

Public Finance Committee Meeting

Wed 15 February 2023, 14:00 - 16:00

Agenda

14:00 - 14:00 1. Standing Items

0 min

Rhian Thomas

1.1. Welcome and Introductions

1.2. Apologies for Absence

1.3. Declarations of Interest

1.4. Minutes of the previous Committee meeting –18th January 2023

 1.4 Draft Public Finance Minutes - Jan.pdf (6 pages)

1.5. Action log following the meeting held on 18th January 2023

 1.5 Draft Public Finance Action Log - Feb.pdf (2 pages)

1.6. Chair's Actions since previous meeting

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

0 min

2.1. Financial Report – Month 10

Robert Mahoney


 2.1 Public Finance Committee SUMMARY Finance Position Report for Month 10 FINAL.pdf (12 pages)

14:00 - 14:00 3. Items for Approval / Ratification

0 min

3.1. Finance Committee Annual Report 2022/23

James Quance

 3.1 Finance Committee Annual Report Cover.pdf (2 pages)

 3.1a Draft Finance Annual Report 2223.pdf (8 pages)

14:00 - 14:00 4. Items for Information and Noting

0 min

4.1. Financial Position – Month 10

Robert Mahoney

14:00 - 14:00
0 min

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14:00 - 14:00
0 min

5. Agenda for Private Finance Committee Meeting

Rhian Thomas

5.1. Approval of Private Minutes

5.2. IMTP Financial Plan Update (Confidential discussion)

14:00 - 14:00
0 min

6. AOB

14:00 - 14:00
0 min

7. Review and Final Closure

Rhian Thomas

7.1. Items to be deferred to Board / Committee

7.2. Note the date, time and venue of the next Committee meeting

Wednesday 22nd March 2023 at 2p via MS Teams

14:00 - 14:00
0 min

8. Declaration

To consider a resolution that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest [Section 1(2) Public Bodies (Admission to Meetings) Act 1960]

Mohamed Sarah
10/02/2023 11:27:52

**Unconfirmed Minutes of the Public Finance Committee Meeting
Held On 18th January 2023 at 2:30pm
Via MS Teams**

Chair:		
John Union	JU	Independent Member – Finance
Present:		
In Attendance:		
Charles Janczewski	CJ	UHB Chair
Suzanne Rankin	SR	Chief Executive Officer
Abigail Harris	AH	Executive Director of Strategic Planning
Catherine Phillips	CP	Executive Director of Finance
Nicola Foreman	NF	Director of Corporate Governance
Robert Mahoney	RM	Deputy Director of Finance (Operational)
Andrew Gough	AG	Deputy Director of Finance (Strategy)
Paul Bostock	PB	Chief Operating Officer
Jason Roberts	JR	Executive Nurse Director
Observers:		
Marcia Donovan	MD	Head of Corporate Governance
Tim Davies	TD	Head of Corporate Business
James Quance	JQ	Interim Director of Corporate Governance
Secretariat:		
Sarah Mohamed	SM	Corporate Governance Officer
Apologies:		
David Edwards	DE	Independent Member – ICT
Rhian Thomas	RT	Independent Member - Capital and Estates

Item No	Agenda Item	Action
FC 18/01/001	Welcome & Introduction The Committee Chair (CC) welcomed everyone to the meeting.	
FC 18/01/002	Apologies for Absence It was noted that the Independent Members for ICT and Capital and Estates had given their apologies and therefore the meeting was not quorate. The Committee acknowledged that no formal decisions for approval/ratification were on the Committee's agenda that day. The Finance Committee resolved that: a) Apologies were noted.	

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FC 18/01/003	Declarations of Interest The Finance Committee resolved that: a) No Declarations of Interest were noted.	
FC 18/01/004	Minutes of the meeting Held on 14 December 2022 The minutes of the meeting held on 14 December 2022 were received. The Executive Director of Finance (EDF) stated that a list of actions that contributed to the control totals would be picked up in the deep dive. The Finance Committee resolved that: a) The minutes of the meeting held on 14 December 2022 were held as a true and accurate record of the meeting.	
FC 18/01/005	Action Log following the meeting held on 14 December 2022 The Action Log was received. The EDF stated that FC14/12/007 would be picked up as part of the planning exercise for this year and the feedback from the lessons learnt exercise would be brought back to the Committee in quarter 4. The Finance Committee resolved that: a) The Action Log was up to date.	EDF
FC 18/01/006	Chairs Action since previous meeting There had been no Chair's Actions taken since the last meeting.	
Items for Review and Assurance		
FC 18/01/007	Financial Report – Month 9 The Deputy Director of Finance (Operational) (DDFO) presented the Financial Report – Month 9 and highlighted the following: <ul style="list-style-type: none"> • At month 9 the Health Board was reporting an overspend of £20.491m against the submitted draft plan. • That was comprised of £7.666m of operational overspend and the planned deficit of £12.825m (nine twelfths of the annual planned deficit of £17.1m set out in 2022/23 financial plan). • The Health Board had forecast a £26.9m deficit for 2022-23. 	

- The Health Board had submitted an initial draft financial plan to Welsh Government (WG) at the end of March 2022 and a revised plan on 30 June 2022.
- That had resulted in an initial 2022-23 planning deficit of £20.8m. The revised plan submitted in June incorporated additional savings totalling £3.7m, resulting in a revised planning deficit of £17.1m.

The DDFO stated that the performance indicators remained in line with what was previously reported.

The creditor payments had improved and was closer to the 95% target.

Table 3: Financial Performance for the period ended 31st December 2022

The operational deficit of £10.468m against delegated budgets was offset by a £2.803m underspend against central budgets leaving a total operational & Covid overspend of £7.666m before the addition of the cumulative £12.825m planned deficit to leave a total overspend of £20.491m.

Table 4: Key Cost pressures and risks within delegated positions as at Month 9

The DDFO advised that a lot of the cost pressures had arisen. A deeper dive into lessons learnt would be discussed in future meetings.

Planned versus current trajectory 2022-23 month 9

It was noted that the Health Board was heading along the orange line on the trajectory shown in the covering report. However, actions taken had made an impact on “sloping” the grey line which had resulted in a lower forecast outturn.

The CC queried whether there were any risks in relation to the fact that WG had not yet confirmed funding of exceptional costs.

The DDFO responded that £14.693m had been spent on those exceptional costs to date. Due to the volatility of the energy prices, some of the forecasting had been increased because it was based on spot pricing. WG was awaiting clarity on the energy costs before confirming the funding in relation to the same.

