

Public Finance Committee

29 April 2020, 14:00 to 16:00
Nant Fawr 1, Ground Floor, Woodlands House

Agenda

1

Preliminaries

John Union



1.0 Agenda 29 April 20 Finance Committee.pdf

(1 pages)

1.1

Welcome & Introductions

John Union

1.2

Apologies for Absence

John Union

1.3

Declarations of Interest

John Union

1.4

Minutes of the Committee Meeting held on 26th February 2020

John Union



1.4. UNCONFIRMED MINUTES OF THE FINANCIAL
COMMITTEE February 2020.pdf

(10 pages)

1.5

Action Log

John Union



1.5. Action Log For April 2020 Finance
Committee.pdf

(1 pages)

1.6

Chairs Action taken since last meeting

John Union

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Items for Review and Assurance

2.1

Financial Performance Report 2019/20

Christopher Lewis



2.1 Finance Report for Month 12 new format.pdf

(20 pages)

2.2

Finance Risk Register 2020/21

Andrew Gough



2.2 Finance Risk Register 2020-21 April 2020.pdf

(2 pages)

2.2.1


Main Risk Register

Blackwell Helpline
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 2.2a Finance Risk Register 2020-21 - Appendix 1.pdf (6 pages)

2.2.2

Dragon's Heart Hospital


 2.2b Dragons Heart Hospital (DHH) Finance Risk Register 2020-21 - Appendix 2.pdf (6 pages)

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Items for Noting and Information

3.1

Month 12 Financial Monitoring Returns

 3.1a CV Financial Monitoring Returns 2019-20 - Month 12.pdf (10 pages)

 3.1b Month 12 - Cardiff Vale ULHB - Monitoring Return Tables.pdf (14 pages)

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Items to bring to the attention of the Board

John Union

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Date and time of next Meeting

Wednesday 27th May 2020 at 2pm, Cefn Mably Meeting Room, Woodland House

Bricknell Helen
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AGENDA
FINANCE COMMITTEE
29th April 2020 at 2.00pm
Nant Fawr 1 Meeting Room, Ground Floor, Woodland House

1.	Preliminaries	
1.1	Welcome & Introductions	John Union
1.2	Apologies for Absence	John Union
1.3	Declarations of Interest	John Union
1.4	Minutes of the Committee Meeting held on 26 th February 2020	John Union
1.5	Action Log	John Union
1.6	Chairs Action taken since last meeting	John Union
2.	Items for Review and Assurance	
2.1	Financial Performance Report 2019/20	Chris Lewis
2.2	Finance Risk Register 2020/21 a. Main Risk Register b. Dragon's Heart Hospital	Andrew Gough
2.3	Business Continuity in the Finance Department	Chris Lewis
3	Items for Noting and Information	
3.1	Month 12 Financial Monitoring Returns	
4.	Items to bring to the attention of the Board	John Union
5.	Date and time of next Meeting	
	Wednesday 27 th May 2020 at 2pm, Cefn Mably Meeting Room, Woodland House	

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**UNCONFIRMED MINUTES OF FINANCE COMMITTEE
HELD ON 26th FEBRUARY 2019
CWM GEORGE MEETING ROOM, WOODLAND HOUSE**

Present:

John Union	JU	Chair, Independent Member – Finance
Charles Janczewski	CJ	Interim Chair (Board)
Dr Rhian Thomas	RT	Independent Member - Capital & Estates
Abigail Harris	AH	Executive Director of Strategic Planning
Andrew Gough	AG	Assistant Director of Finance
Chris Lewis	CL	Deputy Director of Finance
Len Richards	LR	Chief Executive
Nicola Foreman	NF	Director of Corporate Governance
Robert Chadwick	RC	Executive Director of Finance
Steve Curry	SC	Chief Operating Officer

In Attendance:

Secretariat:

Paul Emmerson	PE	Finance Manager
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Apologies:

Martin Driscoll	MD	Executive Director of Workforce and Organisational Development
Ruth Walker	RW	Executive Nurse Director

FC 19/166	WELCOME AND INTRODUCTIONS The Chair welcomed everyone to the meeting.	ACTION
FC 19/167	APOLOGIES FOR ABSENCE Apologies for absence were noted.	
FC 19/168	DECLARATIONS OF INTEREST The Chair invited members to declare any interests in proceedings on the Agenda. None were declared.	
FC 19/169	MINUTES OF THE FINANCE COMMITTEE MEETING HELD ON 29th JANUARY 2020 The minutes of the meeting held on 29 th January 2020 were reviewed for accuracy and were agreed as a true and accurate record. Resolved – that:	

	The minutes of the meeting held on 29 th January 2020 were approved by the Committee as an accurate record.	
FC 19/170	<p>ACTION LOG FOLLOWING THE LAST MEETING</p> <p>The Finance Committee was advised that there were no outstanding Actions.</p> <p>Resolved – that:</p> <p>The Finance Committee noted that there were no outstanding Actions.</p>	
FC 19/171	<p>CHAIRS ACTION SINCE THE LAST MEETING</p> <p>There had been no Chairs action taken since the last meeting.</p>	
FC 19/172	<p>FINANCE REPORT AS AT MONTH 11</p> <p>The Deputy Director of Finance presented the UHB's financial performance to month 10 and highlighted that the UHB had reported a year to date deficit of £0.989m which was an in month improvement of £0.231m and in line with expectations and the profile to reach break even at year end.</p> <p>In addition the committee was informed that the cost pressure associated with the Welsh Risk Pool was now incorporated within the year end forecast break-even position. In response to a query from the Interim Board Chair (CJ) the Deputy Director of Finance confirmed that the UHB had received no additional funding to cover the cost and added that the UHB had been advised of a significant reduction to the additional cost. Further detail within the presentation on plans to deliver a break even position.</p> <p>The number of measures on the Finance Dashboard which were RAG rated Red had not changed in month and 4 measures remained RAG rated Red namely: remaining within revenue resource limits; the reduction in the underlying deficit to £4m; the delivery of the recurrent £16.345m 2% devolved target; the delivery of the £12.8m recurrent/non recurrent corporate target</p> <p>Performance against income was broadly balanced in month and there was a cumulative over-recovery for the year to date. Previous pressures against non pay budgets had continued in month and the underspend against pay budgets also continued in month 10.</p> <p>Turning to table 14 of the written report, the Deputy Director of Finance confirmed an in month overspend of £0.182m against delegated budgets which was an improvement on the trend established in the first nine months. The overspend against delegated budgets was offset by a surplus against central budgets which was in line with the plan to break even. It was noted that the</p>	

<p>Bricknell Helen 04/29/2020 09:59:22</p>	<p>management of operational pressures within delegated budgets remained the key risk to achievement of the UHBs financial plan.</p> <p>The Committee was reminded that as a consequence of the shortfall of c £7.5m against recurrent savings targets the UHB's underlying deficit going into next year was £11.5m and this was reflected in the 2020/21 IMTP.</p> <p>It was noted that the UHB's PSPP performance fell marginally in month, however cumulative performance continued to exceed the 95% target; cash plans remained on target with the UHB not expecting to request additional cash support in 2019/20; net capital expenditure to the end of January was 52% of the UHB's approved Capital Resource Limit which reflected the confirmation of funding in the second half of the year and the associated increase in capital expenditure expected towards the tail end of the year.</p> <p>In concluding the Deputy Director of Finance highlighted that the key risk to the Plan was the management of budgets to deliver a balanced financial position by year end and that the assessment of this risk had fallen from £2.0m to £0.5m in month.</p> <p>The Finance Committee Chair (JU) asked if there were any areas where performance was not going to plan and the Deputy Director of Finance confirmed that any issues would be drawn out in the presentation on Plans to Deliver a Break Even Position.</p> <p>ASSURANCE was provided by:</p> <ul style="list-style-type: none">• The scrutiny of financial performance undertaken by the Finance Committee and the UHBs intention to recover the year to date deficit and deliver a break even position by the year end as planned. <p>Resolved – that:</p> <p>The Finance Committee noted that the UHB has an approved IMTP which includes a balanced Financial Plan for 2019/20;</p> <p>The Finance Committee noted the £0.989m deficit at month 10;</p> <p>The Finance Committee noted the key risks in delegated budgets and the Welsh Risk Pool.</p> <p>The Finance Committee noted the plan to deliver a break even position by year end.</p>	
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<p>FC 19/173</p>	<p>PLANS TO DELIVER A BREAK EVEN POSITION (presentation)</p> <p>The Deputy Director of Finance presented an update on the Plans To Deliver A Break Even Position stating that plans had been adjusted for issues which had emerged in January as follows:</p> <ul style="list-style-type: none"> • The UHB position had improved by £0.289m in January primarily as a result of performance against Central Budgets. Clinical Board performance had generally continued to improve upon the trend established in the preceding months. • A full savings programme was in place and although some schemes remained in amber status the position had improved by £0.9m in month. • At month 10 Clinical Boards were reporting a cumulative overspend of £8.900m which was £0.636m higher than the original forecast. The surplus against Central Budgets was £0.618m better than expected leaving the UHB's deficit £0.018m above the forecast profile to reach breakeven at the end of January. • Clinical Board Recovery actions are back loaded which remained a risk if Clinical Board performance continued at the rate established in the first 10 months of the year. • In recognition of the deterioration in the forecast position for Women and Children at month 10 the Risk Adjusted Delegated Budget Forecast had been increased by £0.638m. This increase was offset by the confirmation of additional funding in respect of the South Wales Plan and digital costs and slippage against corporate budgets and the Hospital at Night scheme. As a consequence the UHBs risk adjusted profile had fallen by £0.670m in January from a deficit of £0.633m to a surplus of £0.037m. • The Committee was also informed of that the UHB had recently received an update from the Welsh Risk Pool which indicated that following a further review of liabilities which would be settled in 2019/20 that the additional cost that the UHBs were required to cover had reduced significantly and that the UHBs share had fallen from c£1.5m to c £0.6m. The Deputy Director of Finance added that the reduction in UHB liability to the Welsh Risk Pool would potentially be offset by the cost of recent flood damage suffered by ALAS where the loss of stock was being assessed. The UHB Interim Board Chair (CJ) emphasized the UHB's responsibility to replace stock to maintain the established service without compromising patient safety. • There were still some risks to the delivery of a break even position as follows; the management of the risk adjusted position across a number of areas; turning the final amber savings schemes to green as soon as possible; unexpected events as 	
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	<p>the UHB is not holding a contingency; Clinical Board improvement plans where delegated budgets need to break even .</p> <p><u>Comments were received as follows:</u></p> <ul style="list-style-type: none">• In reply to a query from the Independent Member – Estates (RT) the Deputy Director of Finance indicated that the deterioration of the overspend in Women and Children at month 10 was unlikely to be recovered in February and March and that this had been built into the forecast position.• The UHB Interim Board Chair (CJ) asked how the UHB’s cost containment plans were progressing. In response to the Director of Finance indicated that the plans remained in place. In the context of patient safety the committee was informed that there was no restriction on either the recruitment to posts that directly impacted on patient care or the use of agency nursing where required to maintain safe levels of cover.• The Director of Finance noted the amendments to Clinical Board Financial Forecasts and confirmed that the strength of financial forecasting would be picked up at performance reviews so that a balanced approach to the management of financial risk could be carried forward.• The Finance Committee Chair (JU) asked for confirmation of the process for writing off flood damaged stock and the Committee was informed that the extent of damage would be assessed by service areas. <p>Resolved – that:</p> <p>The Finance Committee noted the plans and actions required to deliver a break even position in 2019/20.</p>	
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FC19/174	<p>CLINICAL BOARDS IN ESCALATION</p> <p>The Chief Operating Officer confirmed that the number of Clinical Boards in escalation remained at 3 of which one Board namely Medicine was in escalation for Finance performance. It was noted that the Clinical Board had provided a reasonable level of assurance that it would meet its forecast year-end financial position</p> <p>The Chief Operating Officer confirmed that the focus had now shifted towards 2020/21 as the year end approached.</p> <p>Resolved – that:</p> <p>The Finance Committee noted the actions being taken to manage financial performance</p>	
FC19/175	<p>COST REDUCTION PROGRAMME (CRP) AND CROSS CUTTING THEME</p> <p>The Assistant Director of Finance asked the Finance Committee to note the 2019/20 Cost Reduction Report which included the following key points:</p> <ul style="list-style-type: none"> • At 31st January 2020 £16.614m of schemes had been identified as Green or Amber against the devolved 2% savings target of £16.345m, leaving a surplus of £0.269m. £14.313m of the identified schemes were recurrent. • Schemes totalling £13.505m had been identified as Green or Amber against the corporate savings target of £12.800m target as at 31st January 2020 leaving a surplus of £0.705m. The recurrent effect of the identified schemes in 2020/21 was £4.332m. The recurrent position of corporate schemes was being reviewed on a scheme by scheme basis. Further work was focusing on a number of areas highlighted through both the Efficiency Framework and the UHB's own internal benchmarking and analysis. <p>The Committee was reminded that there was a £7.5m shortfall against the 2019/20 recurrent CRP target and this was reflected in the £11.5m underlying deficit carried forward by UHB in the 2020/21 IMTP.</p> <p>The Finance Committee was asked to note that none of the CRP measures had a detrimental impact upon patient safety or service delivery.</p> <p>Turning to the 2020/21 Cost Reduction Plans the Assistant Director of Finance provided a verbal update and highlighted that:</p> <ul style="list-style-type: none"> • As at 27th February 2020 £11.860m had been identified as Green or Amber against the devolved 3.5% 2020/21 savings target of £29.000m. In addition £9.2m of red pipeline schemes had been identified. 	

