

Finance Committee Meeting - Public

Wed 25 May 2022, 14:00 - 16:00

Agenda

14:00 - 14:00
0 min

1. Standing Items

1.1. Welcome and Introductions

Rhian Thomas

1.2. Apologies for Absence

Rhian Thomas

1.3. Declarations of Interest

Rhian Thomas

1.4. Minutes of the previous Committee meeting – 27 April 2022

Rhian Thomas

 1.4 Draft Public Finance Meeting Minutes 27.4.22 - AF.pdf (8 pages)

1.5. Action log following the meeting held on 27 April 2022

Rhian Thomas

 1.5 Action Log - Following Meeting on 27.4.22 - AF.pdf (2 pages)

1.6. Chair’s Actions since previous meeting

Rhian Thomas

14:00 - 14:00
0 min

2. Items for Review and Assurance

2.1. Financial Report – Month 1

Robert Mahoney

 2.1 Finance Position Report for Month 1.pdf (16 pages)

2.2. NHS Long Term Agreements and Financial Approach 2022/23 Presentation

Christopher Markall

2.3. Committee Effectiveness Survey Results 2021-2022

Nicola Foreman

 2.3 Committee Self Effectiveness Surveys Finance.pdf (3 pages)

 2.3a Finance Committee Self Evaluation 2021-22.pdf (21 pages)

14:00 - 14:00
0 min



3. Items for Approval / Ratification

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14:00 - 14:00 0 min **4. Items for Information and Noting**

4.1. Financial Monitoring Return – Month 1

Hywel Pullen

-  4.1 CV Financial Monitoring Returns 2022-23 - Month 1.pdf (10 pages)
-  4.1a 2022-23 MMR Template - Cardiff & Vale UHB Month 1.pdf (1 pages)

14:00 - 14:00 0 min **5. Agenda for Private Finance Committee Meeting**

Rhian Thomas

5.1. Approval of Private Minutes

5.2. Update on the Financial Plan

5.3. Savings Plan Deep Dive Presentation

5.4. Microsoft Office 365 Contract Renewal

5.5. Continuing Healthcare Placements 2022-23 Fee Uplifts

5.6. Finance Risk Register

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

Wednesday 29 June at 2pm Via MS Teams

14:00 - 14:00 0 min **8. Resolution**

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]

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**Unconfirmed Minutes of the Public Finance Meeting
Held On 27 April 2022 at 2pm
Via MS Teams**

Chair:		
Rhian Thomas	RT	Independent Member - Capital and Estates
Present:		
John Union	JU	Independent Member – Finance
Catherine Phillips	CP	Executive Director of Finance
Nicola Foreman	NF	Director of Corporate Governance
Caroline Bird	CB	Interim Chief Operating Officer `
Suzanne Rankin	SR	Chief Executive Officer
Ruth Walker	RW	Executive Nurse Director
Robert Mahoney	RM	Interim Deputy Director of Finance (Operational)
Hywel Pullen	HP	Interim Deputy Director of Finance (Strategy)
Paul Emmerson	PE	Senior Finance Manager
Secretariat		
Sarah Mohamed	SM	Corporate Governance Officer
Apologies:		
David Edwards	DE	Independent Member – ICT
Charles Janczewski	CJ	UHB Chair

Item No	Agenda Item	Action
FC 27/4/001	Welcome & Introduction The Committee Chair (CC) welcomed everyone to the meeting.	
FC 27/4/002	Apologies for Absence The Finance Committee resolved that: a) Apologies were noted.	
FC 27/4/003	Declarations of Interest The Finance Committee resolved that: a) No Declarations of Interest were noted.	
FC 27/4/004	Action Log – Following the meeting held on 23 March 2022 The Finance Committee resolved that: a) There were no outstanding actions.	

FC 27/4/005	Chair's Actions since previous meeting There had been no Chairs action taken since the last meeting.	
	Items for Review and Assurance	
FC 27/4/006	Financial Report – Month 12 The Interim Deputy Director of Finance - Strategy (IDDFS) summarised the key points within the Month 12 Finance Report: <ul style="list-style-type: none"> • There was a £232,000 underspend against the plan. • The Health Board (HB) had stayed within the resource limit by £40,000. • The creditor payment compliance was marginally below the 25% target. The IDDFS would make enquiries. • This was a draft position and accounts were not due to be submitted until the Friday following the meeting. The position was also subject to changes by Audit Wales. • The Health Board's financial target was expected to be hit unless something unexpected arose. <p>The HB provisional year end revenue outturn was a surplus of £0.232m which was broadly in line with the break-even position previously forecasted.</p> <p>Table 2 within the report illustrated that the provisional surplus demonstrated that the HB had broke even for the first time in a number of years and had met its 3-year statutory financial duty for the first time.</p> <p>It was noted that three areas of the HB's KPIs had remained red and that the delivery of the recurrent £12 million was added to the deficit position within the 22/23 plan.</p> <p>The HB had incurred £119 million on Covid costs. This had been fully funded by Welsh Government (WG). WG also funded the underlying deficit on a non-recurrent basis in 2021/22. This meant that a total of £140 million was received from WG for Covid funding.</p> <p>Table 7 within the report illustrated an underspend of £2.679m at month 12.</p> <p>Table 8 illustrated an operational pay underspend of £7.271 million. This had been offset by additional Covid expenditure on staffing.</p>	IDDFS

Table 9 illustrated the non-pay variable. There was an operational overspend of £9.718m on non-pay budgets. There was also an additional gross Covid 19 expenditure of £60.524m matched by £60.524m of Covid 19 funding.

Table 10 illustrated gross Covid 19 expenditure as £119.376m. Additional annual leave had also accrued due to Covid demands the cost of which had increased by £2.4 million by the end of the year. Additional Study Leave was also accrued at a cost of £0.6 million.

It was noted that the balance sheet had changed. The overall trade debt had increased by £63 million since the start of the year. This largely related to amounts due from the Welsh Risk Pool (circa £54m) in respect of clinical negligence.

The value of trade and other payables had increased by around £29m since the start of the year. This mainly related to the completion of the capital programme in March.

Table 15 illustrated progress made against the capital resource limit. The HB had successfully delivered its £70.989m Capital Programme in 2021/22 with a surplus of £0.041m against the allocation. This was commended as an exceptional achievement by the Procurement and Capital Team with the programme heavily weighted to the end of the year following the late availability of WG slippage funding.

It was noted that expenditure of £47m within the Capital Programme had been delivered in March. The Capital Programme was due to be audited in May /June and would be reported in detail at the July Capital Management Group (CMG).

The Chair (CC) congratulated the team on the break-even position and the clear effort made by the Capital team. The CC added that they would need to keep an eye out on the recurrent saving challenge and the payment compliance performance.

The Independent Member for Finance (IMF) queried what the finance committee could do in relation to the non-compliance within public sector performance.

The IDDFS responded that he would discuss this with the financial services team to understand which areas

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<p>Mohamed Sarah 05/20/2022 13:07:40</p>	<p>could be improved. He would also discuss the position with the Shared Services team.</p> <p>The CC requested that the IDDFS expand on this at the May finance meeting. The CC also queried whether there were issues that were leading to non-payment of invoices.</p> <p>The Executive Director of Finance (EDF) responded that the measure in front of them highlighted when invoices were paid. The issue with capital governance was that there were invoices which had not followed the procurement route and the effort people made at end of year matching invoices to previous commitments, may have caused the dip in spend. At the last Audit and Assurance Committee meeting all activity that did not follow correct procurement routes were considered. All procurement work undertaken was known in advance so that invoices could be paid in a prompt and efficient way. This work was continued to be undertaken within the organisation to ensure swift payment of invoices.</p> <p>The Chief Executive Officer (CEO) queried table 12 and the overspend of £8.6 million. The IDDFS responded that the overspend was a managed movement in collaboration with corporate finance. It was not an unexpected, unplanned position.</p> <p>The CEO suggested that there were challenges in generating improvement and queried where how the benefits arising would be tracked financially.</p> <p>The EDF responded that there a lot of connection had been made following the use of Covid response funds. She also added that there were base pressures and budgets remained an issue. It was noted that teams would need to be agile in response to Covid pressures where the benefits sat.</p> <p>The Interim Chief Operating Officer (ICOO) advised that teams would need to be cognisant of the impacts of doing something in one clinical board on another. She also confirmed that the HB were in a better position in terms of clinical board working and that the financial position would be shaped further through performance reviews and the operational delivery plan.</p> <p>The Finance Committee resolved that:</p>	<p>IDDFS</p>
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	<ul style="list-style-type: none"> • The provisional draft year end revenue surplus of £0.232m against the planned break-even position was noted. • The yearend capital position underspend of £0.041m against a CRL of £70.989m was noted. • The gross month 12 financial impact of COVID 19 assessed at £119.376m and matched with anticipated income was noted. • The Health Boards breakeven position, which was consistent with the financial plan submitted to Welsh Government on 30th June and included additional funding of £140.689m to manage the impact of COVID 19 in 2021/22 and also incorporated confirmed funding of £21.313m in respect of the 2020/21 recurrent savings shortfall, was noted. • The Covid 19 reductions in planned care expenditure which were used to mitigate financial risks in the financial plan and to support system resilience, were noted. • The fact that the UHB remained within its authorised cash limit was noted. • The revised forecast 2020/21 carry forward Underlying Deficit of £29.7m was noted. 	
FC 27/4/007	<p>2022/23 Savings and Tracker</p> <p>The IDDFS presented the Savings and Tracker report.</p> <p>It was noted that the HB's draft financial plan included a total savings requirement of £16m in 2022/23. This was split between a £12m recurrent savings target and a £4m non-recurrent savings target.</p> <p>The HB had made good progress with clinical board team to identify recurrent and non-recurrent schemes.</p> <p>The IDDFS advised that teams were looking to identify the full £16 million in savings by May 2022. Following that, teams would look to identify Covid response costs and how to reduce these.</p> <p>The ICOO advised that this work reflected the first cut of saving schemes for the clinical boards. A second cut of saving schemes was also due the following day.</p> <p>The CEO queried if the allocation was equitable across all the sectors described and whether it aligned with the Health Board's strategic positioning.</p>	

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	<p>The Interim Deputy Director of Finance – Operational (IDDFO) responded that the allocation had been set at 1 ½ per cent in an equal way across all budgets.</p> <p>The CC queried whether there would be repercussions for the HB not hitting its financial target the previous year.</p> <p>The IDDFO responded that the element of savings that had not been achieved have been left with default budgets for 2022/23 year which had been capped at 0.5 per cent.</p> <p>The EDF queried whether there was merit in putting a theme on the savings plan rather than looking at savings area by area. She advised that her team would also need to undertake a deep dive on what had been proposed to understand what was meant by the cost reductions proposed.</p> <p>The CC responded that it would be useful to get a more up to date understanding of the savings position and to contextualise savings with themes.</p> <p>The Finance Committee resolved that:</p> <p>a) The progress against the 2022/23 Savings Plan was noted.</p>	EDF
<p>FC 27/4/008</p> <p>Mohamed Sarah 05/20/2022 13:07:40</p>	<p>Escalation of Corporate Directorates and Clinical Boards</p> <p>The ICOO shared the following updates:</p> <ul style="list-style-type: none"> • Performance reviews would re-commence having been stood down during the Covid pandemic. • If the second cut of savings submitted by clinical boards was not acceptable specific escalation meetings would be put in place. • 10 operational reviews would take place on an annual basis. Each would cover finance as part of the agenda. The ICOO and the EDF would be the Executive Leads for this work. • From July 2022 onwards Clinical Boards would provide a finance update to be shared with the Committee. <p>The Finance Committee resolved that:</p> <p>a) The Escalation of Corporate Directorates and Clinical Board update was noted.</p>	

