	0	0	0	0	1,500	100%
Facilities and Estates	500	72	0	0	72	428	86%
Procurement	5,000	1,490	125	1,931	3,546	1,454	29%
Workforce Efficiencies	8,000	23	2,746	4,487	7,257	743	9%
COVID Consequential	3,000	0	3,000	839	3,839	-839	-28%
Review of Investments		0	0	0	0	0	
Commissioning		0	79	1,170	1,249	-1,249	
Subtotal Cost Improvement Themes	24,000	2,581	6,613	10,357	19,551	4,449	19%
Total Savings Position at end of May	32,000	8,369	8,601	10,744	27,714	4,286	13%
Total Savings Position at end of April	32,000	5,064	7,370	4,634	17,068	14,932	47%
Total Savings Position at end of March	32,000	1,274	5,046	2,459	8,779	23,221	73%

Cash Flow Forecast

The closing cash balance at the end of May 2023, was £3.019m.

Welsh Government require submission of a detailed monthly cashflow forecast commencing in Month 3 following the external audit of the 2022-23 draft financial accounts and confirmation of the brought forward balances.

The UHB's working cash assumption for 2023-24 is based on the key assumptions :-

- Movements in working capital from the 2022-23 Balance Sheet to be assessed as the year progresses.
- Additional 1.5% consolidated pay award (£11.5m) for which Resource cover was received from Welsh Government in 2022-23 but has been paid out in 2023-24 and requires cash support.
- Cash support for the £88.4m deficit of the UHB 2023-24 Financial Plan.

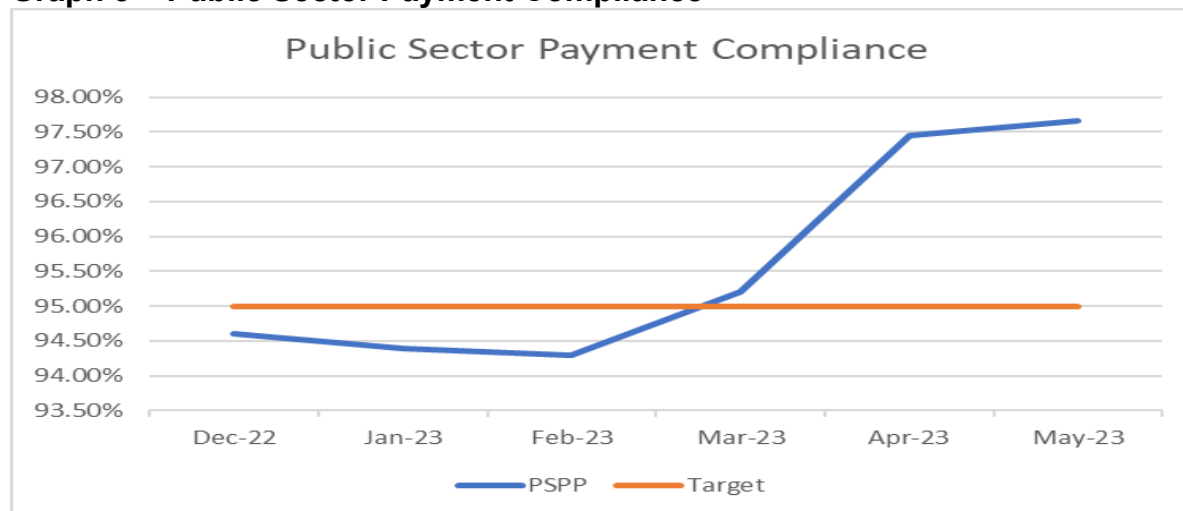
Discussion are ongoing with Welsh Government to provide cash support for these three areas which will approximately total £100m.

In future months, the cashflow will be included in Table G of the Monthly Monitoring Returns which is provided to the Finance Committee each month.

Public Sector Payment Compliance

The UHB's public sector payment compliance performance is above the target of 95%. Performance for the month to the end of May was 97.66% and improvements illustrated in Graph 3 below.

Graph 3 – Public Sector Payment Compliance



Work is ongoing with departments within the UHB, including training, to address the level of orders not receipted, and the high number of workforce and nursing holds, which should improve the UHB's position.

Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:

The Financial Plan includes an annual forecast deficit of £88.4m.

Delivery of the core financial plan includes a 4% (£32.0m) recurrent savings requirement. At Month 2 savings identified of £27.714m representing 87% of the target.

The UHB also needs to manage its operational position and mitigate any emerging pressures as its Covid response costs are collapsed. The operational underspend is (£0.075m) in month 2. Enhanced monitoring is in-place for both operational positions and to further progress the gap in the Savings Programme.

Recommendation:

At Month 2 the Committee are requested to:

- **NOTE** the reported year to date overspend of £17.183m and the forecast deficit of £88.400m.
- **NOTE** the year to date financial impact of forecast COVID 19 costs which is assessed at £44.664m.
- **NOTE** the month 2 operational underspend against plan of (£0.075m)
- **NOTE** the progress against the savings target with £27.714m (87%) of schemes identified at Month 2 against the £32m target.

Link to Strategic Objectives of Shaping our Future Wellbeing:

Please tick as relevant

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	
2. Deliver outcomes that matter to people		7. Be a great place to work and learn	
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	x
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention		Long term	x	Integration		Collaboration		Involvement	
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Impact Assessment:

Please state yes or no for each category. If yes please provide further details.

Risk: Yes

No

Safety: Yes/No

No

Financial: Yes

As detailed in the report.

Workforce: Yes/No

No

Legal: Yes/No

No

Reputational: Yes/No

Yes, if forecast financial position is not delivered.

Socio Economic: Yes/No

No

Equality and Health: Yes/No

No

Decarbonisation: Yes/No

No

Approval/Scrutiny Route:

Finance and Performance Committee

Date: 21st June 2023

Mohamed Sarah
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Report Title:	Operational Performance Report				Agenda Item no.	2.2	
Meeting:	Finance and Performance Committee		Public	✓	Meeting Date:	21 June 2023	
			Private				
Status <i>(please tick one only):</i>	Assurance	✓	Approval		Information		
Lead Executive:	Chief Operating Officer						
Report Author (Title):	Performance and Planning Manager – Operations						

Main Report

Background and current situation:

Background and current situation:

The Operations and Information Teams are currently redesigning the Integrated Performance Report to better meet the requirements of the Board, its Committees and improve performance reporting for the Health Board as a whole, both internally and externally. This updated report incorporates progress against the Ministerial priorities and our performance ambitions/IMTP priorities. It will also include performance against the NHS Performance Framework, which is due to be finalised in June 2023. The report presented for this Finance and Performance Committee contains the Operational Performance information only, although it is the intention to bring the full suite of information to this meeting once the format has been updated and agreed by the Board. This report is intended to be iterative and feedback from the committee will be useful as we develop this resource.

Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:

The full suite of metrics is available in the enclosed report.

Although there continues to be a challenging position across the urgent & emergency care system, largely driven by high levels of adult bed occupancy, as a result of the high number of patients who are experiencing Pathway of Care Delays, significant progress continues to be made in reducing ambulance handover delays. We have eliminated 4-hour and 3-hour ambulance delays and continue our zero-tolerance approach to 2-hour delays. We have also seen a continued increase in the number of patients seen through our Medical and Surgical Same Day Emergency Care (MSDEC) services and are meeting our IMTP ambitions in line with the Ministerial priority to increase usage.

We have recently made additional commitments to Welsh Government around our long waiting patients and are developing trajectories to meet these in relation to RTT waiting times, in addition to waits for Diagnostic and Therapeutic services. We are on-track with our commitments to implement regional diagnostic hubs and straight to test model by Q3 2024.

Progress continues to be made on improving Cancer pathways as we continue to reduce the backlog of long waiting patients and improve our compliance with the Single Cancer Pathway Standard of definitive treatment within 62 days. While improved, our recent performance is below the Standard and our internal ambitions and we continue to work to improve wait time to first outpatient and diagnostics stages to facilitate improved overall performance.

A very high number of referrals to mental health services through March led to a drop in compliance with the Part 1 standards during April, which the teams have worked hard to recover with improved performance in May. We continue to see high number of referrals into these services, with an increased presentation of patients with complex mental health and behavioral needs.

Recommendation:

The Finance and Performance Committee is asked to:

- a) **NOTE** the year to date position against key organisational performance indicators for 2023-24 and the update against the Operational Plan programmes.

Link to Strategic Objectives of Shaping our Future Wellbeing:

Please tick as relevant

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	✓
2. Deliver outcomes that matter to people	✓	7. Be a great place to work and learn	
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	✓
4. Offer services that deliver the population health our citizens are entitled to expect	✓	9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time	✓	10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention		Long term	✓	Integration	✓	Collaboration		Involvement	
------------	--	-----------	---	-------------	---	---------------	--	-------------	--

Impact Assessment:

Please state yes or no for each category. If yes please provide further details.

Risk: No

Safety: No

Financial: No

Workforce: No

Legal: No

Reputational: No

Socio Economic: No

Equality and Health: No

Decarbonisation: No	
Approval/Scrutiny Route:	
Committee/Group/Exec	Date:

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Cardiff and Vale Integrated Performance Report

Draft Version

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Report Contents

1. [Ministerial Priorities](#)

2. [Cardiff and Vale Performance Report](#)

Click on a hyperlink to navigate directly to the section required

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Section 1: Ministerial Priorities

The Minister for Health and Social Services has set out 6 priority areas to help address the immediate pressures and help to build a sustainable health and care service over the next year.

Section 1 provides an overview of the Health Boards performance in relation to the 16 measures that are included within these 6 priority areas. As many of the measures are not specific, detail is provided on the specific measurement(s) that has been used to monitor compliance.

For a more in depth view on performance for each priority, please follow the links in the NHS Performance Framework column.

Priority	Aim	C&V Commitment	By When	In Month Performance	Link in Performance Report
Delayed Transfers of Care	Reduction in backlog of delayed transfers Measure: number of delayed transfers of care. Reporting period: monthly	217	June 2023	201	Hyperlink to section
Primary Care Access to Services	Improved access to GP and Community Services Measure: >95% achievement of core access to in-hours GMS Services Reporting: monthly	95%	June 2023	tbc	Hyperlink to section
	Increased access to dental services Measure: 50% of expected new patient target Reporting: monthly	50%	June 2023	tbc	Hyperlink to section
	Improved use of community pharmacy Measure: >90% of all eligible community pharmacies providing CCPS (June 2023) Reporting: monthly	90%	June 2023	tbc	Hyperlink to section
	Improved use of optometry services Measure: Reduce number of patients referred from primary care (optometry and General Medical Practitioners) into secondary care Ophthalmology services Reporting: monthly	877	Dec' 2023	846	Hyperlink to section
Urgent and Emergency Care	Implementation of a 24/7 urgent care service, accessible via NHS 111 Wales Measure: Performance response time in NHS 111 Reporting: TBC	tbc	June 2023	tbc	Hyperlink to section
	Implementation of Same Day Emergency Care services Measure: Increase in SDEC attendances Reporting: monthly	1233	June 2023	1439	Hyperlink to section
	Honour commitments that have been made to reduce handover waits Measure: Eliminate 4 hour ambulance handover delays Reporting: monthly	0	June 2023	0	Hyperlink to section

Performance Key: Meeting standard / trajectory over target/trajecotory



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Section 1: Ministerial Priorities

Priority	Aim		C&V Commitment	By When	In Month Performance	Link Performance Report	
Planned Care, Recovery, Diagnostics and Pathways of Care	Achieve RTT waiting time targets Measure 1: 52 week new outpatient target by March 2024 Reporting: monthly Measure 2: 104 week treatment target by December 2023 Reporting: monthly		8999	March 2024	10479	Hyperlink to section	
			3788	Dec’ 2023	3983	Hyperlink to section	
	Set foundations for achieving waiting list targets Measure: Reduce outpatient overdue follow by 25% against 2019/20 levels Reporting: monthly		37623	March 2024	54064	Hyperlink to section	
	Implement regional diagnostic hubs Measure 1: progress reporting on regional diagnostic hub Reporting: quarterly Measure 2: Achieve <8-week diagnostic wait Reporting: monthly		Go-Live	Sept’ 2024	On track	Hyperlink to section	
			0	June 2025	6267	Hyperlink to section	
	Implement straight to test model Measure: progress reporting on straight to test Reporting: quarterly		Go-Live	Sept’ 2024	On track	Hyperlink to section	
	Cancer	Achieve SCP target Measure: 75% of patients starting their first definitive cancer treatment within 62 days Reporting: monthly		75%	June 2024	62.2%	Hyperlink to section
Implement the national cancer pathways within the national target Measure: progress reporting on national cancer pathways Reporting: quarterly		Go-Live	Sept’ 2024	On track	Hyperlink to section		
Mental Health and CAMHS	Achieve waiting wait performance for Local Primary Mental Health Support Services and Specialist CAMHS Reporting (for all): monthly		Measure 1: Part 1a (adults)	80%	June 2024	84.0%	Hyperlink to section
			Measure 2: Part 1b (adults)	80%	June 2024	95.5%	
			Measure 3: Part 2 (adults)	80%	June 2024	80%	
			Measure 4: Part 1a (children)	80%	June 2024	92.7%	
			Measure 5: Part 1b (children)	80%	June 2024	tbc	
			Measure 6: Part 2 (children)	80%	June 2024	89.4%	
	Implement 111 press 2 on a 24/7 Measure: progress on implementing NHS 111 press 2 Reporting: quarterly		Go-Live	Sept’ 2024	Delivered	Hyperlink to section	

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Section 2: Cardiff and Vale Performance Report

The Performance Report section provides detail of UHB performance across the quadruple aims.

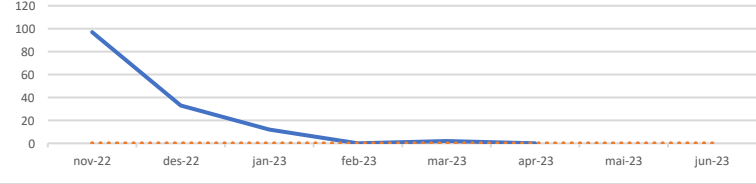
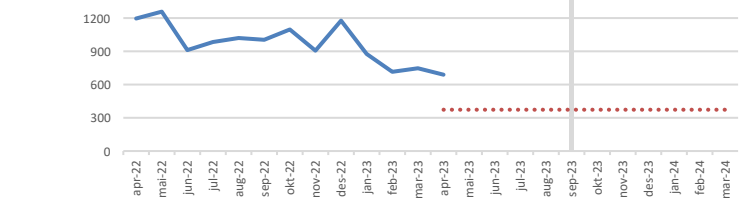
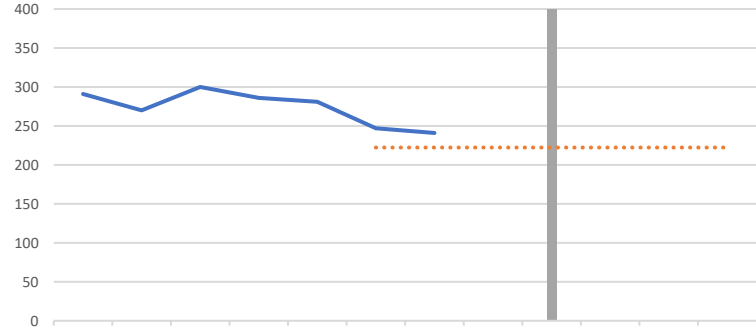
Detail on what is included under each quadruple aim is provided below.