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	<ul style="list-style-type: none"> Welsh Government had confirmed that the shortfall against the 2020/21 was a concern in respect of the 2020/21 IMTP and that the UHB was expected to provide Welsh Government with an update on the level of schemes identified on the 13th March 2020. <p>The UHB Interim Board Chair (CJ) noted that the CRP target for the PCIC Clinical Board was consistent with the overall UHB target and asked for assurance that this approach would enable the Clinical Board to respond to the challenges set out in Shaping Our Future Wellbeing. In response the Chief Executive indicated that the recirculation of resources from CRPs allowed the UHB to reshape services in line with UHB priorities and the Deputy Director of Finance added that estimates of prescribing and continuing health growth had fed into the 2020/21 IMTP.</p> <p>The Independent Member – Estates (RT) asked whether CRPs were aligned with the UHBs strategic objectives and the Executive Director of Strategic Planning indicated that a number of the programmes e.g. reducing length of stay and outpatient follow ups supported the UHBs objective of making the best use of resources by minimizing harm, risk and variation.</p> <p>Resolved – that:</p> <p>The Finance Committee noted the progress against the £29.145m UHB savings requirement for 2019/20.</p> <p>The Finance Committee noted the progress against the £29.000m UHB savings requirement for 2020/21.</p>	
FC19/176	<p>RISK REGISTER</p> <p>The Assistant Director of Finance asked the Finance Committee to note the risks highlighted within the 2019/20 Risk Register.</p> <p>Three risks remained categorized as extreme risks (Red) on the 2019/20 Risk Register as follows:</p> <ul style="list-style-type: none"> Reduction in the £36.3m underlying deficit b/f to 2019/20 to the IMTP planned £4m c/f underlying deficit in 2020/21. Management of budget pressures including month 10 overspends of £3.660m, £1.653m and £1.622m reported respectively in the Medicine, PCIC and Surgery Clinical Boards. Management of nursing position which was £2.857m over budget at month 10. <p>The Finance Committee was also asked to note the risk attached to the forecast 2019/20 Welsh Risk Pool overspend (Fin 13/19) where the UHB's share of the overspend had recently been revised down from £1.5m to £0.6m and was included in the UHB's year end forecast position</p>	

	<p>Turning to the 2020/21 Risk Register the Assistant Director of Finance indicated that the register reflected the financial issues and risks included in the 2020/21 IMTP.</p> <p>Three risks were categorized as extreme risks (Red) on the 2020/21 Risk Register as follows:</p> <ul style="list-style-type: none"> • Reduction in the £11.5m underlying deficit c/f to 2020/21 to the IMTP planned £4m c/f underlying deficit in 2021/22; • Management of Budget pressures; • Delivery of the 3.5% CIP (£29.0m) <p>Two further risks relating to the management of internal investments within the £3m investment reserve and commissioning risks were also included on the Register.</p> <p>The Finance Committee Chair (JU) queried the reduction in risks identified on the 2020/21 Risk Register in comparison to the 2019/20 Risk Register and the Chief Executive also asked whether the risk around the management of the nursing budget and cardiac surgery outsourcing should be added to the 2020/21 Register. The Assistant Director of Finance indicated that the number of risks included was in part due to the timing of risks which emerged during the year and added that the risks around the nursing budget and cardiac surgery outsourcing would be considered before the Register was submitted to the next Finance Committee.</p> <p>Resolved – that:</p> <p>The Finance Committee noted the risks highlighted within the 2019/20 risk register.</p> <p>The Finance Committee noted the value of risk associated with the 2019/20 Welsh Risk Pool overspend where the UHB share had been revised to £0.6m.</p> <p>The Finance Committee noted the risks highlighted within the 2020/21 risk register.</p>	
<p>FC19/177</p>	<p>FINANCE COMMITTEE – TERMS OF REFERENCE</p> <p>The Director of Corporate Governance indicated that the Finance Committee Terms of Reference (TOR) were last reviewed in February 2019 and approved by the Board in March 2019. The Committee was asked to consider a small number of changes to the TOR which included expanding the membership to 4 Independent members.</p> <p><u>Comments were received as follows:</u></p> <p>The UHB Interim Board Chair (CJ) suggested that advising the UHB Board on meeting it's statutory obligations should be included within the section outlining the purpose of the Committee and added that</p>	

	<p>monitoring the UHB's underlying deficit should also be included within the Committee's delegated powers.</p> <p>In the context of the Committee's delegated powers the Deputy Director of Finance advised that the primary responsibility to scrutinise submissions to be made in respect of revenue or capital funding and the service implications of such changes rested with the Capital Management Group and the Business Case Approval Group (BCAG).</p> <p>Resolved – that:</p> <p>The Finance Committee approved the changes to the Terms of Reference for the Finance Committee.</p> <p>The Finance Committee noted that the Terms of Reference would also be amended for the comments received.</p> <p>The Finance Committee recommended the changes to the Board for approval.</p>	
FC19/178	<p>FINANCE COMMITTEE – ANNUAL WORKPLAN</p> <p>The 2020/21 Workplan for the Finance Committee was introduced by the Director of Corporate Governance to provide members of the Finance Committee with the opportunity to review the Work Plan for 2020/21 prior to presentation to the Board for approval.</p> <p>The Finance Committee considered the draft workplan and agreed that the workplan would need to be flexed to reflect changes to the IMTP timetable.</p> <p>Resolved – that:</p> <p>The Finance Committee reviewed and approved the 2020/21 Work Plan subject to revision to reflect changes to the IMTP timetable;</p> <p>The Finance Committee recommended approval of the workplan to the Board of Directors.</p>	
FC19/179	<p>FINANCE COMMITTEE ANNUAL REPORT</p> <p>A paper summarising how the Finance Committee has met its Terms of Reference during the financial year was introduced by the Director of Corporate Governance.</p>	

	<p>The Finance Committee considered the report and agreed that it should be amended to reflect attendance at the February meeting.</p> <p>Resolved – that:</p> <p>The Finance Committee recommended the report for Board approval subject to an amendment to reflect attendance at the February meeting.</p>	
FC19/180	<p>2020/21 IMTP FINANCIAL PLAN</p> <p>The Director of Finance provided the Committee with a verbal update on the UHB's Draft Financial Framework to support the 2020/21 – 2022/23 IMTP.</p> <p>It was noted that Welsh Government feedback was generally positive and had acknowledged that the plan was approvable subject to the UHB making progress in the identification of specific schemes to meet the 2020/21 savings target and clarification of the plans for Winter and RTT.</p> <p>Resolved – that:</p> <p>The Finance Committee:</p> <ul style="list-style-type: none"> • NOTED the feedback on the progress of the 2020/21 IMTP. 	
FC 19/181	<p>MONTH 10 FINANCIAL MONITORING RETURNS</p> <p>These were noted for information.</p>	
FC 19/182	<p>ITEMS TO BRING TO THE ATTENTION OF THE BOARD/OTHER COMMITTEES</p> <p>No other items to bring to the main Board.</p>	
FC 19/183	<p>DATE OF THE NEXT MEETING OF THE COMMITTEE</p> <p>Wednesday 25th March; 2.00pm; Cefn Mably Meeting Room, Ground Floor, HQ, Woodland House</p>	

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FINANCE COMMITTEE

ACTION LOG

MINUTE	DATE	SUBJECT	AGREED ACTION	ACTIONED TO	STATUS
FC - 18/259 & FC 19/082	31.10.18	The impact of weekly vs monthly payroll on the availability of bank staff	It was agreed that once the introduction of a weekly payroll for payment of bank staff was complete that the initiative should be reviewed after 6 months and the results reported back to the Finance Committee.	Executive Nurse Director	<p>Complete – The Nursing Productivity Group reviewed the results of the initiative and the results were reported back to the Finance Committee after the end of June 2019.</p> <p>UPDATE In the context of individuals indicating a delay to join the UHB's nursing bank as a result of the availability of mandatory training capacity the UHB has subsequently increased its Health Care Support Workers manual handling training capacity and progressed increased numbers through training. October 2019 – January 2020: total HCSW's trained – 82 less standard places of 64 leaving 18 additional spaces filled.</p>

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Report Title:	Finance Report for the Period Ended 31 st March 2020							
Meeting:	Finance Committee					Meeting Date:	29 th April 2020	
Status:	For Discussion	x	For Assurance	x	For Approval		For Information	x
Lead Executive:	Executive Director of Finance							
Report Author (Title):	Deputy Director of Finance							

Background and current situation:

The Health Board agreed and submitted its 2019/20 – 2021/22 IMTP to Welsh Government by the end of January 2019 for its consideration. Approval of this plan was received from Welsh Government in March 2019. The financial plan aims to deliver a break even position for each year during the period of the plan. The financial plan for 2019/20 requires the delivery of a £31.245m savings target.

A summary of this plan is provided in Table 1.

Table 1: 2019/20 IMTP

	Approved IMTP £m
b/f underlying deficit	(36.3)
Net Allocation Uplift (inc LTA inflation)	56.6
Cost Pressures	(47.6)
Investments	(4.0)
Recurrent Cost Improvement Plans	31.3
In Year Financial Plan	36.3
Planned Surplus/(Deficit) 2019/20	0.0

The UHB's provisional year end revenue outturn is a surplus of £0.058m which is broadly in line with the break-even position previously forecast. The UHB is also reporting that it stayed within its Capital Resource limit and achieved its creditor payment compliance target. The Finance Committee is asked to note that these are all provisional at this stage as the draft accounts have not yet been finalized and when this is completed it will be subject to External Audit scrutiny. Whilst this is subject to finalization and verification, the year-end reported position is not expected to materially change.

The actual and provisional performance against the 3 year break even duty on revenue is shown in Table 2 below.

Table 2: Performance against 3 year financial break even duty

	Actual / Forecast year end position surplus/(deficit) £m	Rolling 3 year break even duty surplus/(deficit) £m	Pass or fail financial duty
2014/15	(21.364)	n/a	n/a
2015/16	0.068	n/a	n/a
2016/17	(29.243)	(50.539)	Fail
2017/18	(26.853)	(56.028)	Fail
2018/19	(9.872)	(65.968)	Fail
2019/20 Draft	0.058	(36.667)	Fail

The three year break even duty came into effect in 2014/15 and the first measurement of it was in 2016/17. The above table shows that the UHB breached its statutory financial duty in 2016/17, 2017/18 and 2018/19 and that the forecast balanced 2019/20 outturn position also results in a breach of financial duty at the end of 2019/20.

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

The UHB's financial position improved again in March in line with the profiled plan to reach break-even at year end. Budget holders had previously been requested to maintain financial improvements to manage the residual financial risk in the final month of the year so that the approved IMTP delivered. Plans were flexed in March to respond to the additional operational demands arising as result of the COVID 19 virus and an additional £1m revenue funding was secured from Welsh Government to cover the increase in net cost arising as a result of the change to plans.

The UHB has delivered a balanced position in line with the 2019/20 financial plan supporting the approved IMTP. The draft reported financial position for the twelve months to the end of March 2020 is a surplus of £0.058m.

At the beginning of 2019/20 the UHB had a brought forward underlying recurrent deficit of £36.3m. This has now reduced to £11.5m.

This reflects a satisfactory outcome to what has been a very challenging financial year.

















Assurance is provided by the scrutiny of financial performance undertaken by the Finance Committee and the delivery of a balanced position at the year end. This will now be subject to external verification by the Wales Audit Office.

Assessment and Risk Implications

The Finance Dashboard outlined in Table 3 reports actual financial performance against key financial performance measures.

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Table 3: Finance Dashboard @ March 2020

		STATUS REPORT				
Measure	n	March 2020	RAG Rating	Latest Trend	Target	Time Period
Financial balance: remain within revenue resource limits	36	£0.058m surplus at month 12.	G			2019/20 Break-Even M12 2019-20
Remain within capital resource limits.	37	Expenditure at the end of February was £58.071m against a plan of £58.159m.	G			Approved planned expenditure £58.159m M12 2019-20
Reduction in Underlying deficit	36a	£7.5m shortfall against the recurrent savings plan target at month 12 (see below).	R			If 2019/20 plan achieved reduce underlying deficit to £4.0m M12 2019-20
Delivery of recurrent £16.345m 2% devolved target	36b	£16.345m in year schemes identified at Month 11. £3m shortfall against recurrent schemes.	R			£16.345m M12 2019-20
Delivery of £9.750m recurrent/non recurrent corporate target	36c	£9.750m in year schemes identified at month 11. £4.5m shortfall against recurrent schemes	R			£9.750m M12 2019-20
Creditor payments compliance 30 day Non NHS	37a	Cumulative 95.8% in March	G			95% of invoices paid within 30 days M12 2019-20
Remain within Cash Limit	37b	Year end cash surplus of £1.410m	G			To remain within Cash Limit M12 2019-20
Maintain Positive Cash Balance	37c	Cash balance = £1.410m	G			To Maintain Positive Cash Balance End of March 2020

Month 12 Cumulative Financial Position

Financial performance at month 12 was ahead of the expected profile resulting in a provisional year end surplus of £0.058m. This is an improvement of £0.262m on the £0.205m adverse position reported at month 11.

Performance against the forecast trajectory to achieve break-even has been updated in month to reflect the month 12 reported position and this is included in Appendix 6. This shows the recovery in the period of September to March resulting in a break even position at the end of March.

Table 4 analyses the operating variance between income, pay and non pay.

Table 4: Summary Financial Position for the period ended 31st March 2020

Income/Pay/Non Pay	In Month			Cumulative Year to Date		
	Budget	Actual	Variance (Fav)/Adv	Budget	Actual	Variance (Fav)/Adv
	£m	£m	£m	£m	£m	£m
Income	(191.493)	(192.725)	(1.232)	(1,505.195)	(1,507.214)	(2.020)
Pay	83.938	83.609	(0.328)	674.157	670.246	(3.911)
Non Pay	107.555	108.853	1.298	831.037	836.911	5.873
Variance to Plan £m	0.000	(0.262)	(0.262)	0.000	(0.058)	(0.058)

Income

The year to date and in month financial position for income is shown in Table 5.

Table 5: Income Variance @ March 2020

Income	In Month			Cumulative Year to Date		
	Budget	Actual	Variance (Fav)/Adv	Budget	Actual	Variance (Fav)/Adv
	£m	£m	£m	£m	£m	£m
Research & Development	(0.941)	(0.993)	(0.052)	(10.178)	(10.489)	(0.311)
Revenue Resource Limit	(146.276)	(146.276)	0.000	(1,023.742)	(1,023.742)	0.000
Accommodation & Catering	(0.208)	(0.174)	0.034	(4.328)	(4.116)	0.212
Education & Training	(3.304)	(3.406)	(0.102)	(39.385)	(39.762)	(0.376)
Injury Cost Recovery Scheme (CRU) Income	(0.180)	(0.217)	(0.037)	(2.165)	(2.582)	(0.417)
NHS Patient Related Income	(29.279)	(29.555)	(0.277)	(324.505)	(325.203)	(0.698)
Non Revenue Resource Limit	(0.572)	(0.572)	0.000	(17.276)	(17.276)	0.000
Other Operating Income	(10.623)	(11.421)	(0.798)	(82.381)	(82.607)	(0.226)
Overseas Patient Income	(0.007)	(0.006)	0.001	(0.089)	(0.165)	(0.077)
Private Patient Income	(0.102)	(0.103)	(0.001)	(1.145)	(1.272)	(0.127)
Total £m	(191.493)	(192.725)	(1.232)	(1,505.195)	(1,507.214)	(2.020)

A surplus of £2.020m is reported against income budgets. The main variances to note are:

- £0.226m favourable cumulative variance against other operating income. The in month surplus arose from the part return of funding for the 111 service and the release of an income provision. This has offset a cumulative under recovery of income against targets for: NICU/PICU due to activity; the Radiopharmacy and St Mary's Pharmaceutical Units due to closure and production issues; rental income due to vacant retail spaces including the pharmacy outpatients scheme.
- £0.052m in month surplus on R&D income following the collection of commercial study income. The cumulative surplus has arisen from the collection of both commercial and non commercial grant income.
- A £0.376m cumulative surplus against Education and Training follows the receipt of additional income from HEIW to support training.
- A £0.277m in month surplus on NHS patient related income follows confirmation of the LTA income position with Welsh Health Boards at year end.
- A £0.037m surplus in income in month from the Compensation Recovery Unit which once again stems from a relatively high value of receipted cash and new claims.

LTA Provider Performance

The UHB receives circa £315m income from its contracts with WHSSC, LHBs and other commissioners, in addition to non-contractual flows. In-month reporting reflects an estimate based on the prior month's activity, given the timeline for receipt of coded contract information.

There is an adverse movement of £0.293m in the Month 11 LTA position. The overall provider position is a favourable cumulative variance of £0.354m. The LTA position with LHBs is underperforming, and this is mainly driven by under delivery within Orthopaedics. This is offset by over performance on the WHSSC and non-welsh LTA's. The overall performance against plan at Month 12 is summarized in Table 6 below.