The UHB Chair queried the unfunded medical staffing costs within table 4 of the covering report and requested a clearer line of

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DFO

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assurance on what the Health Board planned to do about it. He also queried how the workforce strategy aligned to the financial plan.

The DDFO responded that it was not aligned to the plan yet. However, going forward, as HR and Clinical Boards developed their strategies it would become more accurate.

The UHB Chair responded that further clarity would be appreciated.

The CEO stated that she did not think that the Health Board had sufficient operational grip on workforce resourcing. She had asked the EDPC and EDF to establish a workforce efficiency Programme Board in order to discuss and draw up a detailed workforce plan, trajectories and deliverables alongside the financial plan.

The UHB Chair queried the non-recurrent unforeseen excess costs noted in the papers and stated that it should not be unforeseen and should form part of the workforce strategy.

The EDF responded that the excess costs under international nurse recruitment needed some challenge. The issue was that it was expected that they would fall in the last financial year. Due to the operational issues, more beds had been opened and operational services had been managed in a way that had caused cost inflation. Footfall issues along with estates had caused the most variants to the plan.

The COO advised that they were still discovering where money was spent and why it was being spent in that way. That had been due to lack of oversight by the Clinical Board teams. As more meetings were being held with the Clinical teams, further details were being obtained.

Table 6 - Summary of Year to Date COVID 19 Net Expenditure

WG had previously confirmed that the maximum that they would fund was the forecast cost at month 6.

It was noted that the Covid costs were fluid and the cap did put pressure on the ability to deliver the forecast. In month 9, it was confirmed that WG would cap funding at the month 8 forecast.

Key Financial Assumptions and Risks

The working assumption was that since those were WG programmes, they would be funded in full.

Funding for exceptional cost pressures which were deemed to be outside of the UHB's direct control.

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	<p>The forecast cost of exceptional cost pressures would be subject to review as the year progressed, mainly driven by the unpredictable nature of energy costs.</p> <p><u>Underlying Financial Position</u></p> <p>The underlying position needed to be updated and an update would be provided in the Private session of the Committee meeting.</p> <p><u>Cash flow forecast</u></p> <p>That was a live piece of work and the Finance team was liaising with WG to ensure there was correct cash flow support. WG would be supporting the deficit of £26.9m.</p> <p><u>Public Sector Payment Compliance</u></p> <p>The Health Board's public sector payment compliance performance remained below the target of 95%. Performance for the 9 months to the end of December was 94.6%. Whilst that had remained below the target, it represented an improvement of 0.1% in month.</p> <p>The Finance Committee resolved that:</p> <ul style="list-style-type: none"> a) The reported year to date overspend of £20.491m and the forecast deficit of £26.900m was noted. b) The year to date financial impact of forecast COVID 19 costs which was assessed at £43.855m with assumed Welsh Government funding of £43.855m was noted. c) The financial impact of year to date Exceptional Inflationary Pressures which was assessed at £14.693m with assumed Welsh Government funding of £14.693m, was noted. d) The forecast deficit of £26.900m, which comprised of the £17.1m planned deficit identified in the Final Financial plan and £9.800m of additional operational pressures recognised by the UHB Board, was noted. e) The 2021/22 brought forward Underlying Deficit of £29.7m and the planned forecast carry forward of £20.0m to 2023/24, was noted. 	
Items for Information and Noting		
<p>FC 18/01/008</p> <p>Mohamed Sarah 10/02/2023 11:27:52</p>	<p>Financial Monitoring Return – Month 9</p> <p>The Financial Monitoring Return – Month 9 was received.</p> <p>The Finance Committee resolved that:</p>	

	a) The extract from the UHB's Monthly Financial Monitoring Return was noted.	
Agenda for Private Finance Committee Meeting		
FC 18/01/009	<ul style="list-style-type: none"> i. Approval of Private Minutes ii. Financial plan 2023/24 Presentation iii. Deep Dive on Financial performance of Clinical Boards 	
FC 18/01/010	<p>Any Other Business</p> <p>No Other Business was discussed.</p>	
Review and Final Closure		
FC 18/01/011	<p>Items to be referred to Board / Committee</p> <p>No Items to be referred to Board / Committee.</p>	
	<p>Date & time of next Meeting</p> <p>Wednesday 15th February 2023 at 2pm Via MS Teams</p>	

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Public Action Log

Following Finance Committee Meeting
18 January 2023
(For the Meeting 15 February 2023)

Completed actions					
REF	SUBJECT	AGREED ACTION	ACTIONED TO	DATE	STATUS/COMMENTS
FC 16/11/009	Financial performance of Clinical Boards	Deep dive on how the clinical boards are following through with their actions.	Paul Bostock/Catherine Phillips	January 2023	Complete Update provided on 18 January 2023
FC 14/12/007		To include quantitate data and context.			
Actions in progress					
REF	SUBJECT	AGREED ACTION	ACTIONED TO	DATE	STATUS/COMMENTS
FC 14/12/007 and FC 18/01/007	Financial Report – Month 8	Unforeseen cost pressures – to undertake a lesson learnt exercise and report back to the Committee.	Catherine Phillips/Rob Mahoney	October 2023	Update at the Committee meeting in October 2023. This would be picked up as part of the planning exercise this year. Lessons learnt would be shared with the Committee in quarter 4.
FC 18/01/007	Financial Report – Month 9	The EDC and EDF to establish a workforce efficiency	Catherine Phillips/Rachel Gidman	22 March 2023	Update on 22 March 2023

		Programme Board in order to discuss and draw up a detailed workforce plan, trajectories and deliverables alongside the financial plan.			
Actions referred to Board/Committees					
FC 24/8/008	High-level funding resource map	The high-level funding resource map would be presented at a future Board Development Session.	Nicola Foreman	23 February 2023	To be discussed at Board Development Session in February 2023
FC 14/12/007	Run rates	To consider in detail the feasibility of basing the Health Board's longer term financial plan using run rates rather than historical budgets at the next Board Development Session.	Nicola Foreman	23 February 2023	To be discussed at February's Board Development Session.

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Report Title:	Finance Report for the Period Ended 31 st January 2023			Agenda Item no.	2.1
Meeting:	Finance Committee	Public	<input checked="" type="checkbox"/>	Meeting Date:	15 th February 2023
		Private	<input type="checkbox"/>		
Status <i>(please tick one only):</i>	Assurance	<input checked="" type="checkbox"/>	Approval	<input type="checkbox"/>	Information
Lead Executive:	Executive Director of Finance				
Report Author (Title):	Deputy Director of Finance (Operational)				

Main Report
Background and current situation:

Summary

At month 10 the UHB is reporting an overspend of £22.417m. This is comprised of £8.167m of operational overspend and the planned deficit of £14.250m (ten twelfths of the annual planned deficit of £17.1m set out in 2022/23 financial plan).