A summary of performance is provided against the priority UHB ambition under each aim, including detail of annual plan commitments. Performance against the relevant NHS Performance Frameworks measures is provided under each aim (under development)

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Number	Aim	Contents
Aim 1	People in Wales have improved health and well-being with better prevention and self-management	Public Health Under Development
Aim 2	People in Wales have better quality and more accessible health and social care services, enabled by digital and supported by engagement	Urgent and Emergency Care Inpatient Flow, Discharge and Front Door Alternatives to Admission Community and Urgent Primary Care Priority Services RTT Waiting Times Planned Care Cancer, Diagnostics and Therapies Primary and Community Care Whole System Evaluation and Supporting Patients Whilst Waiting Mental Health Under Development
Aim 3	The health and social care workforce in Wales is motivated and sustainable	People and Culture Under Development
Aim 4	Wales has a higher value health and social care system that has demonstrated rapid improvement and innovation, enabled by data and focused on outcomes.	Quality, Safety and Experience Financial Performance Under Development



Priority	Performance Summary	Reporting Period	Data						
<div>Ambulance Handover</div> <div>Annual Plan Commitments:</div> <div><ul style="list-style-type: none">Zero 4-hour ambulance delays (June 23)Reduce average lost minutes to 30 (Sept 23)</div>	<div><ul style="list-style-type: none">The number of ambulance handovers >4 hours has reduced from 230 in September 2022 to 0 in April 2023. We are now giving the same focus to patients waiting 2-hours for an ambulance handover. In April there were 13 two-hour ambulance holds in April, a reduction from 206 in MarchAverage lost minutes per arrival has reduced to 21 minutes in April, better than annual plan commitment.</div>	Apr-23	<div><div><div>Number of ambulance handovers >4 hours</div><table><tr><th>Date</th><th>Avg. lost hours</th><th>Standard Sept-23</th></tr><tr><td>May-23</td><td>21</td><td>30</td></tr></table></div></div>	Date	Avg. lost hours	Standard Sept-23	May-23	21	30
Date	Avg. lost hours	Standard Sept-23							
May-23	21	30							
<div>Emergency Department</div> <div>Annual Plan Commitments:</div> <div><ul style="list-style-type: none">Zero 24-hour ED waits (June 23)Reduce 12-hour ED waits by 50% (Sept 23)</div>	<div><ul style="list-style-type: none">In April, 7 patients waited 24-hours in the EU footprint without a stop-clock, a reduction from previous months and a significant reduction from the 307 and 199 recorded in December and January respectively12-hour ED waits reduced by 8% from 747 in March to 689 in AprilTime to initial assessment by an EU clinician reduced has reduced from 2 hours 15 minutes in January 2023 to 1 hour 15 minutes in April. We have seen improvement since March 2022 when the wait was over 3 hours as a monthly value.</div>	Apr-23	<div><div><div>12 Hour Wait Reduction by 50% of baseline by Sept-23</div></div></div>						
<div>Delayed Pathways of Care, LOS and Beds</div> <div>Annual Plan Commitments:</div> <div><ul style="list-style-type: none">Reduce DPOCs by 10% (June-23)Reduce >21 day LOS by 5% (June-23)Re-establish dedicated AOS beds (Sept)</div>	<div><ul style="list-style-type: none">Delayed pathways of care remain a national challenge, the May 2023 census reported 201 delayed pathways a reduction from 241 in April.Work in progressWork in progress</div>	May-23	<div><div><div>Reduce DPOC's by 10% (June-23)</div></div></div>						

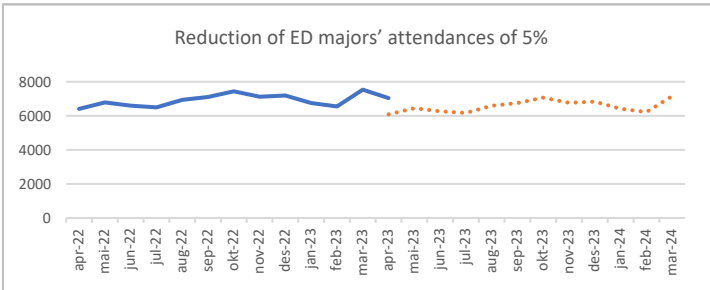
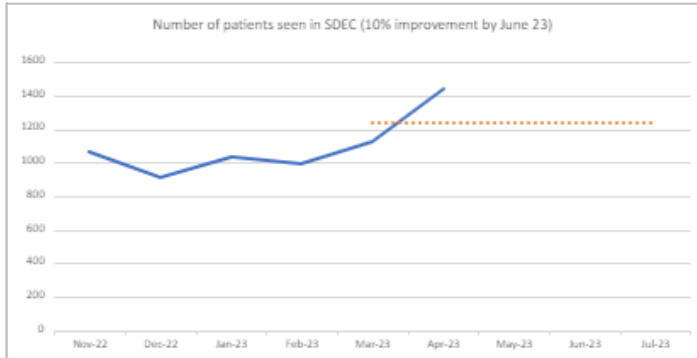
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C&V Priorities and Annual Plan Commitments

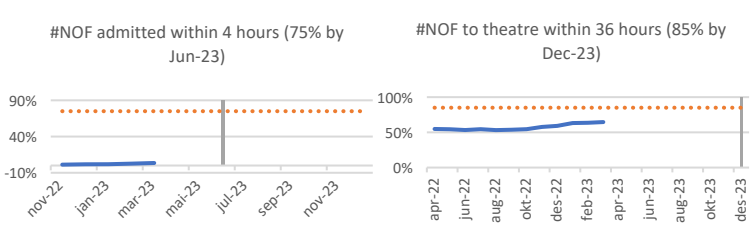
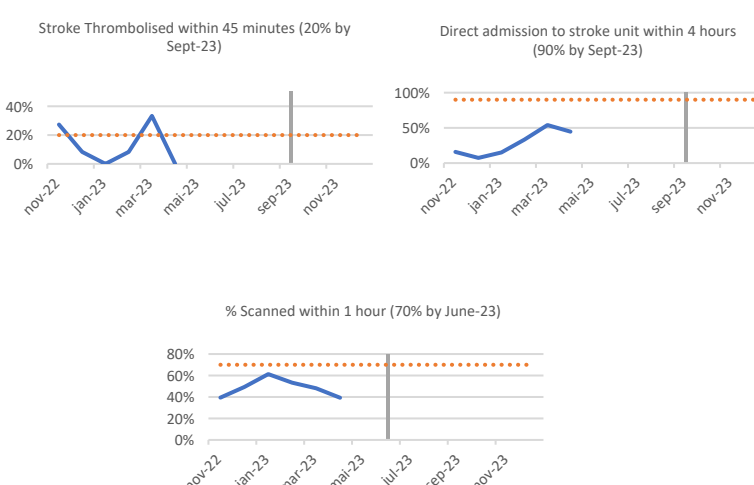
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Priority	Performance Summary	Reporting Period	Data																																																																											
<div>ED Attendances</div> <div>Annual Plan Commitment</div> <div><ul style="list-style-type: none">Reduction of ED majors’ attendances of 5% compared to same period 2022/23 (every quarter)</div>	<div><ul style="list-style-type: none">In April 2023 we reported 12001 EU attendances, a reduction from the 12999 reported in March, but higher than the levels reported in January and February.The number of Majors attendances in April 2023 was 7041, above the 6086 ambition (a 5% reduction from April 2022)</div>	Apr-23	<div><p>Reduction of ED majors’ attendances of 5%</p><table><caption>ED Majors' Attendances (Estimated)</caption><tr><th>Month</th><th>2022/23</th><th>2023/24</th></tr><tr><td>apr-22</td><td>6500</td><td>6175</td></tr><tr><td>may-22</td><td>6800</td><td>6460</td></tr><tr><td>jun-22</td><td>6500</td><td>6175</td></tr><tr><td>jul-22</td><td>6800</td><td>6460</td></tr><tr><td>aug-22</td><td>7000</td><td>6650</td></tr><tr><td>sep-22</td><td>7200</td><td>6840</td></tr><tr><td>okt-22</td><td>7500</td><td>7125</td></tr><tr><td>nov-22</td><td>7200</td><td>6840</td></tr><tr><td>dec-22</td><td>7000</td><td>6650</td></tr><tr><td>jan-23</td><td>6500</td><td>6175</td></tr><tr><td>feb-23</td><td>7200</td><td>6840</td></tr><tr><td>mar-23</td><td>7000</td><td>6650</td></tr><tr><td>apr-23</td><td>6086</td><td>5781</td></tr><tr><td>may-23</td><td>6200</td><td>5900</td></tr><tr><td>jun-23</td><td>6100</td><td>5790</td></tr><tr><td>jul-23</td><td>6300</td><td>5985</td></tr><tr><td>aug-23</td><td>6500</td><td>6175</td></tr><tr><td>sep-23</td><td>6800</td><td>6460</td></tr><tr><td>okt-23</td><td>7000</td><td>6650</td></tr><tr><td>nov-23</td><td>6800</td><td>6460</td></tr><tr><td>dec-23</td><td>6500</td><td>6175</td></tr><tr><td>jan-24</td><td>6200</td><td>5900</td></tr><tr><td>feb-24</td><td>6000</td><td>5700</td></tr><tr><td>mar-24</td><td>6500</td><td>6175</td></tr></table></div>	Month	2022/23	2023/24	apr-22	6500	6175	may-22	6800	6460	jun-22	6500	6175	jul-22	6800	6460	aug-22	7000	6650	sep-22	7200	6840	okt-22	7500	7125	nov-22	7200	6840	dec-22	7000	6650	jan-23	6500	6175	feb-23	7200	6840	mar-23	7000	6650	apr-23	6086	5781	may-23	6200	5900	jun-23	6100	5790	jul-23	6300	5985	aug-23	6500	6175	sep-23	6800	6460	okt-23	7000	6650	nov-23	6800	6460	dec-23	6500	6175	jan-24	6200	5900	feb-24	6000	5700	mar-24	6500	6175
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<div>Same Day Emergency Care</div> <div>Annual Plan Commitment</div> <div><ul style="list-style-type: none">10% increase in the total number of patients managed through SDEC (June 2023)Reduced number of unplanned re-presentations within 7-days of SDEC attendance (September 2023)Improve % of take managed in SDEC without requiring admission</div>	<div><ul style="list-style-type: none">In April 2023 we saw 938 patients seen via surgical SDEC and 501 via the medical SDEC. In total 1439 patients were seen, above our commitment of a 10% increase by the end of Q1. The number of attendances to medical SDEC has been increasing month on month since June 2022.Work in progressWork in progress</div>	Apr-23	<div><p>Number of patients seen in SDEC (10% improvement by June 23)</p><table><caption>Number of patients seen in SDEC (Estimated)</caption><tr><th>Month</th><th>2022/23</th><th>2023/24</th></tr><tr><td>Nov-22</td><td>1050</td><td>1155</td></tr><tr><td>Dec-22</td><td>900</td><td>990</td></tr><tr><td>Jan-23</td><td>1020</td><td>1122</td></tr><tr><td>Feb-23</td><td>980</td><td>1078</td></tr><tr><td>Mar-23</td><td>1100</td><td>1210</td></tr><tr><td>Apr-23</td><td>1439</td><td>1583</td></tr><tr><td>May-23</td><td>1200</td><td>1320</td></tr><tr><td>Jun-23</td><td>1150</td><td>1265</td></tr><tr><td>Jul-23</td><td>1100</td><td>1210</td></tr></table></div>	Month	2022/23	2023/24	Nov-22	1050	1155	Dec-22	900	990	Jan-23	1020	1122	Feb-23	980	1078	Mar-23	1100	1210	Apr-23	1439	1583	May-23	1200	1320	Jun-23	1150	1265	Jul-23	1100	1210																																													
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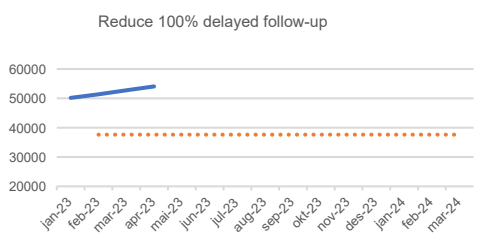
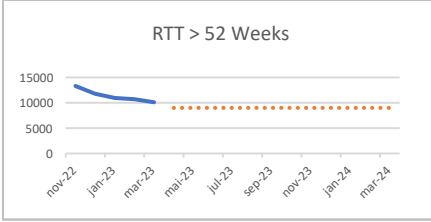
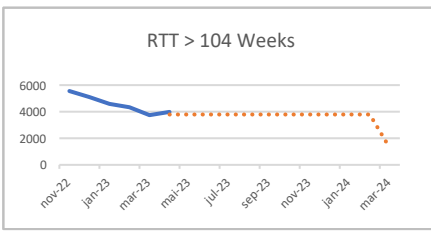
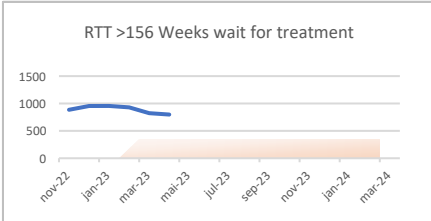
Priority	Performance Summary	Reporting Period	Data																																												
Urgent Primary Care Annual Plan Commitments: <ul style="list-style-type: none">80% appointment utilisation in UPCCs (June 2023), 85% (September 2023), 90% (March 2024)All clusters to have adequate access to UPCC capacity (September 2023)NHS 111 - >90% urgent calls logged and returned within 1 hr (December 2023)Increased redirections from ED to UPCC (March 2024)	<ul style="list-style-type: none">Work in progressWork in progressWork in progressWork in progress																																														
Community Services <ul style="list-style-type: none">Home Visit (Urgent – Priority 2) face to face in 2 hrs >90% (June 2023)	<ul style="list-style-type: none">The Health Board was 100% compliant in April 2023 against the standard of 100% for ‘Emergency’ GP OOH patients requiring a home visit within one hour, with 3 of 3 patients receiving their visit with one hour.For patients that required an ‘Emergency’ appointment at a Primary Care Centre in April the Health Board was 100% compliant, with 4 of 4 patients receiving an appointment within 1 hourThe Health Board was 75% compliant against the commitment of 90% for 'Urgent' GP OOH patients requiring a home visit within 2 hours, with 106 of 141 patients receiving their visit within 2 hours	Apr-23	<div>Home visits within 2 hours (90% by Jun-23)</div> <table><caption>Home visits within 2 hours (90% by Jun-23)</caption><tr><th>Month</th><th>Percentage</th></tr><tr><td>apr-22</td><td>70%</td></tr><tr><td>mai-22</td><td>70%</td></tr><tr><td>jun-22</td><td>75%</td></tr><tr><td>jul-22</td><td>75%</td></tr><tr><td>aug-22</td><td>60%</td></tr><tr><td>sep-22</td><td>70%</td></tr><tr><td>okt-22</td><td>75%</td></tr><tr><td>nov-22</td><td>85%</td></tr><tr><td>des-22</td><td>75%</td></tr><tr><td>jan-23</td><td>75%</td></tr><tr><td>feb-23</td><td>75%</td></tr><tr><td>mar-23</td><td>78%</td></tr><tr><td>apr-23</td><td>75%</td></tr><tr><td>mai-23</td><td>75%</td></tr><tr><td>jun-23</td><td>75%</td></tr><tr><td>jul-23</td><td>75%</td></tr><tr><td>aug-23</td><td>75%</td></tr><tr><td>sep-23</td><td>75%</td></tr><tr><td>okt-23</td><td>75%</td></tr><tr><td>nov-23</td><td>75%</td></tr><tr><td>des-23</td><td>75%</td></tr></table>	Month	Percentage	apr-22	70%	mai-22	70%	jun-22	75%	jul-22	75%	aug-22	60%	sep-22	70%	okt-22	75%	nov-22	85%	des-22	75%	jan-23	75%	feb-23	75%	mar-23	78%	apr-23	75%	mai-23	75%	jun-23	75%	jul-23	75%	aug-23	75%	sep-23	75%	okt-23	75%	nov-23	75%	des-23	75%
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Priority	Performance Summary	Reporting Period	Data
Fracture Neck of Femur IMTP Commitments: <ul style="list-style-type: none">75% admitted within 4 hours (June-23)85% to theatre within 36 hours (December-23)	<p>Performance against the standards within the National Falls and Fragility Fracture Audit Programme (FFFAP) has been poor. In April 2023, 5.5% of patients were admitted to a specialist ward with a nerve block within 4 hours.</p> <p>In April, 66.3% of patients received surgery within 36 hours, this has been increasing since August 2022 and our performance is above the national average of 57% over the last 12 months.</p>	Apr-23	
Stroke IMTP Commitments: <ul style="list-style-type: none">20% thrombolysis rate (Sept-23)70% scanned within 1 hour (June-23)90% admitted within 4 hours (Sept-23)	<p>While overall Stroke performance remains below the standards set out in the Acute Stroke Quality Improvement Measures and The Sentinel Stroke National Audit Programme (SSNAP), we have seen recent improvements in compliance with the 4-hour door to Ward standard. In April:</p> <ul style="list-style-type: none">0% of patients were thrombolysed within 45 minutes of arrival, the All Wales average was 22.6%. 8.2% of stroke patients were given Thrombolysis, below the All Wales Average of 14.7%The percentage of CT scans that were started within 1 hour in April was 39.3%, the All Wales average was 52.4%The percentage of patients who were admitted directly to a stroke unit within 4 hours was 44.6% in April, the All Wales average was 23.3% <p>The UHB has held two internal Stroke summits and a number of improvements to the stroke pathway are now being implemented including increased Clinical Nurse Specialists during out of hours, additional middle grade medical cover for the Emergency Unit and ringfencing of additional stroke beds to deploy the pull model from EU effectively. The UHB aspires to achieve a rating of grade ‘A’ for SSNAP.</p>	Apr-23	
Intensive Care Unit IMTP Commitments: <ul style="list-style-type: none">Patient at risk team 24/7 (Sept 23)ITU - 1 additional staffed bed (Sept 23)ITU - 2 additional staffed beds (March 24)	<p>Work in progress</p> <p>Work in progress</p> <p>Work in progress</p>		