	Items for Information and Noting	
FC 27/4/009	Financial Monitoring Returns – Month 12 The Finance Committee resolved that: a) The Financial Monitoring Returns for Month 12 were noted.	
FC 27/4/010	Any Other Business The CC queried if there were any other agenda items that members would like to see and advised that she would like to bring back deep dives reviews of specific areas of work. This could include how the HB worked with local authorities on regional partnership and medium to long term capital planning. The CEO suggested that commissioning would be good topic to consider. There were significant financial allocations from WG that required a deeper understanding which a deep dive review could bring out. The EDF advised that that a high-level resource map would need to be shared with the Committee. This would include the detail of all the sources of funding, where they came from, what they were to be used for and how they would be allocated. The Finance Committee resolved that: a) Any Other Business was noted.	EDF
FC 27/4/011	Items to be deferred to Board / Committee There were no items to bring to the attention of the Board.	
	Date & time of next Meeting Wednesday 25 May 2022 at 2pm Via MS Teams	

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Public Action Log

Following Finance Committee Meeting
27 April 2022

(For the Meeting 25 May 2022)

MINUTE	DATE	SUBJECT	AGREED ACTION	ACTIONED TO	STATUS/COMMENTS
Completed Actions					
FC 27/4/007	27/4/2022	Savings plan deep dive	A deep dive on the themes within savings would be discussed.	Caroline Bird/ Catherine Phillips	Complete On today's private agenda – item 2.2
Actions in progress					
MINUTE	DATE	SUBJECT	AGREED ACTION	ACTIONED TO	STATUS/COMMENTS
FC 27/4/006	27/4/2022	Financial Report – Month 12	To investigate why creditor payment compliance was below target.	Hywel Pullen	In progress
FC 27/4/006	27/4/2022	Financial Report – Month 12	To investigate non-compliance within public sector performance.	Hywel Pullen	In progress
FC 27/4/010	27/4/2022	High level resource map	A high-level resource map on funding sources to be shared with the Committee	Catherine Phillips	In progress

Actions referred to Board/Committees					

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Report Title:	Finance Report for the Period Ended 30th April 2022			Agenda Item no.	2.1
Meeting:	Finance Committee	Public	x	Meeting Date:	25 th May 2022
Status (please tick one only):	Assurance	X	Approval	Information	
Lead Executive:	Executive Director of Finance				
Report Author (Title):	Interim Deputy Director of Finance (Operational)				
Main Report Background and current situation:					

Summary

The Health Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2022. The draft plan is structured in three parts in line with Welsh Government guidance as follows:

- Core Financial Plan including recovery
- National inflationary pressures which are out of the direct control of individual Health Boards.
- Ongoing COVID response costs.

The UHB's core plan incorporated: -

- Brought forward underlying deficit of £29.7m
- Allocations and inflationary uplifts of £29.8m
- Capped cost pressures and investments of £36.9
- A £16m (2%) Savings programme

This results in a 2022-23 planning deficit of £20.8m.

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

Table 1: 2022/23 Core Draft plan

	2022/23 Plan £m
Underlying deficit from 2020/21 Plan	(4.0)
Adjustment for non-recurrent items in 2020/21 and 2021/22	(25.7)
b/f underlying deficit	(29.7)
Allocation uplift (including LTA inflation)	29.8
Capped cost pressures assessment recurrent	(31.8)
Capped cost pressures assessment non-recurrent	(1.1)
Investment reserve	(4.0)
2022/23 Planned Surplus/(Deficit) before efficiency programme	(36.8)
Efficiency Programme of 2%	
Recurrent cost improvement plans (1.5% in 22/23)	12.0
Non Recurrent cost improvement plans (0.5% in 22/23)	4.0
Planned Surplus/(Deficit)	(20.8)

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

- 1) Energy costs where the planning assumption was based on a mid-range estimate from Shared Services at £20.9m annually.
- 2) Employers NI costs of £6.9m annually.
- 3) The impact of paying Real Living Wage (RLW) for staff working within social care and Third Sector currently estimated at £2.9m annually.

The impact of these costs in Month 1 is £2.888m

In addition to the core plan the UHB also anticipates Month 1 funding for :-

- Ongoing Covid local response costs of £3.720m, as defined by updated 2022-23 Welsh Government allowable definitions.
- Central Covid programme funding of £2.268m as informed by the Welsh Government Allocation Letter to include TTP, MVC, PPE and Flu costs incurred within health boards.

The draft plan is subject to further development during quarter 1 of 2022/23 and the UHB expects to submit a final financial plan for 2022/23 at the end of quarter 1.

At month 1, the UHB is reporting an in month overspend of £1.888m against its submitted draft plan. This is due to £0.155m of operational pressures and a planning deficit of £1.733m, which is one twelfth of the planned deficit of £20.8m identified in the draft 2022/23 financial plan.

	STATUS REPORT				
Measure	April 2022	Rating	Latest Trend	Target	Time Period
Deliver 2022/23 Draft Financial Plan	£1.888m deficit at month 1. £1.733m planned deficit and £0.155m operational deficit	R	9	Deliver 2022/23 £20.8m Planned Deficit	M1 2022-23
Remain within capital resource limits.	The UHB expects to remain within its Capital Resource Limit	G	9	Remain within Approved planned expenditure	M1 2022-23
Maintenance (no deterioration) of Underlying deficit	£29.7m assessed underlying deficit (ULD) position b/f to month 1. Forecast Year End ULD £23.7m	R	9	2022/23 plan to reduce from £29.7m to £23.7m underlying deficit	M1 2022-23
Delivery of recurrent £12.000m 1.5% target	£7.066m forecast at month 1.	R	9	£12.000m	M1 2022-23
Delivery of £4m non recurrent target	£7.384m forecast at month 1.	G	9	£4.000m	M1 2022-23
Creditor payments compliance 30 day Non NHS	Cumulative 92.0% at the end of April	R	9	95% of invoices paid within 30 days	M1 2022-23
Remain within Cash Limit	The UHB's working capital requirement will be discussed with Welsh Government following finalisation of the draft plan @ Q1	A	9	To remain within Cash Limit	M1 2022-23
Maintain Positive Cash Balance	Cash balance = £3.816m	G	9	To Maintain Positive Cash Balance	End of April 2022

Month 1 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 draft financial position reported to Welsh Government for month 1 is a deficit of £1.888m and this is summarised in Table 3.

Table 3: Month 1 Financial Position 2022/23

	Month 1	Forecast Year-End Position £m
COVID 19 Additional Expenditure	5.988	67.583
Exceptional Inflationary Pressures	2.888	30.700
Gross additional COVID and Exceptional Inflationary Pressures £m	8.876	98.283
Welsh Govt FUNDING for additional COVID and Exceptional Inflationary Pressures	(8.876)	(98.283)
Planned deficit	1.733	20.800
Operational position (Surplus) / Deficit	0.155	0.000
Financial Position £m (Surplus) / Deficit £m	1.888	20.800

The month 1 deficit of £1.888 m comprised of the following:

- £1.733m planned deficit (1/12th of £20.800m);
- £0.155m adverse variance against plan.

The UHB plans to recover the adverse operational variance of £0.155m at month 1 as the year progresses and anticipates that it will deliver its planned deficit position of £20.8m.

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

In line with the draft financial plan, the UHB reports that it has incurred additional costs for which it anticipates provision of Welsh Government funding as follows: -

- Exceptional Cost Pressures £2.888m
- Local Covid response £3.720m
- Central Welsh Government Covid Programmes £2.260m

The breakdown of the £1.888m overspend at Month 1 is analysed between income, pay and non pay in Table 4 below :-

Table 4: Summary Financial Position for the period ended 30th April 2022

Income/Pay/Non Pay	Current Period Budget	Current Period Actual	Gross Expenditure Due To COVID 19	Welsh Government COVID 19 Funding Assumed	Exceptional Inflationary Expenditure	Welsh Government Exceptional Inflationary Expenditure Funding Assumed	Operational Variance (Fav)/Adv	Total Variance
	£m	£m	£m	£m	£m	£m	£m	£m
In Month								
Income	(129.276)	(128.824)	0.355	(0.355)		0.000	0.098	0.098
Pay	60.590	64.302	3.403	(3.403)	0.513	0.513	(0.204)	(0.204)
Non Pay	68.686	75.286	2.230	(2.230)	2.375	2.375	1.995	1.995
Sub Total £m	(0.000)	10.764	5.988	(5.988)	2.888	2.888	1.888	1.888
2022/23 Planned Deficit	0.000	(1.733)					(1.733)	(1.733)
Variance to Plan £m	(0.000)	9.031	5.988	(5.988)	2.888	2.888	0.155	0.155
Cumulative								
Income	(129.276)	(128.824)	0.355	(0.355)		0.000	0.098	0.098
Pay	60.590	64.302	3.403	(3.403)	0.513	0.513	(0.204)	(0.204)
Non Pay	68.686	75.286	2.230	(2.230)	2.375	2.375	1.995	1.995
Sub Total £m	(0.000)	10.764	5.988	(5.988)	2.888	2.888	1.888	1.888
2022/23 Planned Deficit	0.000	(1.733)					(1.733)	(1.733)
Variance to Plan £m	(0.000)	9.031	5.988	(5.988)	2.888	2.888	0.155	0.155

Income

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

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Table 5: Income Variance @ April 2022

	Memorandum Annual Budget	Gross Expenditure Due To COVID 19	Welsh Government COVID 19 Funding Assumed	Operational Variance (Fav)/Adv	Total Variance
In Month	£m	£m	£m	£m	£m
Revenue Resource Limit (RRL)	1,137.934	0.000	0.000	0.000	0.000
RRL Welsh Govt. COVID 19 Funding	67.583	0.000	0.000	0.000	0.000
Welsh Government Income (Non RRL)	19.378	0.000	0.000	0.000	0.000
Accommodation & Catering	4.424	0.000	0.000	0.058	0.058
Education & Training	36.666	0.000	0.000	0.013	0.013
Injury Cost Recovery Scheme (CRU) Income	2.165	0.000	0.000	0.000	0.000
NHS Patient Related Income	354.931	0.036	(0.036)	(0.063)	(0.063)
Other Operating Income	35.880	0.237	(0.237)	0.040	0.040
Overseas Patient Income	0.076	(0.008)	0.008	0.001	0.001
Private Patient Income	1.290	0.090	(0.090)	0.006	0.006
Research & Development	8.035	0.000	0.000	0.044	0.044
Variance to Plan £m	1,668.362	0.355	(0.355)	0.098	0.098
Cumulative					
Revenue Resource Limit (RRL)	1,137.934	0.000	0.000	0.000	0.000
RRL Welsh Govt. COVID 19 Funding	67.583	0.000	0.000	0.000	0.000
Welsh Government Income (Non RRL)	19.378	0.000	0.000	0.000	0.000
Accommodation & Catering	4.424	0.000	0.000	0.058	0.058
Education & Training	36.666	0.000	0.000	0.013	0.013
Injury Cost Recovery Scheme (CRU) Income	2.165	0.000	0.000	0.000	0.000
NHS Patient Related Income	354.931	0.036	(0.036)	(0.063)	(0.063)
Other Operating Income	35.880	0.237	(0.237)	0.040	0.040
Overseas Patient Income	0.076	(0.008)	0.008	0.001	0.001
Private Patient Income	1.290	0.090	(0.090)	0.006	0.006
Research & Development	8.035	0.000	0.000	0.044	0.044
Variance to Plan £m	1,668.362	0.355	(0.355)	0.098	0.098

The income position at month 1 is an overspend of £0.098m. This position includes consideration of additional Welsh Government income of £0.355m in recognition of income losses caused by COVID 19 disruption.