The UHB forecasts a £26.9m deficit for the end of 2022-23.

It is assumed that Welsh Government funding will be provided to support COVID National Programme costs and exceptional inflationary costs incurred to month 10 and for the remainder of the year. Welsh Government has now indicated that Covid Local Response funding will be capped to a maximum of the UHB's forecast submitted in Month 8 (November)

Table 1: Month 10 Financial Position 2022/23

	Cumulative to Month 10 £m	Forecast Year-End Position £m
Planned deficit	14.250	17.100
Operational position (Surplus) / Deficit	8.167	9.800
Financial Position £m (Surplus) / Deficit £m	22.417	26.900

Financial Plan Approved by Board and submitted to Welsh Government

The Health Board submitted an initial draft financial plan to Welsh Government at the end of March 2022 and a revised plan on 30 June 2022. The plan is structured in three parts, in line with Welsh Government discussions, as follows:

- Core Financial Plan including recovery
- Exceptional inflationary cost increases
- Ongoing COVID response costs (Local and Welsh Government Covid Programmes)

This resulted in an initial 2022-23 planning deficit of £20.8m. The revised plan submitted in June incorporated additional savings totaling £3.7m, resulting in a revised planning deficit of £17.1m.

*Approved: Sarah
18/02/2023 11:27:52*

Core Financial Plan – Month 10 Cumulative Position

The UHB is overspent by £22.417m against its core financial plan. £14.250m of this was planned as part of the underlying financial deficit. £8.167m is unplanned, as an overspend in delegated and central positions. Table 2 provides a summary of the Month 10 position.

A number of cost pressures have emerged or increased in the year to date that were not foreseen in the original financial plan. Table 3 summarises the year to date position across the Clinical Boards and delegated areas of the UHB. These placed the UHB's ability to remain within the revised plan's forecast £17.1m deficit under severe pressure causing the UHB to reassess the most likely year end out-turn.

These concerns were shared with Welsh Government colleagues in the mid-year review meeting with the Financial Delivery Unit on the 10th November 2022 and were discussed through the UHB's governance structure, including the Finance Committee and Board, during November. The UHB now forecasts a deficit of £26.9m.

Table 2: Finance - Key Performance Indicator Dashboard at January 2023

Measure	STATUS REPORT				
	January 2023/ December 2022	RAG Rating	Latest Trend	Target	Time Period
Deliver 2022/23 Draft Financial Plan	£22.417m deficit at month 10. £14.250m planned deficit and £8.167m operational deficit	R	↓	Deliver 2022/23 £17.1m Planned Deficit	M10 2022-23
Remain within capital resource limits.	Expenditure at the end of January was £27.282m (53% of the annual forecast)	G	↻	Remain within approved planned expenditure £51.675m	M10 2022-23
Delivery of recurrent £15.400m savings target	£12.721m forecast at month 10.	R	↻	£15.400m	M10 2022-23
Delivery of £4m non recurrent savings target	£6.622m forecast at month 10.	G	↻	£4.000m	M10 2022-23
Creditor payments compliance 30 day Non NHS	Cumulative 94.4% at the end of January	R	↓	95% of invoices paid within 30 days	M10 2022-23
Remain within Cash Limit	The UHB's working capital and strategic cash requirement has been relayed to Welsh Government via an Accountable Officer Letter,. At month 9 the UHB forecast is a year end cash deficit of £31.757m. £26.900m is required to support the forecast deficit and a further £4.858m in respect of working balances.	A	↻	To remain within Cash Limit	M10 2022-23
Maintain Positive Cash Balance	Cash balance = £6.300m	G	↻	To Maintain Positive Cash Balance	End of January 2023

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Financial Performance of Clinical Boards

Budgets were set in the anticipation that they were sufficient to deliver the UHB's plan. Financial performance for month 10 by Clinical Board is shown in Table 3.

Table 3: Financial Performance for the period ended 31st January 2023

Clinical Board	Gross Expenditure Due To COVID 19 £m	Welsh Government Covid 19 Funding £m	Exceptional Inflationary Expeniture £m	Welsh Government Exceptional Inflationary Pressure		Operational & Covid Position (Surplus) / Deficit		Total (Surplus) / Deficit	
				Funding £m	£m	Variance £m	£m	Variance £m	£m
In Month									
Clinical Diagnostics & Therapies	0.310	(0.310)	0.000	0.000	0.056	0.056			
Children & Women	0.103	(0.103)	0.000	0.000	0.108	0.108			
Capital Estates & Facilities	0.455	(0.455)	1.519	(1.519)	0.470	0.470			
Surge Hospitals	0.000	0.000	0.000	0.000	(0.000)	(0.000)			
Executives	0.121	(0.121)	0.000	0.000	(0.459)	(0.459)			
All Wales Genomics Service	0.000	0.000	0.000	0.000	(0.005)	(0.005)			
Medicine	0.918	(0.918)	0.000	0.000	0.425	0.425			
Mental Health	0.123	(0.123)	0.000	0.000	0.157	0.157			
PCIC	1.021	(1.021)	0.242	(0.242)	1.009	1.009			
Specialist	0.584	(0.584)	0.000	0.000	(0.201)	(0.201)			
Surgery	0.397	(0.397)	0.000	0.000	0.175	0.175			
SubTotal Delegated Position £m	4.032	(4.032)	1.761	(1.761)	1.735	1.735			
Central Budgets	0.026	(0.026)	0.000	0.000	(1.233)	(1.233)			
Central Budgets - Planning Deficit					1.425	1.425			
Total Deficit/(Surplus) £m	4.058	(4.058)	1.761	(1.761)	1.927	1.927			
Draft 2022/23 Planning Deficit					(1.425)	(1.425)			
Operational Deficit/(surplus Against Plan) £m	4.058	(4.058)	1.761	(1.761)	0.502	0.502			
Cumulative									
Clinical Diagnostics & Therapies	2.232	(2.232)	0.380	(0.380)	0.221	0.221			
Children & Women	1.424	(1.424)	0.447	(0.447)	1.304	1.304			
Capital Estates & Facilities	4.581	(4.581)	10.800	(10.800)	2.870	2.870			
Surge Hospitals	0.000	0.000	0.001	(0.001)	0.004	0.004			
Executives	1.202	(1.202)	0.177	(0.177)	(0.505)	(0.505)			
All Wales Genomics Service	0.000	0.000	0.049	(0.049)	(0.035)	(0.035)			
Medicine	15.045	(15.045)	0.506	(0.506)	4.146	4.146			
Mental Health	1.534	(1.534)	0.255	(0.255)	2.177	2.177			
PCIC	14.881	(14.881)	2.584	(2.584)	2.107	2.107			
Specialist	2.865	(2.865)	0.482	(0.482)	(2.639)	(2.639)			
Surgery	3.882	(3.882)	0.628	(0.628)	2.553	2.553			
SubTotal Delegated Position £m	47.646	(47.646)	16.310	(16.310)	12.203	12.203			
Central Budgets	0.268	(0.268)	0.144	(0.144)	(4.036)	(4.036)			
Central Budgets - Planning Deficit					14.250	14.250			
Total Deficit/(Surplus) £m	47.914	(47.914)	16.454	(16.454)	22.417	22.417			
Draft 2022/23 Planning Deficit					(14.250)	(14.250)			
Operational Deficit/(surplus Against Plan) £m	47.914	(47.914)	16.454	(16.454)	8.167	8.167			