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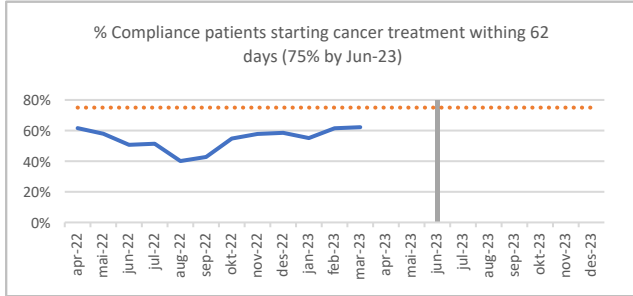
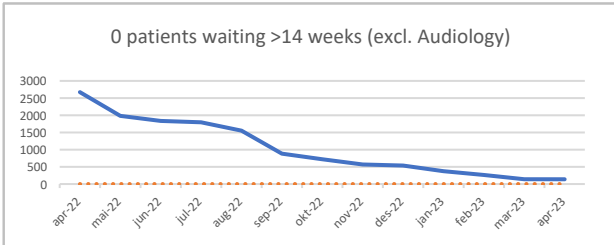
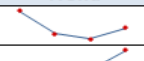
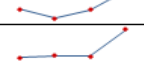
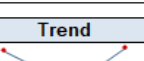
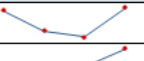
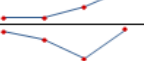
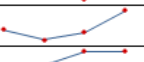
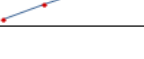

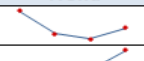
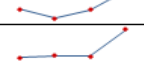
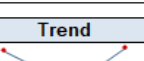
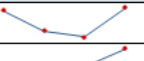
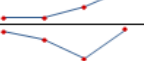
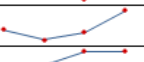
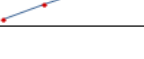

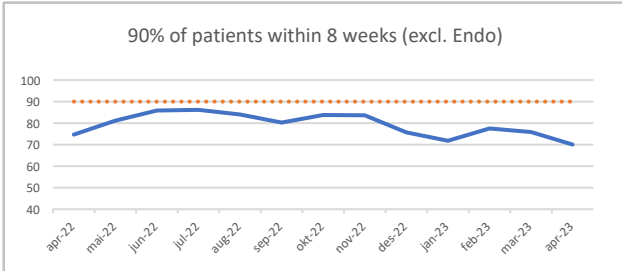
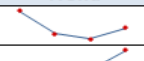
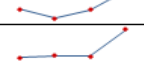
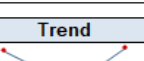
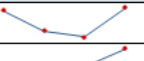
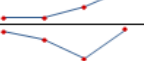
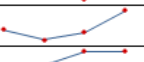
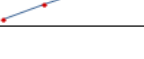



Priority	Performance Summary	Reporting Period	Data
Outpatient Follow-up Management Annual Plan Commitment <ul style="list-style-type: none">Follow up outpatients—reduce 100% delayed follow up by 25% on Jan'23 baseline of 50163 (September 2023)SOS and PIFU –10% of appropriate outpatient appointments (September 2023); 20% (March 2024)SOS and PIFU –20% of appropriate outpatient appointments	<ul style="list-style-type: none">In total there were 198000 patients awaiting a follow-up outpatient appointment at the end of April 2023Of these, there were 54064 patients who were 100% delayed for their follow-up outpatient appointment, with a month on month increase since April 2022. Work to improve this position will be driven through the Outpatients Delivery Group with action plans being developed by Clinical Boards focusing on:<ul style="list-style-type: none">-Use of COMII system to record and book follow-ups-Review of automated processes to maintain waiting lists-Administrative and clinical validation-Risk stratification of waiting listsIn April 2.5% of outpatient appointments saw patients moving onto a See On Symptoms pathway. In April 0.2% of outpatient appointments saw patients moving into Patient Initiated Follow-Up pathway	Apr-23	
52 Week New Outpatient Annual Plan Commitment <ul style="list-style-type: none"><8999 > 52 weeks (March 2024)	<ul style="list-style-type: none">At the end of April there were 10479 patients waiting over 52w for a new Outpatient appointment, an increase from the 10102 waiting at the end of MarchCohorts and trajectories in development	Apr-2023	
104 Week Treatment Annual Plan Commitment <ul style="list-style-type: none">3788 patients > 104 week waits treatment (December 2023)1263 patients > 104 week waits treatment (March 2024)	<ul style="list-style-type: none">At the end of April there were 3983 patients waiting over 104w for treatment, an increase from the 3740 waiting at the end of MarchCohorts and trajectories are in development for these commitments	Apr-2023	
156 Week Waits Annual Plan Commitment <ul style="list-style-type: none">0 patients > 156 weeks outpatients (September 2023)<350 patients > 156 week wait treatment (September 2023)	<ul style="list-style-type: none">At the end of April there were 798 patients waiting over 156w for treatment, a continued reduction from January 2023Cohorts and trajectories are in development for these commitments	Apr-2023	

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C&V Priorities and Annual Plan Commitments

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Priority	Performance Summary	Reporting Period	Data																																																												
<div>Cancer Annual Plan Commitment</div> <div><ul style="list-style-type: none">>75% compliance with the 62-day SCP standard (June 2023), 80% (December 2023)</div> <div><ul style="list-style-type: none">Develop draft UHB strategy to deliver national cancer pathways (June 2023)</div>	<div><ul style="list-style-type: none">There continues to be an improvement against the Single Cancer Pathway and the backlog trajectories agreed with the Delivery Unit. March saw another improvement of 1% compared with January with 62.2% of patients receiving treatments within 62 days. At the time of writing there are a total of 1973 suspected cancer patient on the SCP. 270 have waited over 62 days, of which 54 have waited over 104 days. There have been a number of actions taken to improve the oversight and operational grip of the process for overseeing patients. Three cancer summits have taken place with the tumour group leads and operational teams to understand the demand, the causes for delay in the 62-day pathway and what actions are required to reduce the delays experienced by our patients. We have seen improvements in the proportion of patients given their diagnosis within 28 days and continue to work to improve the front end of the pathway.</div> <div><ul style="list-style-type: none">Work in progress</div>	<div>Mar-23</div> <div>No date</div>	<div><p>% Compliance patients starting cancer treatment withing 62 days (75% by Jun-23)</p></div>																																																												
<div>Therapies Annual Plan Commitment</div> <div><ul style="list-style-type: none">0 patients waiting over 14 weeks (excluding audiology) (June 2023)</div>	<div><ul style="list-style-type: none">Excluding Audiology there were 143 patients waiting over 14-weeks for Therapy in at the end of April. In total there were 1041 patients waiting longer 14 weeks for Therapy.</div>	<div>Apr-23</div>	<div><p>0 patients waiting >14 weeks (excl. Audiology)</p></div>																																																												
<div>Diagnostics Annual Plan Commitment</div> <div><ul style="list-style-type: none">90% of patients within 8-weeks (excl. endoscopy) (December 2023)Endoscopy – urgent <6weeks; SCP<14days; 0 surveillance patients 100% past target date (December 2023)</div> <div><div>Mohamed Sarah 14/06/2023 12:31:21</div><div><ul style="list-style-type: none">Regional Diagnostic Centre go-live (December 2023)</div></div>	<div><ul style="list-style-type: none">Excluding endoscopy there were 4401 diagnostic patients waiting longer than 8 weeks for a Diagnostic at the end of April 2023 at the end of April 70% of the patients waiting for a diagnostic test had waited less that 8 weeks (excl. endoscopy).In total there were 6267 patients waiting longer than 8 weeks for a diagnostic test. This is a further increase from the 4782 reported in March and driven largely by Radiology and Endoscopy.</div> <div><table><tr><th>Radiology modality</th><th>Jan-23</th><th>Feb-23</th><th>Mar-23</th><th>Apr-23</th><th>Trend</th></tr><tr><td>MRI</td><td>1084</td><td>915</td><td>874</td><td>954</td><td></td></tr><tr><td>Non-Obstetric Ultrasound</td><td>1311</td><td>946</td><td>1279</td><td>2099</td><td></td></tr><tr><td>CT</td><td>8</td><td>18</td><td>15</td><td>167</td><td></td></tr></table><table><tr><th>Diagnostic endoscopy</th><th>Jan-23</th><th>Feb-23</th><th>Mar-23</th><th>Apr-23</th><th>Trend</th></tr><tr><td>Cystoscopy</td><td>241</td><td>228</td><td>224</td><td>243</td><td></td></tr><tr><td>Colonoscopy</td><td>239</td><td>240</td><td>272</td><td>327</td><td></td></tr><tr><td>Flexible Sigmoidoscopy</td><td>348</td><td>337</td><td>311</td><td>351</td><td></td></tr><tr><td>Gastroscopy</td><td>767</td><td>679</td><td>741</td><td>930</td><td></td></tr><tr><td>Bronchoscopy</td><td>11</td><td>13</td><td>15</td><td>15</td><td></td></tr></table></div> <div><ul style="list-style-type: none">(work in progress)</div>	Radiology modality	Jan-23	Feb-23	Mar-23	Apr-23	Trend	MRI	1084	915	874	954		Non-Obstetric Ultrasound	1311	946	1279	2099		CT	8	18	15	167		Diagnostic endoscopy	Jan-23	Feb-23	Mar-23	Apr-23	Trend	Cystoscopy	241	228	224	243		Colonoscopy	239	240	272	327		Flexible Sigmoidoscopy	348	337	311	351		Gastroscopy	767	679	741	930		Bronchoscopy	11	13	15	15		<div>Apr-23</div> <div>No date</div>	<div><p>90% of patients within 8 weeks (excl. Endo)</p></div>
Radiology modality	Jan-23	Feb-23	Mar-23	Apr-23	Trend																																																										
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Cystoscopy	241	228	224	243																																																											
Colonoscopy	239	240	272	327																																																											
Flexible Sigmoidoscopy	348	337	311	351																																																											
Gastroscopy	767	679	741	930																																																											
Bronchoscopy	11	13	15	15																																																											

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Priority	Performance Summary	Reporting Period	Data
Community Pharmacy Annual Plan Commitment: <ul style="list-style-type: none">>90% of all eligible community pharmacies providing CCPS (June 2023)10% increase in pharmacy independent provider access (December 2023)			
GMS Escalation Annual Plan Commitment: <ul style="list-style-type: none">>95% of practices reporting escalation levels (June 2023)>95% improvement of core access to in-hours GMS Services (September 2023)			
Community Dental Annual Plan Commitment: <ul style="list-style-type: none">50% of expected target for new patients, urgent and historic (June 2023); 90% (March 2024)			
Optometry Annual Plan Commitment <ul style="list-style-type: none">>90% of eligible practices offering Clinical Community Optometry Services (CCOS) (June 2023); 95% (December 2023)			
Respiratory Annual Plan Commitment <ul style="list-style-type: none">50% of backlog of suspected COPD patients receive spirometry (June 2023); 100% March 2024)			

Mohammed Sarah
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C&V Priorities and Annual Plan Commitments

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Priority	Performance Summary	Reporting Period	Data
Whole System Evaluation Annual Plan Commitment: <ul style="list-style-type: none">Undertake high impact evaluations of three key specialities (June)Undertake high impact evaluations of three key specialities (Sept)			
Supporting Patients Whilst Waiting Annual Plan Commitment: <ul style="list-style-type: none">Produce models of care (June 2023)Develop pathways (Sept)Expand services (December)			



Priority	Performance Summary	Reporting Period	Data
Children’s Mental Health Annual Plan Commitments: <ul style="list-style-type: none">>80% Part 1a performance – SCAMHSPart 1b – 10% improvement (September 2023); further 10% (December 2023); achieve >80% compliance (March 2023)Reduce SCAMHS Intervention longest wait to no longer than 6 weeks	<div>Work in progress</div> <div>Work in progress – working through data quality issues following the merger of PMH and CAMHS services</div> <div>Work in progress</div>	<div>May-23</div>	<div>In progress</div> <div>In progress</div>
Adult Mental Health Annual Plan Commitments: <ul style="list-style-type: none">>80% Part 1a performance>80% Part 1b performance	<div>• Part 1a: The percentage of Mental Health assessments undertaken within 28 days was 84%, increased from 45.5% in April 2023.</div> <div>• Part 1b: 95.5% of therapeutic treatments started within 28 days following assessment at the end of May 2023, a reduction from the reported compliance in April 2023 (100%)</div>	<div>May-23</div> <div>May-23</div>	

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NHS Wales Performance Framework Measures

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No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend
10.	Percentage of GP practices that have achieved all standards set out in the National Access Standards for In-hours				
11.	Percentage of primary care dental services (GDS) contract value delivered (for courses of treatment for new, new urgent and historic patients)				
12.	Number of patients referred from primary care (optometry and General Medical Practitioners) into secondary care Ophthalmology services				
13.	Number of consultations delivered through the Pharmacist Independent Prescribing Service (PIS)				
14.	Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for people aged under 18 years				
15.	Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for people aged under 18 years				
16.	Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for adults aged 18 years and over				
17.	Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for adults aged 18 years and over				

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NHS Wales Performance Framework Measures

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No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
18.	Percentage of emergency responses to red calls arriving within (up to and including) 8 minutes	Apr-23	65%	64%	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>50.2%</td><td>56.7%</td><td>51.4%</td><td>64.0%</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	50.2%	56.7%	51.4%	64.0%
Jan-23	Feb-23	Mar-23	Apr-23										
50.2%	56.7%	51.4%	64.0%										
19.	Median emergency response time to amber calls	Apr-23	n/a	59:56	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>59:43</td><td>60:35</td><td>87:11</td><td>59:56</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	59:43	60:35	87:11	59:56
Jan-23	Feb-23	Mar-23	Apr-23										
59:43	60:35	87:11	59:56										
20.	Median time from arrival at an emergency department to triage by a clinician	Work in Progress											
21.	Median time from arrival at an emergency department to assessment by a senior clinical decision maker	Work in Progress											
22.	Percentage of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge	Apr-23	95%	69.5%	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>67.5%</td><td>70.9%</td><td>71.3%</td><td>69.5%</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	67.5%	70.9%	71.3%	69.5%
Jan-23	Feb-23	Mar-23	Apr-23										
67.5%	70.9%	71.3%	69.5%										
23.	Number of patients who spend 12 hours or more in all hospital major and minor emergency care facilities from arrival until admission, transfer, or discharge	Apr-23	0	689	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>876</td><td>715</td><td>747</td><td>689</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	876	715	747	689
Jan-23	Feb-23	Mar-23	Apr-23										
876	715	747	689										
24.	Number of patients waiting more than 62 days for their first definitive cancer treatment from point of suspicion (regardless of the referral route)	Mar-23	Tbc	189	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>347</td><td>250</td><td>189</td><td></td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	347	250	189	
Jan-23	Feb-23	Mar-23	Apr-23										
347	250	189											
25.	Percentage of patients starting their first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)	Mar-23	75%	62.2%	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>58.5%</td><td>55.1%</td><td>61.5%</td><td>62.2%</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	58.5%	55.1%	61.5%	62.2%
Jan-23	Feb-23	Mar-23	Apr-23										
58.5%	55.1%	61.5%	62.2%										
26.	Number of patients waiting more than 8 weeks for a specified diagnostic	Apr-23	Tbc	6267	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>5247</td><td>4421</td><td>4565</td><td>6267</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	5247	4421	4565	6267
Jan-23	Feb-23	Mar-23	Apr-23										
5247	4421	4565	6267										
27.	Percentage of children (aged under 18 years) waiting 14 weeks or less for a specified Allied Health Professional	Work in Progress											
28.	Number of patients (all ages) waiting more than 14 weeks for a specified therapy	Apr-23	Tbc	1041	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>1220</td><td>1111</td><td>953</td><td>1041</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	1220	1111	953	1041
Jan-23	Feb-23	Mar-23	Apr-23										
1220	1111	953	1041										

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
29.	Number of patients waiting more than 52 weeks for a new outpatient appointment	Apr-23	Tbc	10479	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>10951</td><td>10707</td><td>10102</td><td>10479</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	10951	10707	10102	10479
Jan-23	Feb-23	Mar-23	Apr-23										
10951	10707	10102	10479										
30.	Number of patients waiting more than 36 weeks for a new outpatient appointment	Apr-23	Tbc	19468	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>20179</td><td>19516</td><td>18718</td><td>19468</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	20179	19516	18718	19468
Jan-23	Feb-23	Mar-23	Apr-23										
20179	19516	18718	19468										
31.	Number of patients waiting for a follow-up outpatient appointment who are delayed by over 100%	Apr-23	Tbc	54064	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>50163</td><td>51374</td><td>52742</td><td>54064</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	50163	51374	52742	54064
Jan-23	Feb-23	Mar-23	Apr-23										
50163	51374	52742	54064										
32	Number of patients waiting more than 104 weeks for referral to treatment	Apr-23	Tbc	3983	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>4587</td><td>4333</td><td>3740</td><td>3983</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	4587	4333	3740	3983
Jan-23	Feb-23	Mar-23	Apr-23										
4587	4333	3740	3983										
33.	Number of patients waiting more than 52 weeks for referral to treatment	Apr-23	Tbc	23512	<table><tr><td>Jan-23</td><td>Feb-23</td><td>Mar-23</td><td>Apr-23</td></tr><tr><td>23950</td><td>23745</td><td>22664</td><td>23512</td></tr></table>	Jan-23	Feb-23	Mar-23	Apr-23	23950	23745	22664	23512
Jan-23	Feb-23	Mar-23	Apr-23										
23950	23745	22664	23512										
34.	Percentage of patients waiting less than 28 days for a first appointment for specialist Child and Adolescent Mental Health Services (sCAMHS)	Work in Progress											
35.	Percentage of children and young people waiting less than 26 weeks to start an ADHD or ASD neurodevelopment assessment	Work in Progress											
36.	Percentage of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health	Work in Progress											