Table 6: Month 12 LTA Provider Position

	Annual Budget £m	YTD Profile £m	YTD Actual £m	YTD Variance £m
WHSCC	(239.305)	(239.305)	(239.949)	(0.645)
Aneurin Bevan	(30.603)	(30.603)	(30.473)	0.129
Othe LHBs	(40.131)	(40.131)	(39.831)	0.300
Non-Welsh	(4.443)	(4.443)	(4.581)	(0.138)
Total £m	(314.482)	(314.482)	(314.835)	(0.354)

Pay

In total pay budgets are showing a cumulative underspend of £3.911m as reported in Table 7.

Table 7: Analysis of pay expenditure by staff group @ March 2020

Pay	In Month			Cumulative Year to Date		
	Budget £m	Actual £m	Variance (Fav)/Adv £m	Budget £m	Actual £m	Variance (Fav)/Adv £m
Additional clinical services	3.387	3.315	(0.072)	25.906	25.578	(0.328)
Management, admin & clerical	10.082	9.969	(0.114)	79.941	79.124	(0.817)
Medical and Dental	20.280	20.070	(0.210)	170.395	168.873	(1.522)
Nursing (registered)	25.682	25.286	(0.396)	203.837	202.636	(1.201)
Nursing (unregistered)	6.641	7.127	0.486	52.144	56.338	4.194
Other staff groups	12.956	12.803	(0.153)	102.625	100.089	(2.536)
Scientific, prof & technical	4.910	5.041	0.130	39.310	37.609	(1.701)
Total £m	83.938	83.609	(0.328)	674.157	670.246	(3.911)

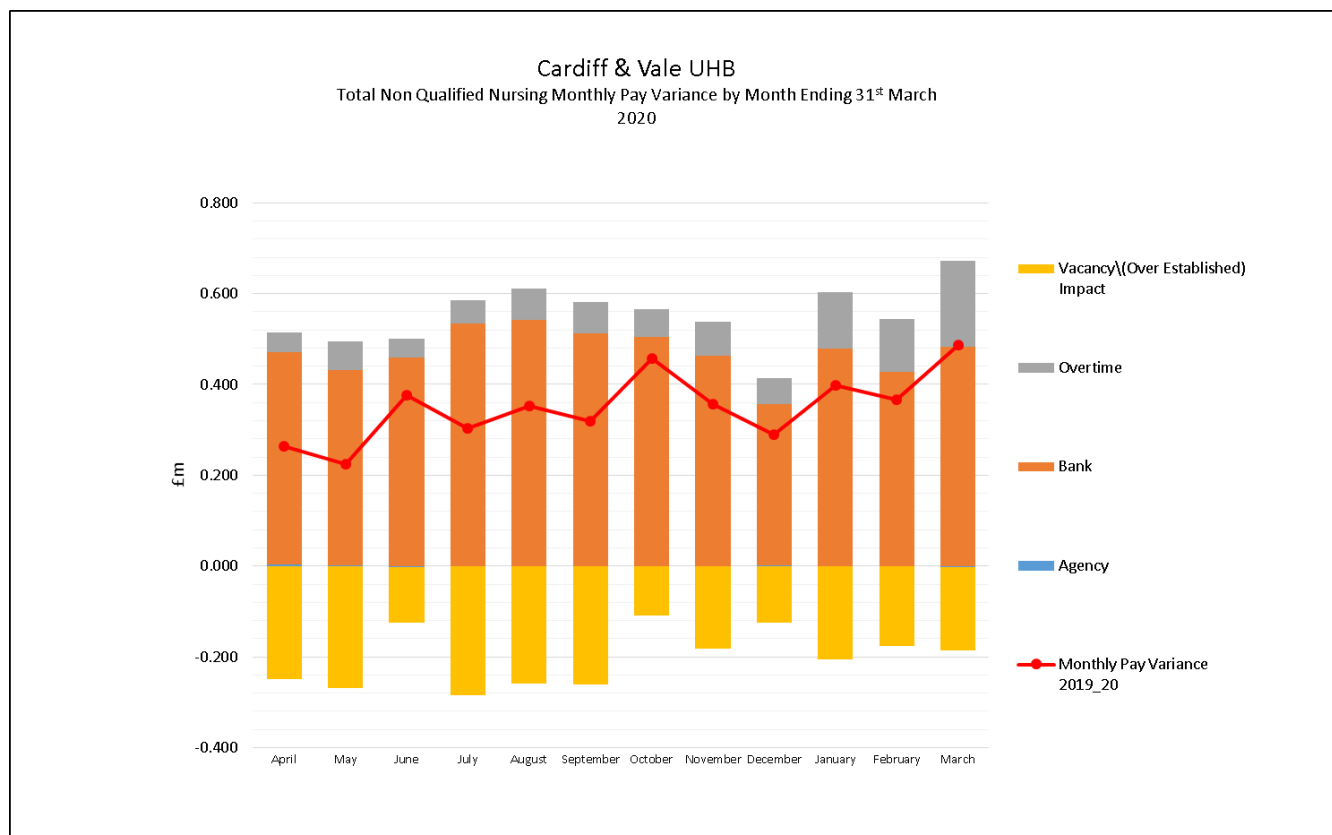
Total pay budgets improved by a further £0.328m in month to full year underspend of £3.911m.

The rate of overspend against the nursing budget in month was lower than the average for the previous 11 months of the year.

The in month underspend on medical and dental continues as a result of a number of vacant posts.

The underspend against management, admin and clerical and other staff groups is in part due to vacancy management in support of cost pressures.

Table 8 – Non Qualified Nursing Staff Pay Variance

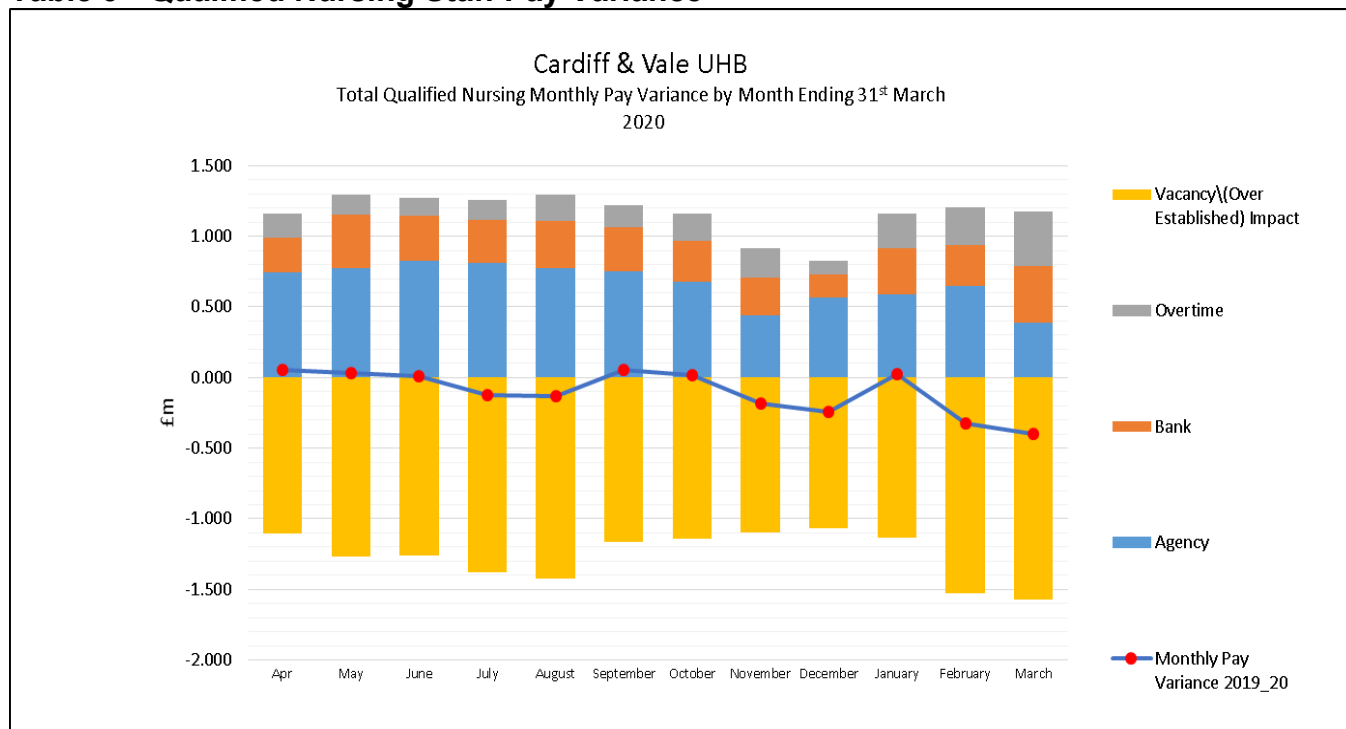


Reason	In Month £m (Fav)/Adv	Year To Date £m (Fav)/Adv
Agency	(0.002)	(0.001)
Bank	0.483	5.657
Overtime	0.189	0.961
Adverse Impact	0.669	6.617
Vacancy\ (Over Established) Impact	(0.183)	(2.423)
Total Pay Variance - Unqualified Nursing (Fav)/Adv £m	0.486	4.194

Table 8 indicates that the £4.194m adverse variance against non-qualified nursing assistants is due to overspends of £5.657m on bank staff and £0.961m on overtime which is partly offset by an underspend against established posts.

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Table 9 - Qualified Nursing Staff Pay Variance

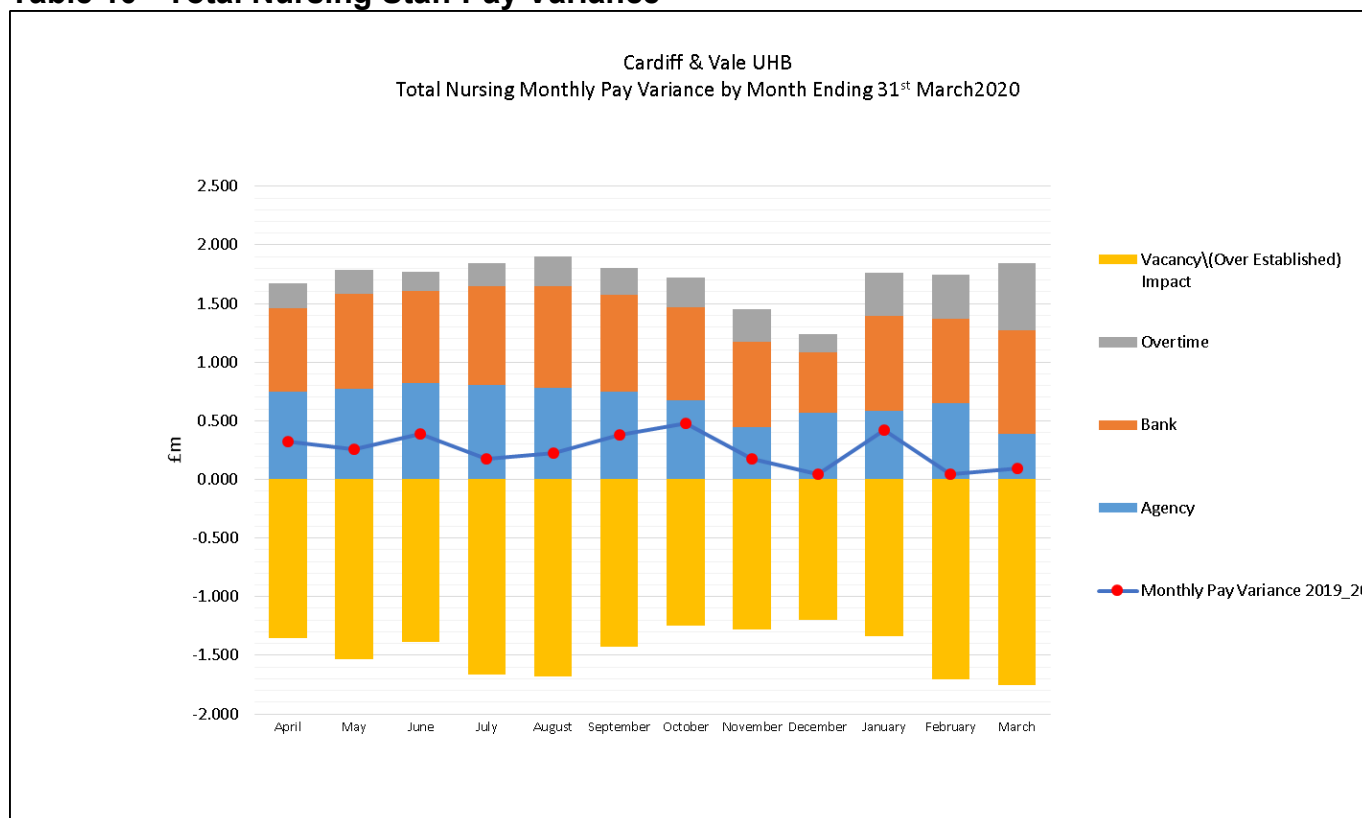


Reason	In Month £m (Fav)/Adv	Year To Date £m (Fav)/Adv
Agency	0.391	8.000
Bank	0.399	3.619
Overtime	0.387	2.322
Adverse Impact	1.177	13.941
Vacancy\((Over Established) Impact	(1.573)	(15.142)
Total Pay Variance - Qualified Nursing (Fav)/Adv £m	(0.396)	(1.201)

Table 9 confirms that expenditure on established qualified nursing posts is significantly less than budget and that the UHB is covering vacancies through additional spend on temporary staffing.