The operational deficit of £12.203m against delegated budgets is offset by a £4.036m underspend against central budgets leaving a total operational & Covid overspend of £8.167m before the addition of the cumulative £14.250m planned deficit to leave a total overspend of £22.417m

The largest operational overspends are in the Medicine Clinical Board (£4.146m deficit) where the main pressure areas are nursing and medical staffing, in Capital Estates & Facilities (£2.870m deficit) where there are pressures against security costs, patient catering in EU and commercial income and in Mental Health (£2.177m deficit) where there are continuing healthcare and nursing pressures.

Table 4 provides details of some of the cost pressures impacting operational positions. These pressures are incorporated within the financial tables included within the body of the report and within the appendices. The cost pressures have the effect of removing budgetary surpluses that the UHB has partially relied on to achieve break even positions in previous financial years.

Table 4: Key Cost pressures and risks within delegated positions as at Month 10

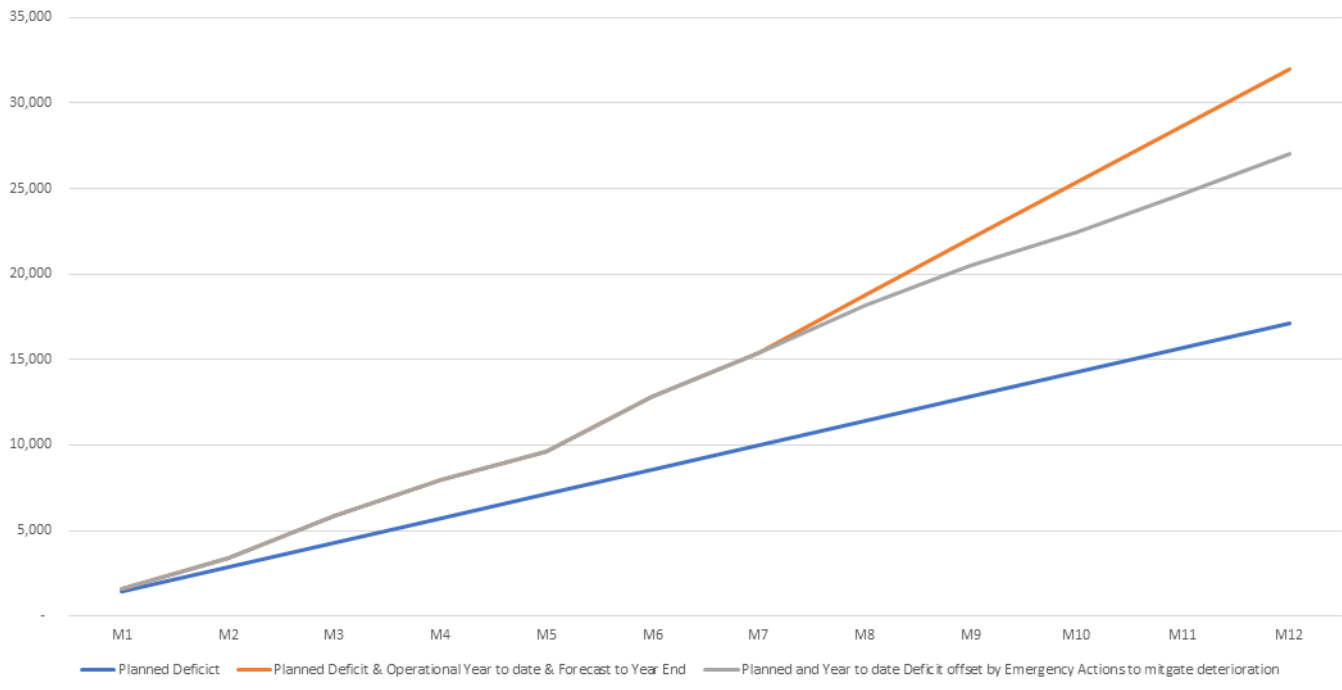
	Impact in Month	Year to date impact	Full Year Forecast Impact	
Key Cost pressures incorporated in position at Month 10	£000s	£000s	£000s	Future outlook and potential mitigations
Unfunded Medical Staffing inc. Agency & Premium costs	785	4,619	5,176	The UHB workforce strategies aim to maximise recruitment to permanent posts alongside the improvement of staff retention rates. Over time this will reduce dependency on agencies.
Nursing Staff Agency & Premium costs	595	3,602	4,193	
International Nurse Recruitment	225	934	1,000	Forms part of the strategy to maximise permanent recruitment. In time dependency on this recruitment source should reduce.
WHSSC LTA performance	-304	487	1,000	WHSSC performance should recover towards the end of the year and will improve on return to pre Covid footprint
Patient Catering to EU and food price rises	111	842	1,011	Subject to wider inflationary pressures.
Prescribing	762	4,609	6,159	National Pressures including exceptional costs associated with NCSOs . The Prescribing advisors have a plan in place focussed in part on further savings plans.
Mental Health CHC Placements	203	2,121	2,550	Physical and staffing capacity difficulties at Hafan Y Coed have caused additional external placements for some patients.
Community Pharmacy increased product and practice payment costs	91	943	1,100	Increased product and practice payment costs.
Security at Rookwood & Whitchurch	92	883	1,177	Will continue to be incurred until the disposal of estate
Footfall impact on Aroma Sales/Concourse Leases	216	1,209	1,451	Anticipated that footfall will improve in 2023-24 as UHB moves away from Covid footprint. Service is working through options to reduce losses

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

The continued deterioration of the UHB position in Month 10 and the ongoing nature of the cost pressures highlighted in Table 4 continues to represent a risk. A central focus of Executive Performance Reviews with Clinical Boards has been on the remedial actions and additional savings that are needed to mitigate and address these cost pressures.

