#### **Public Finance Committee**

Wed 16 February 2022, 14:00 - 15:00

Via Teams

# **Agenda**

#### 14:00 - 14:00 1. Preliminaries

0 min

1.0 Agenda 16 February 2022 Finance Committee.pdf (1 pages)

#### 1.1. Welcome & Introductions

Rhian Thomas

#### 1.2. Apologies for Absence

Rhian Thomas

#### 1.3. Declarations of Interest

Rhian Thomas

#### 1.4. Minutes of the Committee Meeting held on 26th January 2022

Rhian Thomas

🖺 1.4 UNCONFIRMED MINUTES OF THE FINANCE COMMITTEE JANUARY 26 2022.pdf (5 pages)

#### 1.5. Action Log

Rhian Thomas

1.5. Action Log For 16 February 2022 Finance Committee Meeting.pdf (1 pages)

#### 1.6. Chairs Action taken since last meeting

Rhian Thomas

# 0 min

#### 14:00 - 14:00 2. Items for Review and Assurance

#### 2.1. Financial Performance Month 10

Christopher Lewis

2.1 Finance Position Report for Month 10.pdf (22 pages)

#### 2.2. Finance Risk Register 2021/22

Hywel Pullen

- 2.2a Finance Risk Register 2021-22 January 2022.pdf (2 pages)
- 2.2b Finance Risk Register 2021-22 January 2022.pdf (5 pages)

Nicola Foreman 2.3a Covering report for Terms of Reference - Finance Committee.pdf (2 pages) 2.3b Finance Committee TOR 2022v1.pdf (6 pages)

#### 2.4. Finance Committee - Annual Work Plan 2022//23

Nicola Foreman

- 2.4a Covering report work plan 2022.23.pdf (2 pages)
- 2.4b Finance Committee Work Plan 2022.23.pdf (1 pages)

#### 2.5. Finance Committee – Annual Report 2021/22

Nicola Foreman

- 2.5a FC Annual Report covering report.pdf (2 pages)
- 2.5b FC Draft Annual Report.pdf (4 pages)

# 14:00 - 14:00 3. Items for Noting and Information

#### 3.1. Month 10 Financial Monitoring Returns

- 3.1b CV Financial Monitoring Returns 2021-22 Month 10 (2).pdf (13 pages)
- 3.1a 2021\_22 MMR Template Cardiff & Vale UHB Month 10.pdf (10 pages)

# 14:00 - 14:00 $_{0 \text{ min}}$ 4. Items to bring to the attention of the Board

Rhian Thomas

## 14:00 - 14:00 5. Date and time of next Meeting

Wednesday 23rd March 2022 at 2.00pm, Virtual meeting via Teams



#### AGENDA FINANCE COMMITTEE 16<sup>th</sup> February 2022 at 2.00pm Virtual Meeting via Teams

1.	Preliminaries	
1.1	Welcome & Introductions	Rhian Thomas
1.2	Apologies for Absence	Rhian Thomas
1.3	Declarations of Interest	Rhian Thomas
1.4	Minutes of the Committee Meeting held on 26th January 2022	Rhian Thomas
1.5	Action Log	Rhian Thomas
1.6	Chairs Action taken since last meeting	Rhian Thomas
2.	Items for Review and Assurance	
2.1	Financial Performance Month 10	Chris Lewis
2.2	Finance Risk Register 2021/22	Hywel Pullen
2.3	Finance Committee – Terms of Reference	Nicola Foreman
2.4	Finance Committee – Annual Work Plan 2022//23	Nicola Foreman
2.5	Finance Committee – Annual Report 2021/22	Nicola Foreman
3	Items for Noting and Information	
3.1	Month 10 Financial Monitoring Returns	
4.	Items to bring to the attention of the Board	Rhian Thomas
5.	Date and time of next Meeting	
	Wednesday 23 <sup>rd</sup> March 2022 at 2.00pm, <b>Virtual Meeting via Teams</b>	



#### **UNCONFIRMED MINUTES OF THE MEETING OF THE FINANCE COMMITTEE HELD ON 26th JANUARY 2021 VIRTUAL MEETING via TEAMS**

#### Present:

Dr Rhian Thomas	RT	Chair, Independent Member – Capital and Estates
John Union	JU	Independent Member – Finance
Charles Janczewski	CJ	Board Chair
Andrew Gough	AG	Assistant Director of Finance
Caroline Bird	СВ	Acting Chief Operating Officer
Catherine Phillips	CP	Executive Director of Finance
Chris Lewis	CL	Deputy Director of Finance
Nicola Foreman	NF	Director of Corporate Governance
Rachel Gidman	RG	Executive Director of People and Culture
Ruth Walker	RW	Executive Nurse Director
In Attendance:		

Hywel Pullen HP **Assistant Director of Finance** 

#### Secretariat:

Paul Emmerson PΕ Senior Finance Manager

#### **Apologies:**

Independent Member – Information Communication & **David Edwards** DE Technology

Executive Director of Strategic Planning AΗ

Abigail Harris Stuart Walker Interim Chief Executive SW

FC 22/01/013	WELCOME AND INTRODUCTIONS	ACTION
	The Chair welcomed everyone to the meeting.	
FC 22/01/014	APOLOGIES FOR ABSENCE	
	Apologies for absence were noted.	
FC 22/01/015	DECLARATIONS OF INTEREST	
, St.	The Chair invited members to declare any interests in proceedings on the Agenda. None were declared.	

FC 22/01/016	MINUTES OF THE COMMITTEE MEETING HELD ON 5th JANUARY 2022	
22/01/016	The minutes of the meeting held on 5 <sup>th</sup> January 2022 were reviewed and confirmed to be an accurate record.	
	Resolved – that:	
	The minutes of the meeting held on 5 <sup>th</sup> January 2022 were approved by the Committee as an accurate record.	
FC 22/01/017	ACTION LOG FOLLOWING THE LAST MEETING	
22/01/011	<b>22/01/007 - Reductions in Planned Expenditure arising from impact of COVID 19 -</b> Additional detail on the plans to use the funding released by the Reductions in Planned Expenditure would be relayed to Finance Committee members. Detail was relayed to Finance Committee members w/c January 17 <sup>th</sup> January 2022.	
	Action complete.	
	22/01/009 - Bring forward, by a week, the Finance Committee meetings planned for February and March 2022 – Meetings re-scheduled.	
	Action complete.	
	Resolved – that:	
	The Finance Committee <b>received</b> the Action Log.	
FC	CHAIRS ACTION SINCE THE LAST MEETING	
22/01/018	There had been no Chairs action taken since the last meeting.	
FC	FINANCIAL PERFORMANCE MONTH 9	
22/01/019	The Deputy Director of Finance summarised the key points within the Month 9 Finance Report.	
	At month 9, the UHB has reported an underspend of £0.202m against its plan, which was a reduction of £0.103m on the surplus reported at month 8.	
	The full year gross COVID forecast had increased by circa £1.5m in month, primarily relating to additional funding being made available from the Health and Social Care Winter Plan and an agreed uplift in respect to Deprivation of Liberty Safeguards (DOLS).	
OSMAN, POR	Key issues were outlined as follows:	
,	A further £4.5m recurrent saving schemes needed to be identified if the UHB was to maintain its underlying deficit and it was noted that there	

- had been little progress against the recurrent savings target over the last few months
- The other key financial risk facing the UHB is delivering a break even position, including the full utilisation if resources available. This includes the full utilisation of COVID response and recovery plan funding as well as reductions in planned expenditure.

The shorfall against the recurrent savings target meant that 2 of the measures on the Finance Dashborad, namely delivery of the recurrent savings target and maintenance of the underlying deficit remained rated red. This was a greater risk to the position in 2022/23 rather than the current year.

The UHB continued to forecast a breakeven position at year end in line with the plan submitted to Welsh Government. The performance against income, pay and non pay was outlined in the report and reference was made to the in month slowdown in pay underspend.

In reply to a query from the Finance Committee Chair (RT), it was confirmed that the improvement in NHS patient related income followed the successful conclusion of negotiations with a neighbouring Health Board for the provision of vascular services.

Forecast Covid Expenditure expenditure was circa £119 million and this was supplement by a further £21 million in respect of the the non delivery of savings during the pandemic. The majoity of COVID funding was now finalised with just the funding for CAV24/7 and extended flu vaccination, still to be confirmed.

The reductions in planned expenditure due to Covid 19 were now forecast to be £7.1m and a report on the plans to spend the forecast reductions in planned expenditure had been shared with Finance Committee members. The UHB management Executive would continue to monitor and flex plans to utilise this resource as the UHB moved towards the year end.

The UHB expected to deliver the majority of £16m savings target in year, however, there was still a shortfall of £4.5m against the recurrent element of the target and this in turn would feed into the underlying defict featuring in the 2022/23 plan. In this context, the UHB Chair (CJ) expressed concern that this would have an ongoing impact and stressed the importance of continuing to encourage Clinical Boards to identify savings. In response, the Acting Chief Operating Officer indicated that further progress in closing the gap in recurrent savings before year end would be a challenge due to the ongoing impact of the pandemic, the focus on recovery and the emergence from the fourth wave. In addition, it was acknowledged that Clinical Boards would also be focussing on identifying savings schemes for 2022/23.



Moving on to the capital expenditure programme the Committee was advised that the UHB had expended 22.6% of its approved Capital Resource Limit at the end of December. The relatively low percentage reflected the large number and value of schemes approved by Welsh Government since Month 6. The UHB had plans in place to fully utilise its capital allocation with the majority of expenditure being planned for the later part of the year. In relation to this, the Committee was advised that the Capital Management Group would

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continue to pro-actively manage risks so that the UHB could deliver a broadly balanced position against its capital allocation at year end. However, there was an inherent risk of potential supplier delays and works slippage and this would be recognised in the risks highlighted in future reports to the Committee.

The Executive Director of Finance added that the additional information on capital expenditure included within the Finance Reports over the last 2 months was in recognition of the widening of the Finance Committee's remit to include the monitoring of the capital programme. In addition, work was progressing so that the Finance Committee could be presented with concise papers to enable it to provide assurance to the UHB Board in respect of business cases over £0.500m prior to a decision on their approval.

Finally, the Committee was informed that the key risks were; the further progress required to find another £4.4m recurrent schemes in order to maintain the underlying position; the management of risks to achieve a break even position, including the full utilization of resources that have been allocated to the UHB; and the management of capital so that a broadly balanced position against the capital resource limit was reached at year end.

#### Resolved - that:

The Finance Committee **noted** the reported underspend of £0.202m at month 9;

The Finance Committee **noted** the gross month 9 financial impact of COVID 19 which was assessed at £73.480m and that this was matched with anticipated income;

The Finance Committee **noted** the forecast breakeven which is consistent with the financial plan submitted to Welsh Government on 30th June and assumes additional funding of £140.310m to manage the impact of COVID 19 in 2021/22, including confirmed funding of £21.313m in respect of the 2020/21 recurrent savings shortfall;

The Finance Committee **noted** that COVID 19 reductions in planned care expenditure can be used to mitigate financial risks in the plan and support system resilience;

The Finance Committee **noted** that Welsh Government had confirmed the COVID response funding based on the month 5 forecast and that the UHB will need to manage risks within the confirmed funding.

The Finance Committee **noted** that Welsh Government had confirmed funding for COVID recovery schemes and that the UHB needed to manage within this allocation.

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The Finance Committee noted that Welsh Government had confirmed funding for National COVID programmes based on month 8 forecasts and that the UHB needed to manage within this allocation;

The Finance Committee **noted** that following a request from Welsh Government that the UHB has identified the additional working cash required in 2021/22 to satisfy the cash outlay that is expected to be incurred in respect of resource only funding adjustments confirmed by Welsh Government in previous years. The Finance Committee **noted** the 2021/22 brought forward Underlying Deficit was £25.3m and that the forecast carry forward of £25.3m into 2022/23 is dependent upon delivery of the £12m recurrent savings target which required the identification of a further £4.4m savings schemes. FC **FINANCE RISK REGISTER** 22/01/020 The Assistant Director of Finance presented the 2021/22 Finance Risk Register to the Committee. The following risks identified on the 2021/22 Risk Register remained categorized as extreme risks (Red): Maintaining the underlying deficit of £25.3m on line with the draft annual plan; Delivery of the recurrent element of the CIP (£12.0m). The Committee was advised that the COVID response and recovery funding was now confirmed and that both response and recovery costs needed to be managed within funding available. In addition, the Committee was advised that FIN05/21 - Commissioning Risks had been assessed as low risk with a green risk rating as a result of block contract arrangements remaining in place for the remainder of 2021/22. The Finance Committee was asked if the risk could now be removed from the Register. Resolved - that: The Finance Committee noted the risks highlighted within the 2021/22 risk register. The Finance Committee **agreed** the removal of risk Fin05/21 highlighted within the 2021/22 risk register FC MONTH 9 FINANCIAL MONITORING RETURNS 21/01/021 These were noted for information. FC ITEMS TO BRING TO THE ATTENTION OF THE BOARD 21/01/022 There were no items to being to the attention of the Board. DATE OF THE NEXT MEETING OF THE COMMITTEE FC 21/01/023

Wednesday 16th February 2022 2.00pm; Virtual Meeting via Teams

# FINANCE COMMITTEE – PUBLIC MEETING ACTION LOG

MINUTE	DATE	SUBJECT	AGREED ACTION	ACTIONED TO	STATUS
			No Outstanding Actions		

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Report Title:	Finance Report for the Period Ended 31st January 2022								
Meeting:	Finance Committee  Meeting Date:  16 <sup>th</sup> Febuary 2022								
Status:	For Discussion x For Assurance x Approval For Information								
Lead Executive:	Executive Director of Finance								
Report Author (Title):	Deputy Director of Finance								

#### Background and current situation:

The Health Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2021 which focused on delivering in-year financial stability and maintaining the current level of underlying deficit. The draft plan included a planned deficit of £21.3m in 2021/22 and if delivered ensured that the underlying position is stabilised and does not deteriorate. Following submission of the draft plan, Welsh Government issued updated planning guidance and asked the UHB to assume non recurrent COVID funding to cover the initial planning deficit of £21.3m caused by COVID impacting on the delivery of 2020/21 savings plans. The UHB is now planning for a break-even year end position on this basis and the finalised financial plan was submitted to Welsh Government on the 30<sup>th</sup> June 2021.

A summary of the core financial plan submitted is provided in Table 1.

Table 1: 2021/22 Core Draft plan

	2021/22	2022/23
	Plan	Plan
	£m	£m
Prior Year Plan	(4.0)	(21.3)
Adjustment for non recurrent items in previous year (note 1)	(21.3)	(4.0)
b/f underlying deficit	(25.3)	(25.3)
Net Allocation Uplift (including LTA inflation) (note 2)	19.4	
Draft Cost Pressures Assessment (note 3)	(27.4)	
Investments	(4.0)	
Recurrent Cost Improvement Plans 1.5% (note 4)	12.0	
Non Recurrent Cost Improvement Plans 0.5% (note 5)	4.0	
Planned Surplus/(Deficit) 2021/22	(21.3)	
Non Recurrent COVID Funding to cover slippage in 2020/21 Recurrent saving schemes	21.3	
Updated Core Draft Financial Plan 2021/22 £m	0.0	

In addition to the core financial plan of the Health Board identified by Table 1, the UHB will also incur additional COVID 19 costs in respect of response and recovery. These costs are





considered to be in addition to the core financial plan and the UHB has confirmed and anticipated additional funding to fully cover these costs.

At month 10, the UHB is reporting an underspend of £0.406m against this plan. During the 10 months to the end of January the UHB incurred gross expenditure of £83.823m relating to the management of COVID 19, which is assumed to be offset by Welsh Government COVID 19 funding leaving an operating surplus of £0.406m.

The full year gross COVID forecast moved marginally by £0.023m in the month from £118.997m at month 9 to £119.020m at month 10, as the result of additional funding being made available for Covid 19 – Support at HMP Cardiff.

The UHB continues to progress its plans and is forecasting a breakeven year end position.

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

The UHB continues to forecast a break even position based upon the confirmed resource planning assumptions.

The reported financial position for the 10 months to the end of January is an operational surplus of £0.406m, which is an increase of £0.204m on the surplus reported at month 9.

The full year gross COVID forecast moved in the month from £118.997m at month 9 to £119.020m in month 10, due to funding being made available for offender health prison support.

Delivery of the core financial plan includes a 2% (£16.0m) savings requirement. At month 10 £15.252m Green and Amber savings have been identified against the target and therefore, there is confidence that this will be met. Further progress however will need to be made on recurrent schemes with a further £4.492m savings to be identified in order to maintain the underlying financial position. This is a key financial risk that needs to be managed.

There is a forecast surplus of £7.4m on reductions in planned expenditure for which expenditure plans are well developed and are being implemented.

The key risk faced is the full utilisation of resources made available to support services during the pandemic where workforce is the key constraint.

#### **Assessment and Risk Implications**

The Finance Dashboard outlined in Table 2 reports actual financial performance against key financial performance measures.





Table 2: Finance Dashboard @ January 2022

	STATUS REPORT						
Measure	January 2021	Rating Latest Trend		Target	Time Period		
Deliver 2021/22 Draft Financial Plan	Forecast year-end breakeven at month 10. £0.406m operational surplus at month 10.	G	6	Deliver 2021/22 Planned Breakeven	M10 2021-22		
Remain within capital resource limits.	Expenditure at the end of January was £15.794m against a plan of £24.750m.	G	<u> </u>	Approved planned expenditure £59.239m	M10 2021-22		
Maintenance (no deterioration) of Underlying deficit	£25.3m assessed underlying deficit (ULD) position b/f to month 1. Forecast Year End ULD £25.3m	R	<u>o</u>	2021/22 plan to ensure no deterioration in £25.3m underlying deficit	M10 2021-22		
Delivery of recurrent £12.000m 1.5% target	£7.576m forecast at month 10.	R	9	£12.000m	M10 2021-22		
Delivery of £4m non recurrent target	£7.676m identified at month 10.	G	9	£4.000m	M10 2021-22		
Creditor payments compliance 30 day Non NHS	Cumulative 93.5% at the end of January.	Α	<b>+</b>	95% of invoices paid within 30 days	M10 2021-22		
Remain within Cash Limit	The UHB is expecting a positive cash balance at the end of 2021/22 in line with the forecast breakeven.	G	<u> </u>	To remain within Cash Limit	M10 2021-22		
Maintain Positive Cash Balance	Cash balance = £4.062m	G	<u></u>	To Maintain Positive Cash Balance	End of January 2022		

#### **Month 10 Cumulative Financial Position**

The Welsh Government monthly financial monitoring returns continue to capture and monitor costs due to COVID 19 that are over and above LHB core plans. The financial position reported to Welsh Government for month 10 is a surplus of £0.406m and this is summarised in Table 3.

Table 3: Month 10 Financial Position 2021/22

	Cumlative	Forecast
	Month 10	Year-End Position
	£m	£m
COVID 19 Additional Expenditure	83.823	119.020
Welsh Government COVID funding received / assumed	(83.823)	(119.020)
Gross COVID 19 Forecast Position (Surplus) / Deficit £m	0.000	0.000
COVID FUNDING for Deficit due to non delivery of 2020/21 recurrent Sav	(17.750)	(21.313)
Operational position (Surplus) / Deficit	17.344	21.313
Financial Position £m (Surplus) / Deficit £m	(0.406)	0.000

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The month 10 surplus of £0.406m reflects the operational performance of the UHB with all COVID costs funded.

Welsh Government has now agreed confirmed and anticipated COVID 19 funding. The UHB is forecasting a break even position by year end and all risks will need to be managed to deliver this. The forecast is based on the premise that COVID 19 allocations will be sufficient to meet COVID costs and that reductions arising in planned expenditure will be used to offset non COVID operational pressures and support system resilience.

The UHB is focusing on plans to full utilise resources made available to support services during the pandemic, recognizing that workforce is the key constraint.

The additional COVID 19 expenditure in the year to month 10 was £83.823m with full year forecast costs totalling £119.020m. The full year forecast assumes a significant step up in expenditure in the final 2 months of the year, primarily as a result of the increase in expenditure expected as recovery plans progress and reductions arising from planned expenditure reductions are applied.