The key COVID 19 income reductions in month, contributing to cumulative income losses, were :

- £0.237m deficit against Other Operating Income which is a result of reduced General Dental Services activity leading to a loss of Dental Patient Charges income;
- £0.090m adverse variance against private patient income following the re-planning of non COVID activity.

The shortfall on accommodation and catering income no longer falls within the defined Covid response costs and now forms a pressure on operational budgets. This pressure is £0.058m in month 1. The deficit against Research & Development reflects a slowdown in invoicing in month1.

Pay

The year to date and in month financial position for pay is shown in Table 6.

Table 6: Analysis of pay expenditure by staff group @ April 2022

Pay	Memorandum Annual Budget	Gross Expenditure Due To COVID 19	Welsh Government COVID 19 Funding Assumed	Exceptional Inflationary Expenditure COVID 19	Welsh Government Exceptional Inflationary Expenditure Funding Assumed	Operational Variance (Fav)/Adv	Total Variance
In Month	£m	£m	£m	£m	£m	£m	£m
Medical and Dental	178.168	0.545	(0.545)	0.130	(0.130)	0.405	0.405
Nursing (registered)	208.929	1.287	(1.287)	0.147	(0.147)	(0.907)	(0.907)
Nursing (unregistered)	53.899	0.717	(0.717)	0.049	(0.049)	0.738	0.738
Scientific, prof & technical	38.474	0.070	(0.070)	0.028	(0.028)	(0.193)	(0.193)
Additional clinical services	27.860	0.096	(0.096)	0.020	(0.020)	(0.171)	(0.171)
Management, admin & clerical	83.990	0.433	(0.433)	0.064	(0.064)	0.042	0.042
Other staff groups	106.610	0.256	(0.256)	0.075	(0.075)	(0.119)	(0.119)
Total £m	697.930	3.403	(3.403)	0.513	(0.513)	(0.204)	(0.204)
Cumulative							
Medical and Dental	178.168	0.545	(0.545)	0.130	(0.130)	0.405	0.405
Nursing (registered)	208.929	1.287	(1.287)	0.147	(0.147)	(0.907)	(0.907)
Nursing (unregistered)	53.899	0.717	(0.717)	0.049	(0.049)	0.738	0.738
Scientific, prof & technical	38.474	0.070	(0.070)	0.028	(0.028)	(0.193)	(0.193)
Additional clinical services	27.860	0.096	(0.096)	0.020	(0.020)	(0.171)	(0.171)
Management, admin & clerical	83.990	0.433	(0.433)	0.064	(0.064)	0.042	0.042
Other staff groups	106.610	0.256	(0.256)	0.075	(0.075)	(0.119)	(0.119)
Total £m	697.930	3.403	(3.403)	0.513	(0.513)	(0.204)	(0.204)

The pay position at month 1 is an operational underspend of £0.204m which is £0.402m less than the average monthly underspend reported in 2021/22, following the shift in the UHBs focus from Covid response, to pre pandemic service levels and additional recovery activity.

The additional COVID 19 expenditure (local response and national programmes) of £3.403m is matched by £3.403m of anticipated COVID 19 funding from Welsh Government. Similarly, it is assumed that Welsh Government will provide coverage for the additional £0.513m of Employer National Insurance pay costs arising from the Health and Social Care Levy

The main UHB areas incurring COVID 19 pay costs are Medicine Clinical Board where there are cumulative additional costs of £1.669m mainly in nursing and medical staffing and PCIC Clinical Board where additional costs of £0.678m are reported across all staff groups. Additional COVID 19 pay costs continue across all other Clinical Boards except Genomics.

Performance against operational pay varies across the UHB with the largest overspend being reported by the Medicine Clinical Board where there is an operational overspend of £0.292m, 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 7.

Table 7: Non Pay Variance @ April 2022

Mohamed, Sarah
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Non Pay	Memorandum Annual Budget	Gross Expenditure Due To COVID 19	Welsh Government COVID 19 Funding Assumed	Exceptional Inflationary Expenditure COVID 19	Welsh Government Exceptional Inflationary Expenditure Funding Assumed	Operational Variance (Fav)/Adv	Total Variance
In Month	£m	£m	£m	£m	£m	£m	£m
Drugs / Prescribing	148.862	0.119	(0.119)	0.000	0.000	(0.119)	(0.119)
Clinical services & supplies	106.117	0.067	(0.067)	0.000	0.000	(0.566)	(0.566)
General supplies & services	8.452	0.481	(0.481)	0.000	0.000	0.080	0.080
Establishment expenses	10.773	0.028	(0.028)	0.000	0.000	(0.050)	(0.050)
Premises & fixed plant	37.928	0.293	(0.293)	2.133	(2.133)	0.240	0.240
Continuing healthcare	73.771	0.000	0.000	0.242	(0.242)	(0.065)	(0.065)
Commissioned Services	226.962	0.224	(0.224)	0.000	0.000	0.010	0.010
Primary Care Contractors	149.224	0.019	(0.019)	0.000	0.000	0.018	0.018
Other non pay	187.543	1.000	(1.000)	0.000	0.000	0.712	0.712
Other non pay - Planned Deficit	20.800					1.733	1.733
Total £m	970.432	2.230	(2.230)	2.375	(2.375)	1.995	1.995
Cumulative							
Drugs / Prescribing	148.862	0.119	(0.119)	0.000	0.000	(0.119)	(0.119)
Clinical services & supplies	106.117	0.067	(0.067)	0.000	0.000	(0.566)	(0.566)
General supplies & services	8.452	0.481	(0.481)	0.000	0.000	0.080	0.080
Establishment expenses	10.773	0.028	(0.028)	0.000	0.000	(0.050)	(0.050)
Premises & fixed plant	37.928	0.293	(0.293)	2.133	(2.133)	0.240	0.240
Continuing healthcare	73.771	0.000	0.000	0.242	(0.242)	(0.065)	(0.065)
Commissioned Services	226.962	0.224	(0.224)	0.000	0.000	0.010	0.010
Primary Care Contractors	149.224	0.019	(0.019)	0.000	0.000	0.018	0.018
Other non pay	187.543	1.000	(1.000)	0.000	0.000	0.712	0.712
Other non pay - Planned Deficit	20.800					1.733	1.733
Total £m	970.432	2.230	(2.230)	2.375	(2.375)	1.995	1.995

There is an operational overspend of £1.995m on non pay budgets which incorporate the 2022/23 monthly planning deficit of £1.733m.

The additional gross COVID 19 expenditure of £2.230m (local response and national programme) is matched by £2.230m of anticipated COVID 19 funding and the additional exceptional energy and continuing healthcare costs arising from national pressures are matched by assumed funding of £2.375m.

Key COVID 19 costs related to non pay include :

- £0.974m on Trace Track and Protect.
- £0.481m expenditure on general supplies and services relating to PPE;
- £0.224m expenditure on commissioned services which includes out of area treatments.

The main issues driving the £1.995m operational overspend against non pay were:

- £1.733m planned overspend being one twelfth of the draft financial plan deficit of £20.8m ;
- £0.240m adverse variance against premises and fixed plant where there are pressures arising from security costs in Capital & Estates.

COVID 19 Expenditure and Funding

At month 1 the UHB is projecting expenditure due to COVID-19 to be £67.583m including local response and national programmes. The COVID year-end forecast position is breakeven following confirmation/assumed funding matching net expenditure. This is summarised in Table 8 below. The projected year end spend on Welsh Government Covid programmes is based on current activity sustaining throughout the year. Should programmes be reduced or end, the projected expenditure will reduce accordingly.

Table 8: Summary of Forecast COVID 19 Net Expenditure

	Month 1	Forecast Year-End Position
	£m	£m
COVID 19 Testing	0.106	1.489
COVID 19 Tracing	0.979	9.040
COVID 19 Vaccination	0.702	10.247
Extended Flu vaccination	0.000	0.919
PPE	0.481	5.320
Sub Total National Programmes	2.268	27.015
Cleaning Standards	0.097	3.760
COVID 19 Local Response	3.622	36.808
Sub Total Local response including Cleaning Standards	3.720	40.568
Total COVID Expenditure £m	5.988	67.583
Sub Total COVID funding confirmed/assumed £m	5.988	67.583

The UHB financial forecast includes an assumption that Welsh Government COVID Funding totaling £67.583m, will be provided to match the forecast costs.

Exceptional Inflationary Pressures and Funding

The Draft Financial plan included forecast exceptional inflationary pressures of £30.700m. At month 1 the UHB recorded costs of £2.888m and the forecast remains at the planning figure of £30.7m identified in table 9 below. The UHB is assuming additional Welsh Government funding to cover the £30.700m forecast.

Table 9: Exceptional Inflationary Pressures

	Month 1	Forecast Year-End Position
	£m	£m
Energy/Fuel	2.133	20.900
National Insurance Levy	0.513	6.900
Living Wage - Social Care	0.242	2.900
Total COVID Expenditure £m	2.888	30.700
Sub Total COVID funding confirmed/assumed £m	2.888	30.700

Note. It is assumed that employer Real Living Wage costs will be covered by the 2022/23 pay settlement

Key Financial Assumptions

Following on from Tables 8 & 9 the overall UHB position assumes :-

- Local COVID response allocations from Welsh Government of £40.568m (annual) to support the ongoing additional COVID costs and to fund achieving the Cleaning Standards.

- Funding for national COVID programmes on an actual cost basis, currently forecast at £27.015m to cover :
 - Testing costs
 - Tracing costs (allocated from separate fund)
 - Mass vaccination programme
 - Extended Flu Vaccination
 - PPE
- Funding for exceptional cost pressures of £30.700m, 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 driven by the unpredictability of some cost areas, such as energy.

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 1 by Clinical Board is shown in Table 10.

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Table 10: Financial Performance for the period ended 30th April 2022

Clinical Board	Gross Expenditure Due To COVID 19 £m	Welsh Government Covid 19 Funding £m	Exceptional Inflationary Expenditure £m	Welsh Government Exceptional Inflationary Pressure Funding £m	Operational Position (Surplus) / Deficit Variance £m	Total (Surplus) / Deficit Variance £m
In Month						
Clinical Diagnostics & Therapies	0.125	(0.125)	0.055	0.055	0.084	0.084
Children & Women	0.105	(0.105)	0.056	0.056	0.043	0.043
Capital Estates & Facilities	0.329	(0.329)	2.153	2.153	0.376	0.376
Surge Hospitals	0.000	0.000	0.000	0.000	0.012	0.012
Executives	0.178	(0.178)	0.025	0.025	0.273	0.273
All Wales Genomics Service	0.000	0.000	0.007	0.007	(0.010)	(0.010)
Medicine	1.669	(1.669)	0.060	0.060	0.394	0.394
Mental Health	0.265	(0.265)	0.035	0.035	0.266	0.266
PCIC	2.174	(2.174)	0.269	0.269	0.016	0.016
Specialist	0.283	(0.283)	0.059	0.059	(0.344)	(0.344)
Surgery	0.428	(0.428)	0.073	0.073	0.155	0.155
SubTotal Delegated Position £m	5.555	(5.555)	2.793	2.793	1.266	1.266
Central Budgets	0.432	(0.432)	0.095	0.095	(1.111)	(1.111)
Central Budgets - Planning Deficit					1.733	1.733
Total Deficit/(Surplus) £m	5.988	(5.988)	2.888	2.888	1.888	1.888
Draft 2022/23 Planning Deficit					(1.733)	(1.733)
Operational Deficit/(surplus Against Plan) £m	5.988	(5.988)	2.888	2.888	0.155	0.155
Cumulative						
Clinical Diagnostics & Therapies	0.125	(0.125)	0.055	0.055	0.084	0.084
Children & Women	0.105	(0.105)	0.056	0.056	0.043	0.043
Capital Estates & Facilities	0.329	(0.329)	2.153	2.153	0.376	0.376
Surge Hospitals	0.000	0.000	0.000	0.000	0.012	0.012
Executives	0.178	(0.178)	0.025	0.025	0.273	0.273
All Wales Genomics Service	0.000	0.000	0.007	0.007	(0.010)	(0.010)
Medicine	1.669	(1.669)	0.060	0.060	0.394	0.394
Mental Health	0.265	(0.265)	0.035	0.035	0.266	0.266
PCIC	2.174	(2.174)	0.269	0.269	0.016	0.016
Specialist	0.283	(0.283)	0.059	0.059	(0.344)	(0.344)
Surgery	0.428	(0.428)	0.073	0.073	0.155	0.155
SubTotal Delegated Position £m	5.555	(5.555)	2.793	2.793	1.266	1.266
Central Budgets	0.432	(0.432)	0.095	0.095	(1.111)	(1.111)
Central Budgets - Planning Deficit					1.733	1.733
Total Deficit/(Surplus) £m	5.988	(5.988)	2.888	2.888	1.888	1.888
Draft 2022/23 Planning Deficit					(1.733)	(1.733)
Operational Deficit/(surplus Against Plan) £m	5.988	(5.988)	2.888	2.888	0.155	0.155

The operational deficit of £1.266m against delegated budgets is offset by a £1.111m underspend against central budgets leaving a total operational overspend of £0.155m before the addition of the £1.733m planned deficit in month to leave a total overspend of £1.888m

The largest operational overspend is in the Medicine Clinical Board (£0.394m deficit) where the main pressure areas are nursing and medical staffing and in Capital and Estates (£0.376m deficit) where there are pressures against security costs and commercial income.