Report Title:	Business Cases with No Funding Options			Agenda Item no.	2.3	
Meeting:	Finance and Performance Committee	Public	<input checked="" type="checkbox"/>	Meeting Date:	21 st June 2023	
		Private	<input type="checkbox"/>			
Status (please tick one only):	Assurance	<input checked="" type="checkbox"/>	Approval	<input type="checkbox"/>	Information	<input type="checkbox"/>
Lead Executive:	Executive Director of Finance					
Report Author (Title):	Deputy Director of Finance (Operational)					
Main Report						
Background and current situation:						
<p>Following discussions regarding the support and submission of a capital bid to Welsh Government at the 22 March 2023 meeting, Finance Committee (now Finance and Performance Committee) requested oversight of other business cases without approval of the Welsh Government in place.</p> <p>The attached report provides an example of the information provided regularly to Senior Leadership Board and the Capital Management Group of the Health Board (UHB) that summarises the UHB's capital programme including the status of various bids submitted to Welsh Government and those which it is intended will be submitted to Welsh Government.</p> <p>This is a report that evolves during the financial year as capital projects progress and financing opportunities and restraints become clearer.</p>						
Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:						
<p>The report is presented to Finance and Performance Committee to consider whether this is a report that will be useful to Committee members in future meetings.</p>						
Recommendation:						
<p>The Committee is requested to:</p> <ul style="list-style-type: none"> CONSIDER the usefulness of the attached report to the Finance and Performance Committee 						
Link to Strategic Objectives of Shaping our Future Wellbeing:						
Please tick as relevant						
1. Reduce health inequalities	<input type="checkbox"/>	6. Have a planned care system where demand and capacity are in balance	<input type="checkbox"/>			
2. Deliver outcomes that matter to people	<input type="checkbox"/>	7. Be a great place to work and learn	<input type="checkbox"/>			
3. All take responsibility for improving our health and wellbeing	<input type="checkbox"/>	8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	<input type="checkbox"/>			
4. Offer services that deliver the population health our citizens are entitled to expect	<input type="checkbox"/>	9. Reduce harm, waste and variation sustainably making best use of the resources available to us	<input checked="" type="checkbox"/>	x		
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time	<input type="checkbox"/>	10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	<input type="checkbox"/>			

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention		Long term	x	Integration		Collaboration		Involvement	
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Impact Assessment:

Please state yes or no for each category. If yes please provide further details.

Risk: Yes

No

Safety: Yes/No

No

Financial: Yes

As detailed in the report.

Workforce: Yes/No

No

Legal: Yes/No

No

Reputational: Yes/No

Yes, if forecast financial position is not delivered.

Socio Economic: Yes/No

No

Equality and Health: Yes/No

No

Decarbonisation: Yes/No

No

Approval/Scrutiny Route:

Finance and
Performance
Committee

Date: 21st June 2023

Mohamed Sarah
14/06/2023 12:31:21

Report Title:	Draft Capital Approval Plan 2023/24			Agenda Item no.	Attachment to 2.3
Meeting	Senior Leadership Board	Public	√	Meeting Date:	8 th June 2023
Status (please tick one only):	Assurance	Approval	√	Information	
Lead Executive:	Director of Finance				
Report Author (Title):	Director of Capital, Estates and Facilities				
Main Report					
Background and current situation:					

The purpose of this report is to:

1. inform Senior Leadership Board (SLB) of the available capital funding received from Welsh Government (WG) as set out in the Capital Resource Limit (CRL), which for 2023/24 is £20.086m in total, with £9.0666m allocated to Major Capital schemes and £11.020m Discretionary Capital
2. advise SLB of the annual commitments against the Discretionary Capital funding available and the budgets carried over from 2022/23 for schemes that complete in the new financial year
3. Identify the unallocated funding available, together with a schedule of schemes for SLB to consider and determine which scheme to prioritise

The funding available does not include any Business Case's developed with funding support from the UHB Discretionary Capital allocation and which have been submitted to WG for approval. On receipt of approval, the funding will be paid back to the discretionary capital budget and therefore available to support the programme. The total commitment is shown below.

Scheme	Amount
Park View Wellbeing Hub (OBC)	£0.755m
CRI Wellbeing Centre (OBC)	£2.301m
CRI MEP (FBC)	£0.662m
Mortuary (BJC)	£0.129m
Haematology Ward & Day Unit (BJC)	£0.090m
Lift Upgrade Programme (BJC)	£0.017m
Total	£3.954m

Capital Funding 2023/24

Scheme	Major Capital	Discretionary Capital	Total
Rookwood Relocation (St David's Hospital)	£0.750m		£0.750m
UHL Engineering Infrastructure	£0.594m		£0.594m
Endoscopy Expansion	£2.275m		£2.275m
EFAB	£4.235m		£4.235m
Fracture Clinic	£0.240m		£0.240m
Emergency Unit	£0.154m		£0.154m
Genomics	£0.259m		£0.259m
Maelfa Wellbeing Hub	£0.338m		£0.338m
Eye Care	£0.221m		£0.221m
Discretionary Capital		£11.020m	£11.020m
Totals	£9.066m	£11.020m	£20.086m

Capital Expenditure 2023/24

Scheme	Major Capital	Discretionary Capital	Total
Construction			
Rookwood Relocation (St David's Hospital)	£0.750m		£0.750m
UHL Engineering Infrastructure	£0.594m		£0.594m
Endoscopy Expansion	£2.275m		£2.275m
EFAB	£4.235m		£4.235m
Fracture Clinic	£0.240m		£0.240m
Emergency Unit	£0.154m		£0.154m
Genomics	£0.259m	£1.041m	£1.300m
Maelfa Wellbeing Hub	£0.338m		£0.338m
Eye Care	£0.221m		£0.221m
Boiler Upgrade UHL		£0.050m	£0.050m
Ward C5		£0.010m	£0.010m
Annual Commitments			
UHB Capitalisation of Salaries		£0.865m	£0.865m
UHB Revenue to Capital		£1.215m	£1.215m
Business Cases			
Penarth Wellbeing Hub	£0.592m		£0.592m
Haematology Ward & Day Unit		£0.020m	£0.020m
Ward Reconfiguration			
UHW Ward Reconfiguration (Phase 1)		£0.319m	£0.319m
Estate Statutory Compliance			
Fire Risk Works		£0.200m	£0.200m
Asbestos		£0.400m	£0.400m
Gas infrastructure Upgrade		£0.300m	£0.300m
Legionella		£0.450m	£0.450m
Electrical Infrastructure Upgrade		£0.150m	£0.150m
Ventilation Upgrade		£0.500m	£0.500m
Electrical Backup Systems		£0.250m	£0.250m
Upgrade Patient Facilities		£0.350m	£0.350m
Dedicated Team		£0.200m	£0.200m
Backlog			
IM&T Backlog		£0.500m	£0.500m
Medical Equipment Backlog		£1.000m	£1.000m
Estate Backlog		£0.500m	£0.500m
Lift Upgrade (Maternity)		£0.157m	£0.157m
Contingency		£1.000m	£1.000m
Unallocated		£1.543m	£1.543m
Penarth Wellbeing Hub	(£0.592m)		(£0.592m)
Totals	£9.066m	£11.020m	£20.086m

Scheme Awaiting Approval	Funding	Expenditure	Balance Remaining
Unallocated Discretionary Capital	(£1.543m)		(£1.543m)
UHW Ward Reconfiguration (Phase 2)		£0.400m	(£1.143m)
Cardiology Moves			
C3 Link (formally CITU)		£0.750m	(£0.939m)
A3 Link		£0.120m	(£0.273m)
Old Discharge Lounge		£0.030m	(£0.243m)
B4H Ventilation		£0.450m	£0.207m
		£1.750m	
UHL TACU		£0.150m	
UHL Boiler Leveling Tanks		£0.120m	
St Mary's (Plant Room)		£0.155m	
CFPU Build Cold Storage		£0.582m	
Maternity Air Plant		£0.285m	
Assessment Units		£0.075m	
UHW Tunnels Phase 1 (EU to Lift Block B)		£0.240m	
UHW Tunnels Phase 2 (Lift Block B Children's Hospital)		£0.120m	
ITU (SOC)		£0.050m	
Purchase Redland Road Surgery		£0.800m	
		£2.577m	
	(£1.543m)	£4.327m	£2.784m

Business Cases Awaiting Approval from Welsh Government / UHB Board

CAVOC (OBC) – UHB Board approved
Hybrid/MTC Theatres (FBC) – Welsh Government
SARC (OBC) – Welsh Government
Park View Wellbeing Hub (OBC) – Welsh Government
CRI Wellbeing Centre (OBC) – Welsh Government
Haematology Ward & Day Unit (BJC) - UHB Board approved
Mortuary (BJC) - UHB Board approved
Tertiary Tower (BJC) - Welsh Government
Lift Upgrade Programme (BJC) - UHB Board approved

Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:

- The proposed programme retains a Contingency £1.000m to support any 'in year' emergency expenditure identified
- The draft capital programme identifies, **Unallocated Funding of £1.543m**
- To address a number of schemes identified as priority an over commitment against unallocated funding of £2.704m is anticipated
- A submission for £0.592m of IRCF funding is being submitted to support the development of the revised OBC for the Penarth Wellbeing Hub

Recommendation:

Senior Leadership Board are requested to:

1. **NOTE:** the content of the paper and in particular the extremely limited unallocated discretionary capital funding available
2. **NOTE:** the schedule of priority schemes identified which would require £4.247m of funding against the unallocated budget of £1.543m
3. **APPROVE:** the following schemes which have total commitment of £1.750m against the unallocated budget of £1.543m, with the shortfall of £0.207m being funded by slippage from other projects, income from Business Case expenditure or contingency.
4. **PRIORITISE:** the remaining schemes to enable them to progress as funding becomes available

Link to Strategic Objectives of Shaping our Future Wellbeing:

Please tick as relevant

1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance	√
2. Deliver outcomes that matter to people		7. Be a great place to work and learn	
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect	√	9. Reduce harm, waste and variation sustainably making best use of the resources available to us	√
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention		Long term	√	Integration		Collaboration		Involvement	
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Impact Assessment:

Please state yes or no for each category. If yes please provide further details.

Risk: Yes

Lack of capital funding to deliver the scheme has implications on clinical service delivery.

Safety: Yes

The scheme has clinical safety implications with lift entrapment issues and breakdowns will impede clinical service delivery and patient safety.

Financial: Yes/No

Workforce: Yes/No

Legal: Yes

Statutory obligations require investment and the lack thereof can lead to exposure to risk and legal challenge.

Reputational: Yes

The UHB's ability to reduce waiting times and deliver services in an appropriate setting being cognisant of patient's privacy and dignity.

Socio Economic: No

Equality and Health: Yes	
Increasing the overall reliability of the Lifts will ensure clinical staff are able to appropriately perform intensive clinicals activities.	
Decarbonisation: Yes	
Although not been specifically, new equipment installed will be more energy efficient.	
Approval/Scrutiny Route:	
Committee/Group/Exec	Date:

Mohamed Sarah
14/06/2023 12:31:21

Mohamed Sarah
14/06/2023 12:31:21

Report Title:	Board Assurance Framework – Capital Assets and Financial Sustainability			Agenda Item no.	2.4	
Meeting:	Finance & Performance Committee	Public	<input checked="" type="checkbox"/>	Meeting Date:	21st June 2023	
		Private	<input type="checkbox"/>			
Status <i>(please tick one only):</i>	Assurance	<input checked="" type="checkbox"/>	Approval	<input type="checkbox"/>	Information	<input type="checkbox"/>
Lead Executive:	Director of Corporate Governance					
Report Author (Title):	Director of Corporate Governance					
Main Report						
Background and current situation:						
<p>The purpose of the report is to provide Members of the Finance & Performance Committee with the opportunity to review the Capital Assets and Financial Sustainability Risks on the Board Assurance Framework which link specifically to this Committee.</p> <p>The risks within the full BAF were last reported to the Board at the end of May 2023 and confirmed to be the risks to our Strategic Objectives.</p> <p>The purpose of discussion at the Finance & Performance Committee is to provide further assurance to the Board that these risks are being appropriately managed or mitigated, that controls where identified are working and that there are appropriate assurances on the controls. Where there are gaps in either controls or assurances there should be actions in place.</p>						
Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:						
<p>The Board Assurance Framework is presented to each meeting of the Board after discussion with the relevant Executive Director. It provides the Board with information on the key risks impacting upon the delivery of the Strategic Objectives of Cardiff and Vale University Health Board.</p> <p>The attached Capital Assets and Financial Sustainability risks are key risk to the achievement of the organisation's Strategic Objectives and have been included within the BAF from 2018 and 2022 respectively.</p>						
Recommendation:						
<p>The Finance & Performance Committee are requested to:</p> <p>a) Review the attached risks in relation to Capital Assets and Financial Sustainability to enable the Committee to provide further assurance to the Board when the Board Assurance Framework is reviewed in its entirety.</p>						
Link to Strategic Objectives of Shaping our Future Wellbeing:						
<i>Please tick as relevant</i>						
1. Reduce health inequalities	<input type="checkbox"/>	6. Have a planned care system where demand and capacity are in balance	<input type="checkbox"/>			
2. Deliver outcomes that matter to people	<input type="checkbox"/>	7. Be a great place to work and learn	<input type="checkbox"/>			
3. All take responsibility for improving our health and wellbeing	<input checked="" type="checkbox"/>	8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	<input type="checkbox"/>			

4. Offer services that deliver the population health our citizens are entitled to expect	x	9. Reduce harm, waste and variation sustainably making best use of the resources available to us	x
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention	x	Long term		Integration		Collaboration		Involvement	
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Impact Assessment:

Please state yes or no for each category. If yes please provide further details.

Risk: Yes/No

Safety: Yes/No

Financial: Yes/No

Workforce: Yes/No

Legal: Yes/No

Reputational: Yes/No

Socio Economic: Yes/No

Equality and Health: Yes/No

Decarbonisation: Yes/No

Approval/Scrutiny Route:

Committee/Group/Exec	Date:
Executive Director of Finance	10 th May 2023
Executive Director of Strategic Planning	10 th May 2023

Mohamed Sarah
14/06/2023 12:31:21

1. Capital Assets (Estates, IT Infrastructure, Medical Devices) – Executive Director of Strategic Planning (Abigail Harris)

The UHB delivers services through a number of buildings across Cardiff and the Vale of Glamorgan, from health centres to the Tertiary Centre at UHW. All NHS organisations have statutory responsibilities to manage their assets effectively: an up to date estate strategy is evidence of the management of the estate. The IT SOP sets out priorities for the next five years and Medical Equipment is replaced in a timely manner.

Risk Date added: 12.11.2018	<p>There is a risk that the condition and suitability of the UHB estate, IT infrastructure and Medical Equipment impacts on the delivery of safe, effective and prudent health care for the patients of Cardiff and Vale UHB.</p> <p>The condition of facilities within our main hospitals are impacting on our ability to continue to provide the full range of services, and provide the new treatments WHSSC would like to commission from us. This is as a result of insufficient funding and resource to bring the estate up to the required condition in a timely way.</p>		
Cause	<ul style="list-style-type: none"> • Significant proportion of the estate is over-crowded, not suitable for the function it performs, or falls below condition B. • Investment in replacing facilities and proactively maintaining the estate has not kept up the requirements, with compliance and urgent service pressures being prioritised. • Lack of investment in IT also means that opportunities to provide services in new ways are not always possible and core infrastructure upgrading is behind schedule. • Insufficient resource to provide a timely replacement programme, or meet needs for small equipment replacement • Lack of timely decisions regarding the development of strategic business cases required to address the significant estates challenges we face. 		
Impact	<ul style="list-style-type: none"> • The health board is not able to always provide services in an optimal way, leading to increased inefficiencies and costs. • Service provision is regularly interrupted by estates issues and failures. • Patient safety and experience is sometimes adversely impacted. • IT infrastructure not upgraded as timely as required increasing operational continuity and increasing cyber security risk • Medical equipment replaced in a risk priority where possible, insufficient resource for new equipment or timely replacement • Staff facilities are inadequate in many areas. 		
Impact Score: 5	Likelihood Score: 5	Gross Risk Score:	25 (Extreme)
Current Controls	<ul style="list-style-type: none"> • Estates strategic plan in place which sets out how over the next ten years, plans will be implemented to secure estate which is fit for purpose, efficient and is 'future-proofed' as much as possible, recognising that advances in medical treatments and therapies are accelerating. Subject to mid-point review as covered in Board Development session in February 2023. • Statutory compliance estates programme in place – including legionella proactive actions, and time safety management actions. • The strategic plan sets out the key actions required in the short, medium and long term to ensure provision of appropriate estates infrastructure. 		