The additional COVID 19 expenditure is matched by the additional Welsh Government funding outlined in the table 4 below:

Table 4: Welsh Government COVID 19 Funding assumed at month 2021/22

	Month 10
	£m
COVID 19 Testing	(2.364)
COVID 19 Tracing	(10.832)
COVID 19 Vaccination includind COVID Vaccine Allergy SLA	(11.014)
Extended Flu vaccination	(0.750)
Field Hospital / Surge - Recovery of Over Accrual	0.803
Cleaning Standards	(0.685)
PPE	(4.138)
Continuing Care and Funded Nursing Care	(2.233)
Urgent and Emergency Care	(1.659)
COVID 19 Local Response	(38.736)
COVID 19 Recovery	(12.622)
COVID 19: Adferiad Programme - Long Covid Recovery	(0.579)
Covid 19: Pay Increase	(0.620)
COVID 19: Recovery Of NHS Bonus Accrual	1.755
COVID 19: Same Day Emergency Care	(0.150)
Sub Total COVID funding confirmed/assumed £m	(83.823)
NR Funding for Non Delivery of 2020/21 Recurrent Savings	(17.750)
Total OVID funding confirmed/assumed £m	(101.573)





The risk in the financial plan has reduced considerably following confirmation of COVID 19 allocations. Any resultant risk will however, now need to be managed within confirmed allocations.

The UHB has a small operational surplus of £0.406m at Month 10 and Table 5 analyses the reported position between income, pay and non pay.

Table 5: Summary Financial Position for the period ended 31st January 2022

Income/Pay/Non Pay	Budget	Actual	Gross Expenditure Due To COVID 19	Reductions in Planned Expenditure Due To COVID 19	Net Expenditure Due To COVID 19	Welsh Government COVID 19 Funding Assumed	Welsh Government COVID 19 Funding 2020/21 Savings Shortfall	Operational Variance (Fav)/Adv	Total Variance
In Month	£m	£m	£m	£m	£m	£m	£m	£m	£m
Income	(124.261)	(134.487)	0.538		0.538	(0.538)		(0.421)	(0.421)
Pav	63.256		5.750			(5.750)		(1.408)	(1.408)
Non Pay	74.539	80.337	4.055		3.628	(4.055)		1.625	1.625
Sub Total £m	13.532	13.330		(0.545)	9.798	(10.343)	0.000	(0.204)	(0.204)
COVID funding due to non delivery of 2020/21 recurrent Savings	0.000		10.343	(0.343)	5.756	(10.343)		0.000	0.000
Variance to Plan £m	13.532		10.343	(0.545)	9.798	(12.118)		(0.204)	(0.204)
	15.552	15.550	10.545	(0.545)	9.798	(12.116)	1.775	(0.204)	(0.204)
Cumulative	(200,000)	(070 000)				(0.00=)		(4 = 00)	(1.500)
Income	(792.280)	(873.606)	3.997		3.997	(3.997)		(1.500)	(1.500)
Pay	601.077	630.662	39.873		38.191	(39.873)		(8.606)	(8.606)
Non Pay	696.389	747.724	39.953		35.109	(39.953)		9.700	9.700
Sub Total £m	505.186		83.823	(6.526)	77.297	(83.823)		(0.406)	(0.406)
COVID funding due to non delivery of 2020/21 recurrent Savings	0.000					(17.750)	17.750	0.000	0.000
Variance to Plan £m	505.186	504.781	83.823	(6.526)	77.297	(101.573)	17.750	(0.406)	(0.406)

#### Income

The year to date and in month financial position for income is shown in Table 6:

Table 6: Income Variance @ January 2022

Table 6. meeme variance & canaary		Gross	Reductions	Net	Welsh	Operational	Total
		Expenditure	in Planned	Expenditure	Government	Variance	Variance
		Due To	Expenditure	Due To	COVID 19	(Fav)/Adv	
		COVID 19	Due To	COVID 19	Funding		
			COVID 19		Assumed		
In Month		£m	£m	£m	£m	£m	£m
Revenue Resource Limit (RRL)		0.000	0.000	0.000	0.000	0.000	0.000
RRL Welsh Govt. COVID 19 Funding		0.000	0.000	0.000	0.000	0.000	0.000
Welsh Government Income (Non RRL)		0.000	0.000	0.000	0.000	0.000	0.000
Accommodation & Catering		0.083	0.000	0.083	(0.083)	(0.004)	(0.004)
Education & Training		0.000	0.000	0.000	0.000	0.003	0.003
Injury Cost Recovery Scheme (CRU) Income		0.000	0.000	0.000	0.000	0.039	0.039
NHS Patient Related Income		0.099	0.000	0.099	(0.099)	(0.295)	(0.295)
Other Operating Income		0.274	0.000	0.274	(0.274)	(0.167)	(0.167)
Overseas Patient Income		0.004	0.000	0.004	(0.004)	(0.001)	(0.001)
Private Patient Income		0.079	0.000	0.079	(0.079)	0.016	0.016
Research & Development		0.000	0.000	0.000	0.000	(0.012)	(0.012)
Variance to Plan £m		0.538	0.000	0.538	(0.538)	(0.421)	(0.421)
Cumulative							
Revenue Resource Limit (RRL)		0.000	0.000	0.000	0.000	0.000	0.000
RRL Welsh Govt. COVID 19 Funding		0.000	0.000	0.000	0.000	0.000	0.000
Welsh Government Income (Non RRL)		0.000	0.000	0.000	0.000	0.000	0.000
Accommodation & Catering		0.660	0.000	0.660	(0.660)	(0.065)	(0.065)
Education & Training		0.000	0.000	0.000	0.000	(0.030)	(0.030)
Injury Cost Recovery Scheme (CRU) Income		0.000	0.000	0.000	0.000	0.055	0.055
NHS Patient Related Income		(0.042)	0.000	(0.042)	0.042	(1.628)	(1.628)
Other Operating Income		2.841	0.000	2.841	(2.841)	0.109	0.109
Overseas Patient Income		0.033	0.000	0.033	(0.033)	(0.028)	(0.028)
Private Patient Income		0.504	0.000	0.504	(0.504)	0.055	0.055
Research & Development		0.000	0.000	0.000	0.000	0.031	0.031
Variance to Plan £m	1	3.997	0.000	3.997	(3.997)	(1.500)	(1.500)





The income position at month 10 is an operational underspend of £1.500m. The additional gross COVID 19 cost of £3.997m is matched by £3.997m of COVID 19 funding.

The key COVID 19 costs related to income reductions have continued in month and cumulative income losses are as follows:

- £0.660m shortfall on accommodation and catering income as a result of a reduction in restaurant services;
- £2.841m deficit against Other Operating Income. The majority of the deficit (£2.118m) is a result of reduced General Dental Services activity leading to a loss of Dental Patient Charges income;
- £0.504m adverse variance against private patient income following the re-planning of non COVID activity.

The in month operational surplus reported against NHS patient related income and other operating income is a result of performance against diagnostic and vascular surgery income targets.

#### Pay

The year to date and in month financial position for pay is shown in Table 7.

Table 7: Analysis of pay expenditure by staff group @ January 2022

Table 1. Alialysis of pay expellulture	υy	, Stall Git	յսբ <u>ա</u> յն	allualy Z	UZZ		
Pay		Gross	Reductions	Net	Welsh	Operational	Total
		Expenditure	in Planned	Expenditure	Government	Variance	Variance
		Due To	Expenditure	Due To	COVID 19	(Fav)/Adv	
		COVID 19	Due To	COVID 19	Funding		
			COVID 19		Assumed		
In Month		£m	£m	£m	£m	£m	£m
Medical and Dental		0.998	0.000	0.998	(0.998)	0.399	0.399
Nursing (registered)		1.542	(0.118)	1.424	(1.542)	(0.879)	(0.879)
Nursing (unregistered)		0.933	0.000	0.933	(0.933)	0.658	0.658
Scientific, prof & technical		0.222	0.000	0.222	(0.222)	(0.255)	(0.255)
Additional clinical services		0.148	0.000	0.148	(0.148)	(0.287)	(0.287)
Management, admin & clerical		1.373	0.000	1.373	(1.373)	(0.571)	(0.571)
Other staff groups		0.534	0.000	0.534	(0.534)	(0.475)	(0.475)
Total £m		5.750	(0.118)	5.632	(5.750)	(1.408)	(1.408)
Cumulative							
Medical and Dental		7.719	0.000	7.719	(7.719)	1.574	1.574
Nursing (registered)		13.322	(1.682)	11.640	(13.322)	(4.364)	(4.364)
Nursing (unregistered)		7.274	0.000	7.274	(7.274)	2.999	2.999
Scientific, prof & technical		1.323	0.000	1.323	(1.323)	(2.517)	(2.517)
Additional clinical services		1.147	0.000	1.147	(1.147)	(1.693)	(1.693)
Management, admin & clerical		5.653	0.000	5.653	(5.653)	(1.842)	(1.842)
Other staff groups		3.435	0.000	3.435	(3.435)	(2.764)	(2.764)
Total £m		39.873	(1.682)	38.191	(39.873)	(8.606)	(8.606)

The pay position at month 10 is an operational underspend of £8.606m. The additional gross COVID 19 expenditure of £39.873m is matched by £39.873m of COVID 19 funding.

Significant COVID 19 pay costs have been incurred for medical and nursing staff especially in the Medicine Clinical Board where there are cumulative additional costs of £12.702m and in the PCIC Clinical Board where additional costs of £10.835m are reported across all staff groups.





Additional COVID 19 pay costs have also been incurred across all other Clinical Boards bar Genomics. Some of these costs are offset by nursing staff savings in the Surgical Clinical Board.

The in month operational surplus of £1.408m reported against pay is a step up in the trend reported in the previous months of the year. This is principally due to a staff vacancies in Executive Director, Specialist services, CD&T and PCIC budgets and non recurrent opportunities identified in the Children and Women's Clinical Board.

Operational pay remains balanced or in surplus in all Clinical Boards except the Medicine Clinical Board where there is an operational overspend of £2.881m primarily as a result of nursing pressures.

#### **Non Pay**

The year to date and in month financial position for non pay is shown in Table 8.

Table 8: Non Pay Variance @ January 2022

Table 8: Non Pay Variance @ January 2	2022					
Non Pay	Gross	Reductions	Net	Welsh	Operational	Total
	Expenditure	in Planned	Expenditure	Government	Variance	Variance
	Due To	Expenditure	Due To	COVID 19	(Fav)/Adv	
	COVID 19	Due To	COVID 19	Funding		
		COVID 19		Assumed		
In Month	£m	£m	£m	£m	£m	£m
Drugs / Prescribing	0.144	0.000	0.144	(0.144)	(0.255)	(0.255)
Clinical services & supplies	0.515	(0.358)	0.157	(0.515)	0.875	0.875
General supplies & services	0.463	0.000	0.463	(0.463)	0.306	0.306
Establishment expenses	0.060	0.000	0.060	(0.060)	0.065	0.065
Premises & fixed plant	0.599	0.000	0.599	(0.599)	0.325	0.325
Continuing healthcare	0.127	0.000	0.127	(0.127)	0.172	0.172
Commissioned Services	0.075	(0.067)	0.008	(0.075)	(0.127)	(0.127)
Primary Care Contractors	(0.027)	(0.040)	(0.067)	0.027	0.003	0.003
Other non pay	2.098	0.038	2.136	(2.098)	0.262	0.262
Total £m	4.055	(0.427)	3.628	(4.055)	1.625	1.625
Cumulative						
Drugs / Prescribing	2.475	0.000	2.475	(2.475)	0.653	0.653
Clinical services & supplies	3.411	(2.651)	0.760	(3.411)	2.587	2.587
General supplies & services	4.138	0.000	4.138	(4.138)	2.252	2.252
Establishment expenses	0.494	0.000	0.494	(0.494)	0.278	0.278
Premises & fixed plant	3.654	0.000	3.654	(3.654)	2.939	2.939
Continuing healthcare	2.233	0.000	2.233	(2.233)	1.727	1.727
Commissioned Services	1.393	(0.792)	0.601	(1.393)	(1.786)	(1.786)
Primary Care Contractors	2.015	(0.823)	1.192	(2.015)	(1.693)	(1.693)
Other non pay	20.140	(0.578)	19.562	(20.140)	2.743	2.743
Total £m	39.953	(4.844)	35.109	(39.953)	9.700	9.700

There is an operational overspend of £9.700m on non pay budgets. The additional Gross COVID 19 expenditure of £39.953m is matched by £39.953m of COVID 19 funding.

The key COVID 19 costs related to non pay are as follows:

♦ £4.138m expenditure on general supplies and services primarily relating to PPE;





- £3.654m expenditure on Premises and Fixed Plant including £2.4m in relation to the mass vaccination centres, £0.971m in capital and estates and £0.217m relating to energy, utilities and rates at the Lakeside Surge Hospital.
- £20.140m on other non pay primarily due to the Local Authority TTP Team and healthcare activity commissioned from the Independent sector.

A reduction in planned expenditure of £4.844m is reported against non pay costs mainly arising from reduced levels of consumables associated with elective activity and adjustments to dental contracts.

The main issues driving the £9.700m operational overspend against non pay were as follows:

- £1.727m overspend against Continuing Healthcare as a result of pressures in the Mental Health Clinical Board where there is an operational overspend of £1.680m against continuing healthcare budgets;
- £2.939m adverse variance against premises and fixed plant where overspends are reported across all Clinical Boards. £1.024m of the overspend relates to Capital Estates where contractor costs which are offset by a corresponding pay underspend are included.
- £2.587m adverse variance against clinical services and supplies where overspends are reported in the PCIC, Medicine, Surgery and Specialist Clinical Boards.

#### **Gross Expenditure Due to COVID 19**

Forecast gross COVID 19 expenditure is £119.020m and is summarised in table 9:



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GIG CYMRU NHS WALES Bwrdd lechyd Prifysgol Caerdydd a'r Fro Cardiff and Vale University Health Board

Table 9: Summary of Forecast COVID 19 Gross Expenditure		
	Month 10	Forecast
		Year-End
		Position
	£m	£m
COVID 19 Testing	2.364	2.973
COVID 19 Tracing	10.832	12.992
COVID 19 Vaccination	11.014	12.715
Extended Flu vaccination	0.750	1.129
Field Hospital / Surge - Recovery of Over Accrual	(0.803)	(0.803)
Cleaning Standards	0.685	0.835
PPE	4.138	5.078
Continuing Care and Funded Nursing Care	2.233	2.350
Urgent and Emergency Care	1.659	1.997
COVID 19 Local Response	38.736	50.611
COVID 19 Recovery	12.622	25.196
COVID 19: Adferiad Programme - Long Covid Recovery	0.579	0.761
COVID 19: Additional Funding Allocation For PACU	0.000	0.528
COVID 19: Community Health Checks for Chronic Conditions	0.000	0.133
Covid 19: Pay Increase	0.620	0.826
Covid 19: Recovery Funding National schemes	0.000	0.747
COVID 19: Recovery Of NHS Bonus Accrual	(1.755)	(1.759)
COVID 19: Health Checks For People With a Learning Disability	0.000	0.085
COVID 19: Same Day Emergency Care	0.150	0.808
COVID 19: Cluster Funding	0.000	0.266
COVID 19: Health and Social Care Winter Plan	0.000	1.304
COVID 19: Agreed WG Uplift DOLS	0.000	0.126
COVID 19: Offender Health Prison Support - HMP Cardiff	0.000	0.023
COVID 19: Planned Care Recovery Revenue SOS/PIFU	0.000	0.099
Gross Expenditure Due To COVID 19 £m	83.823	119.020

It should be noted that the COVID response forecast is changeable being linked to the national agreed programmes (TTP, Mass Vaccinations, PPE) and workforce availability.

#### **Forecast COVID 19 Funding**

The forecast funding for COVID 19 is £140.333m to match the forecast gross costs and includes £21.313m in support of the planning deficit identified in the initial draft plan as outlined below in Table 10.





Table 10: Summary of Forecast COVID 19 Funding		
	Month 10	Forecast
		Year-End
		Position
	£m	£m
COVID 19 Testing	(2.364)	(3.159)
COVID 19 Tracing	(10.832)	(13.158)
COVID 19 Vaccination includind COVID Vaccine Allergy SLA	(11.014)	(13.420)
Extended Flu vaccination	(0.750)	(1.873)
Field Hospital / Surge - Recovery of Over Accrual	0.803	0.803
Cleaning Standards	(0.685)	(0.806)
PPE	(4.138)	(3.984)
Continuing Care and Funded Nursing Care	(2.233)	(2.348)
Urgent and Emergency Care	(1.659)	(1.997)
COVID 19 Local Response	(38.736)	(49.935)
COVID 19 Recovery	(12.622)	(25.196)
COVID 19: Adferiad Programme - Long Covid Recovery	(0.579)	(0.761)
COVID 19: Additional Funding Allocation For PACU	0.000	(0.528)
COVID 19: Community Health Checks for Chronic Conditions	0.000	(0.133)
Covid 19: Pay Increase	(0.620)	(0.826)
Covid 19: Recovery Funding National schemes	0.000	(0.747)
COVID 19: Recovery Of NHS Bonus Accrual	1.755	1.759
COVID 19: Health Checks For People With a Learning Disability	0.000	(0.085)
COVID 19: Same Day Emergency Care	(0.150)	(0.808)
COVID 19: Cluster Funding	0.000	(0.266)
COVID 19: Health and Social Care Winter Plan	0.000	(1.304)
COVID 19: Agreed WG Uplift DOLS	0.000	(0.126)
COVID 19: Offender Health Prison Support - HMP Cardiff	0.000	(0.023)
COVID 19: Planned Care Recovery Revenue SOS/PIFU	0.000	(0.099)
Sub Total COVID funding confirmed/assumed £m	(83.823)	(119.020)
NR Funding for Non Delivery of 2020/21 Recurrent Savings	(17.750)	(21.313)
Total COVID funding confirmed/assumed £m	(101.573)	(140.333)

It should be noted that of the forecast income:

- Testing, tracing, COVID vaccination, PPE, cleaning standards, CHC and FNC packages of care are have now been based upon forecast costs at month 8;
- Funding is now confirmed for CAV24/7 and the extended flu vaccination.

The full year gross COVID forecast moved in the month from £118.997m at month 9 to £119.020m in month 10, due to funding being made available for offender health prison support.

#### Overarching Planning assumptions for 2021/22

The first principle of the UHB's approach to planning through the pandemic has been, and continues to be, "COVID ready".





To that end the UHB has developed three broad scenarios (shown in table 11), representing the range of plausible circumstances (for COVID 19) over the coming year. It is important to note this is not to predict or project what might happen, but rather to understand the range of demand levels that the UHB may need to be prepared for. The model used for these scenarios has been further developed to account for the impact that the vaccine roll-out programme is expected to have on reducing susceptibility within the population.

**Table 11: Scenario Analysis** 

Sce	nario	Gear	Description
1	COVID-19 "best- case"	Lower end of 'Significant' or 'COVID-free'	COVID recedes significantly during quarter one and – as a consequence of the vaccine programme and no new vaccine-resistant variants emerging - doesn't return to any significant degree
2	COVID-19 "worst- case"	Substantial (during Autumn/Winter)	New variants emerge over the summer which significantly reduce the effectiveness of the vaccines and result in a substantial third wave in the Autumn/Winter of 21/22
3	COVID-19 "central" scenario	Significant (during Autumn/Winter)	COVID reduces through Q1/Q2 but then a smaller third wave occurs during Autumn/Winter as a result of a partial reduction in the effectiveness of the vaccines

#### **COVID Local Response**

Full year forecasting remains a challenge given the range of potential COVID trajectories. With COVID prevalence increasing the organisation needs to remain COVID ready. Key cost drivers within the UHB's local COVID response include:

- Site footprint (green, amber, red zones including transitional care beds)
- Reduced Dental income
- Critical Care revised layout
- Reduced private patient/overseas income
- Reduced restaurant and retail income
- GP OOH
- Laboratory support
- Mental Health out of area placements impact
- Use of the Independent Sector

#### **Resuming Non-Covid Activity and COVID Recovery**

There is increased focus on planning the recovery of the system, which will present a long term challenge. The organisation is progressing its recovery plans in line with its recovery funding. The UHB had £13.660m funding confirmed in tranche 1 and £11.536m confirmed in tranche 2. In addition it has secured £2.216m futher funding for national recovery schemes. The UHB is progressing plans to ensure that this is fully utilised. This is a challenge given the constraints on workforce and internal and external capacity.





The UHB continues to track the impact of schemes against the commitments as set out in the Annual Plan. Having delivered the Quarter 1 target of a return to 70% of pre-covid elective activity, activity delivery increased to 80% of pre-covid activity by the end of quarter 2. Capacity and activity across all diagnostics modalities continues to increase, with CT and endoscopy running at over 100% when compared to pre-covid. New and follow up outpatients capacity continues to increase in line with specific recovery schemes.

#### **Urgent and Emergency Care**

The UHB continues to shape its unscheduled care plans around the goals of the national urgent and emergency care framework. Costs relate to urgent primary care centres and CAV 24/7. Confirmation of funding available for CAV 24/7 is still outstanding.

# Progress on the Application of Resources Available Due to Reductions in Planned Expenditure Caused by the Impact of COVID 19

In 2020/21 the Welsh Government expectation was that reductions in planned expenditure were used to offset the costs of COVID 19. A change in approach from Welsh Government this year on the application of reductions in planned expenditure has given the UHB financial flexibility to offset financial risks in its plan and to support system resilience and help deliver 2021/22 and 2022/23 plans and priorities.