The revised forecast deficit of £26.9m was agreed by the Board in month 8 in recognition of year to date position. Delivery of the revised forecast will require continuing focus and downward pressure on the UHBs cost base.

Cardiff & Vale UHB - Planned versus current EOY Trajectory 2022-23 @ MONTH 10



Exceptional Costs

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

- 1) **Increased** energy costs of £20.9m for 2022-23. The Year to date assessment is additional energy costs of £10.692m, with further additional costs expected in the final 2 months.

The UHB receives market intelligence on prices from Shared Services on a monthly basis, which in turn is based on market forecasting provided by British Gas. The Shared Services Forecasting model is based on the latest spot price and consequently provides for a high level of volatility between forecasts.

The energy forecast will remain a live piece of work involving the UHB Capital and Estates Team and Shared Services market intelligence, in light of the volatility of market intelligence.

- 2) Employers NI costs of £6.9m. Following the announcement of the discontinuation of the levy from November 6th 2022 the forecast was revised down to £3.345m and the same level of funding has been confirmed.
- 3) The impact of paying Real Living Wage (RLW) for staff working within social care and the Third Sector remains at the original estimated level of a £2.9m increase in annual costs.

Mohamed Sarah
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A summary of forecast exceptional costs is outlined in Table 5 below:

Table 5 – Exceptional Cost Year to Date 2022-23

	Month 10	Forecast Year-End Position
Incremental costs in 2022/23	£m	£m
Energy/Fuel	10.692	13.897
National Insurance Levy	3.345	3.345
Living Wage - Social Care	2.417	2.900
Total Exceptional Costs Expenditure £m	16.453	20.142
Sub Total Exceptional Cost funding confirmed/assumed £m	16.453	20.142

Welsh Government funding to support the National Insurance Levy and Social Care Providers has been confirmed. Welsh Government has also now confirmed that funding for the exceptional costs of Energy is no longer at risk.

COVID 19 Expenditure and Funding

The expenditure for the year to date is summarised in Table 6 below. Forecast costs for the year are within the capped level of Welsh Government Covid funding.

Table 6: Summary of Year To Date COVID 19 Net Expenditure

	Month 10	Forecast Year-End Position	Forecast Year-End Position @ Month 9	Change in Forecast Year-End Position in month
	£m	£m	£m	£m
COVID 19 Testing	0.977	1.191	1.233	(0.041)
COVID 19 Tracing	3.960	4.486	4.560	(0.074)
COVID 19 Vaccination	6.924	7.832	7.782	0.050
Extended Flu Vaccination	0.846	1.243	1.243	(0.000)
PPE	2.438	2.978	3.086	(0.108)
Sub Total National Programmes	15.145	17.730	17.904	(0.174)
Cleaning Standards	2.239	2.800	2.819	(0.019)
COVID 19 Local Response	27.671	32.692	34.000	(1.308)
Sub Total Local response including Cleaning Standards	29.910	35.492	36.819	(1.327)
Dental Income; Long Covid; Anti-Viral; Allergy Advice and Nosocomial	2.859	3.562	3.562	0.000
Total COVID Expenditure £m	47.914	56.783	58.284	(1.501)

Welsh Government confirmed that funding for Covid National Programme costs can be assumed by health boards.

The forecast cost of national Covid programmes is £17.730m, which is a decrease of £0.174m against the £17.904m forecast costs reported at month 9.

The forecast local Covid response costs and Cleaning Standards is £35.492m, which is an decrease of £1.327m against the comparable £36.819m forecast costs reported at month 9.

Welsh Government acknowledged the assumption of financial support for Covid Response costs by health boards in the 2022-23 financial year but has been consistent in stating that this assumption is carried at risk. Welsh Government recently reviewed guidance and indicated to health boards that funding support will be capped at a maximum of Month 8 reported costs for each health board.

The year end forecast for Covid Response costs is circa £1.3m less than the month 8 funding cap at month 10.

Summary Financial Table

The following table analyses the £22.417m overspend at Month 10, between Income, Pay and Non Pay.

Table 7: Summary Financial Position for the period ended 31st January 2023

Income/Pay/Non Pay	Memorandum Annual Budget £m	Current Period Budget £m	Current Period Actual £m	Operational Variance (Fav)/Adv £m
In Month				
Income	(1,770.034)	(154.219)	(154.406)	(0.187)
Pay	785.723	67.894	66.800	(1.095)
Non Pay	984.311	86.324	88.108	1.783
Sub Total £m	0.000	0.000	0.501	0.501
2022/23 Planned Deficit	17.100	1.425	1.425	1.425
Variance to Plan £m	17.100	1.425	1.926	1.926
Cumulative				
Income	(1,770.034)	(1,472.010)	(1,473.156)	(1.146)
Pay	785.723	662.436	655.073	(7.363)
Non Pay	984.311	809.574	826.250	16.676
Sub Total £m	0.000	0.000	8.167	8.167
2022/23 Planned Deficit	17.100	14.250	14.250	14.250
Variance to Plan £m	17.100	14.250	22.417	22.417

Key Financial Assumptions and Risks

Following on from Tables 6 & 7 the overall UHB position assumes:

- Local COVID response allocations from Welsh Government to support the ongoing additional COVID costs and to fund achieving the Cleaning Standards. This is based on the Welsh Government direction that funding will be capped in line with the month 8 assessment of forecast costs.
- Welsh Government funding for national COVID programmes on an actual cost basis, to cover:
 - Testing costs
 - Tracing costs (allocated from separate fund)
 - Mass vaccination programme
 - Extended Flu Vaccination
 - PPE
- Funding for exceptional cost pressures which are deemed to be outside of the UHB's direct control. The forecast cost of exceptional cost pressures will be subject to review as the year progresses mainly driven by the unpredictable nature of energy costs.

Table 8 summarises the Finance Department's Risk Register. The key risk which feeds the UHB Corporate Risk Register is the failure of the UHB to deliver a breakeven position by 2022-23 year end with a current planned deficit of £17.1m.