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Table 10 - Total Nursing Staff Pay Variance



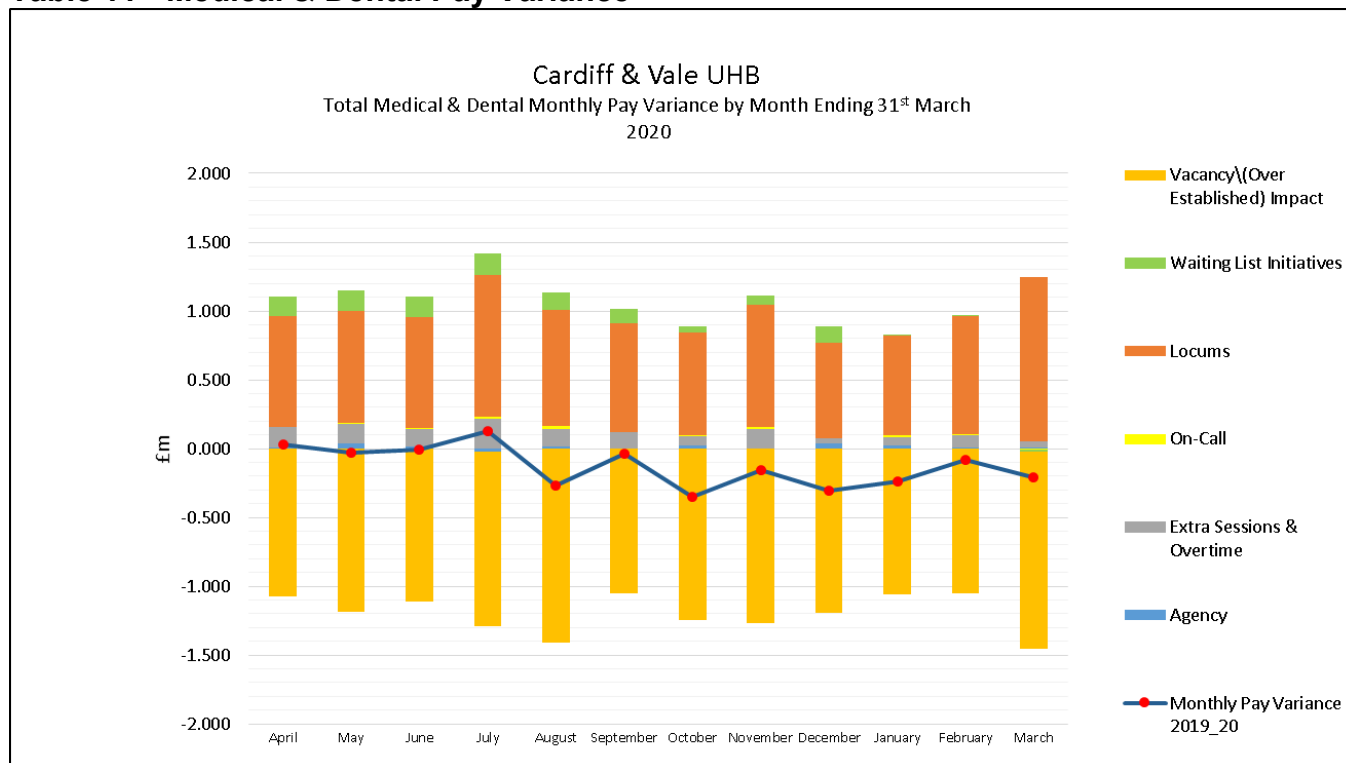
Reason	In Month £m (Fav)/Adv	Year To Date £m (Fav)/Adv
Agency	0.389	7.999
Bank	0.882	9.276
Overtime	0.576	3.283
Adverse Impact	1.847	20.558
Vacancy\ (Over Established) Impact	(1.757)	(17.565)
Total Pay Variance - (Fav)/Adv £m	0.090	2.993

Table 10 identifies expenditure against substantive nursing posts for the year to date which is £2.993m more than budget. The £17.565m surplus against established posts is offset by a £20.558m overspend on agency, bank and overtime leading to an overall overspend against nursing budgets. Performance on nursing budgets remains a concern and features on the risk register again in 2020/21.

Table 11 shows financial performance against medical and dental pay budgets. This identifies that the majority of the favourable variance against established posts is offset by expenditure on locums, waiting list initiatives and extra sessions leaving an underspend of £1.522m at month

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Table 11 - Medical & Dental Pay Variance



Reason	In Month £m (Fav)/Adv	Year To Date £m (Fav)/Adv
Agency	0.009	0.141
Extra Sessions & Overtime	0.040	1.326
On-Call	(0.010)	0.093
Locums	1.194	10.204
Waiting List Initiatives	(0.013)	1.047
Adverse Impact	0.980	12.812
Vacancy\ (Over Established) Impact	(1.430)	(14.333)
Total Pay Variance - Medical & Dental (Fav)/Adv £m	(0.210)	(1.522)

Non Pay

Table 12 highlights an in month overspend of £1.298m and a £5.873m cumulative underspend against non pay budgets.

The key operational pressure areas are:

- An overspend against drug budgets primarily in medicine and primary care which continued in March with a reported in month overspend of £0.601m.
- Premises and fixed plant where key cost drivers are: increased spend on estates contractors to cover vacancies in substantive posts during a workforce modernisation programme; energy costs; and the significant cost of security on the vacant sites at

Lansdowne and Whitchurch. Part of the £1.014m of the overspend on estates contractor costs is offset by staff underspends of £0.871m on vacant posts. The cost of providing security is expected to fall in the 2020/21 following the sale of the Lansdowne site.

- High levels of CHC growth as a consequence of increasing numbers particularly in the first half of the year in respect of palliative care, learning difficulties and high cost mental health placements.
- Pressures against commissioned services relate to the recognition of the UHB's contribution to the WHSCC budget and non contractual cost per case activity. The overspend of £2.212m in month 12 follows agreement of the 2019/20 WHSCC contribution and the finalisation of the year end liability for cost per case activity.
- The cumulative overspend against clinical services and supplies is a result of theatre consumables, growth in community beds and dressings, genomics activity and additional spend on wheelchairs at ALAS. The in month underspend has arisen following a review of outstanding liabilities in respect of receipted goods.
- The in month deficit against primary care contractors is primarily due to the recognition of performance of independent contractors against activity based services.

Table 12: Non Pay Variance @ March 2020

Non Pay	In Month			Cumulative Year to Date		
	Budget	Actual	Variance (Fav)/Adv	Budget	Actual	Variance (Fav)/Adv
	£m	£m	£m	£m	£m	£m
Clinical services & supplies	13.648	12.694	(0.953)	111.963	112.422	0.458
Commissioned Services	14.542	15.734	1.192	173.805	176.017	2.212
Continuing healthcare	4.993	5.458	0.465	64.599	67.551	2.951
Drugs / Prescribing	15.104	15.705	0.601	155.103	159.027	3.923
Establishment expenses	1.497	1.296	(0.200)	13.285	13.538	0.253
General supplies & services	0.823	0.886	0.063	9.005	9.382	0.376
Other non pay	37.044	36.944	(0.100)	95.097	88.817	(6.279)
Premises & fixed plant	3.750	3.590	(0.160)	35.046	37.926	2.880
Primary Care Contractors	16.154	16.546	0.392	173.133	172.232	(0.901)
Total £m	107.555	108.853	1.298	831.037	836.911	5.873

LTA Commissioner Performance

The UHB spends circa £165m on central commissioning of healthcare services for its population mainly through contracts with WHSSC, LHBs and Velindre. The overall position is an overspend of £2.0m at month 12. The WHSSC cumulative overspend of £1.5m is driven by Cardiology, NICU and melanoma drugs. The LHB position is £0.055m favourable to M12. There is favourable performance on Velindre drugs which has been partly negated by over performance on activity e.g. radiotherapy. The year to date commissioner position is shown in Table 13.

Table 13: Month 12 LTA Commissioner Position

Expenditure - C&V Commissioner			(fav) / adv	
Annual Budget	YTD Profile	YTD Actual	YTD Variance	
£m	£m	£m	£m	
WHSSC	127.191	127.191	128.702	1.511
Velindre	17.495	17.495	17.333	(0.162)
LHBs	20.762	20.762	20.706	(0.055)
Other / NCAs	1.329	1.329	2.012	0.683
	166.776	166.776	168.753	1.977

Financial Performance of Clinical Boards

Budgets were set to ensure that there is sufficient resource available to deliver the UHB's plan. Financial performance for the twelve months to 31st March 2020 by Clinical Board is shown in Table 14.

Table 14: Financial Performance for the period ended 31st March 2020

Clinical Board	M11 Budget Variance £m	M12 Budget Variance £m	In Month Variance £m	Cumulative % Variance
All Wales Genomics Service	(0.026)	(0.059)	(0.032)	(0.43%)
Capital Estates & Facilities	1.103	1.194	0.091	1.79%
Children & Women	1.069	1.548	0.479	1.35%
Clinical Diagnostics & Therapies	1.075	1.425	0.349	1.30%
Executives	(0.389)	(0.066)	0.323	(0.15%)
Medicine	3.798	3.736	(0.062)	3.09%
Mental Health	0.106	(0.155)	(0.261)	(0.19%)
PCIC	1.712	2.050	0.338	0.59%
Specialist	(1.303)	(1.534)	(0.231)	(0.86%)
Surgery	1.687	1.214	(0.473)	0.78%
SubTotal Delegated Position	8.832	9.352	0.520	0.80%
Central Budgets	(8.628)	(9.410)	(0.782)	(3.40%)
Total	0.205	(0.058)	(0.262)	(0.07%)

Delegated budgets are £9.352m overspent for the year to date, following an in month overspend of £0.520m. The in month overspend against delegated budgets is offset by an underspend of £0.782m in March against central budgets which includes the planned release of corporate opportunities.

Further detail on the Performance of Executive Directorate Budgets is provided at **Appendix 5**

Savings Programme

The UHBs £31.245m savings target has been reduced by £5.150m to reflect the release of £2.1m relating to the UHBs remaining investment reserve and a further £3.050m to reflect an operational underspend on WEQAS. The target is now £26.095m.

At month 12 the UHB has a fully identified savings programme to deliver against the £26.095m savings target as summarised in Table 15.

Table 15: Progress against the 2019/20 Savings Programme at Month 12

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total £m	26.095	26.095	0.000

The final position is shown in **Appendix 1**.

Underlying Financial Position

A key challenge to the UHB is eliminating its underlying deficit. The recurrent underlying deficit in 2018/19 b/f into 2019/20 was £36.3m. Successful delivery of the 2019/20 plan would have reduced this to £4m by the year end. The achievement of this was very much dependent upon delivering the full year impact of 2019/20 savings schemes. The latest assessment is that this remains circa £7.5m less than planned and this will increase the underlying deficit to £11.5m. This is now the opening position included in the 2020/21 IMTP. This is shown in Table 16.

Table 16: Summary of Underlying Financial Position

	2019/20 Plan £m	Forecast Position @ Month 12	
		Non Recurrent £m	Recurrent Position £m
Opening Underlying Deficit £m	36.261	0.000	36.261
Income	(56.610)		(56.610)
Cost pressures less mitigating actions	51.594		51.594
Less CIPs (includes income generation & NR accountancy gains)	(26.095)	8.450	(17.645)
Release of Remaining Investment Reserve & operational underspend at WEQAS	(5.150)	3.050	(2.100)
Deficit £m	0.000	11.500	11.500

Balance Sheet

The balance sheet at month 12 is detailed in **Appendix 2**.

The increase in the carrying value of property, plant & equipment since the start of the year is largely due to the impact of annual indexation and capital spend.

Overall trade debtors have fallen by £9.5m (5.2%) since the start of the year mainly due to a fall in amounts due from the Welsh Risk Pool in respect of clinical negligence cases and additional

NHS invoice accruals. The in month decrease of £30m was a consequence of a £24m reduction in the WRP Debtor as a result of court approval of clinical negligence cases in month and the settlement of 2019/20 WHSSC LTA income.

Stock levels fell in month following the loss of flood damaged ALAC stock (£0.6m) which was offset in part by increased drug stock held in Pharmacy (£0.3m) due to the COVID 19 pandemic. The carrying value of Inventory fell by £0.142m (0.8%) over the course of the year.

The value of trade and other payables has increased by around £15.9m (8.7%) since the start of the year following an increase of £43m during March. £10m of this increase related to capital creditors following the completion of £25.3m capital expenditure in March. Revenue creditors increased by £34m in month. £7m of this related to the timing of contractual payments to pharmacists, £3.6m related to year end activity settlements with other health boards and WHSCC, a further £2.3m due to the Cardiff Council CHC Pooling arrangements accrual with the remainder relating to a significant increase in the levels of trade creditors in month.

Cash Flow Forecast

The cash flow profile is shown in **Appendix 3** with a year end cash balance of £1.410m.

Public Sector Payment Compliance

The UHB's annual performance was 95.8% at the end of March and therefore it achieved its statutory target in 2019/20. This is an improvement on the rate achieved in 2018/19 (95.0%). Cumulative performance fell from 96.3% at the end of February.

Capital Resource Limit (CRL)

Progress against the CRL for the period to the end of March 2020 is summarised in Table 17 and detailed in **Appendix 4**.

Table 17: Progress against Capital Resource Limit @ March 2020

	£m
Planned Capital Expenditure at month 11	58.159
Actual net expenditure against CRL at month	58.071
Variance against planned Capital Expenditure at month	(0.088)

The UHB successfully remained within its Capital Resource Limit (CRL) in 2019/20. Net capital expenditure was £0.088m (0.15%) below the approved CRL of £58.159m

Key Risks and Recovery Actions

The UHB's provisional year end position is a £0.058m surplus on the revenue and a £0.088m surplus on capital which is subject to External Audit scrutiny and review. At this point in time the UHB does not expect any risks to materially affect the reported year end position.

Recommendation:

The Finance Committee is asked to:

- **NOTE** the provisional draft year end revenue surplus of £0.058m against the planned breakeven position;
- **NOTE** that the year end capital position is a spend of £58.071m against a CRL of £58.159m;
- **NOTE** that the UHB achieved its creditor payment compliance target of 95%.

Shaping our Future Wellbeing Strategic Objectives

This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report

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, click [here](#) for more information

Prevention		Long term	x	Integration		Collaboration		Involvement	
Equality and Health Impact Assessment Completed:		Yes / No / Not Applicable <i>If "yes" please provide copy of the assessment. This will be linked to the report when published.</i>							

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Appendix 1

2019-20 In-Year Effect

Clinical Board	19-20 Target	Green	Amber	Total Green & Amber	Pipeline Red	Shortfall on Total Target vs Green & Amber
	£'000	£'000	£'000	£'000	£'000	£'000
PCIC	3,300	4,133	0	4,133	517	(833)
Surgery	2,300	2,556	0	2,556	375	(256)
Specialist Services	2,019	2,207	0	2,207	0	(188)
Corporate Executives	681	696	0	696	20	(15)
Mental Health	1,470	1,470	0	1,470	100	0
CD & T	1,633	1,675	0	1,675	574	(42)
Children & Women	1,775	1,634	0	1,634	225	141
Medicine	1,877	1,360	0	1,360	38	517
Capital Estates & Facilities	1,290	883	0	883	267	407
Total	16,345	16,614	0	16,614	2,116	(269)
Corporate	12,800	13,505	0	13,505	0	(705)
Total	29,145	30,119	0	30,119	2,116	(974)

2019-20 Full Year Effect

Clinical Board	Recurrent	Green	Amber	Total Green & Amber	Pipeline Red	Shortfall on Total Target vs Green & Amber
	£'000	£'000	£'000	£'000	£'000	£'000
PCIC	3,300	4,218	0	4,218	0	(918)
Surgery	2,300	2,198	0	2,198	560	102
Specialist Services	2,019	2,039	0	2,039	0	(20)
Corporate Executives	681	697	0	697	0	(16)
Mental Health	1,470	1,152	0	1,152	100	318
CD & T	1,633	1,010	0	1,010	574	623
Children & Women	1,775	872	0	872	245	903
Medicine	1,877	1,563	0	1,563	84	314
Capital Estates & Facilities	1,290	564	0	564	0	726
Total	16,345	14,313	0	14,313	1,563	2,032
Corporate	12,800	4,332	0	4,332	0	8,468
Total	29,145	18,645	0	18,645	1,563	10,500

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Appendix 2

BALANCE SHEET AS AT 31st MARCH 2020

	Opening Balance 1 st April 2019	Closing Balance 31 st March 2020
Non-Current Assets	£'000	£'000
Property, plant and equipment	675,904	688,636
Intangible assets	2,902	2,038
Trade and other receivables	21,432	18,952
Other financial assets		
Non-Current Assets sub total	700,238	709,626
Current Assets		
Inventories	16,926	16,784
Trade and other receivables	176,987	169,893
Other financial assets		
Cash and cash equivalents	1,219	1,410
Non-current assets classified as held for sale	1,906	0
Current Assets sub total	197,038	188,087
TOTAL ASSETS	897,276	897,713
Current Liabilities		
Trade and other payables	174,685	191,206
Other financial liabilities		
Provisions	129,087	118,598
Current Liabilities sub total	303,772	309,804
NET ASSETS LESS CURRENT LIABILITIES	593,504	587,909
Non-Current Liabilities		
Trade and other payables	9,095	8,491
Other financial liabilities		
Provisions	24,862	14,311
Non-Current Liabilities sub total	33,957	22,802
TOTAL ASSETS EMPLOYED	559,547	565,107
FINANCED BY:		
Taxpayers' Equity		
General Fund	443,904	448,331
Revaluation Reserve	115,643	116,776
Total Taxpayers' Equity	559,547	565,107