The UHB is currently managing all risks within its operational position and confirmed COVID allocations and therefore has progressed additional plans to fully utlise this resource by the year end.

At month 10, the full year forecast reductions in planned expenditure is £7.401m which is an increase of £0.322m on the month 9 forecast. Plans to utilse this reource to mitigate risks, support system resilience and progress UHB priorities are well progressed.

#### **Financial Forecast Uncertainties**

The UHB is forecasting a breakeven position at the year end in line with the submitted annual financial plan. In order to achieve this there are a number of risks and uncertainties that need to be managed. Workforce remains the key constraint. In this context, the key risk facing the UHB is the full application of resources on recovery and response plans

#### **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 month 10 by Clinical Board is shown in Table 12.





Table 12: Financial Performance for the period ended 31st January 2022									
Clinical Board	Gross Expenditure Due To COVID 19 £m	Reductions in Planned Expenditure due to COVID 19 £m	Net Expenditure Due to COVID 19 £m	Welsh Government COVID 19 Funding Assumed £m	Operational Position (Surplus) / Deficit Variance £m	Total (Surplus) / Deficit Variance £m			
In Month									
All Wales Genomics Service	0.000	0.000	0.000	0.000	(0.047)	(0.047)			
Capital Estates & Facilities	0.428	0.000	0.428	(0.428)	0.101	0.101			
Children & Women	0.492	0.000	0.492	(0.492)	(0.210)	(0.210)			
Clinical Diagnostics & Therapies	0.744	0.000	0.744	(0.744)	(0.223)	(0.223)			
Surge Hospitals	0.000	0.000	0.000	0.000	(0.002)	(0.002)			
Executives	0.968	0.000	0.968	(0.968)	(0.294)	(0.294)			
Medicine	1.915	0.000	1.915	(1.915)	0.486	0.486			
Mental Health	0.214	0.000	0.214	(0.214)	(0.220)	(0.220)			
PCIC	3.225	(0.040)	3.185	(3.225)	(0.325)	(0.325)			
Specialist	0.385	(0.172)	0.213	(0.385)	0.086	0.086			
Surgery	1.130	(0.266)	0.864	(1.130)	0.223	0.223			
SubTotal Delegated Position £m	9.501	(0.478)	9.023	(9.501)	(0.425)	(0.425)			
Central Budgets	0.842	(0.067)	0.775	(0.842)	0.221	0.221			
Total Variance pre COVID -19 Funding	10.343	(0.545)	9.798	(10.343)	(0.204)	(0.204)			
Cumulative									
All Wales Genomics Service	0.000	0.000	0.000	0.000	(0.086)	(0.086)			
Capital Estates & Facilities	3.880	0.000	3.880	(3.880)	0.228	0.228			
Children & Women	3.464	0.000	3.464	(3.464)	0.143	0.143			
Clinical Diagnostics & Therapies	2.998	0.000	2.998	(2.998)	(0.050)	(0.050)			
Surge Hospitals	0.000	0.000	0.000	0.000	0.000	0.000			
Executives	3.887	0.000	3.887	(3.887)	(0.648)	(0.648)			
Medicine	14.766	0.000	14.766	(14.766)	3.800	3.800			
Mental Health	1.971	0.000	1.971	(1.971)	1.084	1.084			
PCIC	33.993	(0.823)	33.170	(33.993)	(2.191)	(2.191)			
Specialist	4.552	(1.907)	2.645	(4.552)	(0.959)	(0.959)			
Surgery	6.966	(3.004)	3.962	(6.966)	0.970	0.970			
SubTotal Delegated Position £m	76.476	(5.734)	70.742	(76.476)	2.291	2.291			
Central Budgets	7.347	(0.792)	6.555	(7.347)	(2.697)	(2.697)			
Total Variance £m	83.823	(6.526)	77.297	(83.823)	(0.406)	(0.406)			

Delegated budgets are £2.291m overspent for the 10 months to the end of January 2022, which is an improvement of £0.425m in month. The operational deficit of £2.291m against delegated budgets is offset by a £2.697m underspend against central budgets leaving a reported underspend of £0.406m at month 10.

#### **Savings Programme**

Delivery of the core financial plan includes a 2% (£16.0m) savings requirement. At month 10, £15.252m Green and Amber savings have been identified against the target.

This leaves the UHB with a further £0.748m of schemes to identify to meet the £16.000m savings target as outlined in table 13 below:

Table 13: Savings Schemes at Month 10

	Total	Total	Total
	Savings	Savings	Savings
	Target	Identified	(Unidentified)
	£m	£m	£m
Total £m	16.000	15.252	(0.748)

Whilst the UHB is confident that the £16m target will be achieved this year, further progress will need to be made on recurrent schemes. The gap against the UHB's recurrent target has

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remained stable in month at £4.492m. Further progress will need to be made with a focus on recurrent schemes

Further analysis of the December position is shown in **Appendix 1**.

#### **Underlying Financial Position**

A key challenge to the UHB is eliminating its underlying deficit. The UHB's accumulated underlying deficit brought forward into 2021/22 is £25.3m which reflects the £21.3m shortfall against the recurrent 2020/21 savings target due to the pandemic. An illustration of the year on year movement in the underlying deficit is shown at **Appendix 2**.

Delivery of the UHB's draft financial plan will ensure that the underlying position does not deteriorate in 2021/22 and this will leave an underlying deficit of £25.3m to carry forward to 2021/22 as shown in Table 14.

**Table 14: Summary of Forecast Underlying Financial Position** 

		Draft Positio	n @Month 10
	Submitted Draft Plan £m	Non Recurrent £m	Recurrent Position £m
b/f underlying deficit	(25.3)	0.0	(25.3)
Net Allocation Uplift (inc LTA inflation)	19.4		19.4
Cost Pressures Investments	(27.4) (4.0)		(27.4) (4.0)
Recurrent Cost Improvement Plans  Non Recurrent Cost Improvement Plans	12.0 4.0	4.0	12.0
Submitted 2020/21 IMTP £m	(21.3)	4.0	(25.3)
In Year Movements Operational Expenditure Cost Increase Due To Covid-19	119.0	119.0	
Planned Operational Expenditure Cost Reduction Due To Covid-19 COVID 19 Welsh Govt. Funding based on Q3/Q4 planning assumptions	7.4 (119.0)	7.4 (119.0)	
COVID 19 Welsh Govt. Funding for the non delivery of 2020/21 recurrent savin In Year Operational Pressures including Unidentified Savings Gap	21.3 (7.4)	21.3 (7.4)	
Planned Deficit 2021/22	(0.0)	25.3	(25.3)

Key to delivering this plan and stabilising the underlying financial position is full delivery of the £12m recurrent savings target. This is currently £4.4m short on delivery.

#### **Balance Sheet**

The balance sheet at month 10 is detailed in **Appendix 3**. The opening balances at the beginning of April 2021 reflect the closing balances in the 2020/21 Annual Accounts approved by the UHB's Board.

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. Updated indices are reflected.

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Overall trade debtors have increased by £51m since the start of the year. This largely relates to NHS receivables (circa £10m) and amounts due from the Welsh Risk Pool (circa £35m) in respect of clinical negligence.

The value of Trade and other payables has decreased by around £16m since the start of the year. This mainly relates to a significant decrease in the levels of non NHS accruals compared to the year end.

#### **Cash Flow Forecast**

The closing cash balance at the end of January, was £4.006m which is detailed in **Appendix 4**. The UHB cashflow forecast includes a cash deficit of £26.517m at the end of 2021/22. This is in line with an instruction from Welsh Government which required the UHB to identify the additional working cash required in 2021/22.

The request for working cash represents resource limit only allocations, which supported reported UHB expenditure primarily in the previous year and where there has been a related cash outflow in 2021/22.

On the basis of Welsh Government approval of the working cash request, the UHB is forecasting that it will remain within its cash limit and maintain a positive cash balance in year.

#### **Public Sector Payment Compliance**

The UHB's public sector payment compliance performance was 93.5% at the end of January which is slightly below the target of 95%.

#### Capital Resource Limit (CRL)

Progress against the CRL for the period to the end of January 2021 is summarised in Table 15 and detailed in **Appendix 5**.

Table 15: Progress against Capital Resource Limit @ January 2021

	£m
Planned Capital Expenditure at month 10	24.750
Actual net expenditure against CRL at month	15.794
Variance against planned Capital Expenditure at month 10	(8.956)

The year to date expenditure is behind the original scheme forecasts, which is due to lead times being longer than expected. However, all schemes are expected to be deliverable within year. The UHB had an approved Capital Resource Limit (CRL) of £59.239m in line with the latest CRL received from Welsh Government 3<sup>rd</sup> February 2022. The CRL comprised of £15.921m discretionary funding and £43.318m towards specific projects (including Rookwood Replacement, Maelfa Well Being Hub, Cystic Fibrosis Service, the National Imaging Programme, New Substation and Medical Gas Upgrade at UHL, Covid 19 Recovery Plans & Developing Genomics Partnership Wales)

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Of the UHB's approved Capital Resource Limit, 26.7% has been expended to date. The relatively low percentage reflects the large number and value of schemes approved by Welsh Government since Month 6. The UHB has plans to fully utilise its capital allocation and most expenditure is planned for the later part of the year. There is an inherent risk in this due to potential supplier delays and works slippage. The UHB is therefore being proactive in managing these risks via its Capital Management Group.

#### **Key Risks**

Delivery of the core financial plan includes a 2% (£16.0m) savings requirement for which good progress is being made. At month 10 however, £7.6m recurrent schemes have been identified against the £12.000m recurrent element of the target. Further progress is required to find another £4.4m recurrent schemes in order to maintain the underlying position.

The UHB is forecasting a breakeven position at the year end in line with the submitted annual financial plan. In order to achieve this the key risk that needs to be managed is to utilise the resources that have been allocated to the UHB.

The UHB is forecasting a broadly balanced position against its capital resource limit at year end and will need to continually monitor the position so that progress can be pro-actively managed to achieve this.

#### **Recommendation:**

The Finance Committee is asked to:

- **NOTE** the reported underspend of £0.406m at month 10;
- **NOTE** the gross month 10 financial impact of COVID 19 is assessed at £83.823m and this is matched with anticipated income;
- **NOTE** the forecast breakeven which is consistent with the financial plan submitted to Welsh Government on 30<sup>th</sup> June and assumes additional funding of £140.333m to manage the impact of COVID 19 in 2021/22 and this includes confirmed funding of £21.313m in respect of the 2020/21 recurrent savings shortfall;
- NOTE that COVID 19 reductions in planned care expenditure can be used to mitigate financial risks in the plan and support system resilience and that plans to fully utilise this are being progressed;
- NOTE that following a request from Welsh Government that the UHB has identified the
  additional working cash required in 2021/22 to satisfy the cash outlay that is expected to
  be incurred in respect of resource only funding allocations received in previous years;
- **NOTE** the 2021/22 brought forward Underlying Deficit was £25.3m and that the forecast carry forward of £25.3m into 2022/23 is dependent upon delivery of the £12m recurrent savings target which requires the identification of a further £4.4m savings schemes;
- NOTE the UHB is forecasting a breakeven position at the year end in line with the submitted annual financial plan. In order to achieve this the key risk that needs to be managed is to utilise the resources that have been allocated to the UHB;
- NOTE the UHB is forecasting a broadly balanced position against its capital resource limit at year end and will need to continually monitor the position so that progress can be proactively managed to achieve this.

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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	e heal	th inequalities			6.		ive a planned ca mand and capac	•		
<ol><li>Deliver people</li></ol>	outco	mes that matt	er to		7.	Ве	a great place to	work	and learn	
3. All take					8.	<ol> <li>Work better together with partners to deliver care and support across care sectors, making best use of our people and technology</li> </ol>			across care	
	tion he	s that deliver t ealth our citize pect		е	9.	<ul> <li>Reduce harm, waste and variation sustainably making best use of the resources available to us</li> </ul>			x	
care sy	stem :	lanned (emero that provides t ght place, firs	the rig	ght	<ol> <li>Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives</li> </ol>					
F	ive W	_	•				ppment Principl for more informa	•	onsidered	
Prevention		Long term	x	Integration	n		Collaboration		Involvement	
Equality and Health Impartment Assessment Completed	act nt	Not Applicat	ole							

CARING FOR PEOPLE KEEPING PEOPLE WELL



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## 2021/22 SAVING SCHEMES

#### 2021-22 In-Year Effect

Clinical Board	21-22 Target 2%	Green	Amber	Total Green & Amber	Red	Shortfall on Total Target vs Green & Amber
	£'000	£'000	£'000	£'000	£'000	£'000
Capital Estates and Facilities	946	955	0	955	0	-8
Children and Women	1,303	1,304	0	1,304	0	-1
Clinical Diagnostics and Therapeutics	1,199	1,067	0	1,067	0	132
Corporate Executives	500	500	0	500	0	0
Medicine	1,378	1,378	0	1,378	0	-0
Mental Health	1,079	701	0	701	0	378
Primary, Community and Intermediate Care	2,423	2,488	0	2,488	0	-66
Specialist Services	1,482	1,482	0	1,482	0	0
Surgical Services	1,689	1,377	0	1,377	0	311
Sub Total Clinical Boards £'000	12,000	11,252	0	11,252	0	747
Healthboard Wide	4,000	4,000	0	4,000	0	0
Total £'000	16,000	15,252	0	15,252	0	747

## 2021-22 Full Year Effect

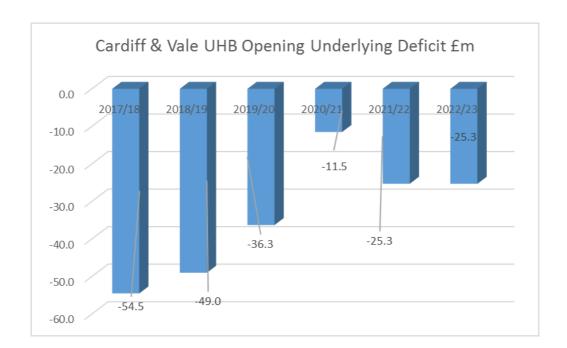
Clinical Board	21-22 Target 1.5%	Green	Amber	Total Green & Amber	Pipeline Red	Shortfall on Total Target vs Green & Amber
	£'000	£'000	£'000	£'000	£'000	£'000
Capital Estates and Facilities	789	797	0	797	0	-8
Children and Women	1,086	451	0	451	0	635
Clinical Diagnostics and Therapeutics	999	533	0	533	0	466
Corporate Executives	417	187	0	187	0	230
Medicine	1,148	757	0	757	0	391
Mental Health	899	100	0	100	0	799
Primary, Community and Intermediate Care	2,019	1,325	0	1,325	0	694
Specialist Services	1,235	1,085	0	1,085	0	150
Surgical Services	1,407	342	0	342	0	1,066
Sub Total Clinical Boards £'000	10,000	5,576	0	5,576	0	4,424
Healthboard Wide	2,000	2,000	0	2,000	0	0
Total £'000	12,000	7,576	0	7,576	0	4,424





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# Year on Year Movement in Cardiff & Vale UHB Underlying Deficit







Cardiff & Vale UHB Balance Sheet as at 31st January 2022

Cardiff & Vale UHB Balance She	Opening Balance	Closing Balance
	1 <sup>st</sup> April 2021	31st January 2022
Non-Current Assets	£'000	£'000
Property, plant and equipment	742,355	756,735
Intangible assets	2,238	1,616
Trade and other receivables	6,649	34,143
Other financial assets	5,5 10	
Non-Current Assets sub total	751,242	792,494
Current Assets	,	•
Inventories	16,684	18,035
Trade and other receivables	190,014	213,802
Other financial assets	,	,
Cash and cash equivalents	3,637	4,061
Non-current assets classified as held for sale		
Current Assets sub total	210,335	235,898
TOTAL ASSETS	961,577	1,028,392
Current Liabilities		
Trade and other payables	219,106	203,517
Other financial liabilities	0	
Provisions	133,674	152,500
Current Liabilities sub total	352,780	356,017
NET ASSETS LESS CURRENT LIABILITIES	608,797	672,375
	600,797	672,373
Non-Current Liabilities		
Trade and other payables	8,126	7,855
Other financial liabilities	0	
Provisions	10,514	30,914
Non-Current Liabilities sub total £'000s	18,640	38,769
TOTAL ASSETS EMPLOYED £'000s	590,157	633,606
10172700210 2IIII 20125 2 0003	300,101	000,000
FINANCED BY:		
Taxpayers' Equity		
General Fund	479,113	494,793
Revaluation Reserve	111,044	138,813
Total Taxpayers' Equity £'000s	590,157	633,606





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#### **APPENDIX 4**

#### **CASHFLOW FORECAST AT THE END OF JANUARY 2022**

	07 (01)				· · · · · · —		J. 07 (I)						
	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)	103,150	98,720	97,875	95,990	80,875	96,715	97,170	94,080	93,625	77,235	80,230	135,991	1,151,656
WG Revenue Funding - Non Cash Limited (NCL)	1,195	1,590	1,320	1,320	810	1,235	905	1,040	1,225	1,180	975	1,160	13,955
WG Revenue Funding - Other (e.g. invoices)	2,787	1,285	1,319	1,674	2,642	1,327	1,437	2,975	28	2,091	3,948	3,020	24,533
WG Capital Funding - Cash Limit	7,750	2,500	1,000	2,500	3,855	4,485	2,670	2,010	2,610	6,270	7,455	16,134	59,239
Sale of Assets			0	0	0	0	0	0	0	0	167	7,218	7,385
Income from other Welsh NHS Organisations	39,174	38,782	43,254	46,383	35,596	40,416	36,425	41,127	48,934	42,639	44,345	38,005	495,079
Other - (Specify in narrative)	4,694	12,133	5,097	11,559	9,933	3,382	6,771	14,663	8,779	4,669	16,046	9,476	107,201
TOTAL RECEIPTS	158,749	155,010	149,865	159,426	133,711	147,559	145,378	155,895	155,201	134,084	153,166	211,004	1,859,047
PAYMENTS													
Primary Care Services : General Medical Services	5,287	4,770	8,512	5,705	4,577	6,907	4,920	4,644	8,536	6,459	4,977	7,927	73,220
Primary Care Services : Pharmacy Services	149	111	109	89	99	78	104	87	214	688	427	315	2,470
Primary Care Services : Prescribed Drugs & Appliances	16,063	4	8,617	16,449	3	8,645	7,479	8,307	16,570	3	8,463	8,165	98,769
Primary Care Services : General Dental Services	2,003	2,115	2,154	2,143	2,516	2,257	2,537	2,206	2,165	2,307	2,297	2,195	26,896
Non Cash Limited Payments	1,615	2,234	1,693	1,769	2,182	1,749	1,748	1,926	1,819	1,795	1,880	1,785	22,196
Salaries and Wages	57,573	65,877	62,686	56,243	57,310	60,951	61,105	57,785	58,284	59,496	60,366	59,624	717,299
Non Pay Expenditure	58,849	72,825	54,303	68,579	60,450	59,731	58,320	76,960	57,891	54,786	61,554	125,900	810,147
Capital Payment	10,624	2,666	3,316	2,989	2,666	2,012	2,107	2,271	,	2,155	8,000	28,364	69,628
Other items (Specify in narrative)	5,440	4,833	7,958	5,405	4,209	5,795	4,338	4,486	7,265	6,340	5,259	7,250	68,578
TOTAL PAYMENTS	157,602	155,434	149,348	159,371	134,013	148,126	142,657	158,671	155,201	134,028	153,224	241,525	1,889,201
Net cash inflow/outflow	1,147	(425)	516	55	(302)	(567)	2,721	(2,777)	0	56	(57)	(30,521)	
Balance b/f	3,637	4,784	4,359	4,875	4,931	4,628	4,062	6,782	4,006	4,006	4,062	4,004	
Balance c/f	4,784	4,359	4,875	4,931	4,628	4,062	6,782	4,006	4,006	4,062	4,004	(26,517)	



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# PROGRESS AGAINST CRL AS AT 31st JANUARY 2022