Table 8: Risk Register at January 2023

	Risks	Rating	Comment
Key Corporate Risk	Approved Three year Financial plan (IMTP)	20	A revised financial plan was submitted into Welsh Government on 30 June 2022. The plan projected a £17.1m deficit by the end of 2022-23. Welsh Government has now moved into Enhanced Monitoring based on financial concerns.
	Revenue Funding Limit.	20	The UHB has submitted a £17.1m deficit plan and therefore will breach breakeven duty in 2022-23. There is a high risk that this will not be recovered in years two and three of the rolling performance measure.
	Capital Funding - Three Year Rolling Breakeven Duty	6	The current 2022-23 UHB Capital Plan is structured to remain within the Capital Resource limit

Financial Performance	Operational delegated positions deteriorate in year resulting from cost and service pressures and excess inflation.	20	Table 5 refers to new in year cost pressures arising from demand and staffing pressures whilst still maintaining a Covid ready environment. This has contributed to the forecast year end deficit of £26.9m.
	Failure to deliver 2022-23 Savings Programme	6	At month 10 the gap against the total savings target was £56k. This masks a shortfall on the recurrent savings target of £2.9m which will contribute to the underlying deficit carried forward to 2023-24.
	Failure to exit current Covid Response costs once Welsh Government funding ceases. Cost will transfer to the UHB underlying deficit.	20	Welsh Government have confirmed that there will not be any Covid Response or Covid consequential cost funding in 2023-24 and consequently this has contributed to the 2023-24 draft planning deficit
	2022-23 One Year LTA framework in NHS Wales	3	UHB performance within the one year LTA framework is sufficient to support forecast out-turn

Funding Assumptions	Welsh Government has confirmed Exceptional Costs funding in 2022-23	3	No risk is assumed in 2022-23 Forecasts.
	Welsh Government has confirmed basis of Covid Response funding in 2022-23	3	UHB currently forecasts Covid Response costs below confirmed ceiling for claim

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Savings Programme

The UHB expects to broadly deliver the revised £19.400m savings target.

Cash Flow Forecast

The closing cash balance at the end of January, was £6.300m.

The UHB is currently reworking its cash shortfall for 2022/23 within the context of a £26.9m forecast deficit and an estimated working cash balance requirement of £4.234m.

Strategic cash support is required to cover the cash shortfall arising from the forecast deficit and an Accountable Officer letter has been relayed to cover this request.

In addition, the UHB has identified an estimated working cash balance requirement of £4.858m to Welsh Government. This is comprised of a £1.339m of payment in respect of the Annual Leave Buy Back Scheme, £2.079m in respect of the removal of IFRS 16 Leases (which reflects an increase of £0.624m on the month 9 estimate) and a further £1.339m in respect of 2021/22 Welsh Government funding confirmed in March 2022, which was not backed by cash because of the proximity of the end of the financial year.

Public Sector Payment Compliance

The UHB's public sector payment compliance performance remains below the target of 95%. Performance for the 10 months to the end of January was 94.4%. This remains below the target following a deterioration of 0.2% in month.

The below target performance is due to the high number of invoices which were on hold and subsequently cleared following work by the Procurement department with those placing orders to clear the backlog of holds. However, this has contributed to the performance remaining below target, as holds exceeding the 30 days have been resolved and paid.

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

Capital Resource Limit (CRL)

The UHB had an approved capital resource limit of £51.675m in line with the latest CRL received from Welsh Government 20th January 2023 comprising of £10.263m discretionary funding and £41.412m towards specific projects (including Maelfa Primary Care Pipeline, the National Imaging Programme, Developing Genomics Partnership Wales, UHL Electrical infrastructure, Endoscopy Unit UHL & Refit - Phase 2).

Of the UHB's approved Capital Resource Limit, 53% has been expended to date.

The Genomics capital which is forecasting a potential £0.264m overspend is currently classified as medium risk. All other schemes are currently in line with forecast.

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

The draft Financial Plan sets out the UHB financial strategy in three parts:

1. Core Financial Plan including recovery
2. National inflationary pressures which are out of the direct control of individual Health Boards
3. Ongoing COVID response costs and Welsh Government Covid Programmes

The planning deficit included in the UHBs Final Financial Plan for 2022/23 reduced from £20.8m to £17.1m financial plan following the inclusion of further recurrent Financial Recovery Plans totaling £3.7m.

Delivery of the core financial plan initially included a 2% (£16.0m) savings requirement, which included a recurrent savings target of £12.0m . A further recurrent savings target of £3.4m was added to the initial target and included within the final financial plan submitted to Welsh Government at the end of Quarter 1.

The UHB also needs to manage its operational position and mitigate any emerging pressures as its Covid response costs are collapsed. The rate of operational overspend was £0.501m in month 10 which is an improvement on the trend in the first 9 months of the year. The reported operational overspend which is £8.167m for the 10 months to the end of January remains cause for concern and has prompted enhanced monitoring through the monthly Executive Performance Reviews of Clinical Boards.

The UHB position is predicated on the assumption of Welsh Government continuing to provide income support for local Covid response, exceptional costs and central Covid programmes.

These assumptions continue to be tested out in ongoing discussions with Welsh Government regarding the UHB's Financial Plan.

Recommendation:

At Month 10 the Committee are requested to:

- **NOTE** the reported year to date overspend of £22.417m and the forecast deficit of £26.900m.
- **NOTE** the year to date financial impact of forecast COVID 19 costs which is assessed at £47.914m with assumed Welsh Government funding of £47.914m.
- **NOTE** the financial impact of year to date Exceptional Inflationary Pressures which is assessed at £16.453m with assumed Welsh Government funding of £16.453m.
- **NOTE** the forecast deficit of £26.900m, which comprises of the £17.1m planned deficit identified in the Final Financial plan and £9.800m of additional operational pressures recognised by the UHB Board.

Link to Strategic Objectives of Shaping our Future Wellbeing:

Please tick as relevant

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

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention	Long term	x	Integration	Collaboration	Involvement
Impact Assessment:					
<i>Please state yes or no for each category. If yes please provide further details.</i>					
Risk: Yes					
No					
Safety: Yes/No					
No					
Financial: Yes					
As detailed in the report.					
Workforce: Yes/No					
No					
Legal: Yes/No					
No					
Reputational: Yes/No					
Yes, if forecast financial position is not delivered.					
Socio Economic: Yes/No					
No					
Equality and Health: Yes/No					
No					
Decarbonisation: Yes/No					
No					
Approval/Scrutiny Route:					
Finance Committee		Date: 15 th February 2023			

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Report Title:	Draft Finance Committee Annual Report 2022/23		Agenda Item no.	3.1	
Meeting:	Finance Committee	Public	X	Meeting Date:	15.02.2023
		Private			
Status <i>(please tick one only):</i>	Assurance	Approval	X	Information	
Lead Executive:	Interim Director of Corporate Governance				
Report Author (Title):	Corporate Governance Officer				

Main Report

Background and current situation:

An Annual Report from the Committee is produced to demonstrate that it has undertaken the duties set out in its Terms of Reference and to provide assurance to the Board that this is the case.