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Appendix 3

CASH FLOW FORECAST AS AT 31st MARCH 2020

	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													
WG Revenue Funding - Cash Limit (excluding NCL)	91,830	92,150	73,290	73,685	82,585	76,520	83,570	84,720	72,730	80,455	82,095	53,787	947,417
WG Revenue Funding - Non Cash Limited (NCL)	1,590	1,590	1,005	1,555	1,685	1,210	1,560	1,390	1,415	1,455	1,680	1,319	17,454
WG Revenue Funding - Other (e.g. invoices)	1,255	1,255	1,255	2,108	2,396	1,307	3,026	2,711	1,411	1,582	1,306	9,575	29,187
WG Capital Funding - Cash Limit	8,500	1,000	0	3,850	3,900	4,900	4,440	3,400	4,150	3,550	2,741	14,127	54,558
Sale of Assets	0	1,200	0	166	0	0	0	0	0	0	2,642	334	4,342
Income from other Welsh NHS Organisations	39,794	47,109	39,129	53,252	50,677	34,006	43,675	52,139	48,290	49,502	42,793	45,514	545,880
Other - (Specify in narrative)	14,126	6,259	5,137	12,752	6,892	4,176	13,884	5,729	5,187	12,775	5,427	5,835	98,179
TOTAL RECEIPTS	157,095	150,563	119,816	147,368	148,135	122,119	150,155	150,089	133,183	149,319	138,684	130,491	1,697,017
PAYMENTS													
Primary Care Services : General Medical Services	5,495	4,343	8,338	4,816	4,261	6,402	4,755	4,395	7,316	4,514	4,228	7,284	66,147
Primary Care Services : Pharmacy Services	165	136	176	124	132	145	150	133	196	540	481	216	2,594
Primary Care Services : Prescribed Drugs & Appliances	6,818	15,385	3	7,987	15,385	3	7,473	16,118	7,630	8,004	8,118	4	92,928
Primary Care Services : General Dental Services	1,835	1,877	1,926	2,054	1,786	1,900	1,941	2,150	1,797	1,843	1,963	1,908	22,980
Non Cash Limited Payments	1,957	1,861	2,088	2,215	2,005	2,182	1,984	2,100	2,195	1,837	2,069	2,165	24,658
Salaries and Wages	51,454	51,583	50,105	51,135	51,185	50,037	51,844	52,355	51,304	51,256	51,674	52,459	616,391
Non Pay Expenditure	68,366	54,158	46,656	61,896	45,187	52,173	63,042	44,351	44,200	63,098	51,414	48,728	643,269
Capital Payment	6,335	2,613	3,087	3,268	4,047	3,649	4,470	3,227	3,743	3,383	3,450	15,373	56,645
Other items (Specify in narrative)	10,691	19,637	7,881	14,604	22,839	6,045	14,147	23,994	15,963	14,598	14,650	6,166	171,215
TOTAL PAYMENTS	153,116	151,593	120,260	148,099	146,827	122,536	149,806	148,823	134,344	149,073	138,047	134,302	1,696,826
Net cash inflow/outflow	3,979	(1,030)	(444)	(731)	1,308	(417)	349	1,266	(1,161)	246	637	(3,811)	
Balance b/f	1,219	5,198	4,168	3,724	2,993	4,301	3,884	4,233	5,499	4,338	4,584	5,221	
Balance c/f	5,198	4,168	3,724	2,993	4,301	3,884	4,233	5,499	4,338	4,584	5,221	1,410	

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Appendix 4

PROGRESS AGAINST CRL AS AT 31st MARCH 2020

Approved CRL issued April 14 th 2020 £'000s			58,159			
Performance against CRL	Year To Date			Forecast		
	Plan £'000	Actual £'000	Var. £'000	Plan £'000	F'cast £'000	Var. £'000
All Wales Capital Programme:						
Neo Natal BJC2	5,131	5,131	0	5,131	5,131	0
Rookwood Replacement	18,555	18,527	(28)	18,555	18,527	(28)
MRI Scanners	3,050	2,958	(92)	3,050	2,958	(92)
Pharmacy Equipment	448	424	(24)	448	424	(24)
Replacement Imaging Equipment	3,473	3,297	(176)	3,473	3,297	(176)
Digital Priorities Investment Fund	1,668	1,683	15	1,668	1,683	15
Cystic Fibrosis Services	923	941	18	923	941	18
Major Trauma Centre	3,112	2,972	(140)	3,112	2,972	(140)
Wellbeing Hub Maelfa	908	784	(124)	908	784	(124)
Penarth Wellbeing Hub	800	790	(10)	800	790	(10)
MCP - ICFC1906 Development Chapel at H&WC@CRI	313	310	(3)	313	310	(3)
2019-20 YE Additional Capital	1,744	1,744	0	1,744	1,744	0
Autoclaves	142	142	0	142	142	0
111	60	35	(25)	60	35	(25)
CRI Links Buildings	328	133	(195)	328	133	(195)
Ophthalmology Training Simulator	194	181	(13)	194	181	(13)
Digital NDR	114	114	0	114	114	0
Green Growth Energy Efficiency Project	523	792	269	523	792	269
EOY - Funding March	400	400	0	400	400	0
COVID 19 HCID - UHW	840	840	0	840	840	0
Pathogen Genomics Unit	195	195	0	195	195	0
COVID 19 - digital / inpatient / critical care beds	467	468	1	467	468	1
COVID 19 - monitors and mobile X-ray	284	284	0	284	284	0
Sub Total	43,672	43,145	(527)	43,672	43,145	(527)
Discretionary:						
I.T.	446	446	0	446	446	0
Equipment	3,150	3,150	0	3,150	3,150	0
Statutory Compliance	1,924	2,001	77	1,924	2,001	77
Estates	12,227	12,590	363	12,227	12,590	363
Sub Total	17,747	18,187	440	17,747	18,187	440
Donations:						
Charitable Funds Equipment	1,107	1,107	0	1,107	1,107	0
Sub Total	1,107	1,107	0	1,107	1,107	0
Asset Disposals:						
Iorweth Jones	912	912	0	912	912	0
Amy Evans	206	206	0	206	206	0
Lansdowne Hospital	439	439	0	439	439	0
Carbon Emmissions Credits	166	166	0	166	166	0
Ventilators (Neonatal)	407	407	0	407	407	0
	24	24	0	24	24	0
Sub Total	2,154	2,154	0	2,154	2,154	0
CHARGE AGAINST CRL	58,158	58,071	(87)	58,158	58,071	(87)
PERFORMANCE AGAINST CRL (Under)/Over £'000s		(88)			(88)	

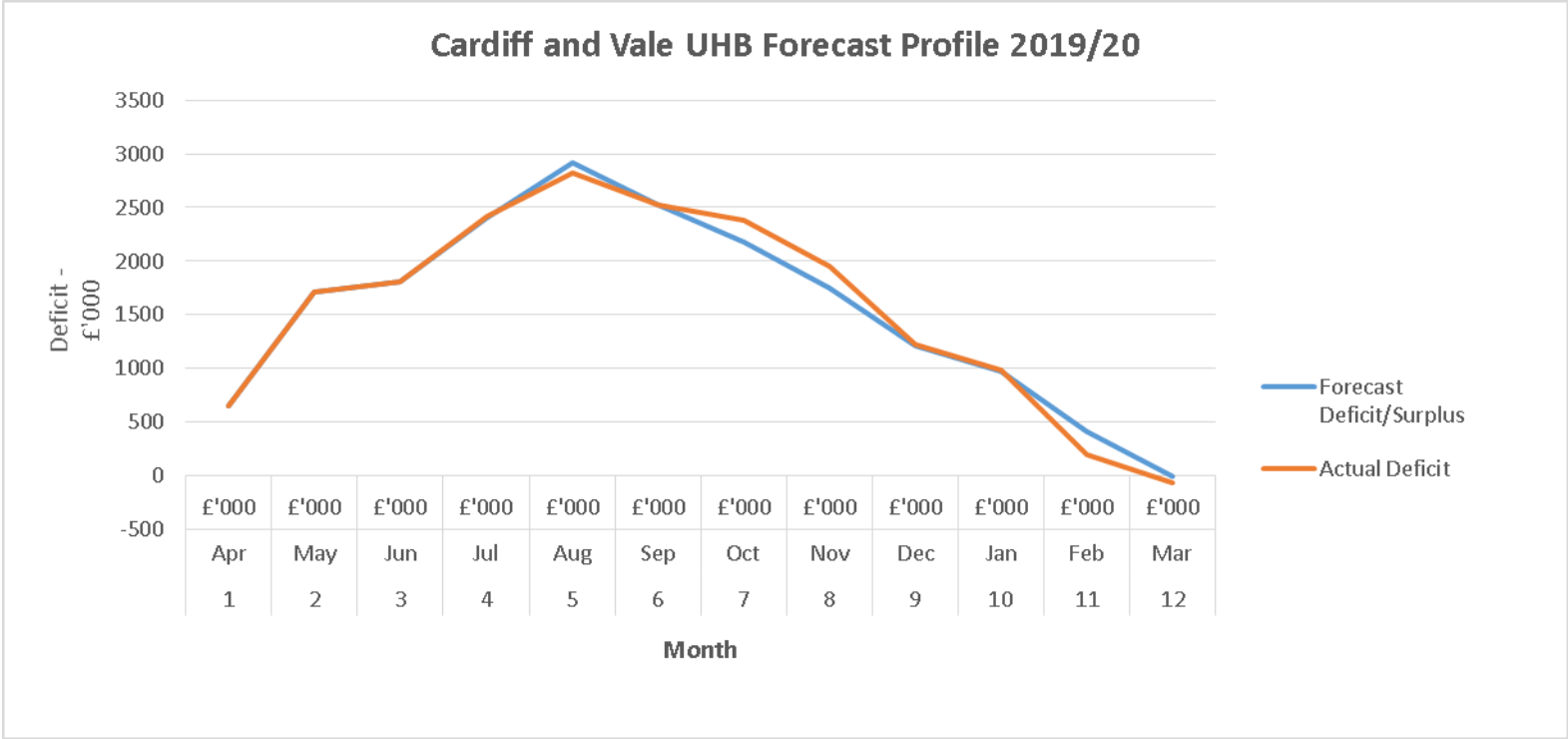
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Appendix 5

FINANCIAL PERFORMANCE OF EXECUTIVE DIRECTORATES

Corporate Executive Directorate	M12 Budget Variance £m
Chief Executive Officer	0.005
Chief Operating Officer	(0.029)
Director of Finance	(0.102)
Director of Governance	0.052
Director of Nursing	(0.032)
Director of Planning	0.038
Director of Public Health	(0.000)
Director of Therapies	(0.066)
Director of Transformation	(0.077)
Director of Workforce	0.096
Medical Director	0.048
Total £m	(0.066)

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Report Title:	Finance Risk Register				
Meeting:	Finance Committee			Meeting Date:	29 th April 2020
Status:	For Discussion		For Assurance	For Approval	For Information
Lead Executive:	Executive Director of Finance				
Report Author (Title):	Assistant Director of Finance				

Background and current situation:

This report highlights the 2020/21 Finance Risk Register risk categorisation by severity of risk as at 29th April 2020. The detailed 2020/21 risk register is shown in Appendix 1.

Following the most recent review the number of risks identified in each category is shown below:

2020/21 UHB Financial Risks at 29th April 2020

Risk Category	Risk Score	Number of Risks as at 29 April 2020
Extreme Risk	20 - 25	4
High Risk	12 - 16	4
Moderate Risk	4 - 10	2
Low Risk	1 - 3	0

A summary of the **Extreme Risks** are shown below:

Fin01/20 – Reducing underlying deficit from £11.5m to £4.0m in line with IMTP submission.

Fin02/20 – Management of budget pressures.

Fin03/20 – Delivery of £29.0m (3.5%) CIP

Fin10/20 – COVID-19 impact on financial plan

The Finance Committee is asked to note the COVID-19 financial plan risk (FIN10/20). The Dragons Heart Hospital (DHH) COVID-19 is shown in appendix 2 as a sub-set to the main risk register.

Assessment and Risk Implications (Safety, Financial, Legal, Reputational etc:)

The Finance Committee will be kept up to date regarding any additions to the Risk Registers or any change in risk assessment.

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Recommendation:

The Finance Committee is asked to:

- **NOTE** the risks highlighted within the 2020/21 risk register
- **NOTE** the risks highlighted in the Dragons Heart Hospital (DHH) sub set-risk register

Shaping our Future Wellbeing Strategic Objectives

This report should relate to at least one of the UHB's objectives, so please tick the box of the relevant objective(s) for this report

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, click [here](#) for more information

Prevention		Long term		Integration		Collaboration		Involvement	
Equality and Health Impact Assessment Completed:	Yes / No / Not Applicable <i>If "yes" please provide copy of the assessment. This will be linked to the report when published.</i>								