Performance against CRL		ν	ear To Date		Forecast				
Wiles Capital Programme:   C000   C	Performance against CRI		1		Plan	<del></del>	Var		
Wildlescapital Programme:	chomanoc agamot one			-			£'000		
Sookwood reprovision at Liandough	All Wales Capital Programme:								
SARC'S OBC Fees		400	355	(45)	400	731	3		
	·			, ,		_			
National Programmes - Fire   197   5.5   (144)   5.92   5.92   5.92   5.92   5.92   5.93				` '					
National Programmes - Hirastructure   267   261   (6)   807   80				,					
National Programmes - Decarbonisation   200   0   203   847   847   847   847   848   847   847   848   847   847   848   84	· ·			, , , ,					
National Programmes - Mental Health			-	(-)					
101   103   2   499   149   6   6   6   6   6   6   6   6   6			_		_				
National Programmes = Imaging   National Programmes   National P				(15)			(2)		
Prince   P	·		,	(047)		_	(3		
Developing Genomics Partnership Wales -FBC				, ,					
				\ /					
New Substation and Medical gas upgrade at university Hospital Llandough   1,287 (13) (1,300)   2,409   2,409   0   0   0   0   0   0   0   0   0				, ,					
National programmes = Imagining = UHW DR Rooms									
National programmes - Imagining - UHW DR Rooms   600   0 (600)   1,200   1,2	New Substation and Medical gas upgrade at university Hospital Llandough	1,287	(13)	(1,300)	2,409	2,409			
National programmes – Imagining – UHL Fluoroscopy  315		0	0	0	0	0			
CF - Barry Hospital Feasibility	National programmes – Imagining – UHW DR Rooms	600	0	(600)	1,200	1,200			
CF - respite accommodation - Complex Health Needs	National programmes – Imagining – UHL Fluoroscopy	315	0	(315)	630	630			
CF - respite accommodation - Complex Health Needs									
CF - respite accommodation - Complex Health Needs	CF - Barry Hospital Feasibility	25	0	(25)	75	75			
CF - North Cardiff H&WB Centre		30	0		100	100			
1,315   1,205   1,101   5,982   5,982   3,986   3,98	·	25	0	(25)	75	75			
Additional capital funding-November			1.205	` '	-				
HEPMA	·			\ /					
DPIF - LINC Digital funding.		-							
The second Comparison of the Endoscopy Unit at University Hospital Llandough – 2021-20   100   0   100   923   9				•					
Sequencing Capacity for All Wales Medical Genomics Service - Equipme		-							
Additional DPIF Capital funding - 21/22 625 0 (625) Sexual Assault Referral Centre - Equipment 10 0 (10) Sexual Assault Referral Centre - Equipment 10 0 0 10 Expansion of the Endoscopy Unit at University Hospital Llandough - 2021- 0 0 0 0 250 250 SWAN IT equipment 0 0 0 0 0 20 20 SWAN IT equipment 15,003 9,206 (5,797) Discretionary:  T. 937 726 (211) 1,765 1,965 Equipment 801 506 (295) Statutory Compliance 224 610 (214) Estates 7,185 5,937 (1,248) Sub Total 9,747 7,779 (1,968) Total 9,747 7,779 (1,968) Total 9,747 7,779 (1,968) Total 9,747 7,779 (1,968) Total 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	· · · · · · · · · · · · · · · · · · ·			, ,					
Sexual Assault Referral Centre - Equipment				-					
Neurophysiology suite and eye care equipment.				· /					
Expansion of the Endoscopy Unit at University Hospital Llandough - 2021-	·			` '					
Sub Total   15,003   9,206   (5,797)   43,318   43,299   (5,797)   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,765   1,965   (211)   1,260   1,249   1,2800   2,800   (211)   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,280   1,2800   2,800   (211)   1,2800   1,2800   2,800									
Sub Total   15,003   9,206   (5,797)   43,318   43,299   10   1,765   1,965	,				<b>—</b>				
Discretionary:  T. 937 726 (211) 1,765 1,965 Equipment 801 506 (295) Equipment 801 506 (295) Equipment 801 506 (295) Equipment 801 506 (295) 8,24 610 (214) 2,800 2,800 8,24 610 (214) 8,856 9,985 1, 8,100 Total 9,747 7,779 (1,968)  Discretionary:  The schemes:  Discretionary:  Discretionary:  Discretionary:  1,765 1,965 2,500 2,5	SWAN II equipment	0	0	0	20	20			
Discretionary:  T. 937 726 (211) 1,765 1,965 Equipment 801 506 (295) Equipment 801 506 (295) Equipment 824 610 (214) 2,800 2,800 Estates 7,185 5,937 (1,248) 8,856 9,985 1, 9,747 7,779 (1,968) Equipment 801 506 (295) 8,2500 2,500 8,200 2,800 1,240 8,856 9,985 1, 9,747 7,779 (1,968) Equipment 801 502 (1,248) 8,856 9,985 1, 9,747 7,779 (1,968) Equipment 90 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Sub Total	15,003	9,206	(5,797)	43,318	43,299	(		
Statutory Compliance   801   506   (295)   2,500   2	Discretionary:								
Statutory Compliance   801   506   (295)   2,500   2	Л.	937	726	(211)	1,765	1,965	2		
Statutory Compliance   824   610   (214)   2,800   2,800	Equipment	801	506		2,500	2,500			
States   7,185   5,937   (1,248)   8,856   9,985   1,     Sub Total   9,747   7,779   (1,968)   15,921   17,250   1,     Other schemes:	1 1								
Sub Total   9,747   7,779   (1,968)   15,921   17,250   1,				•	<del> </del>		1,1		
## Differ schemes:    Differ schemes:				, ,					
DH Assets 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0,141	7,770	(1,000)	10,021	17,200			
Sub Total		0	0	0		0			
Capital grants:       0					-				
DH Assets   0   0   0   0   0   0   0   0   0		٩	<u> </u>		<b>├</b>	9			
Sub Total   0   0   0   0   0   0   0   0   0		0	0			0			
Chartible Funds Equipment   0   1,191   1,191   0   1,660   1,000									
Chartible Funds Equipment 0 1,191 1,191 0 1,660 1,  Sub Total 0 1,191 1,191 0 1,660 1,  Asset Disposals:  Broad Street Clips 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		U	0	0	0	0			
Sub Total  Asset Disposals:  Broad Street Cling  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
Asset Disposals:  Broad Street Clinco  O O O O O O O O O O O O O O O O O O O					0		1,6		
Broad Street Clips  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		0	1,191	1,191	0	1,660	1,6		
Whitehuring FOR PEOPLE  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1.04								
ARING PEOPLE  0 0 CYMRU Glaerdydd ag Fro NHS Glardiff and glaie	Broad Street Clinco	0	0	0		0			
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Report Title:	Finance Risk Ro	egister			
Meeting:	Finance Commit	tee		Meeting Date:	16 <sup>th</sup> February 2022
Status:	For Discussion	For Assurance	For Approval	For Inf	ormation
Lead Executive:	Executive Direc	ctor of Finance			
Report Author (Title):	Assisstant Dire	ctor of Finance			

#### Background and current situation:

This report highlights the 2021/22 Finance Risk Register risk categorisation by severity of risk as at 16<sup>th</sup> February 2022. The detailed 2021/22 risk register is shown in Appendix 1.

The number of risks identified in each category is shown below:

#### 2021/22 UHB Financial Risks at 16th February 2022

Risk Category	Risk Score	Number of Risks as at 16 February 2022
Extreme Risk	20 - 25	2
High Risk	12 - 16	0
Moderate Risk	4 - 10	4
Low Risk	1 - 3	0

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

**Fin01/21** – Maintaining underlying deficit of £25.3m in line with draft annual plan.

Fin03/21 – Delivery of £16.0m (2.0%) CIP / £12.0m recurrent element.

**FIN07/21** and **FIN08/21** - COVID response and recovery funding has now been confirmed. Both response and recovery costs will need to be managed within funding available

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

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



#### Recommendation:

The Finance Committee is asked to:

NOTE the risks highlighted within the 2021/22 risk register

	Shaping or	ur Future	Wellbeing	Strated	ic Ob	iectives
--	------------	-----------	-----------	---------	-------	----------

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

	i cicvarii o	Djeciive		
1.	Reduce health inequalities		<ol><li>Have a planned care system where demand and capacity are in balance</li></ol>	
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	t Yes/No/N	ot Applicable		

**Assessment** Completed:

If "yes" please provide copy of the assessment. This will be linked to the report when published.



Page 1 2.1a Finance Risk Register 2021-22 - Appendix 1

						tial Risk Rating	t .			ent Ri ating	sk					Ra Con	et Risk ting if trols in lace		
CB/Dir Ref N	D Domain	Date Entered onto new CB/Dir/UHB Risk Register	Risk/Issue (Including Impact)	Exec Lead	Impact /	Likelihood	Existing Controls	Assurance	Impact / Consequence	Likelihood	ອີດ Gaps in Controls ທ	Gaps in Assurance	Summary of Additional Actions being undertaken	Who	When	Impact / Consequence	Likelihood		Level of assurance required
Fin01/21	Finance	Jan-20	The opening underlying deficit in the draft 21/22 plan is £25.3m. The annual plan aims to maintain the £25.3m underlying deficit .	Director of Finance	5	4 2	Governance reporting and monitoring arrangements through the Finance Committee and Board	Limited Assurance	5	4	Adequate but more Action Required	Identification of 2% savings plan whilst managing and addressing budget pressures.	Progress against the underlying deficit is to be managed by Management Executive.	Assistant Director of Finance	Feb-22	3	3 9	Mar-22	Management
Fin02/21	Finance	Jan-20	Deliver in year breakeven position. Manage Budget pressures	Director of Finance	5	4	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 Performance meetings with Clinical Boards.	Reasonable assurance	4	1	4 Adequate but more Action Required	Plans to address overspending budgets in 2020/21 addressing the risk in 2021/22. Operational surplus at month 10 £0.406m.	Performance meetings with Clinical Borads.	Assistant Director of Finance	Feb-22	4	1 4	Mar-22	Management
Fin03/21	Finance	Jan-20	Deliver 2%% CIP £16m (1.5% recurrent)	Director of Finance	5	4 4	2% 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. Clinical Board Performance meetings.	Limited Assurance	5	4	Adequate but more Action Required	£15.252m savings identified as green or amber against target of £16m as at Wc 7th February 2022. £7.576m recurrent schemes identified against the £12.0m recurrent elemen of the target.	meetings with Clinical Boards	Assistant Director of Finance	Feb-22	3	3 9	Mar-22	Management
Fin06/21	Finance	Feb-20	Winter pressures managed within available resources	Director of Finance	4	4	Winter plan for 2021/22 developed in partnership with Local Authorities and signed off by Management Executive.	Reasonable assurance	3	2	Adequate but more Action Required	<sup>n</sup> None	Winter plan approved at a cost of £2.837m against baseline budget of £1.500m. Balance anticipated to be funded through WG COVID allocation.	Assistant Director of Finance	Feb-22	2	2 4	Mar-22	Management
Fin07/21	Finance	Feb-20	COVID-19 Response	Director of Finance	4	4	Oversight arrangements in place at Board level and through the command structure. Expenditure Plans developing controlled through Management Executive and Directors of Operations.	Reasonable assurance	3	2	Adequate but more Action Required	Local COVID response costs have been funded in by Welsh Government based on the month 5 forecast totalling £49.935m.	Local COVID response costs will be closely monitored against forecast and managed within funding avaialble.	Assistant Director of Finance	Feb-22	2	2 4	Mar-22	Management
Fin08/21	Finance	Feb-20	COVID-19 Recovery	Director of Finance	4	4	Oversight arrangements in place at Board level and through the command structure. Expenditure Plans developing controlled through Management Executive and Directors of Operations.	Reasonable assurance	3	2	6 Adequate but more Action Required	Agreement of expenditure plan and monitoring against tranche 1, tranche 2 and national recovery schemes.	(£13.662m) and tranche 2 (£11.536m)bids	Assistant Director of Finance	Feb-22	2	2 4	Mar-22	Management



# st completing the risk register

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	Consequence	(coverity levels) and	ramples of descripts		
<u></u>	Consequence score	(severity levels) and ex	tamples of descriptors	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety	Minimal injury	Minor injury or illness,	Moderate injury	Major injury leading to	Incident leading to
of patients, staff or public	requiring no/minimal intervention or	requiring minor intervention	requiring professional intervention	long-term incapacity/disability	death
(physical/psychologi	treatment.	into ronion	and volucin	in output in your in y	
cal harm)					
	No time off work	Requiring time off work	Requiring time off work	Requiring time off work for	Multiple permanent
		for >3 days	for 4-14 days	>14 days	injuries or irreversible health effects
					nealth effects
		Increase in length of	Increase in length of	Increase in length of	An event which impacts
		hospital stay by 1-3 days	hospital stay by 4-15 days	hospital stay by >15 days	on a large number of patients
		aayo	aayo		patiente
			RIDDOR/agency	Mismanagement of	
			reportable incident	patient care with long-	
				term effects	
			An event which impacts		
			on a small number of patients		
			patients		
Quality/complaints/a	Peripheral element of	Overall treatment or	Treatment or service	Non-compliance with	Totally unacceptable
udit	treatment or service	service suboptimal	has significantly	national standards with	level or quality of
	suboptimal		reduced effectiveness	significant risk to patients if unresolved	treatment/service
				ii uriiesoiveu	
	Informal	Formal complaint/	Formal complaint /	Multiple complaints/	Inquest/ombudsman
	complaint/inquiry	Local resolution	Local resolution (with potential to go to	independent review	inquiry Gross failure of patient safety if findings
			independent review)		not acted on
		0	D	0.75	0 (1)
		Single failure to meet internal standards	Repeated failure to meet internal standards	Critical report	Gross failure to meet national standards
		Minor implications for	Major patient safety		
		patient safety if unresolved	implications if findings are not acted on		
		Reduced performance			
		rating if unresolved			
Human resources/	Short-term low	l ann akadina a lannal dhad	Late delivery of her	Unanatain delivery of less	Nam delicent of her
organisational	staffing level that	Low staffing level that reduces the service	Late delivery of key objective/ service due to	Uncertain delivery of key objective/service due to	Non-delivery of key objective/service due to
development/staffing	temporarily reduces	quality	lack of staff	lack of staff	lack of staff
/ competence	service quality (< 1 day)				
	uay)				
			Unsafe staffing level or competence (>1 day)	Unsafe staffing level or competence (>5 days)	Ongoing unsafe staffing levels or competence
			Low staff morale	Loss of key staff	Loss of several key staff
			Poor staff attendance	Very low staff morale No	No staff attending
			for mandatory/key	staff attending mandatory/	mandatory training /key
			professional training	key professional training	professional training on
					an ongoing basis
Statutory duty/ inspections	No or minimal impact or breech of	Breech of statutory legislation	Single breech in statutory duty	Enforcement action	Multiple breeches in statutory duty
I I I I I I I I I I I I I I I I I I I	guidance/ statutory	logiciation .	ciatatory daty		ciatatory daty
	duty				
			Challenging external recommendations/	Multiple breeches in	Prosecution
			improvement notice	statutory duty	
İ	İ		· ·	Improvement prohibition	Complete systems
				notices	change required
Adverse publicates	Bumouro D-tti-'	Local modic severe	Local modic	Critical report	Severely critical report
Adverse publicity/ reputation	Rumours Potential for public concern	Local media coverage  – short-term reduction	Local media coverage – long-term reduction in	National media coverage with <3 days service well	National media coverage with >3 days
	ľ	in public confidence	public confidence	below reasonable public	service well below
				expectation	reasonable public expectation. MP/AM
					concerned (questions in
					the House/Assembly)
		Elements of public			Total loss of public
		expectation not being met			confidence
Business objectives/	Insignificant cost	<5 per cent over	5–10 per cent over	Non-compliance with	Incident leading >25 per
projects	increase/ schedule	project budget	project budget	national 10-25 per cent	cent over project budget
	slippage	Oakadul "	Cabadal II	over project budget	Cabadala
		Schedule slippage	Schedule slippage	Schedule slippage Key objectives not met	Schedule slippage Key objectives not met
				* *	
Finance including	Small loss	Loss of 0.1–0.25 per	Loss of 0.25–0.5 per	Uncertain delivery of key	Non-delivery of key
claims	Risk of claim remote	cent of budget	cent of budget	objective/Loss of 0.5–1.0 per cent of budget	objective/ Loss of >1 per cent of budget
				J	
		Claim less than	Claim(s) between	Claim(s) between	Failure to meet
<b>&amp;</b>		£10,000	£10,000 and £100,000	£100,000 and £1 million	specification/ slippage
25%				Purchasers failing to pay	Loss of contract
7,00				on time	Cl=:(-) > C4 - :11:
Service/business	Loss/interruption of	Loss/interruption of >8	Loss/interruption of >1	Loss/interruption of >1	Claim(s) >£1 million Permanent loss of
interruption	>1 hour	hours	day	week	service or facility
1,41					
Environmental	Minimal or no impact	Minor impact on	Moderate impact on	Major impact on	Catastrophic impact on
impact .	on the environment	environment	environment	environment	environment
·	<del></del>				

### 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 not 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		Likelihood Score												
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

Report Title:	Terms of Reference								
Meeting:	Finance Commit	tee			Meeting 26 <sup>th</sup> February 2022				
Status:	For Discussion	For Assurance	For Approval	x	For Information				
Lead Executive:	Director of Cor	porate Governance	9						
Report Author (Title):	Director of Cor	porate Governance	9						

### **Background and current situation:**

In line with the UHB's Standing Orders, Terms of Reference for Committees of the Board, should be reviewed on an annual basis.

The Finance Committee Terms of Reference were presented last present to the Committee and then the Board on 27<sup>th</sup> November 2021 due to a change which was required in year.

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

The Terms of Reference were last approved by the Board in November 2021. They are now being presented with some minor administrative changes which are highlighted in red.

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

The Terms of Reference for the Finance Committee have been reviewed by the Director of Corporate Governance.

### Recommendation:

The Finance Committee are asked to

- (a) Review the changes to the Terms of Reference as highlighted
- (b) Ratify the change to the Terms of Reference and
- (c) Recommend approval to the Board at the Board Meeting on 31st March 2022.

### **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

Reduce health inequalities	X	6.	Have a planned care system where demand and capacity are in balance	
Deliver outcomes that matter to people	X	7.	Be a great place to work and learn	X





·	onsibility for in nd wellbeing	nproving		d s	<ol> <li>Work better together with partners to deliver care and support across care sectors, making best use of our people and technology</li> </ol>					
	es that deliver ealth our citize opect		S	<ol><li>Reduce harm, waste and variation sustainably making best use of the resources available to us</li></ol>						
care system	planned (emergethat provides right place, firs		ir p	10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives						
Five V		• •			lopment Principle for more information	•	onsidered			
Prevention	Long term	x In	tegratio	n	Collaboration		Involvement			
Equality and Health Impact Assessment Completed:	Yes / No / N If "yes" plead	assessment. This	s will l	be linked to the	•					





# **Finance Committee**

# **Terms of Reference**

Reviewed by Finance Committee: 16th February 2022

**Approved by Board:** 



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### 1. Introduction

The Board shall establish a Committee to be known as Finance Committee. The detailed terms of reference and operating arrangements in respect of this Committee are set out below.

### 2. Constitution and Purpose

The purpose of this Committee is to advise and assure the Board in discharging its responsibilities with regard to its current and forecast financial position, performance and delivery.

The Board has resolved to establish a Finance Committee which will allow appropriate scrutiny and review to a level of depth and detail not possible in Board Meetings in respect of performance relating to:-

- Financial plans and monitoring including delivery of savings programmes
- Scrutiny and monitoring of Financial monthly performance
- Business Cases over £500k

The Committee will ensure that evidence based and timely interventions are implemented to drive forward improved financial performance thereby allowing the Health Board to achieve the requirements and standards determined for the NHS in Wales.

### 3. Delegated Powers

The Committee, in respect of its provision of advice and assurance will, and is authorised by the Board to:-

- Review monthly Financial Report prior to submission to the Board
- Monitor, review and scrutinise Cost Reduction Programme and Financial Tracker System for Corporate and Clinical Boards
- Review and monitor the IMTP financial plan and associated business cases over £500K and recommend approval to the Board
- Scrutinise the delegated budgets within the budget plan
- Receive assurances with regard to the progress and impact/pace of implementation of Health Boards Cost reduction Programmes/Savings Plan
- Seek assurance on the Financial Planning process and consider Financial Plan proposals
- Scrutinise financial performance and cash management against revenue budgets and statutory duties.
- Scrutinise submissions to be made in respect of revenue or capital funding and the service implications of such changes and ongoing monitoring of the Capital Programme.
- Monitor and review agreed dis-investments
- Review the Board's Scheme of Financial Delegation as and when necessary
- Receive reports arising from financial reviews, including performance and accountability reviews of Corporate and Clinical Boards
- Review the Financial Risk Register

### 4. Authority

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The Committee may investigate or have investigated any activity (clinical and non-clinical) within its terms of reference. It may seek relevant information from any:-

- Employee (and all employees are directed to co-operate with any legitimate request made by the Committee)
- Other committee, sub-committee or group set up by the Board to assist in the delivery of its functions

May obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board's procurement, budgetary and other requirements.

May consider and where appropriate, approve on behalf of the Board any policy within the remit of the Committee's business

Will review risks from the Board Assurance Framework that are assigned to the Committee by the Board and advise the Board on the appropriateness of the scoring and mitigating actions in place.