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Savings Programme

Delivery of the core financial plan includes a 2% (£16.0m) savings requirement. At month 1, the UHB has identified £14.450m of green and amber schemes to deliver against the £16.000m savings target leaving a further £1.550m schemes to identify as outlined in table 11 below:

Table 11: Savings Schemes at Month 1

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total £m	16.000	14.450	(1.550)

Whilst the UHB has made good progress against the overall £16m target, there is a gap of £4.933m against the £12m recurrent target at month 1.

Significant progress will need to be made before the final plan is submitted at the end of quarter 1

Further analysis of the April 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 2022/23 was £29.7m which reflects the £21.3m shortfall against the recurrent 2020/21 savings target due to the pandemic and the £4.4m shortfall against the 2021/22 recurrent savings target. 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 2022/23 and reduces to £23.7m as outlined in table 12

Table 12: Summary of Forecast Underlying Financial Position

	Draft Position @Month 1		
	Submitted Draft Plan £m	Non Recurrent £m	Recurrent Position £m
b/f underlying deficit	(29.7)	0.0	(29.7)
Net Allocation Uplift (inc LTA inflation)	29.8		29.8
Cost Pressures	(31.8)		(31.8)
Cost Pressures - Non recurrent	(1.1)	(1.1)	
Investments	(4.0)		(4.0)
Recurrent Cost Improvement Plans	12.0		12.0
Non Recurrent Cost Improvement Plans	4.0	4.0	
Submitted 2020/21 IMTP £m	(20.8)	2.9	(23.7)
In Year Movements			
Operational Expenditure Cost Increase Due To Covid-19	67.6	67.6	
Welsh Govt. Covid 19 Funding based on Draft Planning assumptions	(67.6)	(67.6)	
Operational Expenditure Cost Increase Due To Covid-19	30.7	30.7	
Welsh Govt. Exceptional Cost Pressures funding based on Draft Planning assumptions	(30.7)	(30.7)	
In Year Operational Pressures including Unidentified Savings Gap	0.0	0.0	
Provisional Draft Surplus 2021/22	(20.8)	2.9	(23.7)
Planned Surplus/(Deficit) 2021/22	(20.8)	2.9	(23.7)

Balance Sheet

The balance sheet will be provided at Month 3 following external audit of the 2021/22 draft financial accounts and determination of draft brought forward balances.

Cash Flow Forecast

The closing cash balance at the end of April, was £3.816m. The cashflow forecast is expected to be provided at month 3 following the external audit of the 2021/22 draft financial accounts and determination of brought forward balances.

Public Sector Payment Compliance

The UHB's public sector payment compliance performance was 92.0%, which is below the target of 95% and a deterioration of 1.1% on the 93.1% achieved in 2021/22. The UHB is reviewing the reasons for payments outside of the 30 day target so that actions can be taken to improve performance where feasible.

Key Risks

Delivery of the core financial plan includes a 2% (£16.0m) savings requirement. At month 1 the UHB needed to identify a further £1.550m of Green and Amber savings to meet the 2% (£16.0m) savings requirement required to deliver the core financial plan. £7.066m of savings were identified against the £12m recurrent part of the savings target leaving a further £4.933m of recurrent savings to identify in order to meet the plan. Further progress will need to be made before the final plan is submitted at the end of quarter 1.

The UHB also has an operational overspend of £0.155m at month 1. This will need to be recovered and managed as the year progresses, alongside any emerging pressures to enable the UHB to deliver the planned deficit of £20.8m.

This position is heavily predicated on the assumption of Welsh Government continuing to provide income support for local Covid response, exceptional costs and central Covid programmes. The total of these is currently forecast at £98.457m in 2022-23. These assumptions will be tested out in ongoing discussions regarding the UHB's Financial Plan.

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.

Delivery of the core financial plan includes a 2% (£16.0m) savings requirement. At month 1, £7.066m of savings were identified against the £12m recurrent part of the savings target leaving a further £4.933m of recurrent savings to identify in order to meet the plan. Further progress will need to be made before the final plan is submitted 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.

This position is heavily predicated on the assumption of Welsh Government continuing to provide income support for local Covid response, exceptional costs and central Covid programmes. The total of these is currently forecast at £98.457m in 2022-23. These assumptions will be tested out in ongoing discussions regarding the UHB's Financial Plan.

Recommendation:

The Board / Committee are requested to:

- **NOTE** the month 1 financial impact of COVID 19 which is assessed at £5.988m ;
- **NOTE** the additional Welsh Government COVID 19 funding of £5.988m assumed within the month 1 position.
- **NOTE** the month 1 financial impact of Exceptional inflationary pressures which is assessed at £2.888m ;
- **NOTE** the additional Welsh Government COVID 19 funding of £2.888m assumed within the month 1 position.
- **NOTE** the reported overspend of £1.888m at month 1 due to £0.155m of operational pressures and a planning deficit of £1.733m
- **NOTE** the forecast deficit of £20.8m which is consistent with the draft financial plan
- **NOTE** the 2021/22 brought forward Underlying Deficit of £29.7m and the forecast carry forward of £23.7m to 2022/23.

Link to Strategic Objectives of Shaping our Future Wellbeing:

Please tick as relevant

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

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention		Long term	x	Integration		Collaboration		Involvement	
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Impact Assessment:

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

Risk: Yes

No

Safety: Yes/No

No

Financial: Yes

As detailed in the report.

Workforce: Yes/No	
No	
Legal: Yes/No	
No	
Reputational: Yes/No	
Yes, if forecast financial position is not delivered.	
Socio Economic: Yes/No	
No	
Equality and Health: Yes/No	
No	
Decarbonisation: Yes/No	
No	
Approval/Scrutiny Route:	
Finance Committee	Date: 25 th May 2022

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2022/23 SAVING SCHEMES

2022-23 In-Year Effect

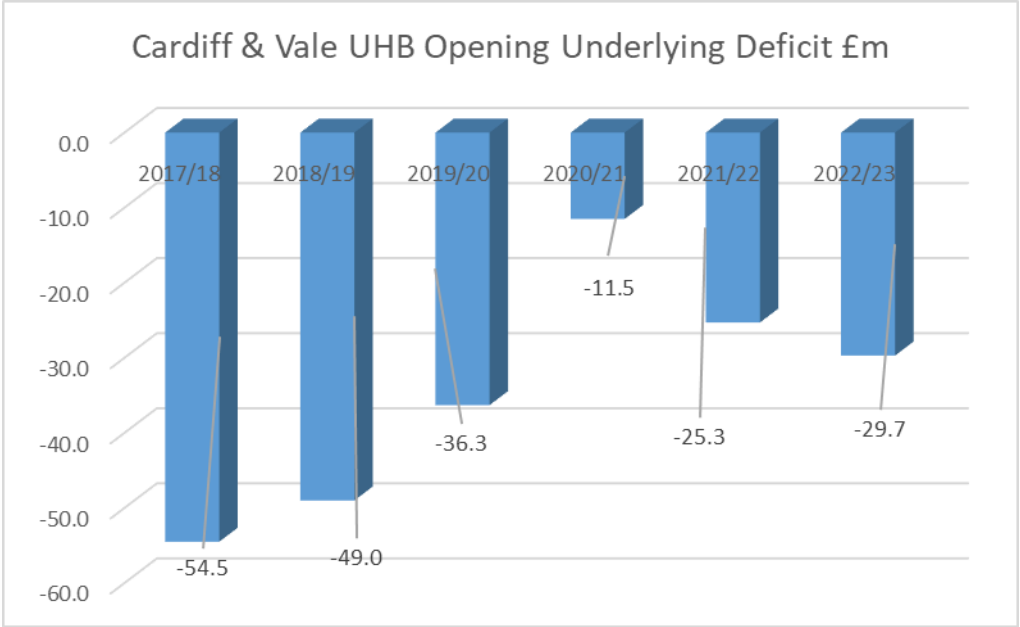
Clinical/Service Board	22-23 Target 2%	Green	Amber	Total Green & Amber	Red	Shortfall on Total Target vs Green & Amber	% Target identified Green / Amber
	£'000	£'000	£'000	£'000	£'000	£'000	%
Capital Estates and Facilities	946	795	14	809	0	138	85%
Children and Women	1,303	476	613	1,089	68	214	84%
Clinical Diagnostics and Therapeutics	1,199	840	76	916	0	283	76%
Corporate Executives	500	351	0	351	0	150	70%
Medicine	1,378	966	162	1,128	451	250	82%
Mental Health	1,079	425	450	875	399	205	81%
Primary, Community and Intermediate Care	2,423	1,405	702	2,107	15	316	87%
Specialist Services	1,482	1,135	345	1,480	0	2	100%
Surgical Services	1,689	1,045	650	1,695	300	-6	100%
Sub Total Clinical Boards £'000	12,000	7,438	3,012	10,450	1,233	1,550	87%
Corporate	4,000	0	4,000	4,000	0	0	100%
Total £'000	16,000	7,438	7,012	14,450	1,233	1,550	90%

2022-23 Full Year Effect

Clinical/Service Board	22-23 Target 1.5%	Green	Amber	Total Green & Amber	Pipeline Red	Shortfall on Total Target vs Green & Amber	% Target identified Green / Amber
	£'000	£'000	£'000	£'000	£'000	£'000	%
Capital Estates and Facilities	946	728	14	742	136	204	78%
Children and Women	1,303	129	225	354	24	949	27%
Clinical Diagnostics and Therapeutics	1,199	459	107	566	0	633	47%
Corporate Executives	500	0	0	0	0	500	0%
Medicine	1,378	484	20	504	935	874	37%
Mental Health	1,079	451	268	719	650	360	67%
Primary, Community and Intermediate Care	2,423	1,040	977	2,018	250	405	83%
Specialist Services	1,482	552	345	897	0	585	61%
Surgical Services	1,689	267	1,000	1,267	600	422	75%
Sub Total Clinical Boards £'000	12,000	4,110	2,956	7,066	2,595	4,933	59%
Corporate		0	0	0	0	0	
Total £'000	12,000	4,110	2,956	7,066	2,595	4,933	59%