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	<ul style="list-style-type: none"> • The annual capital programme is prioritised based on risk and the services requirements set out in the IMTP/annual plan, with regular oversight of the programme of discretionary and major capital programmes. • Medical Equipment prioritisation is managed through the Medical Equipment Group • Business Case performance monitored through Capital Management Group every month and Strategy and Delivery Committee every 2 months. • The Health Board has submitted to Welsh Government a 10-year capital outlook, which has been prioritised to reflect the most pressing infrastructure and service challenges and risks. • Shaping Our Future Hospitals Programme Business Case was submitted to WG in October '21 and scrutinised at WG Infrastructure Investment Board in December '21. The WG Cabinet has considered Our Future Hospitals PBC alongside the priorities across the whole of Wales. There is support 'in principle' for the Health Board to proceed with the development of the next stage of the business case process – the Strategic Outline Case. • Welsh Government has agreed the Strategic Outline Case scope and a resource request has been submitted to Welsh Government. • In accordance with the prioritised plan the Board approved and submitted to Welsh Government the Tertiary Tower Business Case and the Vascular MTC Theatres Business Case. This will improve the overarching theatre provision. 		
Current Assurances	<ul style="list-style-type: none"> • The estates and capital team have a number of business cases in development to secure the necessary capital to address the major short/medium term service estates issues. • Work is starting on the business case (Strategic Outline Case) as part of Our Future Hospitals Programme to secure funding to enable a UHW replacement/redevelopment to be built. ⁽¹⁾ • The statutory compliance areas are monitored every month in the Capital Management Group to ensure that the key areas of risk are prioritised ⁽¹⁾ • The Executive Director of Strategic Planning and the Director of Capital, Facilities and Estates meet regularly with the Welsh Government Capital Team to review the capital programme and discuss the service risks ⁽³⁾. • Regular reporting on capital programme and risks to Capital Management, Management Executive and Strategy and Delivery Committee ^{(1) (2)} • IT risk register regularly updated and shared with DHCW ⁽²⁾ • Health Care Standard completed annually ⁽³⁾ • Medical equipment risk registers developed and managed by Clinical Boards, reviewed at UHB medical equipment group ^{(1) (2)} • Strategy and Delivery Committee continue to oversee the delivery of the Capital Programme ⁽¹⁾ • Timely decision making in relation to the Shaping Our Future Hospitals Strategic Outline Case ⁽³⁾ 		
Impact Score: 5	Likelihood Score: 4	Net Risk Score:	20 (Extreme)
Gap in Controls	<ul style="list-style-type: none"> • The current annual discretionary capital funding is not enough to cover all of the priorities identified through the risk assessment and IMTP process for the 3 services. • In year requirements further impact and require the annual capital programme to be funded by capital to be re-prioritised regularly. 		

Approved: Sarah
 19/06/2023 12:31:21

<ul style="list-style-type: none"> Traceability of Medical Equipment The Welsh Government current capital position is very compromised due to size of budget compared with estimated need which will impact significantly on the Capital Programme of the UHB. Not all business cases in the Welsh Government capital plan will be deliverable and the UHB needs to be mindful of the potential reputational risk of delays between OBC and FBC approvals with supply chain partners. 			
Gap in Assurances <ul style="list-style-type: none"> The regular statutory compliance surveys identify remedial works that are required urgently, for which there is no discretionary capital funding identified, requiring the annual plan to be re-prioritised, or the contingency fund to be used. Medical equipment is also subject to regulatory requirements, and therefore requires re-prioritisation during the year. Despite the substantial end of year capital, the recurrent position remains unchanged. Full condition surveys of all buildings have not been carried out so not possible to fully understand the condition of the estate. 			
Actions	Lead	By when	Update since March 2023
1. The Estates Strategy requires review and refresh and there is a need to ensure that it is future proof. The scoping of this work to understand what is required will take place before Christmas	Catherine Phillips	31.03.24	Mid-term review undertaken and agreed following Board Development in February 2023 to undertake a number of actions overseen by the Health & Safety Committee by the end of 23/24. Refresh of strategy required following sign off of HB strategy with reference to realistic funding available and clarity of funding for UHW2.
2. The Health Board continues to prioritise the use of the discretionary capital budget to target small priority schemes.	Abigail Harris	31.03.24	This continues with discretionary capital.
3. An acute infrastructure group is overseeing the short – medium term priorities.	Abigail Harris	31.03.24	The group continues to meet to agree priorities with a number of business cases progressed to address significant infrastructure risks such as Mortuary and BMT.
Impact Score: 5	Likelihood Score: 2	Target Risk Score:	10 (high)

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2. Financial Sustainability – Executive Director of Finance (Catherine Phillips)

Across Wales, Health Boards and Trusts set out plans to manage their financial pressures by driving out inefficiencies, while at the same time looking to derive greater value from their resources through innovative ways of working and practicing Prudent and Value Based Healthcare. The deficit plan submitted for 2022/23 was not achieved and has contributed to a worsened financial outlook for 2023/24 which has also been exacerbated by the cessation of Welsh Government Covid-19 funding and unprecedented inflationary pressures which are not funded. For 2023/24 the Health Board has submitted an Annual Plan in a three year context with a realistic yet challenging plan for restore financial sustainability over the medium-term.

Risk		There is a risk that the organisation will continue to breach its statutory financial duties by being unable to produce a balanced three-year plan.	
Date added: 01.04.2022 (updated May 2023)			
Cause		Cessation of Covid-19 funding and unprecedented inflationary pressures, for example on energy costs. The UHB also has to manage its operational budget and deliver planned savings on a sustainable recurrent basis.	
Impact		Breach of statutory duties, escalation. Unable to deliver a balanced year-end financial position. Reputational loss.	
Impact Score: 5	Likelihood Score: 5	Gross Risk Score:	25 (Extreme)
Current Controls		Additional expenditure is being authorised within the governance structure and the UHB Scheme of Delegation. Financial Plan submitted to Welsh Government 30 th March 2023 explaining inability to deliver financial balance over the three-year period 2023-2026. An additional Performance Review Meeting is now taking place with CB Teams to focus on Financial Performance.	
Current Assurances		The financial position is reviewed by the Finance & Performance Committee which meets monthly and reports into the Board (1) Financial performance is a standing agenda item monthly on Senior Leadership Board with escalation to Management Executives Meeting (1) Financial performance is monitored by the Management Executive (1). Assurance from internal audit annual review of core financial controls including budgeting and planning. Sustainability Programme Board in place, chaired by the Chief Executive.	
Impact Score: 5	Likelihood Score: 5	Net Risk Score:	25 (Extreme)
Gap in Controls		No gaps currently identified.	

Gap in Assurances		None identified		
Actions		Lead	By when	Update since March 2023
1. Continue to work with Welsh Government to manage our recovery and COVID 19 response as well as exceptional cost pressures.		Catherine Phillips	31/03/23	Complete for 2022/23 as fully funded for the year. See 2023/24 below.
2. Allocation letter has been received from Welsh Government and impact upon financial performance is being developed		Catherine Phillips	31/03/23	Complete – superseded by production of Annual Plan
3. To monitor and control additional expenditure and financial performance to ensure that the year-end forecast is in line with financial plan 2022/23		Catherine Phillips	31/03/23	Complete – draft annual accounts produced reporting deficit consistent with the position reported to the Board and WG.
4. To understand the impact of responding to the Covid 19 pandemic has had on the organisations underlying position. To deliver on our savings plan recurrently		Paul Bostock	31/03/23	Complete – as part of preparation of the Annual Plan.
5. The organisation has fully identified its savings plan for 2023/24 and actions are in place by the end of Q1 to ensure its delivery		Catherine Phillips	30/06/23	On track by end of Q1.
Impact Score: 3	Likelihood Score: 5	Target Risk Score:		15 (Extreme)

Mohamed Sarah
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Report Title:	Regional Integration Fund Q4 reports 2022-23			Agenda Item no.	2.5	
Meeting:	Finance and Performance Committee	Public	X	Meeting Date:	21 June 2023	
		Private				
Status (please tick one only):	Assurance	x	Approval		Information	
Lead Executive:	Executive Director of Strategic Planning					
Report Author (Title):	Head of Partnerships and Assurance					
Main Report						
Background and current situation:						
<p>The Cardiff and Vale of Glamorgan Regional Partnership Board (RPB) was established in response to requirements of the Social Services and Well-being (Wales) Act 2014. Its purpose is to manage and develop services to secure better joint working between local health boards, local authorities and the third sector; and to ensure effective services, care and support that best meet the needs of our population.</p> <p>This paper provides an overview of the financial and activity performance of the Regional Integration Fund presented to Welsh Government as part of the Q4 reporting requirements for 2022 to 23. Case studies highlighting the results of both capital and revenue funding are also provided for information.</p> <p>For further assurance, this paper also includes a local summary of our work which was reviewed and approved by the region-wide Strategic Leadership Group at its last meeting.</p>						
Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:						
<p>All quarter 4 reports have been approved by the Strategic Leadership Group on behalf of the Regional Partnership Board and have also been scrutinised by Welsh Government.</p> <p>A risk assessment and management plan has been implemented as part of preparatory work for the new financial year and an overview is provided within the local summaries attached as the first appendix.</p>						
Recommendation:						
<p>The Finance and Performance Committee is requested to:-</p> <p>a) note for information the Q4 report.</p>						
Link to Strategic Objectives of Shaping our Future Wellbeing:						
Please tick as relevant						
1. Reduce health inequalities	✓	6. Have a planned care system where demand and capacity are in balance	✓			
2. Deliver outcomes that matter to people	✓	7. Be a great place to work and learn	✓			
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	✓			
4. Offer services that deliver the population health our citizens are entitled to expect	✓	9. Reduce harm, waste and variation sustainably making best use of the resources available to us	✓			

5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time	✓	10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	✓
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Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention		Long term		Integration		Collaboration		Involvement	✓
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Impact Assessment:

Please state yes or no for each category. If yes please provide further details.

Risk: Yes

Risk assessments covering data quality, financial activity and actual performance for each priority continue to be reviewed and updated regularly as part of quarterly performance reporting.

Safety: Yes

Safety is a consideration at specific project level where appropriate.

Financial: Yes

The Regional Integration Fund guidance requires partners to demonstrate match funding to various degrees across the programme. In addition, partners are expected to demonstrate how services will be supported by core funding as the programme progresses. This has been highlighted as a significant risk within the programme and an appropriate management response is being considered by the Strategic Leadership Group currently.

Workforce: Yes

The capacity and development of our workforce will be fundamental to ensuring delivery of each project within the RIF. Workforce considerations are included within delivery plans for each project.

Legal: Yes

Any legal implications from delivery of specific commitments will be addressed within the delivery plans for each project area.

Reputational: Yes

The RIF contains a series of challenging commitments for focused work over the next 4 years. It will be important for the UHB to be seen to demonstrate ongoing commitment and support to enabling delivery.

Socio Economic: Yes

The RIF has been developed in direct response to WG guidance which outlines the specific needs of key population groups across our region including those with various socio-economic disadvantages e.g. older people, children, people with learning disabilities, etc. The delivery plans for each project include an overview of engagement intentions and the outcomes to be achieved as a result.

Equality and Health: No

Given the broad nature of the RIF, Equality Health Impact Assessments (EHIA) will be undertaken for each project where necessary.

Decarbonisation: Yes

Decarbonisation is a shared commitment for all partners within the RPB and project delivery plans will be required to take this into account where appropriate.

Approval/Scrutiny Route:

Committee/Group/Exec	Date:

Mohamed Sarah
14/06/2023 12:31:21

Report Title:	2023-24 Month 1 Monthly Financial Monitoring Return			Agenda Item no.	4.1.1				
Meeting:	Finance and Performance Committee	Public	X	Meeting Date:	21 st June 2023				
		Private							
Status (please tick one only):	Assurance		Approval		Information	X			
Lead Executive:	Executive Director of Finance								
Report Author (Title):	Deputy Director of Finance								
Main Report									
Background and current situation:									
SITUATION <p>WHC (2023) 012 - Welsh Government 2023/24 LHB, SHA & Trust Monthly Financial Monitoring Return Guidance requires the UHB to provide a main Committee of the Board with copy of the monthly Financial Monitoring Return (consisting of the Narrative, Table A and Tables C to C4) in order to provide the Committee with transparency on the submission made to the Welsh Government.</p> <p>A copy of the April 2024 MMR is attached.</p>									
Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:									
<p>The extract from the Health Board's Monthly Financial Monitoring Return is provided for information and assurance.</p>									
Recommendation:									
<p>The Committee is requested to:</p> <p>a) NOTE the extract from the Health Board's Monthly Financial Monitoring Return.</p>									
Link to Strategic Objectives of Shaping our Future Wellbeing:									
Please tick as relevant									
1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance							
2. Deliver outcomes that matter to people		7. Be a great place to work and learn							
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology							
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us		X					
5. Have an unplanned (emergency) care system that provides the right care in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives							
Five Ways of Working (Sustainable Development Principles) considered									
Please tick as relevant									
Prevention		Long term	X	Integration		Collaboration		Involvement	

Impact Assessment: <i>Please state yes or no for each category. If yes please provide further details.</i>	
Risk: No	
Safety: No	
Financial: Yes	
As detailed above.	
Workforce: No	
Legal: No	
Reputational: Yes	
Yes, if forecast financial position is not delivered.	
Socio Economic: No	
Equality and Health: No	
Decarbonisation: No	
Approval/Scrutiny Route:	
Finance and Performance Committee	Date: 21 st June 2023

Mohamed, Sarah
14/06/2023 12:31:21

THE WELSH GOVERNMENT FINANCIAL COMMENTARY

FINANCIAL POSITION FOR THE ONE MONTH PERIOD ENDED 30th APRIL 2023

INTRODUCTION

The Health Board submitted an initial draft financial plan to Welsh Government at the end of March 2023. The draft plan incorporated: -

- Brought forward underlying deficit of £40.3m
- Local Covid Consequential costs of £34.2m
- Additional energy costs of £11.5m
- 23/24 Demand and cost growth and unavoidable investments of £48.8m
- Allocations and inflationary uplifts of £14.4m
- A £32m (4%) Savings programme

This results in a 2023/24 planning deficit of £88.4m.

In line with guidance from Welsh Government, the UHB's plan anticipated Welsh Government funding for three National Inflationary Pressure costs as outlined below:

- 1) Health Protection including TTP and Immunisation costs of £8.8m
- 2) PPE cost of £2.9m.
- 3) The 2022/23 recurrent impact of paying Real Living Wage (RLW) for staff working within social care and Third Sector cost at £2.9m.

The plan assumes that the 2023/24 cost of the RLW, being paid to staff directly employed by the UHB will be funded through the 2023-24 pay award funding in addition to the £4.4m cost currently forecast in the social/third sector.

The UHB expects to provide Welsh Government with a progress update on the financial plan including operational progress and options.

At month 1, the UHB is reporting an in month overspend of £8.896m against its submitted draft plan. This is comprised of £1.446m of unidentified savings, £0.083m of operational overspend and a planning deficit of £7.367m, which is one twelfth of the planned deficit of £88.4m identified in the draft 2023/24 financial plan.

BACKGROUND

The Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2023. A summary of the core draft plan submitted is provided in Table 1.

Table 1: 2023/24 Core Draft Plan

	2023/24 Plan £m
2022/23 Forecast Outturn	26.9
Adjustment for recurrent /non-recurrent items	13.4
2023/24 b/f underlying deficit	40.3
COVID local response / consequentials	34.2
Energy cost pressure	11.5
2023/24 Cost Pressures Inflation & Growth	43.8
Service Investments	5.0
Total Planned Deficit before Allocation Uplift and savings	134.8
2023/24 Allocation Uplift / Assumed Income	(14.4)
2023/24 Cost Improvement Ambition	(32.0)
Total Allocation Uplift and Planned Savings	(46.4)
2023/24 Planned Deficit	88.4

This represents the core financial plan of the Health Board.

These financial monitoring returns have been prepared within the framework of the UHB's submitted Core Financial Plan, which includes a planning deficit of £88.4m for 2023-24. This report details the financial position of the UHB for the period ended 30th April 2023.

The UHB has separately identified non COVID 19 and COVID 19 expenditure against its submitted plan in order to assess the financial impact of COVID 19.

A full commentary has been provided to cover the tables requested for the month 1 financial position.

The response to the PSPP query raised in the month 12 financial monitoring returns is set out under the Public Sector Payment Performance heading in the body of this report.