### 5. Sub-Committees

The Committee may, subject to the approval of the Health Board, establish subcommittees to task and finish groups to carry out on its behalf specific aspects of Committee business.

### 6. Membership

### **Members**

Chair: Independent member of the Board

Members: In addition to the Chair of the Committee a minimum of 2 other Independent member of the Board.

### In attendance

Chief Executive
Executive Director of Finance
Chief Operating Officer
Executive Director of People and Culture
Executive Director of Strategic Planning
Executive Nurse Director

**Director of Corporate Governance** 

**Deputy Director of Finance** 

Other Directors/Officers will attend as required by the Committee Chair, as well as any others from within or outside the organisation who the Committee considers should attend, taking into account the matters under consideration at each meeting.

### **Member Appointments**

The membership of the Committee shall be determined by the Chairman of the Board taking account of the balance of skills and expertise necessary to deliver the Committee's remit and subject to any specific requirements or directions made by the Welsh Government.

The Committee will be chaired by the Independent Member for Finance and supported by a Vice Chair who shall also be an Independent Member.

Appointed Independent Members shall hold office on the Committee until such time as it is stood down.

### **Secretariat**

Committee Secretary: as determined by the Director of Corporate Governance.

### **Support to Committee Members**

The Director of Corporate Governance, on behalf of the Committee Chair, shall:

- Arrange the provision of advice and support to Committee Members on any aspect related to the conduct of their role
- Ensure the provision of a programme of development for the Committee members as part of the overall Board Development programme

### 7. Committee Meetings

### Quorum

At least two Independent Members must be present to ensure the quorum of the Committee. This should include either the Chair or the Vice Chair of the Committee. In the interests of effective governance it is expected that a minimum of two Executive Directors will also be in attendance.

### **Frequency of Meetings**

Meetings shall be routinely held on a monthly basis. This will be reviewed on a regular basis.

### Withdrawal of individuals in attendance

The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion or particular matters

# 8. Relationship and Accountabilities with the Board and Its Committees/Groups

Although the Board has delegated authority to the Committee for the exercise of certain functions as set out within these terms of reference, it retains the overall responsibility and accountability for ensuring good financial management for its citizens through the effective governance of the organisation.

The Committee is directly accountable to the Board for its performance in exercising the functions set out in these Terms of Reference

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The Committee, through its Chair and members, shall work closely with the Board's other Committees including Sub-Committee/Advisory Groups to provide advice and assurance to the Board through the:

- Planning and co-ordination of Board and Committee business
- Sharing of information
- In doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance arrangements

The Committee shall embed the Health Board's strategy, corporate goals and priorities through the conduct of the business.

### 9. Reporting and Assurance Arrangements

The Committee Chair shall:

- Report to each Board meeting on the Committee's key activities via the Chair's report
- Ensure the public minutes of each meeting of the Committee are presented to the Board meeting
- Ensure appropriate escalation arrangements are in place to alert the Board and Welsh Government of any urgent/critical matters that may affect the operation and/or reputation of the Health Board.

The Director of Corporate Governance, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation.

### 10. Applicability of Standing Orders to Committee Business

The requirements for the conduct of business as set out in the Standing Orders are equally applicable to the operation of the Committee, except in the following areas:

- Quorum
- <u>Notifying and equipping Committee members</u> Committee members shall be sent an Agenda and a complete set of supporting papers at least seven (7) clear days before a formal Committee meeting (unless specified otherwise in law).
- Notifying the public and others at least seven (7) clear days before each Committee meeting a public notice of the time and place of the meeting, and the public part of the agenda, shall be displayed on the Health Board's website together with the papers supporting the public part of the agenda (unless specified otherwise in law).

### 11. Review

These terms of reference and operating arrangements shall be reviewed annually by the Committee and any changes recommended to the Board for approval.

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Report Title:	Finance Committee – Annual Workplan 2022-23									
Meeting:	Finance Committ	Finance Committee  Meeting Date:  26 February 2022								
Status:	For Discussion	For Assurance	For Approval	x	x For Information					
Lead Executive:	Director of Corpo	orate Governance								
Report Author (Title):	Director of Corp	oorate Governanc	е							

### Background and current situation:

The purpose of the report is to provide Members of the Finance Committee with the opportunity to review the Finance Committee Work Plan 2022/23 prior to presentation to the Board for approval.

The work plan for the Committee should be reviewed on an annual basis to ensure that all areas within its Terms of Reference are being delivered. The Plan also includes and opportunity for areas of development which may be suggested by the Committee Chair.

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

The work plan for the Finance Committee has been developed based upon the requirements set out in its Terms of Reference (also on the agenda). It ensures that the Committee will advise and assure the Board and the Accountable Officer on whether effective governance and assurance arrangements are in place.

### Recommendation:

The Finance Committee is asked to:

**REVIEW** the Work Plan 2022/23; **RATIFY** the Work Plan 2022/23; **RECOMMEND** approval to the Board.

### **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

	TCICVAIIL	ODJECH		TOI TING TOPOIT	
1.	Reduce health inequalities	X	6.	Have a planned care system where demand and capacity are in balance	X
2.	Deliver outcomes that matter to people	X	7.	Be a great place to work and learn	x
3.	All take responsibility for improving our health and wellbeing	X	8.	Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	X



populati	population health our citizens are entitled to expect					<ol><li>Reduce harm, waste and variation sustainably making best use of the resources available to us</li></ol>					
care sys	anned (emero hat provides t ght place, firs		<ol> <li>Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives</li> </ol>								
Fi	Five Ways of Working (Sustainable Development Principles) considered  Please tick as relevant, click here for more information										
Prevention	x	Long term	x Ir	ntegration	ı x	Collaboration	x	Involvement	x		
Equality and Health Impact Assessment Completed:  Yes / No / Not Applica If "yes" please provide report when published					of the	assessment. This	s will i	be linked to the	)		



Finance Committee Work Plan 2022-23													
App Approval Ass Assurance Inf Information	Exec Lead	27-Apr	25-May	29-Jun	27-Jul	24-Aug	28-Sep	26-Oct	26-Nov	14-Dec	25-Jan	22-Feb	29-Mai
Agenda Item													
Items for Assurance													
Financial Report review	СР	Ass.											
Cost Reduction Programme	СР	Ass.											
Financial Tracker System for Corporate and Clinical													
Boards	CP/CB	Ass.											
Escalation of Corporate and Clinical Boards	СВ	Ass.											
Monitoring of Capital Programme	СР	Ass.											
Finance Risk on Board Assurance Framework	NF		Ass.										
Items for approval / ratification													
IMTP Financial Plan review and monitor	СР											Арр.	
Business cases over £500k review prior to Board (as and													
when required)	СР	Арр.											
Submissions for revenue and capital funding and service													
implications (as and when required)	CP/CB	Арр.	Арр.	App.	Арр.	App.	Арр.						
Review of SFIs and Scheme of Financial Delegation	СР											Арр	
Items for noting													
Review of Financial Risk Register	СР	Inf.											
Items for Development/ Deep dive													
TBC	RT/CP		Ass.			Ass.			Ass.			Ass.	
Finance Committee Governance													
Annual Work Plan	NF											Арр.	
Self assessment of effectiveness	NF	Ass.											
Review Terms of Reference	NF											Арр.	
Produce annual Finance Committee Annual Report	NF											Арр.	
Minutes of Finance Committee Meeting	NF	Арр.											
Action log of Finance Committee Meeting	NF	Ass.											

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Report Title:	Draft Annual Report 2021/22 – Finance Committee								
Meeting:	Finance Commi	ttee			eeting ate:	16 <sup>th</sup> February 2022			
Status:	For Discussion	For Assurance	For Approval	X	For Info	ormation			
Lead Executive:	Director of Corp	orate Governance	)						
Report Author (Title):	Finance Manage	er (Resource Mana	ngement)						

### **Background and current situation:**

It is good practice and good governance for the Committees of the Board to produce an Annual Report from the Committee to demonstrate that it has undertaken the duties set out in its Terms of Reference and provide assurance to the Board that this is the case.

The purpose of the report is to provide Members of the Finance Committee with the opportunity to discuss the attached Annual Report prior to submission to the Board for approval

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

The Annual Report for the Finance Committee has been developed based upon the requirements set out in its Terms of Reference.

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

The attached Annual Report 2021/22 of the Finance Committee demonstrates that the Committee has undertaken the duties as set out in its Terms of Reference. The Committee has achieved an overall attendance rate of 91% for the year to January and is scheduled to meet on twelve occassions during the year.

### Recommendation:

The Finance Committee is asked to:

**REVIEW** the draft Annual Report 2021/22 of the Finance Committee. **RECOMMEND** the Annual Report to the Board for approval.

### **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



Health In	Equality and Health Impact Assessment Completed:  Not Applicable If "yes" please provide copy of the assessment. This will be linked to the report when published.									•		
Prevention	n x	Long term	In	itegratio	n		Collaborati	on	Involvement			
	Five W	lays of Worki Please tid	• •				pment Prin	• •				
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time					<ol> <li>Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives</li> </ol>							
Offer services that deliver the population health our citizens are entitled to expect					9.	<ol> <li>Reduce harm, waste and variation sustainably making best use of the resources available to us</li> </ol>						
3. All take responsibility for improving our health and wellbeing					8.	8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology						
2. Delive peop		omes that mat	er to	Х	7.	7. Be a great place to work and learn						
1. Redu	e hea	lth inequalities			6.				stem where re in balance			







# Annual Report of the Finance Committee 2021/22

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### 1.0 INTRODUCTION

In accordance with best practice and good governance, the Finance Committee produces an Annual Report to the Board setting out how the Committee has met it's Terms of Reference during the financial year.

### 2.0 MEMBERSHIP

In addition to the Chair of the Committee, the Committee membership is a minimum of two other Independent Members. The meetings are also attended by the Executive Director of Finance (Executive Lead for the Committee), Chief Executive, Chief Operating Officer, Executive Director of People and Culture, Executive Director of Strategic Planning, Executive Director of Nursing, Director of Corporate Governance, Deputy Director of Finance and Assistant Director of Finance. Other Executive Directors are required to attend on an ad hoc basis.

### 3.0 MEETINGS AND ATTENDANCE

The Committee is scheduled to meet 12 times during the period from 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022. This is in line with its Terms of Reference. The Finance Committee achieved an attendance rate of 91% (80% is considered to be an acceptable attendance rate) during the period 1<sup>st</sup> April 2021 to 26<sup>th</sup> January 2022 as set out below:

Members	28th April 2021	26th May 2021	23rd June 2021	28th July 2021	25th August 2021	29th Sept. 2021	27th Oct. 2021	24th Nov. 2021	5th Jan. 2022	26th Jan. 2022	16th Feb. 2022	March	Attendance to Jan 2022
Dr Rhian Thomas (Committee Chair from May													
2020)*	Yes	Yes	Yes	Yes	Yes	Apols.	Yes	Yes	Yes	Yes	n/a	n/a	90%
John Union (Independent Member - Finance)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	n/a	n/a	100%
David Edwards (Independent Member - IC & T)	n/a	n/a	n/a	n/a	n/a	n/a	Yes	Yes	Yes	Apols.	n/a	n/a	75%
Charles Janczewski ( UHB Board Chair)	Yes	Yes	Apols.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	n/a	n/a	90%
Overall Attendance to January 2022 (based on													
Chair and 2 other Independent members)	100.00%	100.00%	100.00%	66.67%	100.00%	66.67%	100.00%	66.67%	100.00%	100.00%			91%

<sup>\*</sup> The Meeting of 29th September 2021 was chaired by the Independent Member - Finance

### 4.0 TERMS OF REFERENCE

The Terms of Reference were reviewed in November 2021 and will be reviewed again by the Committee on 16<sup>th</sup> February 2021 with the intention of making a recommendation for approval at the Board on 31<sup>st</sup> March 2022.

# 5.0 WORK UNDERTAKEN

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During the financial year 2021/22, the following standing items were considered and reviewed at each Finance Committee:

- Finance Report for previous month
- Finance Risk Register

An extract from the Monthly Finance Monitoring Returns submitted to Welsh Government is also noted at each Committee Meeting.

In addition, the following items were discussed at Finance Committee meetings:

### April 2021

- Resource Allocations and Funding
- Draft 2021/22 Financial Plan

### May 2021

Draft 2021/22 Financial Plan

### June 2021

- 2021/22 Final Financial plan
- Review of 2021/22 Savings Plans

### **July 2021**

Commissioning and Contracting

### October 2021

WHSCC

### November 2021

Terms of Reference

### December 2021 (meeting held January 5th 2022)

• Financial Plan 2022/23 – update on Revenue Allocations

### January 2022

• 2022/23 -2024/25: IMTP Draft Financial Framework

### 🗜 ebruary 2022 ( per agenda )

- Update on 2022/23 -2024/25: IMTP Draft Financial Framework
- 2021/22 Workplan

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• Terms of Reference

• Finance Committee Work Plan

• Annual Report of the Finance Committee

### 6.0 REPORTING RESPONSIBILITIES

The Committee has reported to each Board meeting by presenting a summary report of the key discussion items at the Finance Committee. The report is presented by the Chair of the Finance Committee. In addition, the finance dashboard which is reviewed at Committee meetings is included within the Performance Report which is submitted to each Board meeting.

### 7.0 OPINION

The Committee is of the opinion that the *draft* Finance Committee Report 2021/22 is consistent with its role as set out within the Terms of Reference and that there are no matters that the Committee is aware of at this time that have not been disclosed appropriately.

Dr Rhian Thomas

Committee Chair



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### THE WELSH GOVERNMENT FINANCIAL COMMENTARY

# FINANCIAL POSITION FOR THE TEN MONTH PERIOD ENDED 31st JANUARY 2022

### INTRODUCTION

The UHB's finalised financial plan, which included a breakeven position was submitted to Welsh Government on the 30<sup>th</sup> June 2021.

At month 10, the UHB is reporting an underspend of £0.406m against this plan. During the 10 months to the end of January the UHB incurred gross expenditure of £83.823m relating to the management of COVID 19, which is assumed to be offset by Welsh Government COVID 19 funding leaving an operating surplus of £0.406m.

The full year gross COVID forecast moved marginally by £0.023m in the month from £118.997m at month 9 to £119.020m at month 10, as the result of additional funding being made available for Covid 19 – Support at HMP Cardiff.

The UHB continues to progress its plans and is forecasting a breakeven year end position.

### **BACKGROUND**

The Health Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2021, which focused on delivering in-year financial stability and maintaining the current level of underlying deficit. The draft plan included a planned deficit of £21.3m in 2021/22 and, if delivered, ensured that the underlying position is stabilised and does not deteriorate. Following submission of the draft plan, Welsh Government issued updated planning guidance and asked the UHB to assume non recurrent COVID funding to cover the initial planning deficit of £21.3m caused by COVID impacting on the delivery of 2020/21 savings plans. The UHB is now forecasting a break-even year end position on this basis and the finalised financial plan was submitted to Welsh Government on the 30<sup>th</sup> June 2021.

This updated final core financial plan is provided in Table 1.

CARING FOR PEOPLE KEEPING PEOPLE WELL



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Table 1: 2021/22 Updated Core Draft Plan

	2021/22 Plan £m	2022/23 Plan £m
Prior Year Plan	(4.0)	(21.3)
Adjustment for non recurrent items in previous year (note 1)	(21.3)	(4.0)
b/f underlying deficit	(25.3)	(25.3)
Net Allocation Uplift (including LTA inflation) (note 2) Draft Cost Pressures Assessment (note 3) Investments Recurrent Cost Improvement Plans 1.5% (note 4) Non Recurrent Cost Improvement Plans 0.5% (note 5)	19.4 (27.4) (4.0) 12.0 4.0	
Planned Surplus/(Deficit) 2021/22	(21.3)	
Non Recurrent COVID Funding to cover slippage in 2020/21 Recurrent saving schemes	21.3	
Updated Core Draft Financial Plan 2021/22 £m	0.0	

This represents the core financial plan of the Health Board. In addition, the UHB will be incurring additional COVID 19 costs in respect of response and recovery for which funding has now been confirmed.

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

A full commentary has been provided to cover the tables requested for the month 10 financial position.

The response to the queries raised in the month 9 financial monitoring returns is set out in an attachment to this commentary.

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

Table A sets out the financial plan and latest position at month 10 for which the following should be noted:

- It is assumed that LTA inflation of £5.075m that will be passed to the UHB from other Health Boards;
- The UHBs £16m 2021/22 savings target is reported on lines 8,9 & 13;
- The forecast position reflects the assessed COVID 19 response and recovery costs in Table B3 with additional Welsh Government Funding to match the costs;
- The bought forward and forecast underlying deficit is £25.313m as outlined in the draft financial plan.

The identification and delivery of the £12m (1.5%) recurrent savings target is key to delivery of the planned in year and underlying position. It is recognised that there is still a shortfall in the identification of required recurrent savings

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schemes to deliver this part of the financial plan and the UHB remains focussed in its ambition to achieve this by year end.

It should be noted that the UHB has not phased the reductions in planned expenditure arising from COVID 19 into its position to date but has agreed a utilisation plan that helps manage risk, support systems resilience and progress against UHB priorities. The latest forecast is a reduction of £7.4m for which expenditure plans are well progressed.

### **OVERVIEW OF KEY RISKS & OPPORTUNITIES (TABLE A2)**

The UHB has well developed plan to utilise its reductions in planned expenditure, the risk of this has therefore been reduced in Table A2.

Table A2 reflects the risks and opportunities identified in the financial plan and these will continue to be reviewed on a monthly basis.

### **ACTUAL YEAR TO DATE (TABLE B AND B2)**

Table B confirms the year to date surplus of £0.406m and reflects the analysis contained in the annual operating plan in Table A. The UHB is reporting an underspend of £0.406m for the year to date and a forecast of breakeven as shown in Table 2.

Table 2: Summary Financial Position for the period ended 31<sup>st</sup> January 2021

	Cumlative Month 10	Forecast Year-End Position
	£m	£m
COVID 19 Additional Expenditure	83.823	119.020
Welsh Government COVID funding received / assumed	(83.823)	(119.020)
Gross COVID 19 Forecast Position (Surplus) / Deficit £m	0.000	0.000
COVID FUNDING for Deficit due to non delivery of 2020/21 recurrent Saving	(17.750)	(21.313)
Operational position (Surplus) / Deficit	17.344	21.313
Financial Position £m (Surplus) / Deficit £m	(0.406)	0.000

 Note. It is forecast that £7.401m of Reductions in Planned Expenditure due to COVID 19 will be available to manage risks in the plan.

The month 10 surplus of £0.406m, is an increase of £0.204m on the surplus reported at month 9 and is comprised of the following:

- (£17.750m) planned deficit funding (10/12<sup>th</sup> of £21.300m);
- £17.344m operational pressures including the underlying brought forward position.

The operational position remains broadly stable with continuing workforce underspends where workforce continues to be a real limiting factor across the UHB.



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

The additional COVID 19 expenditure in the year to date was £83.823m with full year forecast costs totalling £119.020m.

The plan assumes that Welsh Government COVID funding is sufficient to cover the gross COVID costs arising in the year to month 10 and for the remainder of the year.

### PAY & AGENCY (TABLE B2)

The UHB recorded Agency costs of £2.164m in month primarily due to nursing pressures and this represents an increase of £0.201m from the £1.963m recorded in month 9. £1.023m of the costs recorded in December related to registered nursing and midwifery.