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Year on Year Movement in Cardiff & Vale UHB Underlying Deficit



Mohamed Sarah
05/20/2022 13:07:40

Report Title:	Committee Self Effectiveness			Agenda Item no.	2.3
Meeting:	Finance Committee	Public	x	Meeting Date:	25 th May 2022
		Private			
Status <i>(please tick one only):</i>	Assurance	x	Approval		Information
Lead Executive:	Director of Corporate Governance				
Report Author (Title):	Director of Corporate Governance				
Main Report					
Background and current situation:					
<p>Routine monitoring of the effectiveness of the Board and its Committees is a vital part of ensuring strong and effective governance within the Health's Board's governance structure. Under its Standing Orders (SO 10.2.1), the Board is required to introduce a process of regular and rigorous self-assessment and evaluation of its own operations and performance and that of its Committees and Advisory Groups. Further, and where appropriate, the Board may determine that such evaluation may be independently facilitated.</p> <p>The Health Board undertook an annual review of the effectiveness of its Board and its Committees in April 2022 using survey questions derived from best practice guides, including the NHS Handbook, and using the following principles:</p> <ul style="list-style-type: none"> the need for sub-Committees to strengthen the governance arrangements of the Health Board and support the Board in the achievement of the strategic objectives; the requirement for a Committee structure that strengthens the role of the Board in strategic decision making and supports the role of non-executive directors in challenging Executive management actions; maximising the value of the input from non-executive directors, given their limited time commitment; and supporting the Board in fulfilling its role, given the nature and magnitude of the Health Board's agenda. <p>For the 2021-2022 self-assessment, a survey was disseminated via Survey Monkey to all Board and Committee Members and Board and Committee attendees, enabling an efficient yet effective reflection on Board effectiveness and mirroring the method used for the Committees.</p> <p>The purpose of this report is to present the findings of the Annual Board Effectiveness Survey 2021-2022, which relate to the Finance Committee (attached as Appendix 1). There were no areas identified for improvement.</p>					
Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:					
<ul style="list-style-type: none"> The survey questionnaires for the annual Board/Committee Effectiveness Surveys 2021-2022 were issued in early April 2021 and attained a positive response rate overall. 					

- The overall findings are positive which provides an assurance that the governance arrangements and Committee structure in place are effective, and that the Committees are effectively supporting the Board in fulfilling its role.

To ensure effective governance the Board Effectiveness Survey is undertaken on an annual basis, in accordance with the provisions of the Standing Orders for NHS Wales.

The next self-assessment will be undertaken in March/April 2023 to coincide with the end of financial year reporting requirements of the Annual Governance Statement 2022-2023.

Recommendation:

The Committee is requested to:

- a) **NOTE** the results of the Annual Board Effectiveness Survey 2021-2022, relating to the Finance Committee.

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	x	8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology	
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us	
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives	

Five Ways of Working (Sustainable Development Principles) considered

Please tick as relevant

Prevention	x	Long term	x	Integration	x	Collaboration	x	Involvement	x
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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: No

Workforce: No

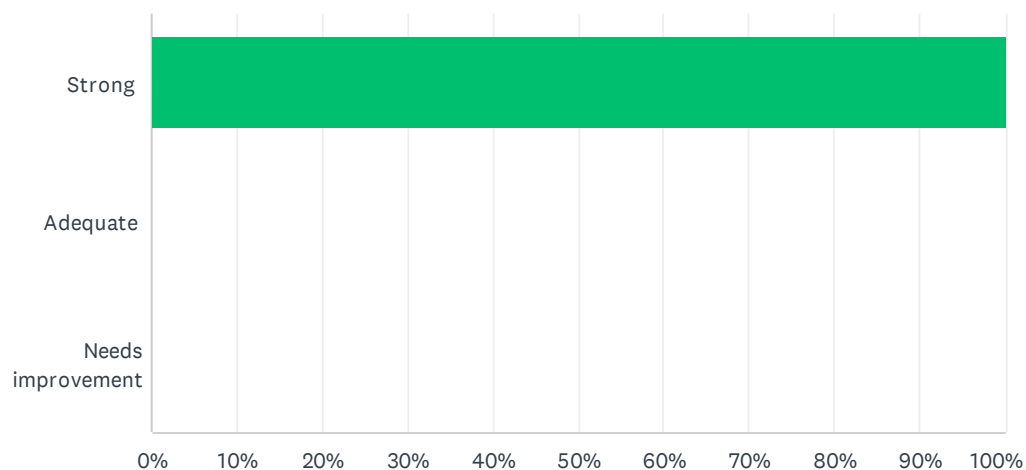
Legal: No

Reputational: No	
Socio Economic: No	
Equality and Health: No	
Decarbonisation: No	
Approval/Scrutiny Route:	
Committee/Group/Exec	Date:
Audit Committee	12 th May 2022

Mohamed Sarah
05/20/2022 13:07:40

Q1 The Committee terms of reference clearly, adequately & realistically set out the Committee's role and nature and scope of its responsibilities in accordance with guidance and have been approved by the committee and the full Board. NHS Handbook status: 1 - must do

Answered: 5 Skipped: 0

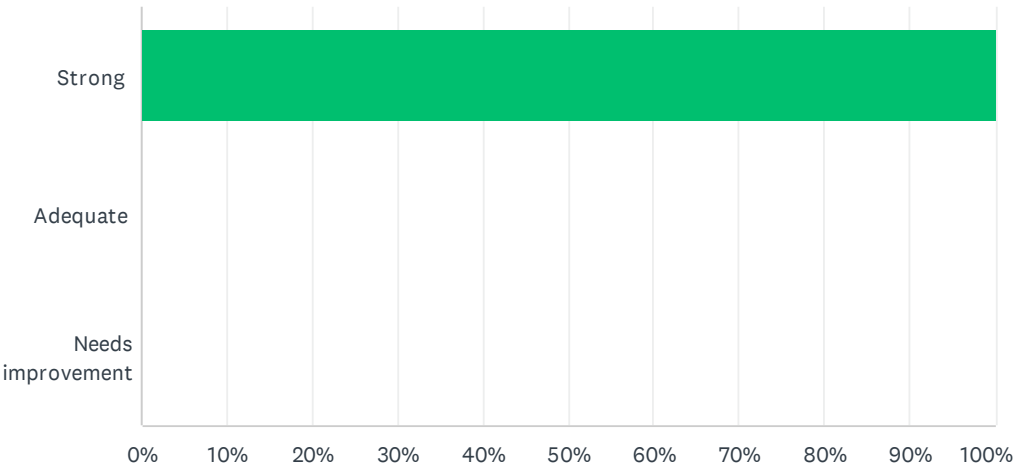


ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q2 The Board was active in its consideration of Committee composition.NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

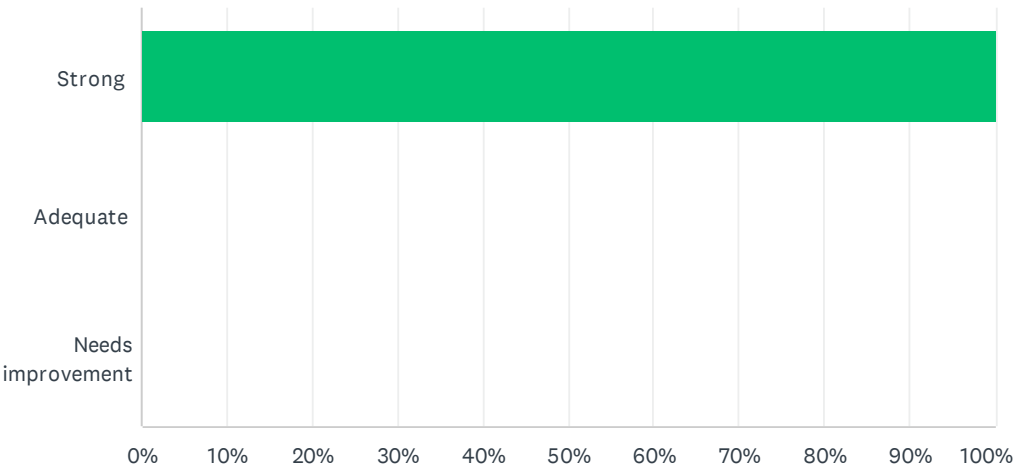


ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q3 The Committee actions reflect independence from management, ethical behaviour and the best interests of the Health Board and its stakeholders.

Answered: 5 Skipped: 0

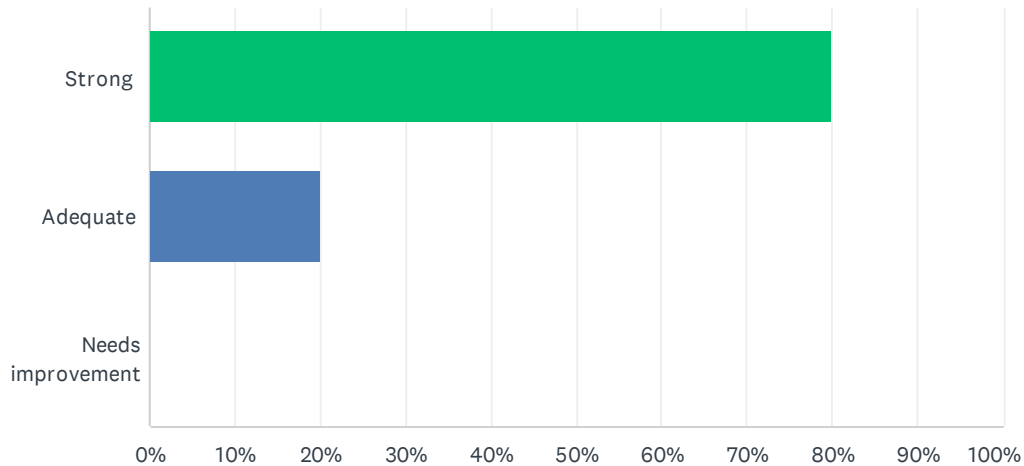


ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q4 The Committee meeting packages are complete, are received with enough lead time for members to give them due consideration and include the right information to allow meaningful discussion. Minutes are received as soon as possible after meetings. NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0



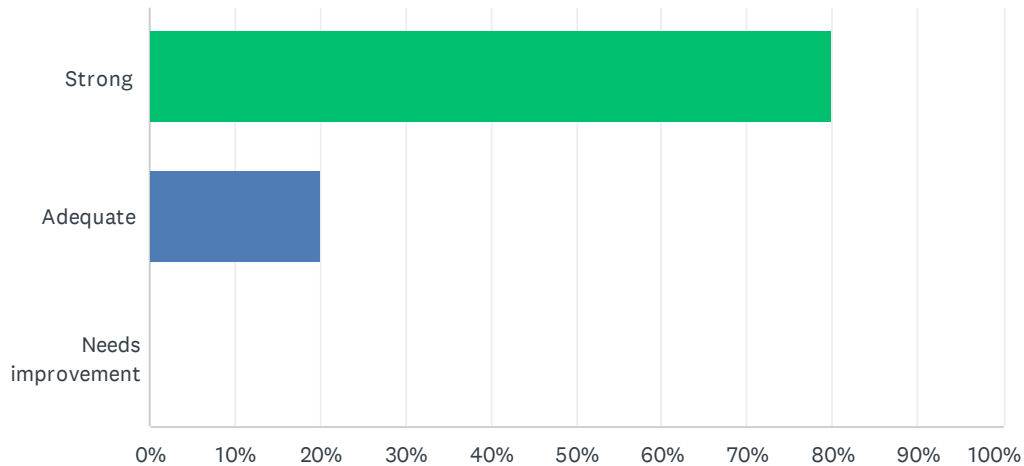
ANSWER CHOICES	RESPONSES	
Strong	80.00%	4
Adequate	20.00%	1
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q5 Committee meetings are well organised, efficient, and effective, and they occur often enough and are of appropriate length to allow discussion of relevant issues consistent with the committee's responsibilities.NHS