**MOVEMENT OF OPENING FINANCIAL PLAN TO FORECAST OUTTURN
and UNDERLYING POSITION (TABLE A & A1)**

Table A sets out the financial plan and latest position at month 1 for which the following should be noted:

- The UHB’s £32m 2023/24 savings target is reported on lines 8 & 9
- The forecast position reflects the assessed COVID 19 national programme costs in Table B3 and assumes that additional Welsh Government Funding will be provided to match the costs;
- It is assumed that LTA inflation of £2.118m that will be passed to the UHB from other Health Boards;
- The bought forward underlying deficit is £40.3m as outlined in the draft financial plan.

The identification and delivery of the £32m recurrent savings target is key to delivery of the planned in year and underlying position.

OVERVIEW OF KEY RISKS & OPPORTUNITIES (TABLE A2)

Table A2 reflects the risks identified in the draft plan and these will be reviewed on a monthly basis.

ACTUAL YEAR TO DATE (TABLE B AND B2)

Table B confirms the year to date deficit of £8.896m and reflects the analysis contained in the annual operating plan in Table A. The UHB is reporting a deficit of £8.896m for the year to date and a forecast deficit of £88.400m as shown in Table 2.

Table 2: Summary Financial Position for the period ended 30th April 2023

	Forecast Month 1 Position £m	Forecast Year-End Position £m
Planned deficit	7.367	88.400
Savings Programme	1.446	0.000
Operational position (Surplus) / Deficit	0.083	0.000
Financial Position £m (Surplus) / Deficit £m	8.896	88.400

The month 1 deficit of £8.896m comprised of the following:

- £7.367m planned deficit
- £1.446m unachieved CRP gap
- £0.083m adverse variance against plan.

It is anticipated that the adverse operational variance of £0.083m and unachieved CRP gap at month 1 can be recovered as the year progresses and that the UHB will deliver its planned deficit position of £88.4m.

A central focus of Executive Performance Reviews with the UHBs Clinical Boards will be on ensuring operational pressures are addressed and managed and further progress is made in identifying and delivering recurrent savings schemes that in turn will de-risk the financial plan.

The UHB continues to face a significant challenge as it delivers services from an operational footprint that is still predominantly designed to address Covid demands and infection control. The contractual obligations to deliver improved throughput has re-introduced pre-pandemic performance arrangements for under delivery of patient activity. In particular, WHSSC commissioned specialties operate to sensitive contract parameters that include high marginal rates for under and over performance.

PAY & AGENCY (TABLE B2)

The UHB recorded Agency costs of £1.772m in month primarily due to nursing pressures. £1.367m of the costs recorded in April related to registered nursing and midwifery.

COVID 19 ANALYSIS (TABLE B3)

At month 1, Table B3 reported forecast outturn expenditure due to COVID-19 to be £13.464m. This includes expenditure related to the Covid funding for Health Protection (£8.800m), PPE (£2.900m) Long Covid (£1.144m), Anti-viral (£0.100m), and Nosocomial (£0.520m) allocations.

Year to date and forecast Covid Expenditure is summarised in Table 3 below.

Table 3: Summary of Forecast COVID 19 Net Expenditure

	Month 1 £m	Forecast £m
Health Protection	0.415	8.800
PPE	0.029	2.900
Long Covid	0.025	1.144
Nosocomial	0.043	0.520
Anti-Viral	0.008	0.100
Total COVID Expenditure £m	0.521	13.464

The UHB forecast is in line with the anticipated Welsh Government COVID Funding totaling £13.464m.

Savings Programme 2023-24 (TABLE C, C1, C2, C3 & C4)

At month 1, the UHB had identified £14.495m of savings to deliver against the £32m savings target leaving a further £17.505m schemes unidentified.

Overall performance in the identification of savings schemes is outlined in table 4 below:

Table 4: Savings Schemes

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total £m	32.000	14.595	(17.405)

The UHB will continue to identify and deliver savings schemes at pace.

INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)

The UHB is currently progressing LTA discussion in line with the Directors of Finance agreement for 2023-24 and Welsh Government timetable. Aneurin Bevan UHB have indicated they are not in agreement with the Directors of Finance agreement and currently it is not possible to confirm how an agreement with Aneurin Bevan Health Board may be reached.

INCOME ASSUMPTIONS 2022/23 (TABLE E)

Table E outlines the UHB's 2023/24 resource limit.

Similar to practice in previous years, the UHB reported position continues to exclude recurrent expenditure which has arisen following a change in the

accounting treatment of UHB PFI schemes under International Financial Reporting Standards (IFRS). The UHB is assuming that Welsh Government will continue to provide resource cover for this cost, which was assessed at £0.222m in the previous financial year.

The draft financial plan assumes that the Directors of Finance agreement on LTAs is upheld by all parties in NHS Wales.

AGED WELSH NHS DEBTORS (TABLE M)

At the 30th April 2023 there were no invoices raised by the UHB against other Welsh NHS bodies which had been outstanding for more than 17 weeks.

PUBLIC SECTOR PAYMENT PERFORMANCE

The UHB met its overall aggregate Public Sector Payment Performance target in 2022/23 in terms for value and invoices paid.

Whilst 98% of NHS liabilities are settled within 30 days, a high number of low value invoices means that only 85% of NHS invoices were settled in the same time period which in itself is a significant improvement on previous years. The main reason contributing to this are a high number of low value invoices relating to historic agreements and recharges.

The UHB has included the improvement of high volume and low value NHS invoices into its modernisation programme to find system improvements to ensure all four PSPP targets are met.

OTHER ISSUES

The financial information reported in these monitoring returns aligns to the financial details included within Finance Committee and Board papers. These monitoring returns will be taken to the 17th May 2023 meeting of the Finance Committee for information.

CONCLUSION

The UHB submitted a draft financial plan at the end of March 2023 and expects to submit a final plan at the end of quarter 1 in line with the Welsh Government timetable.

The UHB is committed to achieving in year and recurrent financial balance as soon as possible. The UHB currently has a one year draft financial plan for 2023-24 which aims to deliver financial stability and ensure that the underlying position is reduced and delivers a deficit of £88.4m. This includes a savings target of £32.0m.

The reported financial position for the first month is a deficit of £8.896m. This is comprised of £1.446m of unidentified savings, £0.083m of operational overspend and a planning deficit of £7.367m, which is one twelfth of the planned deficit of £88.4m identified in the draft 2023/24 financial plan.



.....
SUZANNE RANKIN
CHIEF EXECUTIVE

15th May 2023



.....
CATHERINE PHILLIPS
EXECUTIVE DIRECTOR OF
FINANCE

15th May 2023

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 14 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG

Lines 1 - 14 should not be adjusted after Month 1

	In Year Effect £'000	Non Recurring £'000	Recurring £'000	FYE of Recurring £'000
1 Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	-40,300	0	-40,300	-40,300
2 Planned New Expenditure (Non Covid-19) (Negative Value)	-94,523	0	-94,523	-94,523
3 Planned Expenditure For Covid-19 (Negative Value)	-13,464	-13,464		
4 Planned Welsh Government Funding (Non Covid-19) (Positive Value)	12,305	0	12,305	12,305
5 Planned Welsh Government Funding for Covid-19 (Positive Value)	13,464	13,464		
6 Planned Provider Income (Positive Value)	2,118	0	2,118	2,118
7 RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	0
8 Planned (Finalised) Savings Plan	14,042	4,098	9,944	10,813
9 Planned (Finalised) Net Income Generation	454	124	330	357
10 Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
11 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
12	0	0		
13 Planning Assumptions still to be finalised at Month 1	17,505	0	17,505	20,830
14 Opening IMTP / Annual Operating Plan	-88,400	4,222	-92,622	-88,400
15 Reversal of Planning Assumptions still to be finalised at Month 1	-17,505	0	-17,505	-20,830
16 Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive Value)	0	0		
17 Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets	0	0		
18 Other Movement in Month 1 Planned & In Year Net Income Generation	0	0	0	0
19 Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	0	0	0	0
20 Additional In Year Identified Savings - Forecast	0	0	0	0
21 Variance to Planned RRL & Other Income	0	0		
22 Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 plus virements (Positive Value - additional)	0	0		
23 Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0		
24 Additional In Year & Movement Expenditure for Covid-19 (Negative Value - additional/Positive Value - reduction)	0	0		
25 In Year Accountancy Gains (Positive Value)	0	0	0	0
26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	0	0		
27 Additional savings to be identified	17,505	0	17,505	20,830
28 Savings gap	0	0		
29 Operational Variance	0	0		
30 Roundings	0	0		
31	0	0		
32	0	0		
33	0	0		
34	0	0		
35	0	0		
36	0	0		
37	0	0		
38	0	0		
39	0	0		
40 Forecast Outturn (- Deficit / + Surplus)	-88,400	4,222	-92,622	-88,400
41 Covid-19 - Forecast Outturn (- Deficit / + Surplus)	0			
42 Operational - Forecast Outturn (- Deficit / + Surplus)	-88,400			

	Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	YTD £'000	In Year Effect £'000
1	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-40,300
2	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-94,523
3	-521	-1,212	-1,213	-1,199	-1,199	-1,125	-1,125	-1,182	-1,182	-1,125	-1,199	-521	-13,464	
4	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	12,305
5	521	1,212	1,213	1,199	1,199	1,125	1,125	1,182	1,182	1,125	1,199	521	13,464	
6	177	177	177	177	177	177	177	177	177	177	177	177	177	2,118
7	1,925	254	-61	97	-74	-6	-383	-358	-341	-341	-356	-355	1,925	0
8	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042
9	77	13	43	43	43	43	43	26	26	26	26	26	77	454
10													0	0
11													0	0
12													0	0
13		1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	0	17,505
14	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,366	-7,367	-88,400
15	0	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	0	-17,505
16													0	0
17													0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21													0	0
22	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23													0	0
24	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26													0	0
27		1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	0	17,505
28	-1,446	98	98	139	139	139	139	139	139	139	139	139	-1,446	0
29	-83	42	42										-83	0
30	0												0	0
31													0	0
32													0	0
33													0	0
34													0	0
35													0	0
36													0	0
37													0	0
38													0	0
39													0	0
40	-8,896	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-8,896	-88,400
41	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	-8,896	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-7,228	-8,896	-88,400

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Period : Apr 23

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)

This Table is currently showing 0 errors

			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings
			Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000			YTD variance as %age of YTD	Green £'000	Amber £'000	non recurring £'000	recurring £'000	£'000
1	CHC and Funded Nursing Care	Budget/Plan	8	8	8	8	8	8	8	8	8	8	8	8	8	100		100	0			
2		Actual/F'cast	8	8	8	8	8	8	8	8	8	8	8	8	8	100	8.33%	100	0	0	100	100
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
4	Commissioned Services	Budget/Plan	7	7	19	19	19	19	19	19	19	19	19	19	7	204		0	204			
5		Actual/F'cast	7	7	19	19	19	19	19	19	19	19	19	19	7	204	3.22%	0	204	125	79	79
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
7	Medicines Management (Primary & Secondary Care)	Budget/Plan	185	93	226	167	168	245	206	207	207	207	222	222	185	2,355		1,229	1,126			
8		Actual/F'cast	185	93	226	167	168	245	206	207	207	207	222	222	185	2,355	7.86%	1,229	1,126	743	1,612	2,401
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
10	Non Pay	Budget/Plan	214	226	383	283	428	283	268	268	268	268	268	268	214	3,425		3,280	145			
11		Actual/F'cast	214	226	383	283	428	283	268	268	268	268	268	268	214	3,425	6.26%	3,280	145	2,882	543	623
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
13	Pay	Budget/Plan	251	474	457	457	482	482	913	888	888	888	888	887	251	7,957		1,993	5,964			
14		Actual/F'cast	251	474	457	457	482	482	913	888	888	888	888	887	251	7,957	3.15%	1,993	5,964	347	7,610	7,610
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
16	Primary Care	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
17		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19	Total	Budget/Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042		6,602	7,439			
20		Actual/F'cast	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042	4.74%	6,602	7,439	4,098	9,944	10,813
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
22	Variance in month		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%							
23	In month achievement against FY forecast		4.74%	5.76%	7.79%	6.66%	7.88%	7.39%	10.08%	9.90%	9.90%	9.90%	10.01%	10.00%								

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Table C1- Savings Schemes Pay Analysis

		Month	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD variance as %age of YTD Budget/Plan	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
			Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000				Green £'000	Amber £'000	non recurring £'000	recurring £'000	
1	Changes in Staffing Establishment	Budget/Plan	245	92	195	195	195	195	626	626	626	626	626	625	245	4,873		1,922	2,952			
2		Actual/F'cast	245	92	195	195	195	195	626	626	626	626	626	625	245	4,873	5.02%	1,922	2,952	200	4,673	4,673
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
4	Variable Pay	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7	Locum	Budget/Plan	0	0	0	0	25	25	25	0	0	0	0	0	0	75		0	75			
8		Actual/F'cast	0	0	0	0	25	25	25	0	0	0	0	0	0	75	0.00%	0	75	75	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Agency / Locum paid at a premium	Budget/Plan	0	376	237	237	237	237	237	237	237	237	237	237	0	2,746		0	2,746			
11		Actual/F'cast	0	376	237	237	237	237	237	237	237	237	237	237	0	2,746	0.00%	0	2,746	0	2,746	2,746
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13	Changes in Bank Staff	Budget/Plan	0	0	19	19	19	19	19	19	19	19	19	19	0	190		0	190			
14		Actual/F'cast	0	0	19	19	19	19	19	19	19	19	19	19	0	190	0.00%	0	190	0	190	190
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
16	Other (Please Specify)	Budget/Plan	6	6	6	6	6	6	6	6	6	6	6	6	6	73		71	2			
17		Actual/F'cast	6	6	6	6	6	6	6	6	6	6	6	6	6	73	8.16%	71	2	72	1	1
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
19	Total	Budget/Plan	251	474	457	457	482	482	913	888	888	888	888	887	251	7,957		1,993	5,964			
20		Actual/F'cast	251	474	457	457	482	482	913	888	888	888	888	887	251	7,957	3.15%	1,993	5,964	347	7,610	7,610
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			

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Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

	Month	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY YTD variance as %age of YTD Budget/Plan	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar				Green	Amber	non recurring	recurring	
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	
1	Reduced usage of	0	376	237	237	237	237	237	237	237	237	237	237	0	2,746		0	2,746			
2	Agency/Locums paid at a premium	0	376	237	237	237	237	237	237	237	237	237	237	0	2,746	0.00%	0	2,746	0	2,746	2,746
3	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
4	Non Medical 'off contract' to 'on contract'	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
6	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
7	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8	Medical - Impact of Agency pay rate caps	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
9	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
11	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
12	Other (Please Specify)	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13	Budget/Plan	0	376	237	237	237	237	237	237	237	237	237	237	0	2,746		0	2,746			
14	Actual/F'cast	0	376	237	237	237	237	237	237	237	237	237	237	0	2,746	0.00%	0	2,746	0	2,746	2,746
15	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			

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Table C3- Savings Schemes SoCNE/SCNI Analysis

		Month	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD	Full-year forecast
1	Pay	Budget/Plan	251	474	457	457	482	482	913	888	888	888	888	887	251	7,957
2		Actual/F'cast	251	474	457	457	482	482	913	888	888	888	888	887	251	7,957
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	Non Pay	Budget/Plan	214	226	396	296	441	296	280	280	280	280	280	280	214	3,551
5		Actual/F'cast	214	226	396	296	441	296	280	280	280	280	280	280	214	3,551
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Primary Care Drugs	Budget/Plan	39	40	40	62	63	63	93	93	93	93	108	108	39	894
8		Actual/F'cast	39	40	40	62	63	63	93	93	93	93	108	108	39	894
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	Secondary Care Drugs	Budget/Plan	146	53	185	105	105	182	114	114	114	114	114	114	146	1,461
8		Actual/F'cast	146	53	185	105	105	182	114	114	114	114	114	114	146	1,461
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	CHC/FNC	Budget/Plan	8	8	8	8	8	8	8	8	8	8	8	8	8	100
11		Actual/F'cast	8	8	8	8	8	8	8	8	8	8	8	8	8	100
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	Primary Care Contractor	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Healthcare Services Provided by Other NHS Bodies	Budget/Plan	7	7	7	7	7	7	7	7	7	7	7	7	7	79
17		Actual/F'cast	7	7	7	7	7	7	7	7	7	7	7	7	7	79
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Non Healthcare Services Provided by Other NHS Bodies	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Other Private & Voluntary Sector	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Joint Financing & Other	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Total	Budget/Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042
29		Actual/F'cast	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042
30		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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This Table is currently showing 3 errors