### **COVID 19 ANALYSIS (TABLE B3)**

At month 10, Table B3 is projecting gross expenditure due to COVID-19 to be £119.020m. The COVID year-end forecast position is showing a surplus of £21.313m following confirmation/assumed funding matching gross expenditure. This is summarised in table 3:

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**Table 3: Summary of Forecast COVID 19 Gross Expenditure** 

Table 3: Summary of Forecast COVID 19 Gross Expendition	<u>ire</u>	
	Cumlative	Forecast
	Month 10	Year-End
	£m	Position £m
COVID 19 Testing	2.364	2.973
COVID 19 Tracing	10.832	12.992
COVID 19 Vaccination	11.014	12.715
Extended Flu vaccination	0.750	1.129
Field Hospital / Surge - Recovery of Over Accrual	0.000	(0.803)
Cleaning Standards	0.685	
PPE	4.138	5.078
Continuing Care and Funded Nursing Care	2.233	2.350
Urgent and Emergency Care	1.659	1.997
COVID 19 Local Response	37.933	50.611
COVID 19 Recovery	12.622	25.196
COVID 19: Adferiad Programme - Long Covid Recovery	0.579	0.761
COVID 19: Additional Funding Allocation For PACU	0.000	0.528
COVID 19: Community Health Checks for Chronic Conditions	0.000	0.133
Covid 19: Pay Increase	0.620	0.826
Covid 19: Recovery Funding National schemes	0.000	0.747
COVID 19: Recovery Of NHS Bonus Accrual	(1.755)	(1.759)
COVID 19: Health Checks For People With a Learning Disability	0.000	0.085
COVID 19: Same Day Emergency Care	0.150	0.808
COVID 19: Cluster Funding	0.000	0.266
COVID 19: Health and Social Care Winter Plan	0.000	1.304
COVID 19: Agreed WG Uplift DOLS	0.000	0.126
COVID 19: Offender Health Prison Support - HMP Cardiff	0.000	0.023
COVID 19: Planned Care Recovery Revenue SOS/PIFU	0.000	0.099
Gross Expenditure Due To COVID 19 £m	83.823	119.020
Welsh Government COVID funding confirmed / assumed	(83.823)	(119.020)
COVID 19 Forecast Position (Surplus) / Deficit £m before ULD funding	0.000	0.000
NR Funding for Non Delivery of 2020/21 Recurrent Savings	(17.750)	(21.313)
COVID 19 Forecast Position (Surplus) / Deficit £m	(17.750)	(21.313)

This forecast includes assumed Welsh Government funding totaling £119.020m to match the forecast costs and a further £21.313m in support of the planning deficit identified in the initial financial plan as outlined below in Table 4:

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**Table 4: Summary of Forecast COVID 19 Funding** 

Table 4. Summary of Forecast COVID 19 Funding	Month 10	Forecast
	MOHIT 10	Year-End
	£m	Position £m
COVID 19 Testing	(2.364)	(3.159)
COVID 19 Tracing	(10.832)	(13.158)
COVID 19 Vaccination includind COVID Vaccine Allergy SLA	(11.014)	(13.420)
Extended Flu vaccination	(0.750)	(1.873)
Field Hospital / Surge - Recovery of Over Accrual	0.000	0.803
Cleaning Standards	(0.685)	(0.806)
PPE	(4.138)	(3.984)
Continuing Care and Funded Nursing Care	(2.233)	(2.348)
Urgent and Emergency Care	(1.659)	(1.997)
COVID 19 Local Response	(37.933)	(49.935)
COVID 19 Recovery	(12.622)	(25.196)
COVID 19: Adferiad Programme - Long Covid Recovery	(0.579)	(0.761)
COVID 19: Additional Funding Allocation For PACU	0.000	(0.528)
COVID 19: Community Health Checks for Chronic Conditions	0.000	(0.133)
Covid 19: Pay Increase	(0.620)	(0.826)
Covid 19: Recovery Funding National schemes	0.000	(0.747)
COVID 19: Recovery Of NHS Bonus Accrual	1.755	1.759
COVID 19: Health Checks For People With a Learning Disability	0.000	(0.085)
COVID 19: Same Day Emergency Care	(0.150)	(0.808)
COVID 19: Cluster Funding	0.000	(0.266)
COVID 19: Health and Social Care Winter Plan	0.000	(1.304)
COVID 19: Agreed WG Uplift DOLS	0.000	(0.126)
COVID 19: Offender Health Prison Support - HMP Cardiff	0.000	(0.023)
COVID 19: Planned Care Recovery Revenue SOS/PIFU	0.000	(0.099)
Sub Total COVID funding confirmed/assumed £m	(83.823)	(119.020)
NR Funding for Non Delivery of 2020/21 Recurrent Savings	(17.750)	(21.313)
Total COVID funding confirmed/assumed £m	(101.573)	(140.333)

The surplus non recurrent COVID funding is to be applied to the brought forward COVID defict of £21.313m relating to a shortfall in recurrent savings delivery in 2020/21.

Gross COVID expenditure is now assumed to be fully funded. The COVID 19 reductions in planned care expenditure have risen steadily since month 1 when they were forecast to be £3.786m in year. The forecast has risen by a further £0.322m in month to £7.401m at month 10 and the UHB is currently assuming that the full amount will be utilised to manage financial risks, support systems resilience and progress UHB priorities. The corresponding budget is reported against the non pay line leading to an increase in the profile of non pay costs in the final 2 months of the year.

The full year gross COVID forecast moved marginally by £0.023m in the month from £118.997m at month 9 to £119.020m at month 10, as the result of additional funding being made available for Covid 19 – Support at HMP Cardiff.

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### **Key Financial Assumptions**

The key assumptions are as follows:

- The brought forward COVID deficit of £21.313m relating to non-delivery of savings in 2020/21 is funded non recurrently.
- Confirmed Local COVID 19 response cost allocation of £49.935m for the financial year.
- Funding for national programmes have been fixed at month 8 forecasts
  - Testing costs
  - Mass vaccination programme
  - Transforming access to emergency care
  - Cleaning standards
  - NHS commissioned packages of care
  - PPE
  - Tracing costs (allocated from separate fund)
- COVID recovery allocations (as detailed below).
- COVID element of the 2021/22 pay award, which will be funded non recurrently.

### Overarching Planning assumptions for 2021/22

The first principle of the UHB's approach to planning through the pandemic has been, and continues to be, 'COVID ready'. This recognises the need to be ahead of the 'COVID-curve' and an appreciation that the uncertainty is such that UHB plans must be dynamic and anticipate the full range of possibilities. As a result, the UHB:

- has developed, with its Local Authority partners, a comprehensive surveillance dashboard to closely monitor all aspects of the pandemic, which provides the UHB with an early warning if the situation is deteriorating;
- utilises 'nowcasts' to predict future COVID demand over 4-week time horizons:
- has established the concept of 'gearing' to set out our escalation and deescalation measures as COVID numbers increase and decrease; and
- has developed internal models to produce longer-term scenario modelling and understand the range of potential trajectories for COVID.

To that end the UHB has developed three broad scenarios (shown in Table 5), representing the range of plausible circumstances (for COVID 19) over the coming year. It is important to note this is not to predict or project what might happen, but rather to understand the range of demand levels that the UHB may need to be prepared for. The model used for these scenarios has been further developed to account for the impact that the vaccine roll-out programme is expected to have on reducing susceptibility within the population.



**Table 5: Scenario Analysis** 

Sce	nario	Gear	Description
1	COVID-19 "best- case"	Lower end of 'Significant' or 'COVID-free'	COVID recedes significantly during quarter one and – as a consequence of the vaccine programme and no new vaccine-resistant variants emerging - doesn't return to any significant degree
2	COVID-19 "worst- case"	Substantial (during Autumn/Winter)	New variants emerge over the summer which significantly reduce the effectiveness of the vaccines and result in a substantial third wave in the Autumn/Winter of 21/22
3	COVID-19 "central" (during Autumn/Winter)		COVID reduces through Q1/Q2 but then a smaller third wave occurs during Autumn/Winter as a result of a partial reduction in the effectiveness of the vaccines

### **COVID Local Response**

Full year forecasting has been a challenge all year given the range of potential COVID trajectories. With COVID prevalence increasing the organisation needs to remain COVID ready. Key cost drivers within the UHB's local COVID response include:

- Site footprint (green, amber, red zones including transitional care beds)
- Reduced Dental income
- Critical Care revised layout
- Reduced private patient/overseas income
- Reduced restaurant and retail income
- GP OOH
- Laboratory support
- Mental Health out of area placements impact
- Use of the Independent Sector

### **COVID Recovery**

The focus is now increasingly turning to planning recovery of the system that will present a long term challenge. The organisation is now progressing its recovery plans in line with its recovery proposals.

Confirmation of tranche 1 £13.660m non-recurrent funding will support the following proposals:

- Independent sector and insourcing £6.757m
- Waiting list initiatives £1.214m
- Specialty specific schemes £0.610m



- Therapies £0.448m
- Recruitment of key posts £3.381m
- Hire of 2 mobile theatre units £1.250m

Confirmed funding of tranche 2 recovery bids totalling £11.536m will focus on unscheduled care, primary care, diagnostics and mental health.

Further confirmed funding for national recovery schemes will support the following:

- PACU £0.528m
- Community health checks for chronic conditions £0.133m
- Cancer £0.148m
- Ophthalmology £0.438m
- Dermatology £0.129m
- Waiting list support £0.032m
- Learning Disabilities health checks £0.085m
- DOLS uplift £0.126m
- Planned Care Recovery Revenue SOS/PIFU £0.099M

The UHB continues to track the impact of schemes against the commitments as set out in the Annual Plan. Having delivered the Quarter 1 target of a return to 70% of pre-covid elective activity, activity delivery increased to 80% of pre-covid activity by the end of quarter 2. Capacity and activity across all diagnostics modalities continues to increase, with CT and endoscopy running at over 100% when compared to pre-covid. New and follow up outpatients capacity continues to increase in line with specific recovery schemes.

### **Urgent and Emergency Care**

The UHB continues to shape its unscheduled care plans around the goals of the national urgent and emergency care framework. Costs included relate to urgent primary care centres and CAV 24/7. Confirmation of funding for CAV 24/7 is still outstanding.

### **Resuming Non-Covid Activity**

Throughout the pandemic the UHB has maintained core essential services. Given the uncertainty brought about by COVID 19 the UHB continues to operate in 4 week planning cycles, with prioritisation of need based upon clinical-stratification rather than time-based stratification.

The reductions in non pay costs due to reduced elective capacity is forecast to be £7.4m over the year and the UHB has plans to fully utilise this. This represents activity rising to 70% of pre-COVID levels through Q1, 80% through Q2 and 90% through Q4 supported by COVID recovery plans,



including continued and increased use of the independent sector and the commissioning of new modular theatres. The system is however under considerable pressure which could impact upon elective activity in the last quarter of the year.

### **Financial Risks and Uncertainties**

The UHB is forecasting a breakeven position at the year end in line with the submitted annual financial plan. In order to achieve this there are a number of risks and uncertainities that need to be managed. Worforce remains the key constraint.

### Savings Programme 2021-22 (TABLE C, C1 & C2)

Delivery of the core financial plan includes a 2% (£16.0m) savings requirement. At month 10, £15.252m Green and Amber savings have been identified against the target. This leaves the UHB with a further £0.748m of schemes to identify to meet the £16.000m savings target as outlined in table 6 below:

**Table 6: Savings Schemes** 

	Total	Total	Total			
	Savings	Savings	Savings			
	Target					
	£m	£m	£m			
Total £m	16.000	15.252	(0.748)			

Whilst the UHB is confident that the £16m target will be achieved this year, further progress will need to be made on recurrent schemes. The gap against the UHB's recurrent target has remained stable in month at £4.492m.

### **INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)**

The current status of Welsh LTA agreements is as follows:

- Aneurin Bevan The LTA is agreed and signed.
- Swansea Bay The LTA is agreed and signed.
- Hywel Dda The LTA is agreed and signed.
- Powys The LTA is agreed and signed.
- Cwm Taf Morgannwg The LTA is agreed and signed.
- WHSSC The LTA is agreed and signed.
- Velindre The LTA is agreed and signed.

### **INCOME ASSUMPTIONS 2021/22 (TABLE E)**

Table E outlines the UHB's 2021/22 resource limit.





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Similar to practice in previous years, the UHB's forecast continues to exclude £1.028m of recurrent expenditure, which has arisen following a change in the accounting treatment of PFI schemes under International Financial Reporting Standards (IFRS). The UHB is assuming that Welsh Government will continue to provide resource cover for this.

### BALANCE SHEET - STATEMENT OF FINANCIAL POSITION (TABLE F)

The opening balances at the beginning of April 2021 reflect the closing balances in the 2020/21 Annual Accounts approved by the UHB's Board.

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. Updated indices are reflected.

Overall trade debtors have increased by £51m since the start of the year. This relates to amounts due from the Welsh Risk Pool (circa £35m) in respect of clinical negligence and NHS receivables (circa £10m). The overall carrying value of debtors has increased by £33m in month - £21m relating to Welsh risk pool and £7m Non NHS Prepayments.

The value of Trade and other payables has fallen by around £16m since the start of the year. This mainly relates to a significant decrease in the levels of non NHS accruals (£20m), where the majority of the significant year-end balance has now been settled.

The forecast balance sheet reflects the UHB's November non-cash estimates.

### **CASH FLOW (TABLE G)**

The closing cash balance at the end of January was £4.062m.

The UHB is predicting a cash deficit of £26.517m at the end of 2021/22. The request for working cash represents 2020/21 resource limit only allocations, which supported UHB expenditure and have led to a subsequent outflow of cash in 2021/22. In addition, the UHB is requesting additional cash to support the resource limit allocations made in 2018/19 & 2019/20 in respect of overtime entitlement on holiday pay, where there was no associated additional cash limit allocation and the corresponding cash payment was discharged in 2021/22.

The request is summarised below with further detail provided in the response to the month 5 MMR feedback letter:

 £26.921m Working Cash request for 2020/21 resource limit allocations not backed by associated cash limit adjustments



- £0.233m Working Cash request for 2019/20 holiday pay provision overtime resource limit allocations not backed by associated cash limit adjustments
- £0.910m Working Cash request for 2019/20 holiday pay provision overtime resource limit allocations not backed by associated cash limit adjustments
- Abatement of £1.547m in respect of the 2021/22 resource limit only reduction for the Recovery of the NHS Bonus Accrual.

A large part of the UHB's 2021/22 expenditure is profiled into the final part of the year and at this stage it is unclear whether the UHB will require the full £26.517m working cash in 2021/22.

### **CAPITAL SCHEMES (TABLES I & J)**

Of the UHB's approved Capital Resource Limit, 26.7% has been expended to date. The low percentage reflects the number of large schemes approved in the second half of 21/22.

The year to date spend is behind the original scheme forecast, which is due to estimated lead times being longer than expected. Table J has been updated to reflect this and all schemes are expected to be deliverable within year. The Eye Care Scheme shows a £350k underspend however this relates to the agreed DPIF funding re-provision (updated CRL received 9/2/22).

Planned expenditure for the year reflects the CRL received from Welsh Government dated 3<sup>rd</sup> February 2022.

The key points to note in Table I are:

- The forecast overspend ascribed to the Rookwood Hospital Replacement Scheme repays funding drawn down but not spent in previous years, this is managed within the discretionary forecast
- All other schemes are in line with annual forecast.

### AGED WELSH NHS DEBTORS (TABLE M)

As at the 31<sup>st</sup> January, 2022, five invoices raised by the UHB against other Welsh NHS bodies have been outstanding for more than 17 weeks. One has since been credited (AB), one (HEIW) validated for payment and the remainder agreed for payment as part of the Agreement of Balances exercise.

### 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 14<sup>th</sup> February 2022 meeting of the Finance Committee for information.

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### **CONCLUSION**

Welsh Government wrote to the UHB on 11<sup>th</sup> March 2021 outlining the annual planning arrangements for 2021/22. The UHB submitted a draft financial plan at the end of March 2021 and a final plan on 30<sup>th</sup> June 2021 in line with the Welsh Government timetable.

The UHB is committed to achieving in year and recurrent financial balance as soon as possible and currently has a one year operational plan for 2021/22, which aims to deliver financial stability and ensure that the underlying position does not deteriorate. This includes a savings target of £16.0m.

The reported financial position for the 10 months to the end of January is a surplus of £0.406m and the UHB is forecasting a breakeven position at year end. This forecast is based upon confirmed allocations and other resource planning assumptions agreed with Welsh Government and the management of residual risks in the plan.

SUZANNE RANKIN CHIEF EXECUTIVE

11<sup>th</sup> February 2022

CATHERINE PHILLIPS EXECUTIVE DIRECTOR OF FINANCE

11<sup>th</sup> February 2022





Period: Jan 22

Cardiff & Vale ULHB Table A - Movement of Opening Financial Plan to Forecast Outturn

### This Table is currently showing 0 errors

Line 14 should reflect the corresponding amounts included within the latest IMTP/AOP submission to WG Lines 1 - 14 should not be adjusted after Month 1

	Elito I I I Giodia not de dojudio di ci monti I	In Year	Non		FYE of
		Effect	Recurring	Recurring	Recurring
		£'000	£'000	£'000	£'000
1	Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	-25,313	0	-25,313	-25,313
2	Planned New Expenditure (Non Covid-19) (Negative Value)	-33,575	-48	-33,527	-33,527
3	Planned Expenditure For Covid-19 (Negative Value)	-118,787	-118,787		
4	Planned Welsh Government Funding (Non Covid-19) (Positive Value)	16,501	0	16,501	16,501
5	Planned Welsh Government Funding for Covid-19 (Positive Value)	140,100	140,100		
6	Planned Provider Income (Positive Value)	5,075	0	5,075	5,075
7	RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	0
8	Planned (Finalised) Savings Plan	12,338	6,844	5,494	5,847
9	Planned (Finalised) Net Income Generation	386	220	166	166
10	Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
11	Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
12	Covid Expenditure Reductions	0	0		
13	Planning Assumptions still to be finalised at Month 1	3,275	0	3,275	5,938
14	Opening IMTP / Annual Operating Plan	0	28,329	-28,329	-25,313
15	Reversal of Planning Assumptions still to be finalised at Month 1	-3,275	0	-3,275	-5,938
16	Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive	0	0		
17	Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets	0	0		
18	Underachievement of Month 1 Finalised Income Generation Due to Covid-19 (Negative Value)	0	0		
19	Other Movement in Month 1 Planned & In Year Net Income Generation	86	30	56	67
20	Underachievement of Month 1 Finalised Savings Due to Covid-19 (Negative Value)	0	0		
21	Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	-60	0	-60	-114
22	Additional In Year Identified Savings - Forecast	2,439	1,034	1,404	1,493
23	Variance to Planned RRL & Other Income	0	0		
24	Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 (Positive Value - additional)	233	233		
25	Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0		
26	Additional In Year & Movement Expenditure for Covid-19 (Positive Value - additional/Negative Value - reduction)	-233	-233		
27	In Year Expenditure Cost Reduction Due To Covid-19 (Positive Value)	7,401	7,401		
28	In Year Slippage on Investments/Repurposing of Developmental Initiatives Due To Covid-19 (Positive Value)	0	0		
29	In Year Accountancy Gains (Positive Value)	0	0	0	0
30	Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	0	0		
31	Actions to mitigate Savings Delivery & In Year Operational Pressures	0	0	0	4,492
32	In Year Operational Pressures in addition to Savings Delivery	-6,592	-6,592		
33		0	0		
34		0	0		
35		0	0		
36		0	0		
37		0	0		
38		0	0		
39		0	0		
40	Forecast Outturn (- Deficit / + Surplus)	0	30.203	-30.203	-25.313

	.					_			_					In Year
- 1	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	-2,109	-2,109	-2,109	-2,109	-2,109	-2,109	-2,109	-2,109	-2,109	-2,109	-2,109	-2,109	-21,094	-25,313
2	-2,704	-2,704	-2,704	-2,704	-2,704	-2,704	-2,704	-2,704	-2,704	-2,704	-2,704	-3,835	-27,037	-33,575
3	-8,825	-7,835	-8,499	-8,180	-11,254	-10,726	-11,104	-10,966	-10,633	-10,494	-10,144	-10,125	-98,518	
4	1,375	1,375	1,375	1,375	1,375	1,375	1,375	1,375	1,375	1,375	1,375	1,375	13,751	16,501
5	8,825	11,387	10,276	9,956	13,030	12,502	12,880	12,743	12,409	12,270	11,920	11,901	116,278	140,100
6	423	423	423	423	423	423	423	423	423	423	423	423	4,229	5,075
7	464	390	-802	-561	-105	-132	-102	-91	-98	-97	0	1,134	-1,134	0
8	491	545	1,734	1,553	1,030	1,056	1,026	1,015	1,022	1,021	924	921	10,493	12,338
9	13	30	34	35	35	35	34	34	34	34	34	34	318	386
10													0	0
11													0	0
12													0	0
13	273	273	273	273	273	273	273	273	273	273	273	273	2,729	3,275
14	-1,775	1,775	0	60	-7	-7	-8	-8	-8	-8	-8	-8	16	0
15	-273	-273	-273	-273	-273	-273	-273	-273	-273	-273	-273	-273	-2,729	-3,275
16													0	0
17													0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	0	0	6	14	14	7	7	7	7	7	7	7	71	86
20	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	0	0	0	4	2	-9	-6	-14	-9	-9	-9	-9	-42	-60
22	0	0	45	141	487	210	364	313	171	235	235	237	1,967	2,439
23													0	0
24	1,776	-1,776	0	0	-2,850	-2,851	-3,874	-3,217	-1,753	-151	6,863	8,064	-14,695	233
25													0	0
26	0	0	0	0	2,850	2,851	3,874	3,217	1,753	151	-6,863	-8,064	14,695	-233
27	661	516	970	415	612	571	901	-4,646	0	0	424	6,978	0	7,401
28	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30													0	0
31	0												0	0
32	-2.318	1.251	-187	-226	-1.186	-239	-886	4.655	8	251	-579	-7.135	1.123	-6,592
33													0	0
34													0	0
35													0	0
36													0	0
37													0	0
38													0	0
39													0	0
40	-1,929	1,493	560	136	-351	261	100	35	-103	204	-203	-203	406	0