CB/Dir Ref No	Domain	Date Entered onto new CB/Dir/UHB Risk Register	Risk/Issue (Including Impact)	Exec Lead	Initial Risk Rating			Existing Controls	Assurance	Current Risk Rating			Gaps in Controls	Gaps in Assurance	Summary of Additional Actions being undertaken	Who	When	Target Risk Rating if Controls in Place			Date of Next Review	Level of assurance required
					Impact / Consequence	Likelihood	Score			Impact / Consequence	Likelihood	Score						Impact / Consequence	Likelihood	Score		
Fin01/20	Finance	Jan-20	The opening underlying deficit in 20/21 is planned to be £11.5m. The IMTP planned c/f underlying deficit in 2021/22 is £4m.	Director of Finance	5	4	20	Governance reporting and monitoring arrangements through the Finance Committee and Board	Limited Assurance	5	4	20	Adequate but more Action Required	Identification of 3.5% savings plan whilst managing and addressing budget pressures.	Progress against the underlying deficit is to be managed by Management Executive.	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management
Fin02/20	Finance	Jan-20	Manage Budget pressures	Director of Finance	5	4	20	The requirement to manage budget pressures clearly communicated to primary budget holders. Standing Financial Instructions set spending limits. Break even plans have been requested from all Clinical Boards. Progress to be reviewed through Executive Performance Reviews with Clinical Boards.	Limited Assurance	5	4	20	Adequate but more Action Required	Plans to address overspending budgets in 2019/20 addressing the risk in 2020/21.	Escalation process led by Chief Executive	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management
Fin03/20	Finance	Jan-20	Deliver 3.5% CIP (£29m)	Director of Finance	5	4	20	3.5% recurrent CIP target clearly communicated to budget holders. CIP tracker in place to monitor weekly progress across the organisation. Health Board Wide Schemes being led by Executive Directors Monthly Financial Clearance Meeting. Executive / Clinical Board Performance Reviews.	Limited Assurance	5	4	20	Adequate but more Action Required	£11.330m savings identified as green or amber against target of £29m as at w/c 17th February 2020. Re-assessed w/c 20th April 2020 following COVID-19 impact, £4.099m savings identified as green or amber	Escalation process led by Chief Executive	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management
Fin04/20	Finance	Jan-20	Manage internal investments within £3m envelope	Director of Finance	4	4	16	When Internal investment plan agreed business cases to be approved through the Business Case Approval Group (BCAG)	Reasonable assurance	4	4	16	Adequate but more Action Required	Final investemnt schedule to be agreed	Internal investments will not be agreed until the UHB has a full savings programme in place.	Assistant Director of Finance	Mar-21	2	2	4	May-20	Management
Fin05/20	Finance	Jan-20	Commissioning Risks	Director of Finance	3	3	9	Regular performance/LTA meetings with other providers/WHSSC and internal commisioning group.	Reasonable assurance	3	3	9	Adequate but more Action Required	IMTP commisioner / provider sign off and agreement	None	Assistant Director of Finance	Mar-21	2	2	4	May-20	Management
Fin06/20	Finance	Feb-20	Management of Nursing overspend	Director of Finance	4	4	16	Progress to be monitored through Nursing Productivity Group and Executive / Clinical Board Performance Reviews.	Limited Assurance	3	3	9	Adequate but more Action Required	Plans to address overspending budgets in 2019/20 addressing the risk in 2020/21.	Progress on delivery against nursing budgets is to be managed by Management Executive.	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management
Fin07/20	Finance	Feb-20	Deliver RTT within resources available	Director of Finance	4	4	16	The UHB will continue to work closely with WG to ensure appropraite resources are made available to maintain progress.	Limited Assurance	3	3	9	Adequate but more Action Required	None	Monthly meetings with the COO, progress report to be received through performance review meetings and regular dialogue with WG.	Assistant Director of Finance	Mar-21	2	3	6	May-20	Management
Fin08/20	Finance	Feb-20	Winter pressures managed within available resources	Director of Finance	4	4	16	Winter plan for 2020/21 developed in partnership with Local Authorities and signed off by Management Executive	Limited Assurance	3	3	9	Adequate but more Action Required	None	Progress report to be received through performance review meetings.	Assistant Director of Finance	Mar-21	2	3	6	May-20	Management
Fin09/20	Finance	Feb-20	Cardiac outsourcing	Director of Finance	3	3	9	Potential to need to outsource up to 50 patients at an estimated cost of £0.020m per patient	Reasonable assurance	3	2	6	Adequate but more Action Required	None	None	Assistant Director of Finance	Mar-21	2	3	6	May-20	Management
Fin10/20	Finance	Feb-20	COVID-19 financial plan impact	Director of Finance	5	4	20	Oversight arrangements in place at Board level and through the command structure. Expenditure Plans developing controlled through COVID-19 Strategic Gold Command and Directors of Operations. Capital and Revenue expenditure to be claimed through WG	Limited Assurance	5	4	20	Adequate but more Action Required	Agreement of plan and funding with WG	1. Modelling of anticipated patient flows, and the resultant workforce, equipment and operational requirements is managed through Gold command; 2. Financial modelling and forecasting is co-ordinated on a regular basis; 3. Financial reporting to WG on local costs incurred as a result of COVID-19 to inform central and local scrutiny, feedback and decision making.	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management

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Target Risk
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Date of
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Assuri ng

	Consequence score (severity levels) and examples of descriptors				
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of patients, staff or public (physical/psychological harm)	Minimal injury requiring no/minimal intervention or treatment. No time off work	Minor injury or illness, requiring minor intervention Requiring time off work for >3 days Increase in length of hospital stay by 1-3 days	Moderate injury requiring professional intervention Requiring time off work for 4-14 days Increase in length of hospital stay by 4-15 days RIDDOR/agency reportable incident An event which impacts on a small number of patients	Major injury leading to long-term incapacity/disability Requiring time off work for >14 days Increase in length of hospital stay by >15 days Mismanagement of patient care with long-term effects	Incident leading to death Multiple permanent injuries or irreversible health effects An event which impacts on a large number of patients
Quality/complaints/audit	Peripheral element of treatment or service suboptimal Informal complaint/inquiry	Overall treatment or service suboptimal Formal complaint/ Local resolution Single failure to meet internal standards Minor implications for patient safety if unresolved Reduced performance rating if unresolved	Treatment or service has significantly reduced effectiveness Formal complaint / Local resolution (with potential to go to independent review) Repeated failure to meet internal standards Major patient safety implications if findings are not acted on	Non-compliance with national standards with significant risk to patients if unresolved Multiple complaints/ independent review Critical report	Totally unacceptable level or quality of treatment/service Inquest/ombudsman inquiry Gross failure of patient safety if findings not acted on Gross failure to meet national standards
Human resources/organisational development/staffing / competence	Short-term low staffing level that temporarily reduces service quality (< 1 day)	Low staffing level that reduces the service quality	Late delivery of key objective/ service due to lack of staff Unsafe staffing level or competence (>1 day) Low staff morale Poor staff attendance for mandatory/key professional training	Uncertain delivery of key objective/service due to lack of staff Unsafe staffing level or competence (>5 days) Loss of key staff Very low staff morale No staff attending mandatory/ key professional training	Non-delivery of key objective/service due to lack of staff Ongoing unsafe staffing levels or competence Loss of several key staff No staff attending mandatory training /key professional training on an ongoing basis
Statutory duty/inspections	No or minimal impact or breach of guidance/ statutory duty	Breach of statutory legislation	Single breach in statutory duty Challenging external recommendations/ improvement notice	Enforcement action Multiple breaches in statutory duty Improvement prohibition notices Critical report	Multiple breaches in statutory duty Prosecution Complete systems change required Severely critical report

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Adverse publicity/ reputation	Rumours Potential for public concern	Local media coverage – short-term reduction in public confidence Elements of public expectation not being met	Local media coverage – long-term reduction in public confidence	National media coverage with <3 days service well below reasonable public expectation	National media coverage with >3 days service well below reasonable public expectation. MP/AM concerned (questions in the House/Assembly) Total loss of public confidence
Business objectives/ projects	Insignificant cost increase/ schedule slippage	<5 per cent over project budget Schedule slippage	5–10 per cent over project budget Schedule slippage	Non-compliance with national 10–25 per cent over project budget Schedule slippage Key objectives not met	Incident leading >25 per cent over project budget Schedule slippage Key objectives not met
Finance including claims	Small loss Risk of claim remote	Loss of 0.1–0.25 per cent of budget Claim less than £10,000	Loss of 0.25–0.5 per cent of budget Claim(s) between £10,000 and £100,000	Uncertain delivery of key objective/Loss of 0.5–1.0 per cent of budget Claim(s) between £100,000 and £1 million Purchasers failing to pay on time	Non-delivery of key objective/ Loss of >1 per cent of budget Failure to meet specification/ slippage Loss of contract Claim(s) >£1 million
Service/business interruption	Loss/interruption of >1 hour	Loss/interruption of >8 hours	Loss/interruption of >1 day	Loss/interruption of >1 week	Permanent loss of service or facility
Environmental impact	Minimal or no impact on the environment	Minor impact on environment	Moderate impact on environment	Major impact on environment	Catastrophic impact on environment

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Likelihood Score (L)

- What is the likelihood of the consequence occurring?
- The frequency based score is appropriate in most circumstances and is easier to identify. It should be used whenever it is possible to identify the frequency at which a risk is likely to occur.
- The probability score is more appropriate for risks relating to time limited or one-off projects or business objectives

Likelihood Score

Descriptor	1 Rare	2 Unlikely	3 Possible	4 Likely	5 Almost Certain
Frequency How often does it might it happen	This will probably never happen/ recur	Do not expect it to happen / recur but it is possible it may do so	Might happen or recur occasionally	Will probably happen/recur but it is not a persisting issue	Will undoubtedly happen/recur, possibly frequently
Probability Will it happen or not? % chance of <u>not</u> meeting objective	<0.1 per cent	0.1-1 per cent	1 -10 per cent	10-50 per cent	>50 per cent

Table 3 - Risk Scoring = Consequence x Likelihood (C x L)

Consequence Score	Likelihood Score				
	1	2	3	4	5
5 - Catastrophic	5	10	15	20	25
4 - Major	4	8	12	16	20
3 - Moderate	3	6	9	12	15
2 - Minor	2	4	6	8	10
1 - Negligible	1	2	3	4	5

For grading risk, the scores obtained from the risk matrix are assigned grades as follows

1 - 3 = Low Risk	Quick, easy measures implemented immediately and further action planned for when resources permit
4 - 10 = Moderate Risk	Actions implemented as soon as possible but no later than a year
12 - 16 = High Risk	Actions implemented as soon as possible but no later than six months
20 - 25 = Extreme Risk	Requires urgent action. The UHB Board is made aware and it implements immediate corrective action

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					Initial Risk Rating					Current Risk Rating								Target Risk Rating if Controls in Place				
CB/Dir Ref No	Domain	Date Entered onto new CB/Dir/UHB Risk Register	Risk/Issue (Including Impact)	Exec Lead	Impact / Consequence	Likelihood	Score	Existing Controls	Assurance	Impact / Consequence	Likelihood	Score	Gaps in Controls	Gaps in Assurance	Summary of Additional Actions being undertaken	Who	When	Impact / Consequence	Likelihood	Score	Date of Next Review	Level of assurance required
Fin01/20 DHH	Finance	Apr-20	COVID-19 financial plan impact Dragons Heart Hospital(DHH)	Director of Finance	5	4	20	Oversight arrangements in place at Board level and through the command structure. Expenditure Plans developing controlled through COVID-19 Strategic Gold Command and Director of Operations. Capital and Revenue expenditure to be claimed through WG	Limited Assurance	5	4	20	Adequate but more Action Required	Agreement of plan and funding with WG	1. Modelling of anticipated patient flows, and the resultant workforce, equipment and operational requirements is managed through Gold command; 2. Financial modelling and forecasting is co-ordinated on a regular basis; 3. Financial reporting to WG on local costs incurred as a result of COVID-19 to inform central and local scrutiny, feedback and decision making.	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management
Fin02/20 DHH	Finance	Apr-20	Costs exceeding forecast ranges due to unforeseen technical and/or market forces factors	Director of Finance	5	4	20	Oversight arrangements in place at Board level and through the command structure. Expenditure Plans developing controlled through COVID-19 Strategic Gold Command and Director of Operations. Capital and Revenue expenditure to be claimed through WG	Limited Assurance	5	4	20	Adequate but more Action Required	Agreement of plan and funding with WG	1. Modelling of anticipated patient flows, and the resultant workforce, equipment and operational requirements is managed through Gold command; 2. Financial modelling and forecasting is co-ordinated on a regular basis; 3. Financial reporting to WG on local costs incurred as a result of COVID-19 to inform central and local scrutiny, feedback and decision making.	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management
Fin03/20 DHH	Finance	Apr-20	Damage and alteration to the stadium driving reinstatement cost above current project provision	Director of Finance	5	4	20	Oversight arrangements in place at Board level and through the command structure. Expenditure Plans developing controlled through COVID-19 Strategic Gold Command and Director of Operations. Capital and Revenue expenditure to be claimed through WG	Limited Assurance	5	4	20	Adequate but more Action Required	Agreement of plan and funding with WG	1. Modelling of anticipated patient flows, and the resultant workforce, equipment and operational requirements is managed through Gold command; 2. Financial modelling and forecasting is co-ordinated on a regular basis; 3. Financial reporting to WG on local costs incurred as a result of COVID-19 to inform central and local scrutiny, feedback and decision making.	Assistant Director of Finance	Mar-21	4	4	16	May-20	Management
Fin04/20 DHH	Finance	Apr-20	Cost of delays in vacating the stadium leading to consequential claim by the WRU and Cardiff Blues	Director of Finance	4	4	16	Oversight arrangements in place at Board level and through the command structure. Expenditure Plans developing controlled through COVID-19 Strategic Gold Command and Director of Operations. Capital and Revenue expenditure to be claimed through WG	Limited Assurance	4	4	16	Adequate but more Action Required	Agreement of plan and funding with WG	1. Modelling of anticipated patient flows, and the resultant workforce, equipment and operational requirements is managed through Gold command; 2. Financial modelling and forecasting is co-	Assistant Director of Finance	Mar-21	2	2	4	May-20	Management

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Target Risk
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Risk Owner
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Assuri ng

	Consequence score (severity levels) and examples of descriptors				
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of patients, staff or public (physical/psychological harm)	Minimal injury requiring no/minimal intervention or treatment. No time off work	Minor injury or illness, requiring minor intervention Requiring time off work for >3 days Increase in length of hospital stay by 1-3 days	Moderate injury requiring professional intervention Requiring time off work for 4-14 days Increase in length of hospital stay by 4-15 days RIDDOR/agency reportable incident An event which impacts on a small number of patients	Major injury leading to long-term incapacity/disability Requiring time off work for >14 days Increase in length of hospital stay by >15 days Mismanagement of patient care with long-term effects	Incident leading to death Multiple permanent injuries or irreversible health effects An event which impacts on a large number of patients
Quality/complaints/audit	Peripheral element of treatment or service suboptimal Informal complaint/inquiry	Overall treatment or service suboptimal Formal complaint/ Local resolution Single failure to meet internal standards Minor implications for patient safety if unresolved Reduced performance rating if unresolved	Treatment or service has significantly reduced effectiveness Formal complaint / Local resolution (with potential to go to independent review) Repeated failure to meet internal standards Major patient safety implications if findings are not acted on	Non-compliance with national standards with significant risk to patients if unresolved Multiple complaints/ independent review Critical report	Totally unacceptable level or quality of treatment/service Inquest/ombudsman inquiry Gross failure of patient safety if findings not acted on Gross failure to meet national standards
Human resources/organisational development/staffing / competence	Short-term low staffing level that temporarily reduces service quality (< 1 day)	Low staffing level that reduces the service quality	Late delivery of key objective/ service due to lack of staff Unsafe staffing level or competence (>1 day) Low staff morale Poor staff attendance for mandatory/key professional training	Uncertain delivery of key objective/service due to lack of staff Unsafe staffing level or competence (>5 days) Loss of key staff Very low staff morale No staff attending mandatory/ key professional training	Non-delivery of key objective/service due to lack of staff Ongoing unsafe staffing levels or competence Loss of several key staff No staff attending mandatory training /key professional training on an ongoing basis
Statutory duty/inspections	No or minimal impact or breach of guidance/ statutory duty	Breach of statutory legislation	Single breach in statutory duty Challenging external recommendations/ improvement notice	Enforcement action Multiple breaches in statutory duty Improvement prohibition notices Critical report	Multiple breaches in statutory duty Prosecution Complete systems change required Severely critical report

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Adverse publicity/ reputation	Rumours Potential for public concern	Local media coverage – short-term reduction in public confidence Elements of public expectation not being met	Local media coverage – long-term reduction in public confidence	National media coverage with <3 days service well below reasonable public expectation	National media coverage with >3 days service well below reasonable public expectation. MP/AM concerned (questions in the House/Assembly) Total loss of public confidence
Business objectives/ projects	Insignificant cost increase/ schedule slippage	<5 per cent over project budget Schedule slippage	5–10 per cent over project budget Schedule slippage	Non-compliance with national 10–25 per cent over project budget Schedule slippage Key objectives not met	Incident leading >25 per cent over project budget Schedule slippage Key objectives not met
Finance including claims	Small loss Risk of claim remote	Loss of 0.1–0.25 per cent of budget Claim less than £10,000	Loss of 0.25–0.5 per cent of budget Claim(s) between £10,000 and £100,000	Uncertain delivery of key objective/Loss of 0.5–1.0 per cent of budget Claim(s) between £100,000 and £1 million Purchasers failing to pay on time	Non-delivery of key objective/ Loss of >1 per cent of budget Failure to meet specification/ slippage Loss of contract Claim(s) >£1 million
Service/business interruption	Loss/interruption of >1 hour	Loss/interruption of >8 hours	Loss/interruption of >1 day	Loss/interruption of >1 week	Permanent loss of service or facility
Environmental impact	Minimal or no impact on the environment	Minor impact on environment	Moderate impact on environment	Major impact on environment	Catastrophic impact on environment