Handbook status: 2 - should do

Answered: 5 Skipped: 0

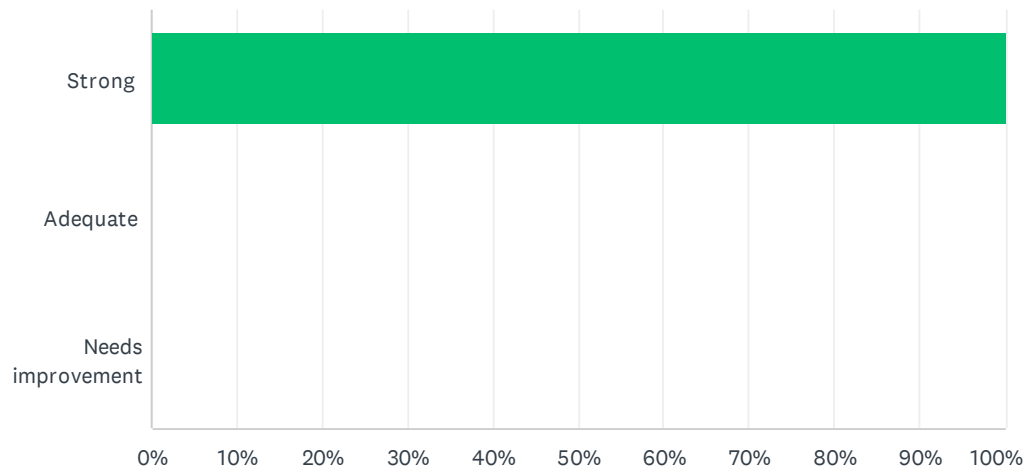


ANSWER CHOICES	RESPONSES	
Strong	80.00%	4
Adequate	20.00%	1
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q6 Appropriate internal or external support and resources are available to the Committee and it has sufficient membership and authority to perform its role effectively. NHS Handbook status: 1 - must do

Answered: 5 Skipped: 0

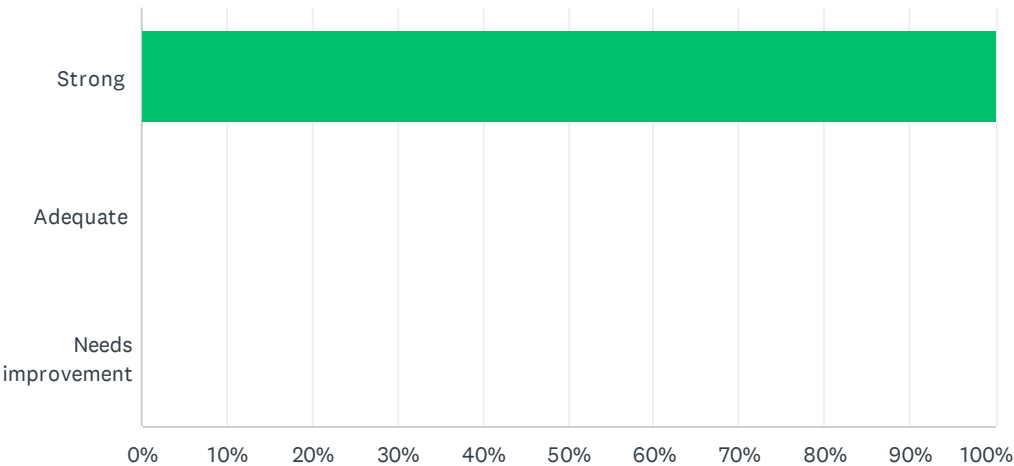


ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q7 The Committee informs the Board on its significant activities, actions, recommendations and on its performance through minutes and regular reports and has appropriate relationships with other committees.NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

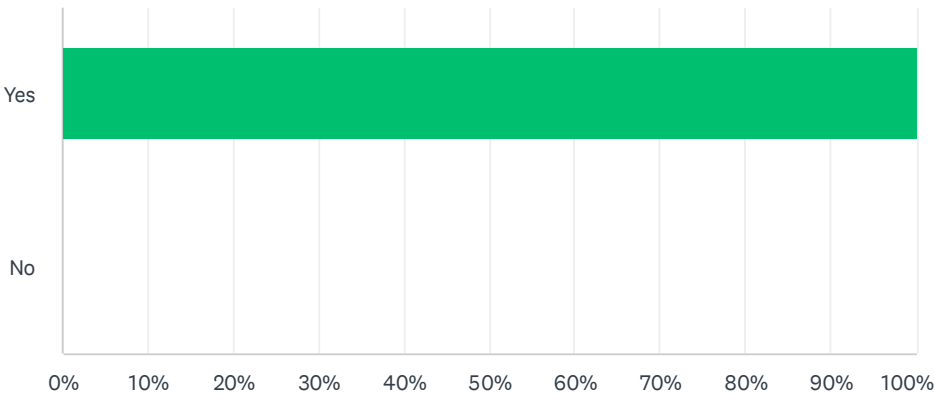


ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q8 Are the terms of reference reviewed annually to take into account governance developments and the remit of other committees within the organisation?NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

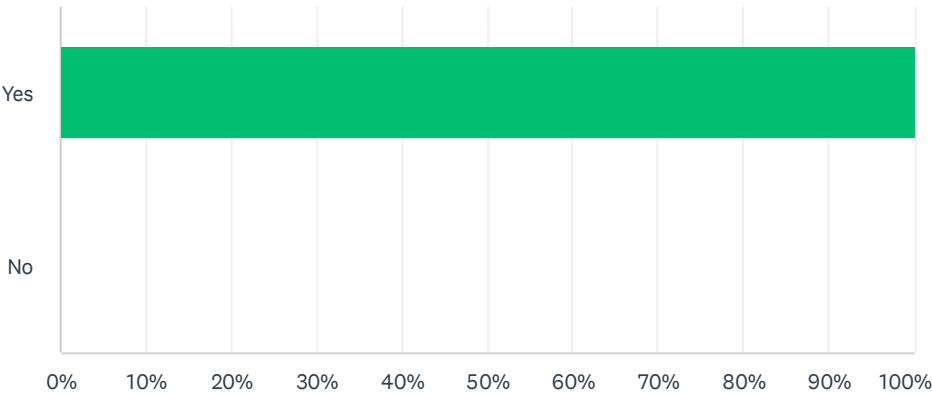


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q9 Are changes to the committee’s current and future workload discussed and approved at Board level?NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

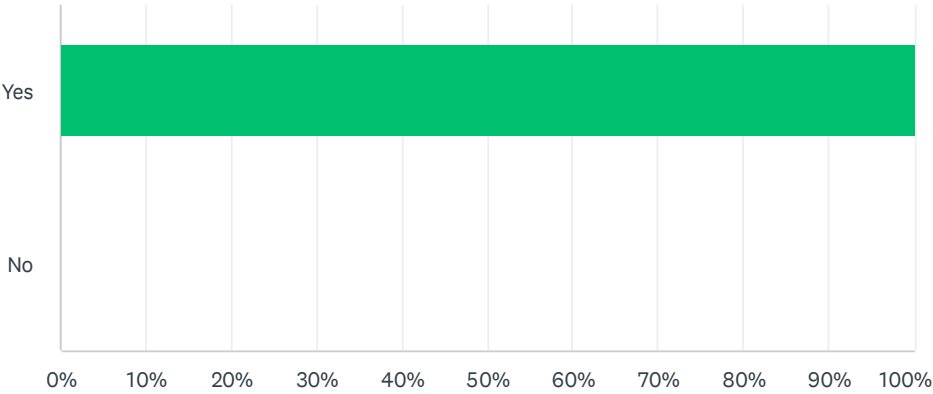


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q10 Are committee members independent of the management team?NHS
Handbook status: 1 - must do

Answered: 5 Skipped: 0

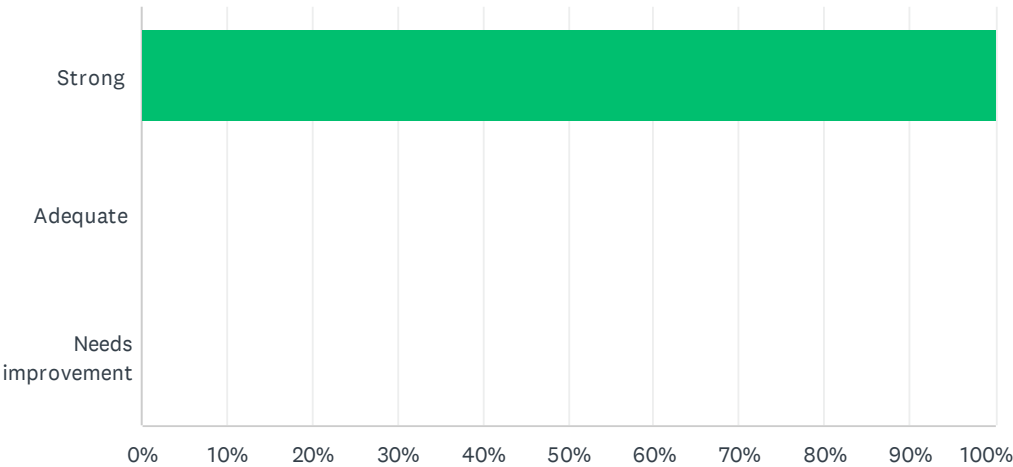


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q11 The Committee agenda-setting process is thorough and led by the Committee Chair.NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

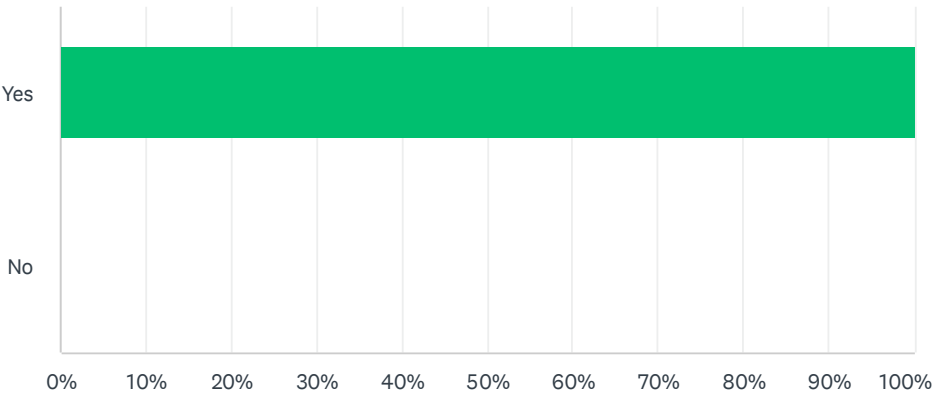


ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q12 Has the Committee established a plan for the conduct of its work across the year?NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

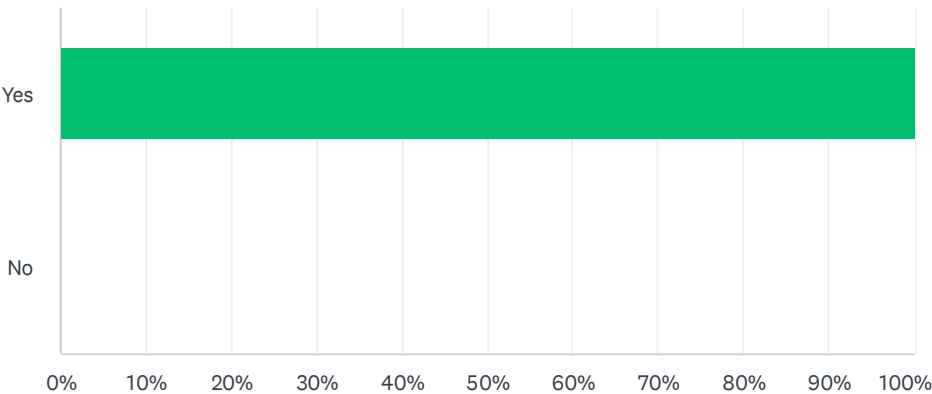


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q13 Has the committee formally considered how its work integrates with wider performance management and standards compliance?NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