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## Cardiff & Vale ULHB

Period :

Jan 22

### This Table is currently showing 0 errors

Tal	ole A2 - Overview Of Key Risks & Opportunities	FORECAST Y	EAR END
		£'000	Likelihood
	Opportunities to achieve IMTP/AOP (positive values)		
1	Red Pipeline schemes (inc AG & IG)		
2	Potential Cost Reduction		
3	Total Opportunities to achieve IMTP/AOP	0	
$\vdash$	Risks (negative values)		
4	Under delivery of Amber Schemes included in Outturn via Tracker		Low
5	Continuing Healthcare		
6	Prescribing		
7	Pharmacy Contract		
8	WHSSC Performance		
9	Other Contract Performance		
10	GMS Ring Fenced Allocation Underspend Potential Claw back		
11	Dental Ring Fenced Allocation Underspend Potential Claw back		
12	Net application of reductions in planned expenditure	(2,000)	Medium
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26	Total Risks	(2,000)	
Ť	Further Opportunities (positive values)	(2,000)	
27	Planned Expenditure reductions	2,000	Low
28	'	2,000	
29			
30			
31			
32			
33 29	Total Eusthan Opportunities	2.000	
34 35	Total Further Opportunities	2,000	
35⁄ 36	Current Reported Forecast Outturn  IMTP / AOP Outturn Scenario	(0)	
37	Worst Case Outturn Scenario	(0)	
38	Best Case Outturn Scenario	2,000	
100	Desi Gase Gutturii Scenario	2,000	

### This Table is currently showing 0 errors

Table B3 - COVID-19 Analysis

A - Add	itional Expenditure	1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	Forecast year-end position
A1	Enter as positive values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Testing (Additional costs due to C19) enter as positive values - actual/forecast	i				·									
2	Provider Pay (Establishment, Temp & Agency)	1													
3	Administrative, Clerical & Board Members	92	74		87	54	73		75		73	80	80	788	
4	Medical & Dental	0	0		0	0	0		0		0	0	0	0	
5	Nursing & Midwifery Registered	102	83		99	89	90		94		76		95	833	
7	Prof Scientific & Technical	30	0		0 13		3		3		0 16		0	0 120	
8	Additional Clinical Services Allied Health Professionals	10	17		16	3	8		8	7	7	7	7	74	
9	Healthcare Scientists	0	0		0	0	0		0		0	0	,	0	
10	Estates & Ancillary	0	0		0		0		0		0	0	0	0	
11	Students	0	0		0		0				0		0	0	
12	Sub total Testing Provider Pay	235	175		215	166	174		181		173		186	1,815	
13	Primary Care Contractor (excluding drugs)	0	0	0	0	43	31		24		87	35	32	226	
14	Primary Care - Drugs	0	0		0	0	0	0	0	0	0	0	0	0	
15	Secondary Care - Drugs	0	0		0		0		0		0	0	0	0	
16	Provider - Non Pay (Clinical & General Supplies, Rent, Rates, Equipment etc) Exclude PPE - see A7	8	8		68	57	28		19		26	84	86	323	494
17	Healthcare Services Provided by Other NHS Bodies	0	0	-	0	0	0		0	0	0	0	0	0	-
18	Non Healthcare Services Provided by Other NHS Bodies	0	0		0		0		0	0	0	0	0	0	
19	Continuing Care and Funded Nursing Care	0	0		0		0				0	0	0	0	
20	Other Private & Voluntary Sector	0	0		0		0				0	0	0	0	
21	Joint Financing and Other (includes Local Authority)	0	0		0		0		0		0	0	0	0	
22	Other (only use with WG agreement & state SoCNE/I line ref)	0	0		0	0	0		0		0	0	0	0	
23		0	0		0	-	0		0		0	0	0	0	
24		0	0		0		0		0			0	0		
25	Out And Tardian New Park	0	0		0	0	0			Ů	0		440	0	
26	Sub total Testing Non Pay	8	8		68	100	58		43		113		118	549	
27	TOTAL TESTING EXPENDITURE	243	183		283	266	233		224		286		304	2,364	
28	PLANNED TESTING EXPENDITURE (In Opening Plan)  MOVEMENT FROM OPENING PLANNED TESTING EXPENDITURE	243 0	183		283	332 66	332 99		332 108		332 46		332 <b>28</b>	3,065 702	
A2		, u	0	0	0	90	99	118	108	265	46	27	28	702	/5/
30	Tracing (Additional costs due to C19) enter as positive values - actual/forecast  Provider Pay (Establishment, Temp & Agency)	ł													
31	Administrative, Clerical & Board Members	0	0	0 0	0	0	0	0	0	0	0	0.	0	0	
32	Medical & Dental	0	0		0	0	0		0		0	0	0	0	
33	Nursing & Midwifery Registered	Ö	0		0		0		0		0	0	0	0	
34	Prof Scientific & Technical	0	0		0		0		0		0	0	0	0	0
35	Additional Clinical Services	0	0		0	0	0		0	0	0	0	0	0	0
36	Allied Health Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0
37	Healthcare Scientists	0	0	0	0	0	0		0	0	0	0	0	0	0
38	Estates & Ancillary	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40	Sub total Tracing Provider Pay	0	0	-	0	0	0			-	0	0	0	0	
41	Primary Care Contractor (excluding drugs)	0	0		0		0		0		0	0	0	0	_
42	Primary Care - Drugs	0	0		0		0		0	-	0	0	0	0	_
43	Secondary Care - Drugs	0	0		0		0				0	0	0	0	
44	Provider - Non Pay (Clinical & General Supplies, Rent, Rates, Equipment etc) Exclude PPE - see A7	0	0		0		0		0		0	0	0	0	
45	Healthcare Services Provided by Other NHS Bodies	0	0		0	-	0		0		0	0	0	0	
46	Non Healthcare Services Provided by Other NHS Bodies	0	0		0	0	0		0		0	0	0	0	
47	Continuing Care and Funded Nursing Care	0	0		0		0		0		0	0	0	•	<del>-  </del>
48 49	Other Private & Voluntary Sector  Joint Financing and Other (includes Local Authority)	0 1,016	956		0 998	1,186	1,081		1,126	1,059	1,290	1,005	1,155	10,832	12,992
50	Other (only use with WG agreement & state SoCNE/I line ref)	1,016	956		998	1,186	1,081		1,126		1,290		1,100	10,832	12,332
50	Const toning and what we agree the lit of state out of the little fell	0	0	0	0		0		0		0		0	0	<del>                                     </del>
(522)		0	0		0	0	0		0	0	0	0	0	0	_
53	h	0	0	0	0	0	0		0	0	0	0	0	0	_
54	Sub total Tracing Non Pay	1,016	956		998	1,186	1,081	1,174	1,126	1,059	1,290	1,005	1,155	10,832	
55	TOTAL TRACING EXPENDITURE	1,016	956		998	1,186	1,081	1,174	1,126	1,059	1,290	1,005	1,155	10,832	12,992
56	PLANNED TRACING EXPENDITURE (In Opening Plan)	1,016	956		998	1,696	1,696	1,696	1,696	1,696	1,696	1,696	1,696	14,092	17,484
	MOVEMENT, FROM OPENING PLANNED TRACING EXPENDITURE	1,010	0		0	510	615		570		406		541	3,260	
31	MOTENIES TO THE OF LIGHTED TRACING EXPENDITURE	. "	U	U U	U	310	010	522	3/0	03/	400	031	541	3,260	4,432

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A3	Mass COVID-19 Vaccination (Additional costs due to C19) enter as positive values - actual/forecast	4													
58 59	Provider Pay (Establishment, Temp & Agency)	238	260	272	222	220	254	200	100	224	240	276	276	2,345	2,896
60	Administrative, Clerical & Board Members  Medical & Dental	238	260 9	273 10	232	228	254	200	180	231	249	276	276	92	2,896
61	Nursing & Midwifery Registered	213	340	279	194	206	240	252	208	223	236	206	206	2,391	2,802
62	Prof Scientific & Technical	9	19	7	9	4	1	2	8	10	2	10	10	71	92
63	Additional Clinical Services	242	293	227	225	158	154	113	80	106	124	102	102	1,722	1,926
64	Allied Health Professionals	0	0	1	3	1	31	0	2	0	2	0	0	41	41
65	Healthcare Scientists	7	2	4	1	1	0	2	3	3	3	0	0	28	28
66 67	Estates & Ancillary Students	42	31	26	25 0	22 0	(22)	0	(0)	0	0	0	0	123	123
68	Sub total Mass COVID-19 Vaccination Provider Pay	763		827	699	631	685	575	486	573	619	594	594	6,813	8,000
69	Primary Care Contractor (excluding drugs)	391	123	69	000	7	4	121	63	18	72	0	0	867	867
70	Primary Care - Drugs	0	0	0	0	0	0	0	0	0	0	0	0	0	0
71	Secondary Care - Drugs	0	0	0	0	0	0	0	0	0	0	0	0	0	0
72	Provider - Non Pay (Clinical & General Supplies, Rent, Rates, Equipment etc) Exclude PPE - see A7	120	177	250	343	645	311	(7)	199	(164)	164	181	110	2,039	2,331
73 74	Healthcare Services Provided by Other NHS Bodies  Non Healthcare Services Provided by Other NHS Bodies	0	0	0	0	0	0	0	0	0	0	0	0	0	0
75	Continuing Care and Funded Nursing Care	0	0	0	0	0	0	0	0	0	0	0	0	0	- 0
76	Other Private & Voluntary Sector	306	88	170	163	37	51	133	217	(9)	139	107	114	1,296	1,517
77	Joint Financing and Other (includes Local Authority)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
78	Other (only use with WG agreement & state SoCNE/I line ref)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
79		0	0	0	0	0	0	0	0	0	0	0	0	0	0
80 81		0	0	0	0	0	0	0	0	0	0	0	0	0	0
81	Sub total Mass COVID-19 Vaccination Non Pay	817	389	490	507	689	366	247	479	(156)	374	288	225	4,202	4.715
	TOTAL MASS COVID-19 VACC EXPENDITURE	1,580	1,344	1,317	1,205	1,319	1,052	822	965	417	993	882	818	11,014	12,715
	PLANNED MASS COVID-19 VACC EXPENDITURE (In Opening Plan)	1,580	1,344	1,317	1,205	1,938	1,419	1,431	1,366	1,327	1,305	1,270	1,270	14,232	16,773
	MOVEMENT FROM OPENING PLANNED MASS COVID-19 VACC EXPENDITURE	0		0	0	619	367	608	401	910	311	389	452	3,218	4,059
A4	Extended Flu Vaccination (Additional costs due to C19) enter as positive values - actual/forecast									,		,		-,	.,,
86	Provider Pay (Establishment, Temp & Agency)	1													
87	Administrative, Clerical & Board Members	0	0	0	0	0	0	0	0	0	17	0	0	17	17
88	Medical & Dental	0		0	0	0	0	0	0	0	0	0	0	0	0
89 90	Nursing & Midwifery Registered Prof Scientific & Technical	0	0	0	0	0	0	18	10 0	21 0	17 0	0	0	66	66
91	Additional Clinical Services	0	0	0	0	0	0	3	6	5	6	9	- 0	20	38
92	Allied Health Professionals	0	0	ő	0	0	0	0	0	0	0	0	0	0	0
93	Healthcare Scientists	0	0	0	0	0	0	0	0	0	0	0	0	0	0
94	Estates & Ancillary	0	0	0	0	0	0	0	0	0	0	0	0	0	0
95	Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
96 97	Sub total Extended Flu Vaccination Provider Pay	0		0	0	0	0	<b>21</b> 673	16	<b>27</b> 430	<b>40</b> (504)	330	9	104 337	122 667
98	Primary Care Contractor (excluding drugs) Primary Care - Drugs	0	0	0	0	0	0	89	(263) 63	430	(504)	13	13	208	235
99	Secondary Care - Drugs	0	0	0	0	0	0	54	24	5	0	0	0	83	83
100	Provider - Non Pay (Clinical & General Supplies, Rent, Rates, Equipment etc) Exclude PPE - see A7	0	0	0	0	0	0	0	13	2	3	3	3	18	23
101	Healthcare Services Provided by Other NHS Bodies	0	0	0	0	0	0	0	0	0	0	0	0	0	0
102	Non Healthcare Services Provided by Other NHS Bodies	0	0	0	0	0	0	0	0	0	0	0	0	0	0
103 104	Continuing Care and Funded Nursing Care Other Private & Voluntary Sector	0	0	0	0	0	0	0	0	0	0	0	0	0	0
104	Joint Financing and Other (includes Local Authority)	0	0	0	0	0	0	- 0	0	0	0	0	0	0	- 0
106	Other (only use with WG agreement & state SoCNE/I line ref)	0	0	0	0	0	0	0	0	0	0	0	ő	0	0
107		0	0	0	0	0	0	0	0	0	0	0	0	0	0
108		0	0	0	0	0	0	0	0	0	0	0	0	0	0
109		0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Sub total Extended Flu Vaccination Non Pay	0		0	0	0	0		(162)	486	(494)	346	16	646	1,008
	TOTAL EXTENDED FLU VACC EXPENDITURE  PLANNED EXTENDED FLU VACC EXPENDITURE (In Opening Plan)	0	0	0	0	0	<b>0</b> 91	<b>837</b> 583	(146) 496	<b>513</b> 165	( <b>454</b> ) 98	<b>355</b>	<b>25</b> 21	750 1,431	1,129 1,536
112	MOVEMENT FROM OPENING PLANNED EXTENDED FLU VACC EXPENDITURE	0		0	0	0	91	(255)	496 <b>642</b>	(348)	552	(270)	(4)	1,431	1,536
A5	Field Hospital / Surge (Additional costs due to C19) enter as positive value - actual/forecast	<b>──</b>					- 31	(200)	042	(540)	332	(210)	(**)	001	407
114	Provider Pay (Establishment, Temp & Agency)	1													
	Administrative, Clerical & Board Members	0	11	3	7	5	4	8	3	5	5	5	5	51	61
116	Medical & Dental	0	0	39	34	44	47	22	32	26	17	23	23	260	307
117	Nursing & Midwifery Registered	0	245	141	128	111	149	149	173	130	157	152	152	1,383	1,687
118	Prof Scientific & Technical Additional Clinical Services	0	0 219	117	0 94	0 88	95	105	133	110	119	126	126	1,080	1,333
120	Allied Health Professionals	0	0	0	0	0	0	0	0	0	0	0	0	1,000	1,333
	Healthcare Scientists	0	0	ő	0	0	0	ő	0	0	0	0	ő	0	- 0
122	Estates & Ancillary	0	37	80	35	35	52	41	41	79	71	35	44	469	548
	Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Sup total Field Hospital / Surge Provider Pay	0		381	298	282	347	324	382	350	369	342	351	3,243	3,936
125	Primary Care Contractor (excluding drugs)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
126 127	Primary Qare - Drugs Secondary Care - Drugs	0	0	0 5	5	6	0	9	9	9	12	10	10	76	0 96
127	Provider - Non/Ray (Clinical & General Supplies, Rent, Rates, Equipment etc) Exclude PPE - see A7	0	131	35	44	47	54	94	(721)	92	107	66	67	(115)	17
129	Provider - Non Pay (Decommissioning Costs)	0	0	0	0	0	0	0	0	0	0	0	0	(113)	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0
130	Healthcare Services Provided by Other NHS Bodies														
130 131	Non Healthcare Services Provided by Other NHS Bodies	0	0	0	0	0	0	0	0	0	0	0	0	0	0
130 131 132			_				0	0	0	0	0	0	0	0	0

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													_		
134	Joint Financing and Other (includes Local Authority)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
135	Joint Financing and Other - (Compensation for Consequential Losses)	0	0	0	0	0	0		0	0	0	0	0	0	0
	Other (only use with WG agreement & state SoCNE/I line ref)	0	0	0	0	0	0	٥	0	0	0	0	0	0	0
137		0	0	0	0	0	0	•	0	0	0	0	0	0	0
138		0	0	0	0	0	0	0	0	0	0	0	0	0	0
139		0	0	0	0	0	0	0	0	0	0	0	0	0	0
140	Sub total Field Hospital / Surge Non Pay	0	144		50	53	62		(712)	101	118	76	77	(39)	113
141	TOTAL FIELD HOSPITAL / SURGE EXPENDITURE	0	656	421	348	335	409	427	(330)	451	487	417	427	3,204	4,049
142	PLANNED FIELD HOSPITAL / SURGE EXPENDITURE (In Opening Plan)	0	656	421	348	357	365	359	360	373	364	339	348	3,603	4,290
143	MOVEMENT FROM OPENING PLANNED FIELD HOSPITAL / SURGE EXPENDITURE	0	0	0	0	22	(43)	(68)	690	(78)	(123)	(79)	(79)	399	241
A6	Cleaning Standards (Additional costs due to C19) enter as positive value - actual/forecast	1		•										•	$\overline{}$
144	Provider Pay (Establishment, Temp & Agency)	1													
145	Administrative, Clerical & Board Members	0	0	0	0	0	0	0	0	0	0	0	0	0	0
146	Medical & Dental	0	0	0	0	0	0	0	0	0	0	0	0	0	0
147	Nursing & Midwifery Registered	0	0	0	0	0	0	0	0	0	0	0	0	0	0
148	Prof Scientific & Technical	0	0	0	0	0	0	0	0	0	0	0	0	0	0
149	Additional Clinical Services	0	0	0	0	0	0		0	0	0	0	0	0	0
150	Allied Health Professionals	0	0	0	0	0	0		0	0	0	0	0	0	0
151	Healthcare Scientists	0	0	0	0	0	0	0	0	0	0	0	0	0	0
152	Estates & Ancillary	155	(48)	83	51	60	73	56	70	65	82	71	71	647	789
153	Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
154	Sub total Cleaning Standards Provider Pay	155	(48)	83	51	60	73	56	70	65	82	71	71	647	789
155	Primary Care Contractor (excluding drugs)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
156	Primary Care - Drugs	0	0	0	0	0	0	0	0	0	0	0	0	0	0
157	Secondary Care - Drugs	0	0	0	0	0	0	0	0	0	0	0	0	0	0
158	Provider - Non Pay (Clinical & General Supplies, Rent, Rates, Equipment etc) Exclude PPE - see A7	0	0	0	0	1	0		4	25	7	4	4	38	46
159	Healthcare Services Provided by Other NHS Bodies	0	0	0	0	0	0		0	0	0	0	0	0	0
160	Non Healthcare Services Provided by Other NHS Bodies	0	0	0	0	0	0	0	0	0	0	0	0	0	0
161	Continuing Care and Funded Nursing Care	0	0	0	0	0	0	0	0	0	0	0	0	0	0
162	Other Private & Voluntary Sector	0	0	0	0	0	0	0	0	0	0	0	0	0	0
163	Joint Financing and Other (includes Local Authority)	0	0	0	0	0	0		0	0	0	0	0	0	0
164	Other (only use with WG agreement & state SoCNE/I line ref)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
165		0	0	0	0	0	0		0	0	0	0	0	0	0
166		0	0	0	0	0	0	0	0	0	0	0	0	0	0
167		0	0	0	0	0	0	0	0	0	0	0	0	0	0
168	Sub total Cleaning Standards Non Pay	0	0	0	0	1	0	0	4	25	7	4	4	38	46
169	TOTAL CLEANING STANDARDS EXPENDITURE	155	(48)	83	51	61	73	56	74	90	89	75	75	685	835
170	PLANNED CLEANING STANDARDS EXPENDITURE (In Opening Plan)	155	(48)	83	51	366	372	372	372	372	372	372	372	2,467	3,211
171	MOVEMENT FROM OPENING PLANNED CLEANING STANDARDS EXPENDITURE	0	Ó	0	0	305	299	316	298	282	283	297	297	1,783	2,377