Table C4 - Tracker

	£'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect
Savings (Cash Releasing & Cost Avoidance)	Month 1 - Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042	4,098	9,944	870	10,813
	Month 1 - Actual/Forecast	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042	4,098	9,944	870	10,813
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042	4,098	9,944	870	10,813
	Total Actual/Forecast	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	665	14,042	4,098	9,944	870	10,813
	Total Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Net Income Generation	Month 1 - Plan	77	13	43	43	43	43	43	43	26	26	26	26	77	454	124	330	27	357
	Month 1 - Actual/Forecast	77	13	43	43	43	43	43	43	26	26	26	26	77	454	124	330	27	357
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Plan	77	13	43	43	43	43	43	43	26	26	26	26	77	454	124	330	27	357
	Total Actual/Forecast	77	13	43	43	43	43	43	43	26	26	26	26	77	454	124	330	27	357
	Total Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accountancy Gains	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	Month 1 - Plan	742	821	1,137	978	1,149	1,081	1,458	1,433	1,417	1,417	1,432	1,430	742	14,495	4,222	10,273	897	11,170
	Month 1 - Actual/Forecast	742	821	1,137	978	1,149	1,081	1,458	1,433	1,417	1,417	1,432	1,430	742	14,495	4,222	10,273	897	11,170
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Plan	742	821	1,137	978	1,149	1,081	1,458	1,433	1,417	1,417	1,432	1,430	742	14,495	4,222	10,273	897	11,170
	Total Actual/Forecast	742	821	1,137	978	1,149	1,081	1,458	1,433	1,417	1,417	1,432	1,430	742	14,495	4,222	10,273	897	11,170
	Total Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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Report Title:	2023-24 Month 2 Monthly Financial Monitoring Return				Agenda Item no.	4.1.2	
Meeting:	Finance and Performance Committee	Public	X	Meeting Date:	21 st June 2023		
		Private					
Status (please tick one only):	Assurance	X	Approval		Information	X	
Lead Executive:	Executive Director of Finance						
Report Author (Title):	Deputy Director of Finance						
Main Report							
Background and current situation:							
SITUATION <p>WHC (2023) 012 - Welsh Government 2023/24 LHB, SHA & Trust Monthly Financial Monitoring Return Guidance requires the UHB to provide a main Committee of the Board with copy of the monthly Financial Monitoring Return (consisting of the Narrative, Table A and Tables C to C4) in order to provide the Committee with transparency on the submission made to the Welsh Government.</p> <p>A copy of the May 2024 MMR is attached.</p>							
Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:							
<p>The extract from the Health Board's Monthly Financial Monitoring Return is provided for information and assurance.</p>							
Recommendation: <p>The Committee is requested to:</p> <p>a) NOTE the extract from the Health Board's Monthly Financial Monitoring Return.</p>							
Link to Strategic Objectives of Shaping our Future Wellbeing: <i>Please tick as relevant</i>							
1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance					
2. Deliver outcomes that matter to people		7. Be a great place to work and learn					
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology					
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	X				
5. Have an unplanned (emergency) care system that provides the right care in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives					
Five Ways of Working (Sustainable Development Principles) considered <i>Please tick as relevant</i>							
Prevention		Long term	X	Integration		Collaboration	
						Involvement	

Impact Assessment: <i>Please state yes or no for each category. If yes please provide further details.</i>	
Risk: No	
Safety: No	
Financial: Yes	
As detailed above.	
Workforce: No	
Legal: No	
Reputational: Yes	
Yes, if forecast financial position is not delivered.	
Socio Economic: No	
Equality and Health: No	
Decarbonisation: No	
Approval/Scrutiny Route:	
Finance and Performance Committee	Date: 21 st June 2023

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THE WELSH GOVERNMENT FINANCIAL COMMENTARY

FINANCIAL POSITION FOR THE TWO MONTH PERIOD ENDED 31st MAY 2023

INTRODUCTION

The Health Board submitted an initial draft financial plan to Welsh Government at the end of March 2023. The draft plan incorporated: -

- Brought forward underlying deficit of £40.3m
- Local Covid Consequential costs of £34.2m
- Additional energy costs of £11.5m
- 23/24 Demand and cost growth and unavoidable investments of £48.8m
- Allocations and inflationary uplifts of £14.4m
- A £32m (4%) Savings programme

This results in a 2023/24 planning deficit of £88.4m.

In line with guidance from Welsh Government, the UHB's plan anticipated Welsh Government funding for three National Inflationary Pressure costs as outlined below:

- 1) Health Protection including TTP and Immunisation costs of £8.8m
- 2) PPE cost of £2.9m.
- 3) The 2022/23 recurrent impact of paying Real Living Wage (RLW) for staff working within social care and Third Sector cost at £2.9m.

The plan assumes that the 2023/24 cost of the RLW, being paid to staff directly employed by the UHB will be funded through the 2023-24 pay award funding in addition to the £4.4m cost currently forecast in the social/third sector.

The UHB expects to provide Welsh Government with a progress update on the financial plan including operational progress and options.

At month 2, the UHB is reporting an overspend of £17.183m against its submitted draft plan. This is comprised of £2.524m of red schemes and unidentified savings, (£0.075m) of operational underspend and a planning deficit of £14.733m, which is two months of the planned deficit of £88.4m identified in the draft 2023/24 financial plan.

BACKGROUND

The Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2023. A summary of the core draft plan submitted is provided in Table 1.

Table 1: 2023/24 Core Draft Plan

	2023/24 Plan £m
2022/23 Forecast Outturn	26.9
Adjustment for recurrent /non-recurrent items	13.4
2023/24 b/f underlying deficit	40.3
COVID local response / consequentials	34.2
Energy cost pressure	11.5
2023/24 Cost Pressures Inflation & Growth	43.8
Service Investments	5.0
Total Planned Deficit before Allocation Uplift and savings	134.8
2023/24 Allocation Uplift / Assumed Income	(14.4)
2023/24 Cost Improvement Ambition	(32.0)
Total Allocation Uplift and Planned Savings	(46.4)
2023/24 Planned Deficit	88.4

This represents the core financial plan of the Health Board.

These financial monitoring returns have been prepared within the framework of the UHB's submitted Core Financial Plan, which includes a planning deficit of £88.4m for 2023-24. This report details the financial position of the UHB for the period ended 31st May 2023.

The UHB has separately identified non COVID 19 and COVID 19 expenditure against its submitted plan in order to assess the financial impact of COVID 19.

A full commentary has been provided to cover the tables requested for the month 2 financial position.

MOVEMENT OF OPENING FINANCIAL PLAN TO FORECAST OUTTURN and UNDERLYING POSITION (TABLE A & A1)

Table A sets out the financial plan and latest position at month 2 for which the following should be noted:

- The UHB's £32m 2023/24 savings target is reported on lines 8 & 9
- The forecast position reflects the assessed COVID 19 national programme costs in Table B3 and assumes that additional Welsh Government Funding will be provided to match the costs;
- It is assumed that LTA inflation of £2.118m that will be passed to the UHB from other Health Boards;
- The bought forward underlying deficit is £40.3m as outlined in the draft financial plan.

The identification and delivery of the £32m recurrent savings target is key to delivery of the planned in year and underlying position.

OVERVIEW OF KEY RISKS & OPPORTUNITIES (TABLE A2)

Table A2 reflects the risks identified in the draft plan and these will be reviewed on a monthly basis.

ACTUAL YEAR TO DATE (TABLE B AND B2)

Table B confirms the year to date deficit of £17.183m and reflects the analysis contained in the annual operating plan in Table A. The UHB is reporting a deficit of £17.183m for the year to date and a forecast deficit of £88.400m as shown in Table 2.

Table 2: Summary Financial Position for the period ended 31st May 2023

	Forecast Month 2 Position £m	Forecast Year-End Position £m
Planned deficit	14.733	88.400
Savings Programme	2.524	0.000
Operational position (Surplus) / Deficit	(0.075)	0.000
Financial Position £m (Surplus) / Deficit £m	17.183	88.400

The month 2 deficit of £17.183m comprised of the following:

- £14.733m planned deficit
- £2.505m savings gap
- £0.019m slippage against identified saving schemes
- (£0.075m) favourable variance against plan.

It is anticipated that the unachieved CRP gap and slippage at month 2 can be recovered as the year progresses and that the UHB will deliver its planned deficit position of £88.4m.

A central focus of Executive Performance Reviews with the UHBs Clinical Boards will be on ensuring operational pressures are addressed and managed and further progress is made in identifying and delivering recurrent savings schemes that in turn will de-risk the financial plan.

The UHB continues to face a significant challenge as it delivers services from an operational footprint that is still predominantly designed to address Covid demands and infection control. The contractual obligations to deliver improved throughput has re-introduced pre-pandemic performance arrangements for under delivery of patient activity. In particular, WHSSC commissioned specialties operate to sensitive contract parameters that include high marginal rates for under and over performance.

PAY & AGENCY (TABLE B2)

The UHB recorded Agency costs of £1.347m in month primarily due to nursing pressures. £1.137m of the costs recorded in May related to registered nursing and midwifery.

COVID 19 ANALYSIS (TABLE B3)

At month 2, Table B3 reported forecast outturn expenditure due to COVID-19 to be £13.464m. This includes expenditure related to the Covid funding for Health Protection (£8.800m), PPE (£2.900m) Long Covid (£1.144m), Anti-viral (£0.100m), and Nosocomial (£0.520m) allocations.

Year to date and forecast Covid Expenditure is summarised in Table 3 below.

Table 3: Summary of Forecast COVID 19 Net Expenditure

	Month 2 £m	Forecast £m	Funded by WG or Financial Plan £m	Variance to Plan/Funding £m
Health Protection	0.944	8.800	8.800	0.000
PPE	0.060	2.900	2.900	0.000
Long Covid	0.050	1.144	1.144	0.000
Nosocomial	0.087	0.520	0.520	0.000
Anti-Viral	0.017	0.100	0.100	0.000
Total COVID Expenditure £m	1.157	13.464	13.464	0.000

The UHB forecast is in line with the anticipated Welsh Government COVID Funding totaling £13.464m.

Savings Programme 2023-24 (TABLE C, C1, C2, C3 & C4)

At month 2, the UHB had identified £27.714m of green, amber and red schemes to deliver against the £32m savings target leaving a further £4.286m schemes unidentified.

Overall performance in the identification of savings schemes is outlined in table 4 below:

Table 4: Savings Schemes

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total £m	32.000	27.714	(4.286)

The table above includes green, amber and red schemes.

The UHB will continue to identify and deliver savings schemes at pace.

INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)

The UHB is currently progressing LTA discussion in line with the Directors of Finance agreement for 2023-24 and Welsh Government timetable. The UHB highlighted issues with Aneurin Bevan not signing up to the DOF agreement last month however this has been resolved with the UHB receiving the AB LTA (provider) documentation.

INCOME ASSUMPTIONS 2023/24 (TABLE E)

Table E outlines the UHB's 2023/24 resource limit.

Similar to practice in previous years, the UHB reported position continues to exclude recurrent expenditure which has arisen following a change in the accounting treatment of UHB PFI schemes under International Financial Reporting Standards (IFRS). The UHB is assuming that Welsh Government will continue to provide resource cover for this cost, which was assessed at £0.222m in the previous financial year.

The draft financial plan assumes that the Directors of Finance agreement on LTAs is upheld by all parties in NHS Wales.

CAPITAL SCHEMES (TABLES I, J & K)

Of the UHB's approved Capital Resource Limit, 11% has been expended to date.

One capital scheme is currently classified as medium risk:

- Genomics - forecasting a potential £1.041m overspend. This is to be managed through the discretionary programme and is reflected in the 'Estates' line of the capital tables. The overspend is due to a number of factors including inflation, IT spec and the rerouting of drainage.

Eye Care – discussions are ongoing with DCHW to arrange transfer of this service from C&V, a transfer date is yet to be confirmed.

All other schemes are currently in line with forecast.

Planned expenditure for the year reflects the CRL received from Welsh Government dated 5th May 2023 - £20.086m.

AGED WELSH NHS DEBTORS (TABLE M)

At the 31st May 2023 there were no invoices raised by the UHB against other Welsh NHS bodies which had been outstanding for more than 17 weeks.

PUBLIC SECTOR PAYMENT PERFORMANCE

The UHB achieved it's Public Sector Payment Performance target with 97.66% being achieved cumulatively to-date.

The UHB has included the improvement of high volume and low value NHS invoices into its modernisation programme to find system improvements to ensure all four PSPP targets are met.

OTHER ISSUES

The financial information reported in these monitoring returns aligns to the financial details included within Finance Committee and Board papers. These monitoring returns will be taken to the 21st June 2023 meeting of the Finance Committee for information.

CONCLUSION

The UHB submitted a draft financial plan at the end of March 2023 and submitted a final plan at the end of May in line with the Welsh Government timetable.

The UHB is committed to achieving in year and recurrent financial balance as soon as possible. The UHB currently has a one year draft financial plan for 2023-24 which aims to deliver financial stability and ensure that the underlying position is reduced and delivers a deficit of £88.4m. This includes a savings target of £32.0m.

The reported financial position for the first month is a deficit of £17.183m. This is comprised of £2.524m of red schemes and unidentified savings, (£0.075m) of operational underspend and a planning deficit of £14.733m, which is two months of the planned deficit of £88.4m identified in the draft 2023/24 financial plan.



.....
SUZANNE RANKIN
CHIEF EXECUTIVE

13th June 2023



.....
CATHERINE PHILLIPS
EXECUTIVE DIRECTOR OF
FINANCE

13th June 2023

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 14 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG

Lines 1 - 14 should not be adjusted after Month 1

	In Year Effect	Non Recurring	Recurring	FYE of Recurring
	£'000	£'000	£'000	£'000
1 Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	-40,300	0	-40,300	-40,300
2 Planned New Expenditure (Non Covid-19) (Negative Value)	-94,523	0	-94,523	-94,523
3 Planned Expenditure For Covid-19 (Negative Value)	-13,465	-13,465		
4 Planned Welsh Government Funding (Non Covid-19) (Positive Value)	12,305	0	12,305	12,305
5 Planned Welsh Government Funding for Covid-19 (Positive Value)	13,465	13,465		
6 Planned Provider Income (Positive Value)	2,118	0	2,118	2,118
7 RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	0
8 Planned (Finalised) Savings Plan	14,042	4,098	9,944	10,813
9 Planned (Finalised) Net Income Generation	454	124	330	357
10 Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
11 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
12	0	0		
13 Planning Assumptions still to be finalised at Month 1	17,505	0	17,505	20,830
14 Opening IMTP / Annual Operating Plan	-88,400	4,222	-92,622	-88,400
15 Reversal of Planning Assumptions still to be finalised at Month 1	-17,505	0	-17,505	-20,830
16 Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive Value)	0	0		
17 Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets	0	0		
18 Other Movement in Month 1 Planned & In Year Net Income Generation	102	0	102	130
19 Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	0	0	0	0
20 Additional In Year Identified Savings - Forecast	2,343	1,041	1,301	1,570
21 Variance to Planned RRL & Other Income	0	0		
22 Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 plus virements (Positive Value - additional)	0	0		
23 Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0		
24 Additional In Year & Movement Expenditure for Covid-19 (Negative Value - additional/Positive Value - reduction)	0	0		
25 In Year Accountancy Gains (Positive Value)	0	0	0	0
26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	29	29		
27 Additional savings to be identified	15,030	0	15,030	19,130
28 Roundings	0	0		
29	0	0		
30	0	0		
31	0	0		
32	0	0		
33	0	0		
34	0	0		
35	0	0		
36	0	0		
37	0	0		
38	0	0		
39	0	0		
40 Forecast Outturn (- Deficit / + Surplus)	-88,400	5,291	-93,694	-88,400
41 Covid-19 - Forecast Outturn (- Deficit / + Surplus)	0			
42 Operational - Forecast Outturn (- Deficit / + Surplus)	-88,400			

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-6,717	-40,300
2	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-15,754	-94,523
3	-521	-943	-1,235	-1,220	-1,194	-1,171	-1,146	-1,203	-1,208	-1,208	-1,167	-1,245	-1,464	-13,465
4	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	2,051	12,305
5	521	943	1,235	1,220	1,194	1,171	1,146	1,203	1,208	1,208	1,167	1,245	1,464	13,465
6	177	177	177	177	177	177	177	177	177	177	177	177	353	2,118
7	1,925	254	-61	97	-74	-6	-383	-358	-341	-341	-356	-355	2,179	0
8	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	1,474	14,042
9	77	13	43	43	43	43	43	43	26	26	26	26	90	454
10													0	0
11													0	0
12													0	0
13		1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	17,505
14	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,367	-7,366	-14,733	-88,400
15	0	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-17,505
16													0	0
17													0	0
18	0	-3	2	11	11	11	11	11	11	11	11	11	-3	102
19	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	0	219	145	211	209	212	189	191	229	191	196	352	219	2,343
21													0	0
22	0	-231	23	23	23	23	23	23	23	23	23	23	-231	0
23													0	0
24	0	231	-23	-23	-23	-23	-23	-23	-23	-23	-23	-23	231	0
25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	-83	158	-5	-5	-5	-5	-5	-5	-5	-5	-5	-5	75	29
27	-1,446	298	956	1,258	1,002	1,427	1,821	1,873	431	921	2,455	4,034	-1,148	15,030
28	0												0	0
29													0	0
30													0	0
31													0	0
32													0	0
33													0	0
34													0	0
35													0	0
36													0	0
37													0	0
38													0	0
39													0	0
40	-8,896	-8,287	-7,859	-7,482	-7,740	-7,313	-6,941	-6,887	-8,291	-7,839	-6,300	-4,564	-17,183	-88,400
41	0	0	0	0	0	0	0	0	0	0	0	0	0	0
42	-8,896	-8,287	-7,859	-7,482	-7,740	-7,313	-6,941	-6,887	-8,291	-7,839	-6,300	-4,564	-17,183	-88,400