The purpose of the Annual Report is to provide Members of the Finance Committee with the opportunity to discuss the attached draft annual report before being submitted to the Board for approval by the end of March 2023.

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

The Committee has achieved an overall attendance rate of **87%** from the period 1 April 2022 to 30 March 2023 and has met on three occasions during the year.

The attached Annual Report 2022/23 of the Finance Committee demonstrates that the Committee has undertaken the duties as set out in its Terms of Reference.

Recommendation:

The Committee is requested to:

- a) **REVIEW** the draft Annual Report 2022/23 of the Finance Committee; and
- b) **RECOMMEND** the Annual Report to the Board for approval.

Link to Strategic Objectives of Shaping our Future Wellbeing:

Please tick as relevant

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

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention	<input checked="" type="checkbox"/>	Long term	<input type="checkbox"/>	Integration	<input type="checkbox"/>	Collaboration	<input type="checkbox"/>	Involvement	<input type="checkbox"/>
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Impact Assessment:

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

Risk: No

Safety: No

Financial: Yes

Workforce: No

Legal: No

Reputational: No

Socio Economic: No

Equality and Health: No

Decarbonisation: No

Approval/Scrutiny Route:

Committee/Group/Exec	Date:

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GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

Annual Report of the Finance Committee 2022/23

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1.0 INTRODUCTION

In accordance with best practice and good governance, the Finance Committee (“the Committee”) produces an Annual Report to the Board setting out how the Committee has met its 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 Strategic Planning, Director of Corporate Governance, and Deputy Director of Finance. Other Directors and officers are required to attend, as well as any others from within or outside the organisation who the Committee considers should attend, considering the matters under consideration at each meeting.

3.0 MEETINGS AND ATTENDANCE

The Committee met 12 times (ie each month) during the period from 1st April 2022 to 31st March 2023. This is in line with its Terms of Reference.

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

The Committee achieved an attendance rate of X% during the period 1st April 2022 to 31st March 2023 as set out below:

Commented [SM(aVU-CG1): To be completed following February meeting

	27.04. .22	25.05. 22	29.06. 22	27.07. 22	24.08. 22	28.09. 22	19.10. 22	16.11. 22	14.12. 22	18.01. 23	15.02. 23	29.03. 23	Attendance
Dr Rhian Thomas (CC)	✓	✓	✓	✓	✓	✓	✓	✓	✓	x			
John Union (VC)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
David Edwards	x	✓	✓	✓	✓	✓	✓	✓	x	x			
Total	66%	100%	100%	100%	100%	100%	100%	100%	66%	33%			

Commented [SM(aVU-CG2): To be completed following February meeting

Commented [SM(aVU-CG3): To be completed following February meeting

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4.0 TERMS OF REFERENCE

The Terms of Reference and annual work plan are due to be reviewed by the Committee on the 22nd February 2023.

Commented [MD(aVU-CG4): This section is to be updated following the Committee meeting in February.

5.0 WORK UNDERTAKEN

As set out in its Terms of Reference, the purpose of the Committee is to advise and assure the Board in discharging its responsibilities with regard to the Health Board's current and forecast financial position, performance and delivery. That includes scrutinising the Health Board's performance in relation to:-

- Financial plans and monitoring, including delivery of savings programmes;
- Scrutiny and monitoring of financial monthly performance; and
- Business cases over £500,000.

During the financial year 2022/23, the following standing items were considered and reviewed at each Finance Committee:

Finance Report for previous month – at each meeting, the Committee was presented with, and discussed, a paper which set out a summary of the Health Board's financial position as at the preceding financial month. Matters discussed included the Health Board's actual financial performance measured against key financial measures, the financial forecast, overspend and/or the planned deficit, key financial risks, performance of the Clinical Boards, saving programmes and cost pressures (including exceptional cost pressures), together with details of the actions being taken to address the key financial risks.

Throughout the year, it was noted that this year the Health Board was facing an extremely challenging financial position.

At its October meeting, the Committee was advised of the very difficult financial challenges the Health Board was experiencing in order to meet its draft financial plan. Significantly, Committee Members were informed that, due to the Health Board's inability to produce a financially balanced plan, the Welsh Government had

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moved the Health Board to the lowest level of escalation status and support, “enhanced monitoring”, as part of NHS Wales Escalation and Intervention arrangements.

At its meeting in February 2023, the Committee was advised that the Health Board was reporting a planned deficit of xxxx for 2022/23.

Commented [MD(aVU-CG5)]: To be updated following February's meeting

Finance Risk Register – This was routinely presented to the Committee for information and discussion. The Committee noted that the key financial risk continued to be the failure of the Health Board to deliver a breakeven position by 2022-23-year end.

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

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

April 2022

- **2022/23 Savings and Tracker** - The Health Board's draft financial plan included a total savings requirement of £16m in 2022/23. The Tracker summarised the progress made against the 2022/23 target.
- **Escalation of Corporate Directorates and Clinical Boards** – The Committee was advised that the Executive Performance Reviews with the Clinical Boards (which formed an integral part of the Health Board's Performance Management Framework) would be stood back up following the COVID-19 pandemic and that finance and operational delivery would be covered in those reviews. This item of business was also considered by the Committee at its meeting held in June, July, and August.

May 2022

- **NHS Long Term Agreements and Financial Approach 2022/23** - The Committee received a presentation from the Head of Finance. It related to the arrangements in place with respect to the provision of healthcare services by the Health Board to other NHS Bodies and the commissioning of healthcare services by the Health Board from other NHS Bodies.

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- **Committee Effectiveness Survey Results 2021-2022** - The purpose of this report was to present the findings of the Annual Board Effectiveness Survey 2021-2022, which related to the Finance Committee. Committee Members noted that there were no areas identified for improvement

June 2022

Integrated Medium Term Plan (“IMTP”)- the Committee was advised the (i) in March 2022 the Health Board had submitted a draft IMTP plan to Welsh Government, (ii) the plan had a deficit forecast position for the end of the financial year and therefore the Welsh Government had allowed the Health Board an extra three months to undertake further work to explore, in detail, how the position could be improved, and (iii) the Health Board was in a position of not having an approvable IMTP and therefore work would be required with Welsh Government to understand the next steps. It was noted that the Health Board was not alone in trying to deliver a balanced plan and that other Health Boards were also struggling to deliver a financially balanced plan.