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_															
	Other (Additional costs due to C19) enter as positive value - actual/forecast												l		
	Provider Pay (Establishment, Temp & Agency)														
173	Administrative, Clerical & Board Members	137	160	175	121	176	149	(38)	493	257	1,034	1,009	1,015	2,664	4,688
174	Medical & Dental	790	831	726	766	604	832	166	1,697	990	897	1,934	1,984	8,299	12,217
175	Nursing & Midwifery Registered	1,183	607	701	636	753	809	1,042	814	1,130	1,101	2,323	2,346	8,777	13,446
176	Prof Scientific & Technical	52	53	46	114	79	149	121	121	122	161	236	280	1,019	1,534
177	Additional Clinical Services	524	423	460	394	571	527	203	1,017	789	854	882	876	5,763	7,521
178	Allied Health Professionals	222	31	79	74	75	122	361	145	(72)	203	232	257	1,239	1,728
179	Healthcare Scientists	1	1	1	62	5	15	30	98	25	51	94	93	290	477
180	Estates & Ancillary	205	80	(13)	82	86	132	(281)	465	108	91	109	130	955	1,194
181	Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
182	Other (only use with WG Agreement & state SoCNE/I line ref)	0	13	40	0	0	0	0	(1,594)	(161)	0	0	0	(1,702)	(1,702)
183		0	0	0	0	0	0	0	0	0	0	0	0	0	0
184		0	0	0	0	0	0	0	0	0	0	0	0	0	0
185		0	0	0	0	0	0	0	0	0	0	0	0	0	0
186	Sub total Other C-19 Provider Pay	3,113	2,198	2,215	2,250	2,350	2,735	1,605	3,257	3,188	4,392	6,819	6,981	27,303	41,103
187	Primary Care Contractor (excluding drugs)	315	233	(491)	13	22	13	24	71	74	318	323	338	591	1,252
188	Primary Care Contractor (excluding drugs) - Costs as a result of lost GDS Income	0	0	773	211	214	221	253	193	245	234	226	219	2,345	2,790
189	Primary Care - Drugs	337	289	165	38	76	169	63	63	63	63	63	63	1,325	1,450
190	Secondary Care - Drugs	57	45	43	61	152	58	84	115	105	63	66	65	783	914
191	Provider - Non Pay (Clinical & General Supplies, Rent, Rates, Equipment etc) Exclude PPE - see separate line	481	427	890	978	386	424	503	777	792	960	4,388	5,453	6,619	16,460
192	Provider - Non Pay - PPE	379	373	721	416	636	(11)	109	215	837	463	470	470	4,138	5,078
193	Healthcare Services Provided by Other NHS Bodies	111	56	9	64	(52)	(100)	(11)	(55)	(50)	154	12	12	126	150
194	Healthcare Services Provided by Other NHS Bodies - Additional Costs due to Block Contracts - Wales NHS	0	0	0	0	Ó	Ó	Ó	Ó	Ó	0	0	0	0	0
195	Healthcare Services Provided by Other NHS Bodies - Additional Costs due to Block Contracts - England NHS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
196	Non Healthcare Services Provided by Other NHS Bodies	0	0	0	0	27	468	19	23	259	(42)	41	41	753	836
197	Continuing Care and Funded Nursing Care	249	249	249	262	255	253	247	184	158	127	75	48	2.233	2.356
198	Other Private & Voluntary Sector	569	655	782	915	952	742	830	846	556	875	1.383	1.145	7,722	10,250
199	Other Private & Voluntary Sector - Private Hospital Providers	200	183	67	86	72	127	50	149	56	46	103	119	1,036	1,258
200	Joint Financing and Other (includes Local Authority)	0	0	0	0	0	0	0	0	0	0	0	432	0	432
201	Other (only use with WG Agreement & state SoCNE/I line ref)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
202	Loss of Private Patient Income	19	19	(38)	0	0	0	0	0	0	0	0	0	0	0
203		0	(12)	12	0	0	0	0	0	0	0	0	0	0	
204		0	29	(29)	0	0	0	0	0	0	0	0	0	0	
205	WHSCC All Wales Covid-19 pressure - Socne Line 13	0	0	(==)	0	147	(70)	(77)	0	0	0	0	0	0	
206	Sub total Other C-19 Non Pay	2.718	2.545	3,153	3.045	2.887	2,294	2.094	2,581	3,095	3.260	7,150	8,405	27.671	43.225
207	TOTAL OTHER C-19 EXPENDITURE	5.831	4,743	5,368	5,295	5.237	5.028	3,699	5.837	6,284	7.652	13.968	15.385	54.974	84.328
207	PLANNED OTHER C-19 EXPENDITURE (In Opening Plan)	5.831	4,743	5,368	5.295	6,566	6.451	6.332	6.345	6,368	6.328	6.051	6.086	59.626	71,763
208	MOVEMENT FROM OPENING PLANNED OTHER C-19 EXPENDITURE	0,031	4,743	5,368	5,295	1,328	1,423	2,633		84	(1,324)	(7,918)	(9,299)		(12,565)
		0 005	•	٠	U				508					4,652	
210	TOTAL ADDITIONAL EXPENDITURE DUE TO COVID	8,825	7,835	8,499	8,180	8,405	7,875	7,231	7,750	8,880	10,343	17,007	18,190	83,823	119,020
211	PLANNED ADDITIONAL EXPENDITURE DUE TO COVID (In Opening Plan)	8,825	7,835	8,499	8,180	11,254	10,726	11,104	10,966	10,633	10,494	10,144	10,125	98,518	118,787
212	MOVEMENT FROM OPENING PLANNED ADDITIONAL COVID EXPENDITURE	0	0	0	0	2,850	2,851	3,874	3,217	1,753	151	(6,863)	(8,064)	14,695	(233)



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B - In Year Non Delivery of Savings / Net Income Generation Schemes Due To C19	1	2	3	4	5	6	7	8	9	10	11	12		
	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
Enter as Positive values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
213 Non Delivery of Savings (due to C19) - Actual/Forecast														
214 Non Delivery of Finalised (M1) Savings	0	0	0	0	0	0	0	0	0	0	0	0	0	0
215 Non finalisation of Planning Assumptions (savings) at M1	0	0	0	0	0	0	0		0		0	0	0	0
216 Non Delivery of Finalised (M1) Net Income Generation Schemes - Actual/Forecast	0	0	0	0	0	0	0		0		0	0	0	
217 TOTAL NON DELIVERY OF SAVINGS/NET INCOME GENERATION DUE TO COVID	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C - In Year Operational Expenditure Cost Reduction Due To C19														
,	1	2	3	4	5	6	7	8	9	10	11	12		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
Enter as Negative values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
218 Expenditure Reductions (due to C19) - Actual/Forecast														
219 Reduction of non pay costs due to reduced elective activity	(234)	(284)	(234)	(611)	(149)	(334)	(360)	2,206	0		(217)	(3,502)	0	(3,719)
220 Reduction of outsourcing costs due to reduced planned activity	0	0	(481)	481	0	0	0	0	0		0	0	0	0
221 WHSSC C-19 Slippage (as advised by WHSSC)	(31)	(29)	(37)	111	(88)	74	(165)	165	0		(13)	(245)	0	(258)
222 Other (please specify): Bed closures due to social distancing 223 Cross-border Non-Contracted Activity (NCA)	(134)	(144)	(100)	(198)	(227)	(238)	(170) (129)	1,211	0			(1,780)	0	(1,880)
223 Cross-border Non-Contracted Activity (NCA)  224 Reduced GDS Contracts	(87) (175)	(67)	(33)	(95)	(53) (95)	(95)	(77)	375 688	0		(94)	(1,451)	0	(1,545)
225	(173)	0	0 0	(93)	(93)	0	0		0		0	0	0	- 0
226	0	0	0	0	0	0	0		0			0	0	0
227	0	0	0	0	0	0	0	0	0	0	0	0	0	0
228 TOTAL EXPENDITURE REDUCTION	(661)	(516)	(970)	(415)	(612)	(571)	(901)	4,646	0	0	(424)	(6.978)	0	(7.401)
D - In Year Slippage on Planned Investments/Repurposing of Developmental Initiatives due to C19	1	2	3	4	5	6	7	8	9	10	11	12		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end
														position
Enter as Negative values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
229 Slippage on Planned Investments/Repurposing of Developmental Initiatives (due to C19) - Actual/Forecast	0.1	0.1	0.	0.1	0.1	0.1	0.1	0.1			0.1	0		
230	0	0	0	0	0	0	0		0			0	0	0
232	0	0	0	0	0	0	0		0		0	0	0	0
233	0	0	0	0	0	0	0		0			0	0	0
234	0	0	0	0	0	0	0	0	0	0	0	0	0	0
235	0	0	0	0	0	0	0	0	0		0	0	0	0
236	0	0	0	0	0	0	0		0		0	0	0	0
237	0	0	0	0	0	0	0		0		0	0	0	0
238	0	0	0	0	0	0	0		0		0	0	0	0
239 TOTAL RELEASE/REPURPOSING OF PLANNED INVESTMENTS/DEVELOPMENT INITIATIVES 240 ACTUAL / FORECAST - EXPENDITURE IMPACT DUE TO COVID-19	0 8.164	7,319	7,530	7,765	7.793	7,304	6.330	12.396	0 8.880	10.343	0 16.584	0 11,212	83.823	111.619
E - Additional Welsh Government Funding for C19	8,164	7,319	7,530	7,765	7,793	7,304	6,330	12,396	8,880	10,343	16,584	11,212	83,823	111,619
			3	4	5	6	7	8	9	10	11	12		
· · ·	1 1 1				•	•		•			- ''	- 12		Forecast
	1	2	-											
				Jul	Aua	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	year-end position
Enter as Positive values				Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	Total YTD £'000	year-end
Enter as Positive values  241 PLANNED WG FUNDING FOR COVID-19	Apr	Мау	Jun		-	·								year-end position
241 PLANNED WG FUNDING FOR COVID-19	Apr £'000 8,825	May £'000 11,387	Jun £'000 10,276	£'000 9,956	£'000 13,030	£'000 12,502	£'000 12,880	£'000 12,743	£'000 12,409	£'000 12,270 1	£'000 11,920	£'000 11,901 <b>1</b>	£'000 116,278	year-end position £'000 140,100
241 PLANNED WG FUNDING FOR COVID-19  242 MOVEMENTS FROM OPENING PLANNED WG FUNDING FOR COVID-19	Apr £'000 8,825 1 1,776	May £'000 11,387 1 (1,776)	Jun £'000 10,276 1	£'000 9,956 1	£'000 13,030 1 (2,850)	£'000 12,502 1 (2,851)	£'000 12,880 1 (3,874)	£'000 12,743 1 (3,217)	£'000 12,409 1 (1,753)	£'000 12,270 1 (151)	£'000 11,920 1 6,863	£'000 11,901 1 8,064	£'000 116,278 (14,695)	year-end position £'000 140,100
241 PLANNED WG FUNDING FOR COVID-19	Apr £'000 8,825	May £'000 11,387	Jun £'000 10,276	£'000 9,956	£'000 13,030	£'000 12,502	£'000 12,880	£'000 12,743	£'000 12,409	£'000 12,270 1	£'000 11,920	£'000 11,901 <b>1</b>	£'000 116,278	year-end position £'000 140,100

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Period: Jan 22

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

This Table is currently showing 0 errors

			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year	YTD as %age of FY	Assess	sment	Full In-Ye	ear forecast	Full-Year Effect of
			Apr	Mav	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YID	forecast	YTD variance as			1		Recurring
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000			%age of YTD	Green £'000	Amber £'000	non recurring £'000	recurring £'000	Savings £'000
		Budget/Plan	2000	2000	21	21	21	21	21	21	21	21	21	21	185	227		227	2000	2000	2000	2000
	and Funded	Actual/F'cast	0		21	21	21	21	158	41	41	41	41	41	380	461	82.42%	461	0	361	100	100
2 Nursin	ng Care	Variance	0	0	- 21	21	21	21	137	20	20	20	20	20		234	105.44%	234	0		100	100
4		Budget/Plan	0	0	80	0	0	0	137	20	20	20	20	20	80	80	103.44%	80	0			
- Comm		Actual/F'cast	0	0	80	0	0	0	0	0	0	0	0	0	80	80	100.00%	80	0		0	
5 00	modioniou convioco		0	0	80	0	0	0	0	0	0	0	0	0	80	00	0.00%	80	0		0	0
- 6		Variance	0	- 0	47	- 0	- 0	- 0	Ť		0	0	0	0	Ů	310	0.00%	0				$\vdash$
	mioo managomone	Budget/Plan	14	16	17	19	19	19	34	34	34	34	34	34	242	385	77.000/	310	0	_	0.45	<u> </u>
Care)		Actual/F'cast	14	16	17	36	26	26	41	56	26	41	41	44	300	75	77.99%	385	0	<del> </del>	345	345
10		Variance	0	0	0	17	7	7	7	22	(9)	7	7	9	58	9,888	24.09%	75	0			$\vdash$
"		Budget/Plan	313	342	1,372	1,307	842	879	843	832	839	839	742	739		11,557		9,888	0	-		$\vdash$
11 Non Pa	ray	Actual/F'cast	313	342	1,417	1,398	1,275	1,031	1,012	1,021	966	993	896	893	9,768		84.52%	11,557	0	5,790	5,767	6,151
12		Variance	0	0	45	91	433	152	169	190	127	154	154	154	1,361	1,669	16.19%	1,669	0			$\vdash$
13		Budget/Plan	155	179	243	205	148	137	128	128	128	127	127	127	1,579	1,833		1,833	0			
14 Pay		Actual/F'cast	155	179	243	242	197	180	174	195	152	172	172	173	1,889	2,234	84.55%	2,234	0	1,607	627	630
15		Variance	0	0	0	37	49	43	45	67	24	45	45	46	310	401	19.65%	401	0			
16		Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			<u></u>
17 Primar	ry Care	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19		Budget/Plan	491	545	1,734	1,553	1,030	1,056	1,026	1,015	1,022	1,021	924	921	10,493	12,338		12,338	0			
20 Total		Actual/F'cast	491	545	1,779	1,698	1,519	1,258	1,384	1,314	1,184	1,247	1,150	1,149	12,418	14,717	84.38%	14,717	0	7,878	6,839	7,226
21		Variance	0	0	45	145	489	201	358	299	162	226	226	228	1,925	2,379	18.34%	2,379	0			
	22	Variance in month	0.00%	0.00%	2.60%	9.34%	47.46%	19.05%	34.91%	29.43%	15.84%	22.11%	24.43%	24.78%	18.34%							
		In month achievement against FY							54.5170						10.04 /0							
	23	forecast	3.33%	3.70%	12.09%	11.53%	10.32%	8.55%	9.41%	8.93%	8.05%	8.47%	7.81%	7.81%								

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Cardiff & Vale ULHB Period: Jan 22

Table C1- Savings Schemes Pay Analysis

		1	2	3	4	5	6	7	8	9	10	11	12			TTD as %age or	Assess	sment	Full In-Ye	ear forecast	Full-Year
	Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	Full-year forecast	YTD variance as %age of YTD Budget/Plan	Green	Amber	non recurring	recurring	Effect of Recurring Savings
1		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		870		£'000	£'000	£'000	£'000	£'000
Changes in Staffing	Budget/Plan	107	113	125	63	58	58	58	58	58	58	58	58		887		870				
2 Establishment	Actual/F'cast	107	113	125	67	60	60	60	80	40	60	60	60	768	17	86.58%	887	0	662	226	229
3	Variance	0	0	0	3	2	2	2	22	(18)	2	2	2	14		1.79%	17	0			
4	Budget/Plan	29	44	67	100	48	37	35	35	35	35	35	35	465	534		534	0			
5 Variable Pay	Actual/F'cast	29	44	67	124	51	68	69	69	69	68	68	68	656	792	82.79%	792	0	569	223	223
6	Variance	0	0	0	24	3	30	33	33	33	33	33	34	191	258	41.03%	258	0			
7	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
8 Locum	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
9	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
10	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
Agency / Locum paid a	t a Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	C	0	0	0
12	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
13	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
14 Changes in Bank Staff	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
15	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
16	Budget/Plan	19	23	52	42	42	42	35	35	35	34	34	34	359	428		428	n			
Other (Please Specify)		19	23	52	52	86	53	45	47	44	45	45	45	465	555	83.81%	555		377	178	178
18	Variance	19	23	0	10	44	10	10	12	- 44	10	10	10	106	127	29.47%	127		311	178	178
19		155	170	242						100	127				1 000	29.41%	1,833				
20 Total	Budget/Plan	155	179	243	205	148	137	128	128	128		127	127	1,579	1,833	04.5		-	4.5		
i	Actual/F'cast	155	179	243	242	197	180	174	195	152	172	172	173	1,889	2,234 401	84.55%	2,234	0	1,607	627	630
21	Variance	0	0	0	37	49	43	45	67	24	45	45	46	310	401	19.65%	401	0			

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

				1	2	3	4	5	6	7	8	9	10	11	12			TTD as wage or	Asses	sment	Full In-Ye	ear forecast		Full-Year
			Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total <u>YTD</u>	Full-year forecast	YTD variance as %age of YTD Budget/Plan	Green	Amber	non recurring	recurring	F	Effect of Recurring Savings
				£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000			Badgot ian	£'000	£'000	£'000	£'000		£'000
	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	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0		0
3	premium	Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
4	Non Medical 'off contract'	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
5	to 'on contract'	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0		0
6	to on contract	Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
7	Medical - Impact of	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
8	Agency pay rate caps	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0		0
9	Agency pay rate caps	Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
10		Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
11	Other (Please Specify)	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0		0
#2		Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				$\overline{}$
0.13	}	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
	∕Potal	Actual/F'cast		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0		0
15	7° C	Variance		0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				

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Jan 22
This Table is currently showing 0 errors

Table C3 - Tracker

															1				$\overline{}$
	£'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect
	Month 1 - Plan	491	545	1,734	1,553	1,030	1,056	1,026	1,015	1,022	1,021	924	921	10,493	12,338	6,844	5,494	353	5,847
	Month 1 - Actual/Forecast	491	545	1,734	1,556	1,032	1,047	1,020	1,001	1,013	1,012	915	912	10,451	12,278	6,844	5,435	299	5,733
Savings	Variance	0	0	0	4	2	(9)	(6)	(14)	(9)	(9)	(9)	(9)	(42)	(60)	0	(60)	(54)	(114)
(Cash	In Year - Plan	0	0	47	150	495	223	399	265	257	258	258	258	2,094	2,609	1,046	1,563	92	1,655
	In Year - Actual/Forecast	0	0	45	141	487	210	364	313	171	235	235	237	1,967	2,439	1,034	1,404	89	1,493
Cost	Variance	0	0	(2)	(8)	(8)	(13)	(35)	48	(86)	(23)	(23)	(20)	(127)	(170)	(11)	(159)	(3)	(162)
Avoidance)	Total Plan	491	545	1,780	1,702	1,525	1,280	1,426	1,280	1,279	1,279	1,182	1,179	12,586	14,947	7,890	7,058	444	7,502
I	Total Actual/Forecast	491	545	1,779	1,698	1,519	1,258	1,384	1,314	1,184	1,247	1,150	1,149	12,418	14,717	7,878	6,839	388	7,226
	Total Variance	0	0	(2)	(5)	(6)	(22)	(41)	33	(95)	(32)	(32)	(30)	(169)	(230)	(11)	(219)	(57)	(276)
	Month 1 - Plan	13	30	34	35	35	35	34	34	34	34	34	34	318	386	220	166	0	166
I	Month 1 - Actual/Forecast	13	30	34	44	44	17	34	34	34	34	34	34	318	386	220	166	0	166
	Variance	0	0	0	9	9	(18)	0	0	0	0	0	0	(0)	(0)	(0)	0	0	0
Net Income	In Year - Plan	0	0	6	6	6	25	7	7	7	7	7	7	71	86	30	56	11	67
Generation	In Year - Actual/Forecast	0	0	6	6	6	25	7	7	7	7	7	7	71	86	30	56	11	67
Contraction	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total Plan	13	30	40	41	41	60	41	41	41	41	41	41	389	472	250	222	11	233
	Total Actual/Forecast	13	30	40	49	49	42	41	41	41	41	41	41	389	472	250	222	11	233
	Total Variance	0	0	0	9	9	(18)	0	0	0	0	0	0	(0)	(0)	(0)	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accountancy Gains	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Month 1 - Plan	504	575	1,768	1,587	1,065	1,091	1,060	1,049	1,056	1,055	958	955	10,811	12,724	7,064	5,660	353	6,013
I	Month 1 - Actual/Forecast	504	575	1,768	1,600	1,075	1,064	1,054	1,035	1,047	1,047	949	946	10,769	12,665	7,064	5,600	299	5,899
I	Variance	0	0	0	13	10	(27)	(6)	(14)	(9)	(9)	(9)	(9)	(42)	(60)	(0)	(60)	(54)	(114)
	In Year - Plan	0	0	52	155	500	248	407	273	264	265	265	265		2,695	1,076	1,619	103	1,722
Total	In Year - Actual/Forecast	0	0	51	147	493	235	372	320	178	242	242	245	2,038	2,525	1,064	1,460	100	1,560
I	Variance	0	0	(2)	(8)	(8)	(13)	(35)	48	(86)	(23)	(23)	(20)	(127)	(170)	(11)	(159)	(3)	(162)
	Total Plan	504	575	1,820	1,743	1,565	1,340	1,467	1,322	1,321	1,320	1,223	1,220	12,976	15,419	8,140	7,279	455	7,735
I	Total Actual/Forecast	504	575	1,819	1,747	1,568	1,300	1,426	1,355	1,226	1,289	1,191	1,191	12,807	15,189	8,129	7,061	399	7,459
	Total Variance	0	0	(2)	4	3	(40)	(41)	33	(95)	(32)	(32)	(30)	(169)	(230)	(11)	(219)	(57)	(276)

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