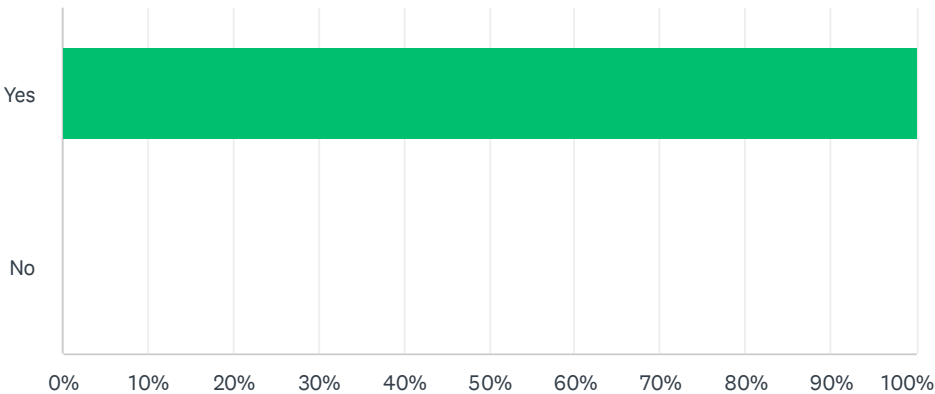


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q14 Has the committee reviewed whether the reports it receives are timely and have the right format and content to ensure its responsibilities are discharged?NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

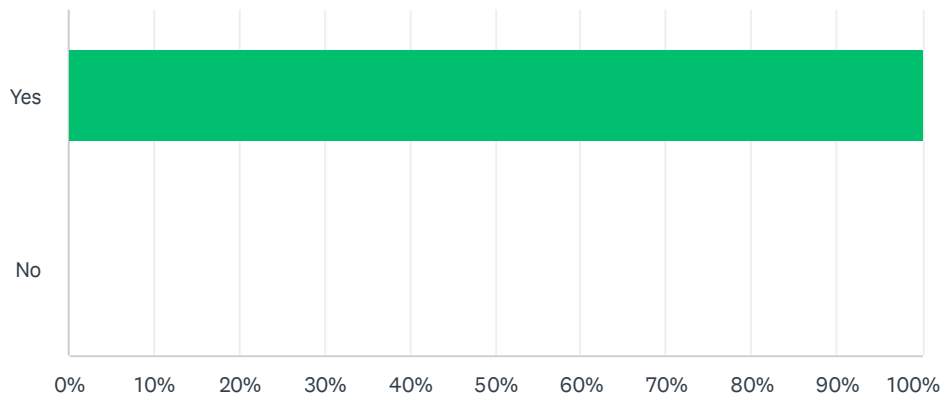


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q15 Does the Board ensure that Committee members have sufficient knowledge of the organisation to identify key risks and to challenge line management on critical and sensitive matters?NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

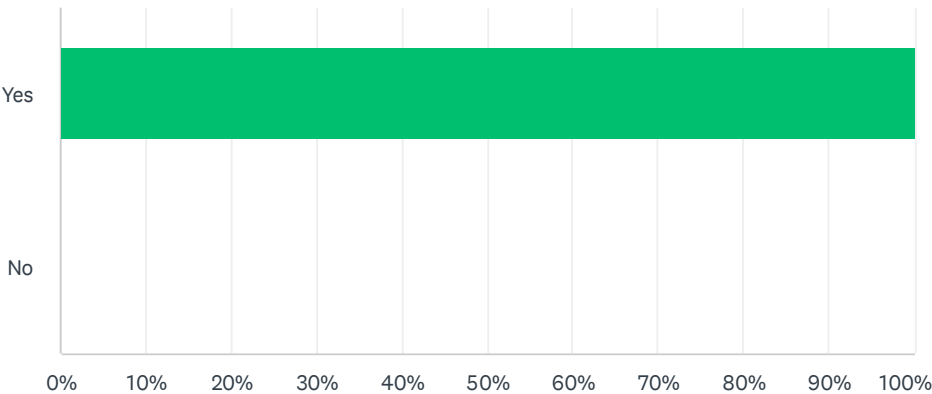


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q16 Is the committee satisfied that the Board has been advised that assurance reporting is in place to encompass all the organisations responsibilities?NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

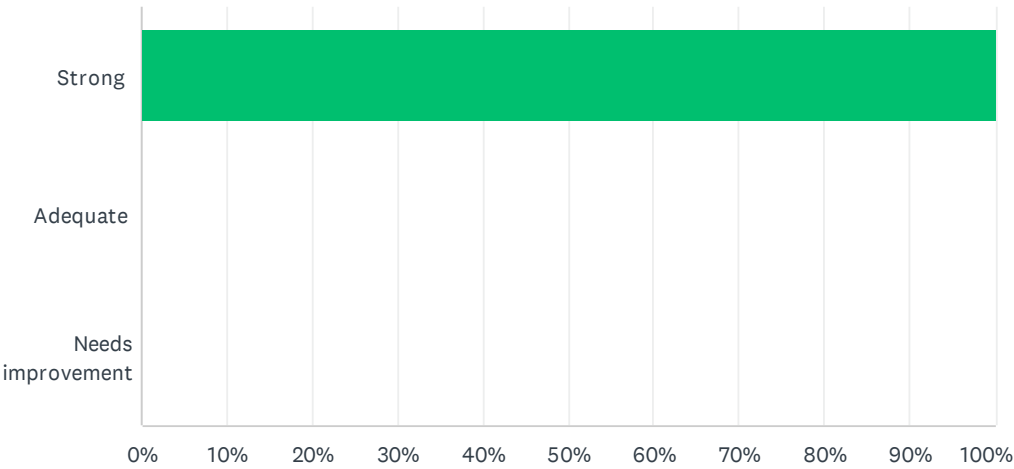


ANSWER CHOICES	RESPONSES	
Yes	100.00%	5
No	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q17 The committee’s self-evaluation process is in place and effective. NHS Handbook status: 2 - should do

Answered: 5 Skipped: 0

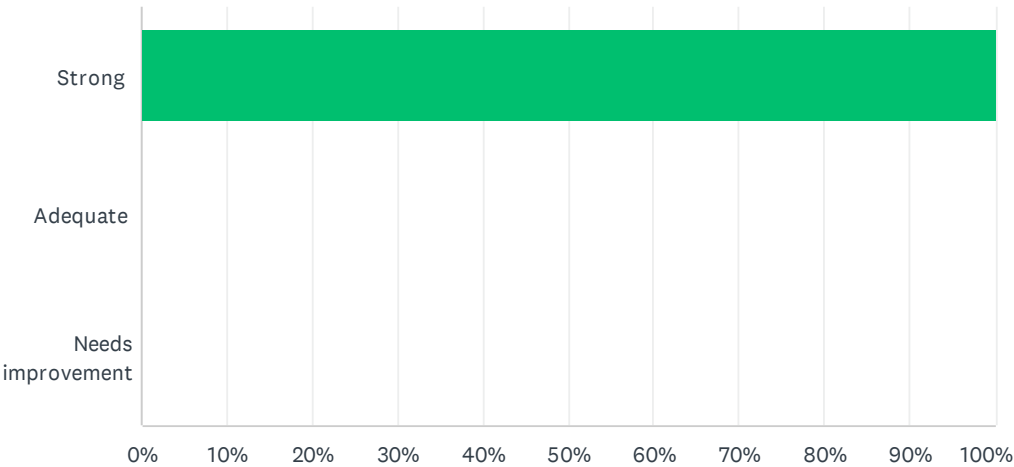


ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q18 What is your overall assessment of the performance of the Committee?

Answered: 5 Skipped: 0



ANSWER CHOICES	RESPONSES	
Strong	100.00%	5
Adequate	0.00%	0
Needs improvement	0.00%	0
TOTAL		5

Mohamed Sarah
05/20/2022 13:07:40

Q19 Additional Comments

Answered: 1 Skipped: 4

Mohamed Sarah
05/20/2022 13:07:40

Q20 Name

Answered: 3 Skipped: 2

Mohamed Sarah
05/20/2022 13:07:40

Q21 Position

Answered: 3 Skipped: 2

Mohamed Sarah
05/20/2022 13:07:40

THE WELSH GOVERNMENT FINANCIAL COMMENTARY

FINANCIAL POSITION FOR THE ONE MONTH PERIOD ENDED 30th APRIL 2022

INTRODUCTION

The UHB's 2022/23 financial plan is structured in three parts in line with Welsh Government guidance as follows:

- Core Financial Plan including recovery
- National inflationary pressures which are out of the direct control of individual Health Boards.
- Ongoing COVID response costs.

The UHB's core plan incorporated :-

- Brought forward underlying deficit of £29.7m
- Allocations and inflationary uplifts of £29.8m
- Capped cost pressures and investments of £36.9
- A £16m (2%) Savings programme

This results in a 2022-23 planning deficit of £20.8m.

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

- 1) Energy costs where the planning assumption was based on a mid-range estimate from Shared services at £20.9m.
- 2) Employers NI cost of £6.9m.
- 3) The impact of paying Real Living Wage (RLW) for staff working within social care and Third Sector currently estimated at £2.9m.

The plan assumes that the cost of the RLW, already being paid to staff directly employed by the UHB will be funded through the 2022-23 pay award funding in addition to the £2.9m cost currently forecast in the social/third sector.

These exceptional forecast costs remain as informed estimates at present. The UHB continues to work through its assessment of their cost impact with particular regard to the volatile energy costs.

In addition to the core plan the UHB anticipates funding for :-

- Ongoing Covid local response costs as defined by updated 2022-23 Welsh Government allowable definitions.
- Central Covid programme funding as informed by the Welsh Government Allocation Letter to include TTP, MVC, PPE and Flu costs incurred within health boards.

The draft plan is subject to further development during quarter 1 of 2022/23 and the UHB expects to submit a final financial plan for 2022/23 at the end of quarter 1.

At month 1, the UHB is reporting an in month overspend of £1.888m against its submitted draft plan. This is due to £0.155m of operational pressures and a planning deficit of £1.733m, which is one twelfth of the planned deficit of £20.8m identified in the draft 2022/23 financial plan.

In addition, the UHB reports that it has incurred additional costs for which it anticipates funding of :-

- Exceptional Cost Pressures £2.888m
- Local Covid response £3.720m
- Central Welsh Government Covid Programmes £2.266m

BACKGROUND

The Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2021. A summary of the core draft plan submitted is provided in Table 1.

Table 1: 2022/23 Core Draft Plan

	2022/23 Plan £m
Underlying deficit from 2020/21 Plan	(4.0)
Adjustment for non-recurrent items in 2020/21 and 2021/22	(25.7)
b/f underlying deficit	(29.7)
Allocation uplift (including LTA inflation)	29.8
Capped cost pressures assessment recurrent	(31.8)
Capped cost pressures assessment non-recurrent	(1.1)
Investment reserve	(4.0)
2022/23 Planned Surplus/(Deficit) before efficiency programme	(36.8)
Efficiency Programme of 2%	
Recurrent cost improvement plans (1.5% in 22/23)	12.0
Non Recurrent cost improvement plans (0.5% in 22/23)	4.0
Planned Surplus/(Deficit)	(20.8)

This represents the core financial plan of the Health Board.