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Likelihood Score (L)

- What is the likelihood of the consequence occurring?
- The frequency based score is appropriate in most circumstances and is easier to identify. It should be used whenever it is possible to identify the frequency at which a risk is likely to occur.
- The probability score is more appropriate for risks relating to time limited or one-off projects or business objectives

Likelihood Score

Descriptor	1 Rare	2 Unlikely	3 Possible	4 Likely	5 Almost Certain
Frequency How often does it might it happen	This will probably never happen/ recur	Do not expect it to happen / recur but it is possible it may do so	Might happen or recur occasionally	Will probably happen/recur but it is not a persisting issue	Will undoubtedly happen/recur, possibly frequently
Probability Will it happen or not? % chance of <u>not</u> meeting objective	<0.1 per cent	0.1-1 per cent	1 -10 per cent	10-50 per cent	>50 per cent

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Table 3 - Risk Scoring = Consequence x Likelihood (C x L)

Consequence Score	Likelihood Score				
	1	2	3	4	5
5 - Catastrophic	5	10	15	20	25
4 - Major	4	8	12	16	20
3 - Moderate	3	6	9	12	15
2 - Minor	2	4	6	8	10
1 - Negligible	1	2	3	4	5

For grading risk, the scores obtained from the risk matrix are assigned grades as follows

1 - 3 = Low Risk	Quick, easy measures implemented immediately and further action planned for when resources permit
4 - 10 = Moderate Risk	Actions implemented as soon as possible but no later than a year
12 - 16 = High Risk	Actions implemented as soon as possible but no later than six months
20 - 25 = Extreme Risk	Requires urgent action. The UHB Board is made aware and it implements immediate corrective action

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THE WELSH GOVERNMENT FINANCIAL COMMENTARY

FINANCIAL POSITION FOR THE TWELVE MONTH PERIOD ENDED 31st MARCH 2020

INTRODUCTION

The UHB's provisional draft year end outturn is a surplus of £0.058m. This is subject to External Audit scrutiny and whilst not expected to materially change is still draft at this stage.

BACKGROUND

The Health Board agreed and submitted its 2019/20 – 2021/22 IMTP to Welsh Government by the end of January 2019 for its consideration. Approval of this plan was received by Welsh Government in March 2019. A summary of this plan is provided in Table 1.

Table 1: 2019/20 IMTP

	Approved IMTP £m
b/f underlying deficit	(36.3)
Net Allocation Uplift (inc LTA inflation)	56.6
Cost Pressures	(47.6)
Investments	(4.0)
Recurrent Cost Improvement Plans	31.3
In Year Financial Plan	36.3
Planned Surplus/(Deficit) 2019/20	0.0

These financial monitoring returns have been prepared against the UHB's approved IMTP which includes a balanced position for 2019/20. This report details the financial position of the UHB for the period ended 31st March 2020.

A full commentary has been provided to cover the tables requested for the month 12 financial position.

The response to the queries raised in the month 11 financial monitoring returns is set out in an attachment to this commentary.

FINANCIAL PLAN (TABLE A)

Table A sets out the financial plan and latest position at month 12 for which the following should be noted:

- Welsh Government funding includes the £10m operational plan allocation that has been made recurrent;
- The UHBs £31.245m savings target has been reduced in year by £5.150m to £26.095m. The reduction reflects the release of £2.1m from the UHBs investment reserve which cannot be applied as sufficient savings had not been made to support it and a reduction of £3.050m to reflect the anticipated operational underspend on WEQAS.

UNDERLYING POSITION (TABLE A1)

This table sets out the opening and forecast underlying financial position of the UHB.

The opening position is an underlying deficit of £36.3m and the plan was to reduce this to £4.0m by the year end. The achievement of this was very much dependent upon delivering the full year impact of 2019/20 savings schemes. The latest assessment is that the delivery of recurrent savings remains at circa £7.5m less than planned and that this increases the underlying deficit to £11.5m. This is now the opening position included in the 2020/21 IMTP.

RING FENCED ALLOCATIONS (TABLES B, N & O)

The UHB allocated budgets to all ring fenced services in line with allocations in 2019/20

ACTUAL YEAR TO DATE AND FORECAST POSITION (TABLE B AND B1)

Table B confirms the year end surplus of £0.058m and reflects the analysis contained in the annual operating plan in Table A.

Month 12 Cumulative Financial Position

Table B sets out the Statement of Comprehensive Net Expenditure for the UHB. The UHB is reporting a surplus of £0.058m for the year as shown in Table 1.

Income and Expenditure Analysis

Table 2 analyses in month and year end variance between Income, Pay and Non Pay.

Table 2: Summary Financial Position for the period ended 31st March 2020

Income/Pay/Non Pay	In Month			Cumulative Year to Date		
	Budget	Actual	Variance (Fav)/Adv	Budget	Actual	Variance (Fav)/Adv
	£m	£m	£m	£m	£m	£m
Income	(191.493)	(192.725)	(1.232)	(1,505.195)	(1,507.214)	(2.020)
Pay	83.938	83.609	(0.328)	674.157	670.246	(3.911)
Non Pay	107.555	108.853	1.298	831.037	836.911	5.873
Variance to Plan £m	0.000	(0.262)	(0.262)	0.000	(0.058)	(0.058)

The month 12 income variance is detailed in Table 3.

Table 3: Analysis of Income Budgets

Income	In Month			Cumulative Year to Date		
	Budget	Actual	Variance (Fav)/Adv	Budget	Actual	Variance (Fav)/Adv
	£m	£m	£m	£m	£m	£m
Research & Development	(0.941)	(0.993)	(0.052)	(10.178)	(10.489)	(0.311)
Revenue Resource Limit	(146.276)	(146.276)	0.000	(1,023.742)	(1,023.742)	0.000
Accommodation & Catering	(0.208)	(0.174)	0.034	(4.328)	(4.116)	0.212
Education & Training	(3.304)	(3.406)	(0.102)	(39.385)	(39.762)	(0.376)
Injury Cost Recovery Scheme (CRU) Income	(0.180)	(0.217)	(0.037)	(2.165)	(2.582)	(0.417)
NHS Patient Related Income	(29.279)	(29.555)	(0.277)	(324.505)	(325.203)	(0.698)
Non Revenue Resource Limit	(0.572)	(0.572)	0.000	(17.276)	(17.276)	0.000
Other Operating Income	(10.623)	(11.421)	(0.798)	(82.381)	(82.607)	(0.226)
Overseas Patient Income	(0.007)	(0.006)	0.001	(0.089)	(0.165)	(0.077)
Private Patient Income	(0.102)	(0.103)	(0.001)	(1.145)	(1.272)	(0.127)
Total £m	(191.493)	(192.725)	(1.232)	(1,505.195)	(1,507.214)	(2.020)

A surplus of £2.020m is reported against income budgets. The main variances to note are:

- £0.226m favourable cumulative variance against other operating income. The in month surplus arose from the recognition of the part return of funding for the 111 service and the release of an income provision. This has offset a cumulative under recovery of income against targets for: NICU/PICU due to activity; the Radiopharmacy and St Mary's Pharmaceutical Units due to closure and production issues; rental income due to vacant retail spaces including the pharmacy outpatients scheme.
- £0.052m in month surplus on R&D income following the collection of commercial study income. The cumulative surplus has arisen from the collection of both commercial and non commercial grant income.
- A £0.376m cumulative surplus against Education and Training follows the receipt of additional income from HEIW to support training.

- A £0.277m in month surplus on NHS patient related income follows confirmation of the LTA income position with Welsh Health Boards at year end.
- A £0.037m surplus in income in month from the Compensation Recovery Unit which once again stems from a relatively high value of receipted cash and new claims.

Financial performance against pay budgets is set out in Table 4 and this includes UHB pay within primary care.

Table 4: Analysis of Pay Budgets

Pay	In Month			Cumulative Year to Date		
	Budget	Actual	Variance (Fav)/Adv	Budget	Actual	Variance (Fav)/Adv
	£m	£m	£m	£m	£m	£m
Additional clinical services	3.387	3.315	(0.072)	25.906	25.578	(0.328)
Management, admin & clerical	10.082	9.969	(0.114)	79.941	79.124	(0.817)
Medical and Dental	20.280	20.070	(0.210)	170.395	168.873	(1.522)
Nursing (registered)	25.682	25.286	(0.396)	203.837	202.636	(1.201)
Nursing (unregistered)	6.641	7.127	0.486	52.144	56.338	4.194
Other staff groups	12.956	12.803	(0.153)	102.625	100.089	(2.536)
Scientific, prof & technical	4.910	5.041	0.130	39.310	37.609	(1.701)
Total £m	83.938	83.609	(0.328)	674.157	670.246	(3.911)

Total pay budgets improved by a further £0.328m in month to an underspend for the year to date of £3.911m.

The rate of overspend against the nursing budget in month was lower than the average for the previous 11 months of the year.

The in month underspend on medical and dental continues as a result of a number of vacant posts.

The underspend against management, admin and clerical and other staff groups is in part due to vacancy management in support of cost pressures.

Financial performance against non pay budgets is set out in Table 5.

Table 5: Analysis of Non Pay Budgets

Non Pay	Budget	Actual	Variance (Fav)/Adv	Budget	Actual	Variance (Fav)/Adv
	£m	£m	£m	£m	£m	£m
Clinical services & supplies	13.648	12.694	(0.953)	111.963	112.422	0.458
Commissioned Services	14.542	15.734	1.192	173.805	176.017	2.212
Continuing healthcare	4.993	5.458	0.465	64.599	67.551	2.951
Drugs / Prescribing	15.104	15.705	0.601	155.103	159.027	3.923
Establishment expenses	1.497	1.296	(0.200)	13.285	13.538	0.253
General supplies & services	0.823	0.886	0.063	9.005	9.382	0.376
Other non pay	37.044	36.944	(0.100)	95.097	88.817	(6.279)
Premises & fixed plant	3.750	3.590	(0.160)	35.046	37.926	2.880
Primary Care Contractors	16.154	16.546	0.392	173.133	172.232	(0.901)
Total £m	107.555	108.853	1.298	831.037	836.911	5.873

Table 5 highlights an in month overspend of £1.298m and a £5.873m cumulative overspend against non pay budgets.

The key operational pressure areas are:

- An overspend against drug budgets primarily in medicine and primary care which continued in March with a reported in month overspend of £0.601m.
- Premises and fixed plant where key cost drivers are: increased spend on estates contractors to cover vacancies in substantive posts during a workforce modernisation programme; energy costs; and the significant cost of security on the vacant sites at Lansdowne and Whitchurch. Part of the £1.014m of the overspend on estates contractor costs is offset by staff underspends of £0.871m on vacant posts. The cost of providing security is expected to fall in the 2020/21 following the sale of the Lansdowne site.
- High levels of CHC growth as a consequence of increasing numbers particularly in the first half of the year in respect of palliative care, learning difficulties and high cost mental health placements.
- Pressures against commissioned services relate to the recognition of the UHB's contribution to the WHSCC budget and non contractual cost per case activity. The overspend of £2.212m in month 12 follows agreement of the 2019/20 WHSCC contribution and the finalisation of the year end liability for cost per case activity.
- The cumulative overspend against clinical services and supplies is a result of theatre consumables, growth in community beds and dressings, genomics activity and additional spend on wheelchairs at ALAS. The in month underspend has arisen following a review of outstanding liabilities in respect of receipted goods.

- The in month deficit against primary care contractors is primarily due to the recognition of performance of independent contractors against activity based services.

SAVING PLANS (TABLE C, C1 AND C2)

The UHBs £31.245m savings target was been reduced by £5.150m to reflect the release of £2.1m relating to the UHBs remaining investment reserve and a further £3.050m to reflect an operational underspend on WEQAS. The target is now £26.095m

At month 12 the UHB had a fully identified savings programme to deliver against the £26.095m savings target as summarised in Table 6. The identified schemes include income generation schemes and accounting gains which are excluded from Table C.

Table 6: Progress against the 2019/20 Savings Programme at Month 12

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total £m	26.095	26.095	0.000

For the 12 months to the end of March the UHB over achieved its profiled savings target (including income generation schemes & non recurrent accounting gains) in part due to identification of non-recurrent corporate opportunities to cover the shortfall against delegated savings targets.

INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)

The final settlements of all LTAs has been agreed.

INCOME ASSUMPTIONS 2019/20 (TABLE E)

Table E outlines the UHB's 2019/20 resource limit.

Similar to practice in previous years, the UHB month 12 outturn excludes £1.028m of recurrent expenditure which has arisen following a change in the accounting treatment of UHB PFI schemes under International Financial Reporting Standards (IFRS). This accounting treatment has been confirmed with Welsh Government.

RISK MANAGEMENT (TABLE F)

The UHB's provisional year end position is a £0.058m surplus which is subject to External Audit scrutiny and review. At this point in time the UHB does not expect any risks to materially affect the reported year end position

STATEMENT OF FINANCIAL POSITION (TABLE G)

The opening balances at the beginning of April 2019 reflect the closing balances in the 2018/19 Annual Accounts approved by the UHB's Board on 30th May 2019.

The increase in the carrying value of property, plant & equipment since the start of the year is largely due to the fact that the spend on capital projects incurred to date and the upward valuation of Land and Buildings due to indexation outweigh depreciation and impairment charges incurred in the year. The carry value is largely unchanged in month.

The in month decrease in the stock levels largely relates to flood lost ALAC stock (£0.6m) offset in part by increased drug stock held in Pharmacy (£0.3m) due to the Covid-19 pandemic.

Overall trade debtors fell by £30m during March. This largely relates to a reduction in the WRP Debtor (£24m) as a result of court approval for two high value clinical negligence cases in month and the settlement of the WHSCC LTA income for 19/20 circa £7m.

The value of Trade and other payables increased by £43m during March. £10m of this increase relates to capital creditors following the completion of £25.3m capital expenditure in March. Revenue creditors increased by £34m compared to February. This was due to: £7m timing of the contractual pharmacy payment; £2.6m of year end activity settlements with other health boards: the determination of the UHB's contribution due under the risk sharing agreement with WHSCC £1m; a £2.3m increase in the Cardiff Council CHC Pooling arrangements accrual; and the remainder related to a significant increase in the levels of trade creditors in month.

At the date of submission, 1 invoices raised against the UHB by other Welsh NHS bodies had been outstanding for more than 17 weeks. The UHB is pursuing a resolution.

CASHFLOW FORECAST (TABLE H)

The closing cash balance for the year was c£0.7m higher than anticipated as a result of Welsh NHS receipts being higher than forecast. The balance is reasonable for a body of the UHB's size and complexity.

Amounts shown on the sale of assets line in Table I reflect the full value of sale proceeds received in year. The UHB utilised the net book value element of this figure (£2.154m) to support its capital commitments in 2019/20.