July 2022

Escalation of Corporate Directorates and Clinical Boards

August 2022

High Level Resource Map - The Committee received and discussed a presentation given in relation to High Level Resource Map. The purpose of the High-Level Resource Map was to provide an overview of the funding received by the Health Board (source of funding) over the past four financial years and how the funding was used (application of funding).

September 2022

- **BAF Risk – Financial Sustainability** - The Committee reviewed the Financial Sustainability Risk (that was, *the risk that the organisation would not be able to manage the impact of COVID 19 and other operational issues within the financial resources available*) which was registered on the Health Board's Board Assurance Framework. The same position was also reported to the Committee in November.
- **Business Cases** – the Committee considered (i) the Velindre NHS Trust Business Cases for (a) Radiotherapy Solution IRS and (b) Radiotherapy Satellite Centre, and (ii) a new Fracture Clinic, and made certain recommendations to full Board.

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October 2022

- **Financial performance of Clinical Boards** - The Committee received an analysis of each Clinical Board's financial performance. It was noted that some were experiencing operational overspends (ie Medicine Clinical Board and the Mental Health Clinical Board). That was due to continued trends, which included the pressure of recruiting nursing and medical staff, and delayed transfers of care. Committee Members requested more data, including more details with regards to the recovery plans to address those overspends.

November 2022

- **2022-23 Strategic Cash Request Submission** - subject to full Board approval, the Committee was advised that an application was to be submitted by the Health Board's Accountable Officer to Welsh Government for strategic cash support in line with the Health Board's forecast deficit.
- **Financial performance of Clinical Boards** – the Committee was advised that the Finance team met with each Clinical Board on a monthly basis to discuss how they could improve their respective expenditure profiles. A number of options were being considered by the Clinical Boards, including considering how the workforce could be better utilised, addressing high sickness rates, reducing high agency costs, considering whether procurement could help to make some savings, and working closely with Local Authority partners to discharge medically fit patients into the community and /or their own homes.
- **Operational Pressures** – the Committee noted that a number of cost pressures that had not been foreseen in the original financial plan, had emerged or increased in the year to date. Further, the Committee was advised of other potential cost issues which could also impact upon the Health Board's financial position. They included i) Winter pressure planning for additional bed capacity, and (ii) the Emergency Unit service whilst Covid-19 restricted the ability to efficiently discharge patients.
- **Business Cases** – Committee Members considered the (i) Tertiary Tower Long term solution – Business Case and (ii) Development of the Hybrid/Major Trauma theatres at UHW - Business Case. The Committee made a recommendation to Board to approve the submission of those Business Cases. to Welsh Government for capital funding support.

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- **FNC Rate** - the Committee recommended that the Board approve the proposed uplift in the FNC rate in line with other Health Boards in Wales.

December 2022

- **Financial performance of Clinical Boards** – the Committee was advised that each Clinical Board had a programme of long-term actions and short-term actions they could take in order to address the financial deficit. It was noted that there were a number of costs pressures that the Health Board could not have foreseen and which had contributed to the overspend. At its meeting in December, the Committee discussed what could be learnt from that and what actions could be taken to avoid those circumstances arising again. Amongst those costs pressures that could not reasonably have been foreseen were (i) the level of additional capacity required – ie medically fit ready for discharge Patients had increased the costs incurred for temporary medical and nursing staff, and (ii) inflation caused by the war in Ukraine.

February 2023

- IMTP Financial Plan Review -
- Review of SFIs and Scheme of Financial Delegation
- Finance Committee Work Plan and Terms of Reference

March 2023

Commented [MD(aVU-CG6):

Commented [MD(aVU-CG7R6): To provide detail following the meeting in February.

Commented [SM(aVU-CG8): To be added following March meeting

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.

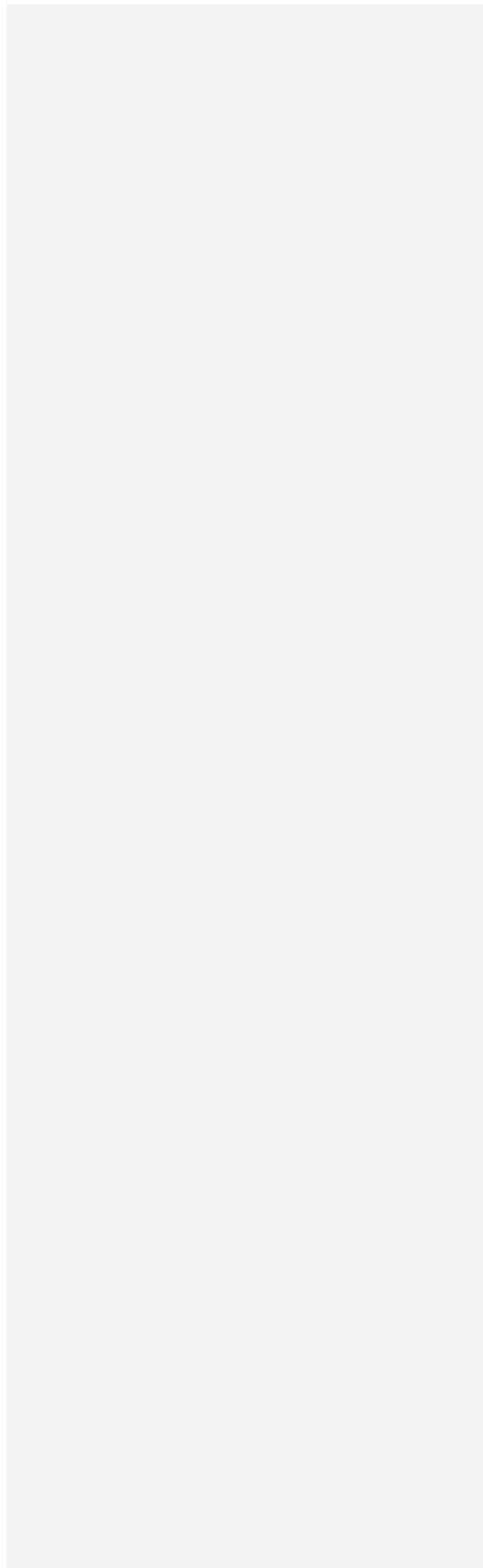
7.0 OPINION

The Committee is of the opinion that the Finance Committee Report 2022/23 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.

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Dr Rhian Thomas
Committee Chair

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