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Period : May 23

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)

This Table is currently showing 0 errors

			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings	
			Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000			YTD variance as %age of YTD	Green	Amber	non recurring	recurring		
																	£'000	£'000	£'000	£'000			
1	CHC and Funded Nursing Care	Budget/Plan	8	8	8	8	8	8	8	8	8	8	8	8	17	100		100	0				
2		Actual/F'cast	8	27	30	53	56	63	71	76	76	76	81	86	35	700	5.04%	250	450	25	675	855	
3		Variance	0	19	22	45	48	54	62	67	67	67	72	77	19	600	111.82%	150	450				
4	Commissioned Services	Budget/Plan	7	7	19	19	19	19	19	19	19	19	19	19	13	204		0	204				
5		Actual/F'cast	7	7	19	19	19	19	19	19	19	19	19	19	13	204	6.44%	0	204	125	79	79	
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0				
7	Medicines Management (Primary & Secondary Care)	Budget/Plan	185	93	226	167	168	245	206	207	207	207	222	222	278	2,355		1,229	1,126				
8		Actual/F'cast	185	104	264	168	168	284	207	207	245	207	222	260	289	2,522	11.46%	1,391	1,131	753	1,769	2,608	
9		Variance	0	11	38	0	0	38	0	0	38	0	0	38	11	167	3.90%	162	5				
10	Non Pay	Budget/Plan	214	226	383	283	428	283	268	268	268	268	268	268	441	3,425		3,280	145				
11		Actual/F'cast	214	257	401	382	507	316	301	298	298	298	298	299	471	3,870	12.18%	3,615	255	3,081	787	901	
12		Variance	0	30	18	99	79	33	33	30	30	30	30	31	30	444	6.90%	335	110				
13	Pay	Budget/Plan	251	474	457	457	482	482	913	888	888	888	888	887	725	7,957		1,993	5,964				
14		Actual/F'cast	251	633	522	522	562	566	1,004	979	979	979	979	1,090	883	9,064	9.75%	2,533	6,532	1,154	7,910	7,912	
15		Variance	0	159	65	65	80	84	90	90	90	90	90	90	203	159	1,107	21.90%	540	568			
16	Primary Care	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
17		Actual/F'cast	0	0	3	3	3	3	3	3	3	3	3	3	3	0	25	0.00%	25	0	0	25	25
18		Variance	0	0	3	3	3	3	3	3	3	3	3	3	3	0	25		25	0			
19	Total	Budget/Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	1,474	14,042		6,602	7,439				
20		Actual/F'cast	665	1,027	1,239	1,146	1,315	1,250	1,604	1,581	1,619	1,581	1,601	1,756	1,692	16,385	10.33%	7,814	8,571	5,139	11,245	12,381	
21		Variance	0	219	145	211	209	212	189	191	229	191	196	352	219	2,343	14.84%	1,211	1,132				
22 Variance in month			0.00%	27.05%	13.28%	22.59%	18.94%	20.37%	13.34%	13.72%	16.46%	13.72%	13.93%	25.10%	14.84%								
23 In month achievement against FY forecast			4.06%	6.27%	7.56%	7.00%	8.03%	7.63%	9.79%	9.65%	9.88%	9.65%	9.77%	10.72%									

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Table C1- Savings Schemes Pay Analysis

		Month	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY YTD variance as %age of YTD Budget/Plan	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar				Green	Amber	non recurring	recurring	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	
1	Changes in Staffing Establishment	Budget/Plan	245	92	195	195	195	195	626	626	626	626	626	625	337	4,873		1,922	2,952			
2		Actual/F'cast	245	237	250	250	262	265	708	708	708	708	708	707	482	5,759	8.37%	2,353	3,406	786	4,973	4,975
3		Variance	0	145	55	55	67	70	82	82	82	82	82	82	145	885	42.97%	431	455			
4	Variable Pay	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7	Locum	Budget/Plan	0	0	0	0	25	25	25	0	0	0	0	0	0	75		0	75			
8		Actual/F'cast	0	0	0	0	25	25	25	0	0	0	0	0	0	75	0.00%	0	75	75	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Agency / Locum paid at a premium	Budget/Plan	0	376	237	237	237	237	237	237	237	237	237	237	376	2,746		0	2,746			
11		Actual/F'cast	0	376	237	237	237	237	237	237	237	237	237	237	376	2,746	13.69%	0	2,746	0	2,746	2,746
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
13	Changes in Bank Staff	Budget/Plan	0	0	19	19	19	19	19	19	19	19	19	19	0	190		0	190			
14		Actual/F'cast	0	0	19	19	19	19	19	19	19	19	19	19	0	190	0.00%	0	190	0	190	190
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
16	Other (Please Specify)	Budget/Plan	6	6	6	6	6	6	6	6	6	6	6	6	12	73		71	2			
17		Actual/F'cast	6	20	16	16	19	19	14	14	14	14	14	127	26	294	8.75%	180	115	293	1	1
18		Variance	0	14	10	10	13	13	8	8	8	8	8	121	14	222	117.61%	109	113			
19	Total	Budget/Plan	251	474	457	457	482	482	913	888	888	888	888	887	725	7,957		1,993	5,964			
20		Actual/F'cast	251	633	522	522	562	566	1,004	979	979	979	979	1,090	883	9,064	9.75%	2,533	6,532	1,154	7,910	7,912
21		Variance	0	159	65	65	80	84	90	90	90	90	90	203	159	1,107	21.90%	540	568			

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Table C2- Savings Schemes Agency/Locum Paid at a Premium Analysis

		Month	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			YTD variance as %age of YTD Budget/Plan	Green	Amber	non recurring	recurring	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000	
1	Reduced usage of	Budget/Plan	0	376	237	237	237	237	237	237	237	237	237	237	376	2,746		0	2,746			
2	Agency/Locums paid at a premium	Actual/F'cast	0	376	237	237	237	237	237	237	237	237	237	237	376	2,746	13.69%	0	2,746	0	2,746	2,746
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
4	Non Medical 'off contract' to 'on contract'	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
5		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
7	Medical - Impact of Agency pay rate caps	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10		Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
11	Other (Please Specify)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13		Budget/Plan	0	376	237	237	237	237	237	237	237	237	237	237	376	2,746		0	2,746			
14	Total	Actual/F'cast	0	376	237	237	237	237	237	237	237	237	237	237	376	2,746	13.69%	0	2,746	0	2,746	2,746
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			

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Table C3- Savings Schemes SoCNE/SCNI Analysis

		Month	1 Apr £'000	2 May £'000	3 Jun £'000	4 Jul £'000	5 Aug £'000	6 Sep £'000	7 Oct £'000	8 Nov £'000	9 Dec £'000	10 Jan £'000	11 Feb £'000	12 Mar £'000	Total YTD	Full-year forecast
1	Pay	Budget/Plan	251	474	457	457	482	482	913	888	888	888	888	887	725	7,957
2		Actual/F'cast	251	633	522	522	562	566	1,004	979	979	979	979	1,090	883	9,064
3		Variance	0	159	65	65	80	84	90	90	90	90	90	203	159	1,107
4	Non Pay	Budget/Plan	214	226	396	296	441	296	280	280	280	280	280	280	441	3,551
5		Actual/F'cast	214	257	413	395	520	329	314	311	311	311	311	311	471	3,995
6		Variance	0	30	18	99	79	33	33	30	30	30	30	31	30	444
7	Primary Care Drugs	Budget/Plan	39	40	40	62	63	63	93	93	93	93	108	108	79	894
8		Actual/F'cast	39	40	78	62	63	101	93	93	131	93	108	146	79	1,046
9		Variance	0	0	38	0	0	38	0	0	38	0	0	38	0	152
7	Secondary Care Drugs	Budget/Plan	146	53	185	105	105	182	114	114	114	114	114	114	199	1,461
8		Actual/F'cast	146	64	186	106	106	183	114	114	114	114	114	114	210	1,476
9		Variance	0	11	0	0	0	0	0	0	0	0	0	0	11	15
10	CHC/FNC	Budget/Plan	8	8	8	8	8	8	8	8	8	8	8	8	17	100
11		Actual/F'cast	8	27	30	53	56	63	71	76	76	76	81	86	35	700
12		Variance	0	19	22	45	48	54	62	67	67	67	72	77	19	600
13	Primary Care Contractor	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14		Actual/F'cast	0	0	3	3	3	3	3	3	3	3	3	3	0	25
15		Variance	0	0	3	3	3	3	3	3	3	3	3	3	0	25
16	Healthcare Services Provided by Other NHS Bodies	Budget/Plan	7	7	7	7	7	7	7	7	7	7	7	7	13	79
17		Actual/F'cast	7	7	7	7	7	7	7	7	7	7	7	7	13	79
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Non Healthcare Services Provided by Other NHS Bodies	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Other Private & Voluntary Sector	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Joint Financing & Other	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Total	Budget/Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	1,474	14,042
29		Actual/F'cast	665	1,027	1,239	1,146	1,315	1,250	1,604	1,581	1,619	1,581	1,601	1,756	1,692	16,385
30		Variance	0	219	145	211	209	212	189	191	229	191	196	352	219	2,343

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Table C4 - Tracker

	£'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect
Savings (Cash Releasing & Cost Avoidance)	Month 1 - Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	1,474	14,042	4,098	9,944	870	10,813
	Month 1 - Actual/Forecast	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	1,474	14,042	4,098	9,944	870	10,813
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	219	145	211	209	212	189	191	229	191	196	354	219	2,345	1,042	1,301	269	1,570
	In Year - Actual/Forecast	0	219	145	211	209	212	189	191	229	191	196	352	219	2,343	1,041	1,301	269	1,570
	Variance	0	0	0	0	0	0	0	0	0	0	0	(2)	0	(2)	(2)	0	0	0
	Total Plan	665	1,027	1,239	1,146	1,315	1,250	1,604	1,581	1,619	1,581	1,601	1,758	1,692	16,387	5,140	11,245	1,139	12,383
	Total Actual/Forecast	665	1,027	1,239	1,146	1,315	1,250	1,604	1,581	1,619	1,581	1,601	1,756	1,692	16,385	5,139	11,245	1,139	12,383
	Total Variance	0	0	0	0	0	0	0	0	0	0	0	(2)	0	(2)	(2)	0	0	0
Net Income Generation	Month 1 - Plan	77	13	43	43	43	43	43	43	26	26	26	26	90	454	124	330	27	357
	Month 1 - Actual/Forecast	77	(6)	34	43	43	43	43	43	26	26	26	26	71	426	124	302	55	357
	Variance	0	(19)	(9)	0	0	0	0	0	0	0	0	0	(19)	(28)	0	(28)	28	0
	In Year - Plan	0	16	11	11	11	11	11	11	11	11	11	11	16	130	0	130	0	130
	In Year - Actual/Forecast	0	16	11	11	11	11	11	11	11	11	11	11	16	130	0	130	0	130
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Plan	77	28	55	55	55	55	55	55	38	38	38	38	105	584	124	460	27	487
	Total Actual/Forecast	77	10	45	55	55	55	55	55	38	38	38	38	87	556	124	432	55	487
	Total Variance	0	(19)	(9)	0	0	0	0	0	0	0	0	0	(19)	(28)	0	(28)	28	0
Accountancy Gains	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	Month 1 - Plan	742	821	1,137	978	1,149	1,081	1,458	1,433	1,417	1,417	1,432	1,430	1,563	14,495	4,222	10,273	897	11,170
	Month 1 - Actual/Forecast	742	803	1,127	978	1,149	1,081	1,458	1,433	1,417	1,417	1,432	1,430	1,545	14,467	4,222	10,245	925	11,170
	Variance	0	(19)	(9)	0	0	0	0	0	0	0	0	0	(19)	(28)	0	(28)	28	0
	In Year - Plan	0	234	157	223	221	223	200	202	240	202	207	365	234	2,475	1,042	1,431	269	1,700
	In Year - Actual/Forecast	0	234	157	223	221	223	200	202	240	202	207	364	234	2,473	1,041	1,431	269	1,700
	Variance	0	0	0	0	0	0	0	0	0	0	0	(2)	0	(2)	(2)	0	0	0
	Total Plan	742	1,055	1,293	1,201	1,370	1,304	1,658	1,636	1,657	1,619	1,639	1,796	1,797	16,970	5,264	11,704	1,166	12,870
	Total Actual/Forecast	742	1,037	1,284	1,201	1,370	1,304	1,658	1,636	1,657	1,619	1,639	1,794	1,779	16,941	5,263	11,676	1,194	12,870
	Total Variance	0	(19)	(9)	0	0	0	0	0	0	0	0	(2)	(19)	(30)	(2)	(28)	28	0

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Cardiff & Vale ULHB

Period : May 23

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Table G - Monthly Cashflow Forecast

		April £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	Total £,000
	RECEIPTS													
1	WG Revenue Funding - Cash Limit (excluding NCL) - LHB & SHA only	130,987	98,095	128,105	108,320	91,516	111,901	80,791	101,491	109,696	82,271	99,961	(16,226)	1,126,908
2	WG Revenue Funding - Non Cash Limited (NCL) - LHB & SHA only	1,190	1,190	650	525	950	950	950	950	950	950	950	4,495	14,700
3	WG Revenue Funding - Other (e.g. Invoices)	1,788	1,320	1,284	1,284	2,784	1,284	1,284	1,284	2,784	1,284	2,784	2,784	21,947
4	WG Capital Funding - Cash Limit - LHB & SHA only	10,000	2,500	0	0	0	0	1,250	1,250	1,250	1,250	1,250	1,336	20,086
5	Income from other Welsh NHS Organisations	40,222	35,616	38,641	32,996	42,736	32,315	42,996	32,196	33,315	41,996	33,196	40,115	446,341
6	Short Term Loans - Trust only													0
7	PDC - Trust only													0
8	Interest Receivable - Trust only													0
9	Sale of Assets	0	0	0	0	0	0	0	0	0	0	0	0	0
10	Other - (Specify in narrative)	4,032	13,939	10,107	14,000	11,227	8,880	15,487	8,109	7,426	15,487	7,820	8,913	125,425
11	TOTAL RECEIPTS	188,219	152,659	178,787	157,125	149,213	155,330	142,758	145,280	155,421	143,238	145,961	41,417	1,755,407
	PAYMENTS													
12	Primary Care Services : General Medical Services	6,777	6,107	6,968	6,603	6,603	7,348	6,603	6,603	7,348	6,603	6,603	7,348	81,514
13	Primary Care Services : Pharmacy Services	280	177	134	195	195	195	195	195	390	780	390	390	3,516
14	Primary Care Services : Prescribed Drugs & Appliances	18,097	0	18,340	0	9,200	18,400	0	9,200	18,400	0	9,200	9,200	110,037
15	Primary Care Services : General Dental Services	2,061	2,268	2,301	2,275	2,275	2,275	2,275	2,275	2,275	2,275	2,275	2,275	27,105
16	Non Cash Limited Payments	1,870	1,850	1,928	1,885	1,885	1,885	1,885	1,885	1,885	1,885	1,885	1,885	22,614
17	Salaries and Wages	65,920	69,595	81,749	78,145	73,632	69,920	69,935	69,933	69,700	69,833	70,416	70,020	858,800
18	Non Pay Expenditure	86,046	71,140	63,757	66,767	53,989	53,757	60,704	53,865	53,849	60,494	54,690	54,908	733,964
19	Short Term Loan Repayment - Trust only													0
20	PDC Repayment - Trust only													0
21	Capital Payment	7,201	852	2,000	1,250	1,435	1,550	1,160	1,325	1,575	1,370	500	282	20,499
22	Other items (Specify in narrative)	339	123	627	0	0	0	0	0	0	0	0	0	1,089
23	TOTAL PAYMENTS	188,592	152,112	177,805	157,121	149,214	155,330	142,757	145,281	155,422	143,240	145,959	146,308	1,859,140
24	Net cash inflow/outflow	(373)	547	981	4	(1)	(0)	1	(1)	(1)	(2)	2	(104,891)	
25	Balance b/f	2,845	2,472	3,019	4,000	4,004	4,004	4,003	4,005	4,004	4,003	4,001	4,003	
26	Balance c/f	2,472	3,019	4,000	4,004	4,004	4,003	4,005	4,004	4,003	4,001	4,003	(100,888)	

Mohamed Sarah
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