The UHB understands the need to ensure that capital funding drawn down is broadly in line with the capital payments to the same date and the capital funding drawn down by the UHB to the end of March is largely in line with the capital payments made to the same date (when taking into account the net book value of assets sold to date).

PUBLIC SECTOR PAYMENT COMPLIANCE (TABLE I)

The UHB's cumulative performance to the end of March was 95.8% which exceeds the statutory 95% target and is better than the cumulative rate achieved in 2018/19.

During the same period, the UHB paid 77.9% of its NHS invoices by number within 30 days which is 0.1% better than the previous month and is also better than the 71.7% achieved for the same period in 2018/19. The largest area of underperformance remains genetics invoices received from English & Scottish NHS bodies. A new system is being implemented in the department, which should lead to improvement going forward.

CAPITAL SCHEMES (TABLES J, K, L)

The UHB successfully remained within its Capital Resource Limit (CRL) in 2019/20. Net capital expenditure was £0.088m (0.15%) below the approved CRL of £58.159m.

Planned expenditure for the year reflects the latest CRL received from Welsh Government dated 14th April 2020.

As a result of current issues with Covid-19, not all schemes have been able to progress as planned leading to a £0.5m overall underspend to forecast on the All Wales Schemes. As discussed and agreed with Welsh Government officers overall expenditure on the discretionary programme is higher than originally forecast allowing the slippage on the Welsh Government Programme to be managed within the 2020/21 discretionary programme.

With regards to the variances shown in Table J attention is drawn to the following:

1. Expenditure against the Neo Natal Scheme was in line with plan.
2. As outlined in the 2018/19 month 12 return, provision for last year's slippage on the Rookwood Replacement, Rookwood Essential Maintenance and the Black and Grey Theatres Schemes was made by the UHB in 2019/20 from discretionary capital funds.
3. The MRI Scanners were underspent due to a covid-19 related delay to installation. This will be managed with the discretionary program in 2020/21.

4. The Replacement Imaging Program was slightly delayed and will be managed with the 2020/21 discretionary programme.
5. Major trauma centre was slightly behind forecast as a result of equipment savings and this will be managed within the 2020/21 discretionary program.
6. Funding for The Well Being Hubs at Maelfa and Penarth was agreed in December at £0.908m and £0.800m respectively. The £0.124m Maelfa underspend partly repays the element spent in 18/19 (£0.111m) over and above the funded level.
7. Expenditure on the CRI chapel was in line with the reduced allocation of c£0.3m.
8. The CRI links building scheme slipped due to the modular build delay and this will be managed through the 20/21 discretionary program.
9. Additional expenditure for the Green Growth Energy Efficiency project was brought forward into 2019/20 allowing provision for slippage on other schemes in 2020/21.
10. All other major schemes were largely in line with forecast.
11. The discretionary program includes expenditure of £440k brought forward from 2020/21. This relates primarily to enabling works for 2020/21 projects, community buildings works and statutory compliance works.

The figures shown in Table L reflect the three anticipated properties where disposals were expected to complete this year. The sale of Lansdowne completed during February and Amy Evans Hospital which sold at auction in February is expected to complete on the 11th of March 2020. The sale of land at Whitchurch Hospital is also included in Table L, however due to the link to the Velindre Business Case for a new Cancer Hospital the timing of this sale remains uncertain. The Neonatal Ventilators were disposed of in February 2020.

AGED WELSH NHS DEBTORS (TABLE M)

At the 31st March, 2 invoice raised by the UHB against other Welsh NHS bodies had been outstanding for more than 17 weeks. Once has since been paid and the UHB is pursuing a resolution in respect of the other one.

GMS & DENTAL (TABLE N & O)

The cumulative position for GMS & Dental is reported at Tables N & O.

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 29th April 2020 meeting of the Finance Committee for information.

CONCLUSION

The UHB has delivered a balanced position in line with the 2019/20 financial plan supporting the approved IMTP. The draft reported financial position for the twelve months to the end of March 2020 is a surplus of £0.058m.

At the beginning of 2019/20 the UHB had a brought forward underlying recurrent deficit of £36.3m. This has now reduced to £11.5m.

This reflects a satisfactory outcome to what has been a very challenging financial year.

.....
MARTIN DRISCOLL
CHIEF EXECUTIVE

24th April 2020

.....
ROBERT CHADWICK
DIRECTOR OF FINANCE

24th April 2020

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

Line 11 should reflect the corresponding amounts included within the latest IMTP submission to WG

Lines 1 - 11 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 - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	-36 261	0	-36 261	-36 261
2	New Cost Pressures - as per 3 year plan (Negative Value)	-51 594		-51 594	-51 594
3	Opening Cost Pressures	-87 855	0	-87 855	-87 855
4	Identified Savings Plan (Positive Value)	23 270	6 809	16 461	21 645
5	Savings / Mitigating Actions Yet To Be Identified (Positive Value)	3 553	2 553	1 000	4 362
6	Welsh Government Funding (Positive Value)	56 610		56 610	56 610
7	Net Income Generated (Positive Value)	1 289	65	1 224	1 272
8	Planned Accountancy Gains (Positive Value)	1 000	1 000	0	0
9	Release of Uncommitted Contingencies & Reserves (Positive Value)				
10	Profit on Disposal of Asset / Weqas operational underspend	2 134	2 134	0	0
11	Opening Financial Plan	1	12 561	-12 560	-3 966
12	Cost Pressures b/fwd from Previous Year - unidentified within 3 year plan (Negative Value)				
13	Opening Plan Savings - Forecast (Underachievement) / Overachievement	-3 372	-177	-3 195	-4 712
14	Additional In Year Identified Savings - Forecast (Positive Value)	3 319	1 994	1 324	2 825
15	Additional In Year Identified Accountancy Gains (Positive Value)	2 807	2 807	0	0
16	Additional Net Income Generated (Positive Value)	-362	16	-378	-411
17	Non Identification of Savings / Mitigating Actions Yet To Be Identified in Opening Plan	-3 553	-2 553	-1 000	-4 362
18	Release of Previously Committed Contingencies & Reserves (Positive Value)	2 100		2 100	2 100
19	Additional In Year Welsh Government Funding (Positive Value)	0			
20	Weqas operational underspend	1 250	1 250		
21	Operational Overspend	-2 320	654	-2 974	-2 974
22		0			
23	Mitigating Actions - Reduction in overspend in delegated budgets and underspends in reserves	1 689	1 689		
24	Welsh Risk Pool	-609	-609		
25	Flood Damage	-891	-891		
26		0			
27		0			
28		0			
29		0			
30		0			
31		0			
32		0			
33		0			
34		0			
35		0			
36		0			
37		0			
38	Forecast Outturn (- Deficit / + Surplus)	58	16 740	-16 683	-11 500

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
18			2 100										2 100
19													0
20				1 000			250						1 250
21	-658	-1 057	-93	-602	-407	-508	-360	-366		1 731			-2 320
22													0
23									874	87	403	325	1 689
24										-1 500	891		-609
25											-891		-891
26													0
27													0
28													0
29													0
30													0
31													0
32													0
33													0
34													0
35													0
36													0
37													0

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

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			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	Assessment		Full In-Year forecast	
			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	CHC and Funded Nursing Care	Budget/Plan	46	46	46	46	46	46	70	94	117	141	165	189	1 050	1 050		1 050	0		
2		Actual/F'cast	46	46	46	46	46	46	70	94	117	141	165	189	1 050	1 050	100,00%	1 050	0	0	1 050
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	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
6		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
7	Medicines Management (Primary & Secondary Care)	Budget/Plan	121	121	127	149	149	149	316	316	316	316	316	415	2 811	2 811		2 173	1 104		
8		Actual/F'cast	121	121	127	149	149	149	436	277	277	277	277	325	2 686	2 686	100,00%	2 632	54	199	2 487
9		Variance	0	0	0	0	0	0	120	(39)	(39)	(39)	(39)	(90)	(125)	(125)	(4,45%)	459	(1 050)		
10	Non Pay	Budget/Plan	381	976	900	1 332	794	878	862	905	905	906	906	1 857	11 602	11 602		11 904	737		
11		Actual/F'cast	305	963	829	1 156	705	1 240	885	1 134	871	904	939	2 017	11 948	11 948	100,00%	11 274	674	6 127	5 821
12		Variance	(76)	(13)	(71)	(176)	(89)	363	23	229	(34)	(2)	33	160	346	346	2,98%	(630)	(63)		
13	Pay	Budget/Plan	403	331	370	875	667	671	693	703	705	705	705	772	7 599	7 599		7 712	708		
14		Actual/F'cast	380	316	433	647	616	633	669	701	681	646	651	951	7 324	7 324	100,00%	7 324	0	2 300	5 024
15		Variance	(23)	(15)	63	(228)	(51)	(38)	(23)	(2)	(24)	(59)	(53)	179	(275)	(275)	(3,62%)	(387)	(708)		
16	Primary Care	Budget/Plan	17	17	17	17	17	17	17	17	17	17	17	17	208	208		208	0		
17		Actual/F'cast	17	17	17	17	17	17	17	17	17	17	17	17	208	208	100,00%	208	0	0	208
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0,00%	0	0		
19	Total	Budget/Plan	968	1 492	1 460	2 419	1 673	1 761	1 958	2 035	2 060	2 084	2 109	3 250	23 270	23 270		23 047	2 549		
20		Actual/F'cast	869	1 463	1 452	2 016	1 534	2 085	2 078	2 222	1 963	1 984	2 050	3 500	23 216	23 216	100,00%	22 488	728	8 626	14 590
21		Variance	(99)	(28)	(8)	(404)	(139)	324	120	187	(97)	(100)	(59)	249	(54)	(54)	(0,23%)	(558)	(1 821)		
22	Variance in month		(10,24%)	(1,91%)	(0,56%)	(16,68%)	(8,33%)	18,43%	6,12%	9,21%	(4,71%)	(4,80%)	(2,79%)	7,67%	(0,23%)						
23	In month achievement against FY forecast		3,74%	6,30%	6,25%	8,68%	6,61%	8,98%	8,95%	9,57%	8,46%	8,55%	8,83%	15,07%							

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	
			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	203	138	142	395	395	395	485	495	497	497	497	497	4 633	4 633		4 415	508		
2		Actual/F'cast	183	121	144	168	362	355	359	379	398	388	389	428	3 674	3 674	100.00%	3 674	0	424	3 250
3		Variance	(20)	(17)	3	(227)	(33)	(40)	(126)	(116)	(99)	(109)	(107)	(69)	(960)	(960)	(20.71%)	(741)	(508)		
4	Variable Pay	Budget/Plan	61	64	66	317	117	121	130	130	130	130	130	130	1 524	1 524		1 324	200		
5		Actual/F'cast	61	63	69	296	93	109	99	115	111	101	112	164	1 392	1 392	100.00%	1 392	0	536	856
6		Variance	(0)	(1)	3	(21)	(24)	(12)	(31)	(14)	(19)	(29)	(17)	33	(132)	(132)	(8.65%)	68	(200)		
7	Locum	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
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	10	10	10	10	10	10	10	10	10	10	10	10	118	118		118	0		
11		Actual/F'cast	10	10	10	10	10	10	10	10	10	10	10	10	118	118	100.00%	118	0	18	100
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	4	4	4	4	4	4	4	4	4	4	4	4	42	42		42	0		
14		Actual/F'cast	4	4	3	3	6	4	4	4	5	1	1	1	38	38	100.00%	38	0	26	12
15		Variance	0	0	(1)	(1)	2	0	0	0	2	(3)	(3)	(3)	(4)	(4)	(9.52%)	(4)	0		
16	Other (Please Specify)	Budget/Plan	126	115	150	150	141	141	65	65	66	65	65	132	1 282	1 282		1 813	0		
17		Actual/F'cast	123	118	207	170	146	156	198	193	158	147	139	349	2 103	2 103	100.00%	2 103	0	1 296	807
18		Variance	(3)	3	57	20	5	14	133	127	92	81	74	217	821	821	64.03%	290	0		
19	Total	Budget/Plan	403	331	370	875	667	671	693	703	705	705	705	772	7 599	7 599		7 712	708		
20		Actual/F'cast	380	316	433	647	616	633	669	701	681	646	651	951	7 324	7 324	100.00%	7 324	0	2 300	5 024
21		Variance	(23)	(15)	63	(228)	(51)	(38)	(23)	(2)	(24)	(59)	(53)	179	(275)	(275)	(3.62%)	(387)	(708)		

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	
			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	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
2	Agency/Locums paid at a premium	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
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'	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
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
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
10	Other (Please Specify)	Budget/Plan	10	10	10	10	10	10	10	10	10	10	10	10	118	118		118	0		
11		Actual/F'cast	10	10	10	10	10	10	10	10	10	10	10	10	118	118	100.00%	118	0	18	100
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0		
13	Total	Budget/Plan	10	10	10	10	10	10	10	10	10	10	10	10	118	118		118	0		
14		Actual/F'cast	10	10	10	10	10	10	10	10	10	10	10	10	118	118	100.00%	118	0	18	100
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0		

Full-Year Effect of Recurring Savings
£'000
1 050
0
4 049
6 597
7 805
208
19 710

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Full-Year Effect of Recurring Savings
£'000
5 324
930
0
100
12
1 440
7 805

Full-Year Effect of Recurring Savings
£'000
0
0
0
100
100

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May 99

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64/70

Case No.	Case Name	Case Type	Case Status	Case Description
Case No. 1	Case Name 1	Case Type 1	Case Status 1	Case Description 1
Case No. 2	Case Name 2	Case Type 2	Case Status 2	Case Description 2
Case No. 3	Case Name 3	Case Type 3	Case Status 3	Case Description 3
Case No. 4	Case Name 4	Case Type 4	Case Status 4	Case Description 4
Case No. 5	Case Name 5	Case Type 5	Case Status 5	Case Description 5
Case No. 6	Case Name 6	Case Type 6	Case Status 6	Case Description 6
Case No. 7	Case Name 7	Case Type 7	Case Status 7	Case Description 7
Case No. 8	Case Name 8	Case Type 8	Case Status 8	Case Description 8
Case No. 9	Case Name 9	Case Type 9	Case Status 9	Case Description 9
Case No. 10	Case Name 10	Case Type 10	Case Status 10	Case Description 10

[illegible]

[illegible]

Gravel & sand (100% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (90% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (80% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (70% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (60% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (50% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (40% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (30% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (20% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (10% sand)	Gravel	Stability	Charged 100% in 20 years
Gravel & sand (0% sand)	Gravel	Stability	Charged 100% in 20 years

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This Table is currently showing 0 errors

Table F - Overview Of Key Risks / Opportunities Affecting Forecast Outturn

		FORECAST YEAR END			
		Worst Case £'000	Likelihood	Best Case £'000	Likelihood
	Current Reported Forecast Outturn	58		58	
	Risks (negative values)				
1	Non delivery of Saving Plans/CIPs				
2	Continuing Healthcare				
3	Prescribing				
4	Pharmacy Contract				
5	WHSSC Performance				
6	Other Contract Performance				
7	GMS Ring Fenced Allocation Underspend Potential Claw back				
8	Dental Ring Fenced Allocation Underspend Potential Claw back				
9	Operational pressures				
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
	Opportunities (positive values)				
23					
24					
25					
26					
27					
28					
29					
30	Total Risks /Opportunities	0		0	
31	Total Amended Forecast	58		58	

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