The UHB expects to incur additional costs and funding in respect of :-

- Exceptional costs from National Inflationary pressures.
- Local Covid response costs
- Welsh Government national COVID programmes.

These financial monitoring returns have been prepared within the framework of the UHB's submitted Draft Core Financial Plan, which includes a planning deficit of £20.8m for 2022-23. This report details the financial position of the UHB for the period ended 30th April 2022.

The UHB has separately identified non COVID 19 and COVID 19 expenditure against its submitted plan in order to assess the financial impact of COVID 19. Where discrete funding has been provided for specific Covid schemes outside local response and Welsh Government programmes, the cost has been excluded from Table B3.

This approach enables the UHB to maintain clear sight of its local response costs so that these can be managed with the £40.6m planning figure, included in the draft financial plan.

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

The response to the queries raised in the month 12 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 1 for which the following should be noted:

- It is assumed that LTA inflation of £7.827m 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 national programme costs in Table B3 and assumes that additional Welsh Government Funding will be provided to match the costs;
- The bought forward and forecast underlying deficit is £29.7m 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.

OVERVIEW OF KEY RISKS & OPPORTUNITIES (TABLE A2)

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

ACTUAL YEAR TO DATE (TABLE B AND B2)

Table B confirms the year to date deficit of £1.888m and reflects the analysis contained in the annual operating plan in Table A. The UHB is reporting a deficit of £1.888m for the year to date and a forecast deficit of £20.800m as shown in Table 2.

Table 2: Summary Financial Position for the period ended 30th April 2022

	Month 1	Forecast Year-End Position £m
COVID 19 Additional Expenditure	5.988	67.583
Exceptional Inflationary Pressures	2.880	30.700
Gross additional COVID and Exceptional Inflationary Pressures £m	8.868	98.283
Welsh Govt FUNDING for additional COVID and Exceptional Inflationary Pressures	(8.868)	(98.283)
Planned deficit	1.733	20.800
Operational position (Surplus) / Deficit	0.155	0.000
Financial Position £m (Surplus) / Deficit £m	1.888	20.800

The month 1 deficit of £1.888 m comprised of the following:

- £1.733m planned deficit (1/12th of £20.800m);
- £0.155m adverse variance against plan.

It is anticipated that the adverse operational variance of £0.155m at month 1, can be recovered as the year progresses and that the UHB will deliver its planned deficit position of £20.8m.

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

The UHB reports that it has incurred additional costs :-

- Exceptional Cost Pressures £2.888m
- Local Covid response £3.720m
- Central Welsh Government Covid Programmes £2.266m

It is assumed that Welsh Government funding will be provided to cover the COVID and exceptional inflationary costs arising in month 1 and for the remainder of the year.

PAY & AGENCY (TABLE B2)

The UHB recorded Agency costs of £1.845m in month1 and £1.141m of these cost related to registered nursing and midwifery.

COVID 19 ANALYSIS (TABLE B3)

At month 1 Table B3 is projecting net expenditure due to COVID-19 to be £67.583m. The COVID year-end forecast position is breakeven following confirmation/assumed funding matching net expenditure. This is summarised in table 3 below. The projected year end spend on Welsh Government Covid programmes is based on current activity sustaining throughout the year. Should programmes be reduced or end, the projected expenditure will reduce accordingly.

Table 3: Summary of Forecast COVID 19 Net Expenditure

	Month 1 £m	Forecast Year-End Position £m
COVID 19 Testing	0.106	1.489
COVID 19 Tracing	0.979	9.040
COVID 19 Vaccination	0.702	10.247
Extended Flu vaccination	0.000	0.919
PPE	0.481	5.320
Sub Total National Programmes	2.268	27.015
Cleaning Standards	0.097	3.760
COVID 19 Local Response	3.622	36.808
Sub Total Local response including Cleaning Standards	3.720	40.568
Total COVID Expenditure £m	5.988	67.583
Sub Total COVID funding confirmed/assumed £m	5.988	67.583

This forecast includes funding assumed from Welsh Government COVID Funding totaling £67.583m to match the forecast costs.

The UHB has excluded the following allocations from the analysis of COVID expenditure on table B3 to allow clear sight of its COVID response costs.

- Covid: Adferiad Long Covid - £0.749m
- Covid: Anti Viral Service Cost - £0.250m
- Covid: Investigating And Learning From Cases Of Nosocomial Covid 19 - £0.520m
- PACU - £0.904m

Key Financial Assumptions

- Local response COVID response allocation of £40.6m to support the exit from additional COVID costs and to fund achieving the Cleaning Standards.
- Funding for national programmes on an actual cost basis:
 - Testing costs
 - Tracing costs (allocated from separate fund)
 - Mass vaccination programme
 - Extended Flu Vaccination
 - PPE
- The UHB's plan includes exceptional cost pressures, which are deemed to be outside of the UHB's direct control. The forecast cost will be subject to review as the year progresses. The plan assumes that additional Welsh Government funding will be provided to mitigate these exceptional inflationary cost pressures set out in the following table below in full.

Table 4: Exceptional Inflationary Pressures

Exceptional Inflationary Pressures	Energy /Fuel £m	NI Levy £m	Living Wage Social Care £m	Total £m
Total £m	20.900	6.900	2.900	30.700

Note. It is assumed that employer living wage costs will be covered by the 2022/23 pay settlement

Financial Risks and Uncertainties

The key financial risks for the Health Board within this draft financial plan are set out below:

- Providing services in a pandemic – The UHB continues to operate in a dynamic environment with considerable uncertainty which affects the availability of its workforce and the planning and delivery of services.
- Achievement of the efficiency plan target – Savings plans delivering 2% need to be in place as soon as possible. There are clear lines of accountability in delivering identified high value opportunities.
- Management of Operational Pressures – The UHB expects its budget holders to manage and recover any operational pressures within the totality of resources delegated to them.
- Inflationary pressures – There are considerable inflationary pressures across the Health Board with pay and energy being the largest. This will affect the UHB directly and also through its supply chain. The UHB will monitor this closely and work with our partners to find a system wide approach to manage the risk.
- COVID Response – The UHB needs to exit its COVID 19 response costs in a manageable way for service delivery and within available resources, whilst maintaining the ability to respond to changes in COVID demands.

The Health Board recognises the risks in the draft financial plan and is taking actions in order to ensure that they are appropriately managed and that financial opportunities to support mitigation are fully explored. Additionally, it is working to finalise its financial plan and this includes assessing the opportunities to reduce the £20.8m deficit in the draft plan.

Savings Programme 2022-32 (TABLE C, C1 & C2)

At month 1 the UHB has identified £13.011m of schemes to deliver against the £16.000m savings target leaving a further £2.989m schemes to identify as outlined in table 5 below:

Table 5: Savings Schemes

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total £m	16.000	13.011	(2.989)

Progress is continuing to identify a full programme of deliverable savings.

INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)

The UHB is currently progressing LTA discussion in line with the Welsh Government timetable.

INCOME ASSUMPTIONS 2022/23 (TABLE E)

Table E outlines the UHB's 2022/23 resource limit.

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

AGED WELSH NHS DEBTORS (TABLE M)

At the 30th April 2022, were no invoices outstanding for more than 17 weeks.

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 25th May 2022 meeting of the Finance Committee for information.

The Deputies who will approve the monthly monitoring submission in the absence of the Director of Finance and the Chief Executive are as follows:

Robert Mahoney/Hywel Pullen – Deputy Director of Finance
Abigail Harris – Director of Strategic Planning and Deputy Chief Executive

CONCLUSION

The UHB submitted a draft financial plan at the end of March 2022 and expects to submit a final plan at the end of quarter 1 in line with the Welsh Government timetable.

The UHB is committed to achieving in year and recurrent financial balance as soon as possible. The UHB currently has a one year draft financial plan for 2022-23 which aims to deliver financial stability and ensure that the underlying position is reduced and delivers a deficit of £20.8m. This includes a savings target of £16.0m.

The reported financial position for the first month is a deficit of £1.888m. This is made up of a budget plan deficit of £1.733m and an adverse variance against plan of £0155m.



SUZANNE RANKIN
CHIEF EXECUTIVE

13th May 2022



CATHERINE PHILLIPS
EXECUTIVE DIRECTOR OF
FINANCE

13th May 2022

Mohamed Sarah
05/20/2022 13:07:40

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

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

	In Year Effect	Non Recurring	Recurring	FYE of Recurring
	£'000	£'000	£'000	£'000
1 Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	-29,700	0	-29,700	-29,700
2 Planned New Expenditure (Non Covid-19) (Negative Value)	-92,708	-1,125	-91,583	-91,583
3 Planned Expenditure For Covid-19 (Negative Value)	-67,582	-67,582		
4 Planned Welsh Government Funding (Non Covid-19) (Positive Value)	77,781	0	77,781	77,781
5 Planned Welsh Government Funding for Covid-19 (Positive Value)	67,582	67,582		
6 Planned Provider Income (Positive Value)	7,827	0	7,827	7,827
7 RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	0
8 Planned (Finalised) Savings Plan	13,061	7,941	5,120	6,273
9 Planned (Finalised) Net Income Generation	90	0	90	92
10 Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
11 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
12	0	0		
13 Planning Assumptions still to be finalised at Month 1	2,849	0	2,849	5,610
14 Opening IMTP / Annual Operating Plan	-20,800	6,816	-27,617	-23,700
15 Reversal of Planning Assumptions still to be finalised at Month 1	-2,849	0	-2,849	-5,610
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 Other Movement in Month 1 Planned & In Year Net Income Generation	0	0	0	0
19 Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	0	0	0	0
20 Additional In Year Identified Savings - Forecast	380	200	180	188
21 Variance to Planned RRL & Other Income	0	0		
22 Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 (Positive Value - additional)	0	0		
23 Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0		
24 Additional In Year & Movement Expenditure for Covid-19 (Negative Value - additional/Postive Value - reduction)	0	0		
25 In Year Accountancy Gains (Positive Value)	204	204	0	0
26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	0	0		
27 Additional savings to be identified	2,265	2,265		5,421
28 Operational Variance	0	0		
29 Roundings	1	1		
30	0	0		
31	0	0		
32	0	0		
33	0	0		
34	0	0		
35	0	0		
36 Forecast Outturn (- Deficit / + Surplus)	-20,800	9,486	-30,286	-23,700
37 Covid-19 - Forecast Outturn (- Deficit / + Surplus)	0			

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-2,475	-29,700
2	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-7,726	-92,708
3	-5,988	-5,801	-5,822	-5,416	-5,290	-5,480	-5,541	-5,814	-5,731	-5,759	-5,556	-5,385	-5,988	-67,582
4	6,482	6,482	6,482	6,482	6,482	6,482	6,482	6,482	6,482	6,482	6,482	6,482	6,482	77,781
5	5,988	5,801	5,822	5,416	5,290	5,480	5,541	5,814	5,731	5,759	5,556	5,385	5,988	67,582
6	652	652	652	652	652	652	652	652	652	652	652	652	652	7,827
7	296	27	-20	-15	-48	-83	5	-25	-38	-27	-27	-45	296	0
8	1,030	1,040	1,087	1,082	1,115	1,149	1,061	1,091	1,105	1,094	1,094	1,111	1,030	13,061
9	7	7	7	8	8	8	8	8	8	8	8	8	7	90
10													0	0
11													0	0
12													0	0
13		259	259	259	259	259	259	259	259	259	259	259	0	2,849
14	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,734	-1,733	-20,800
15	0	-259	-259	-259	-259	-259	-259	-259	-259	-259	-259	-259	0	-2,849
16													0	0
17													0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	32	32	32	32	34	34	34	34	34	34	25	25	32	380
21													0	0
22	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23													0	0
24	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	139	0	0	65	0	0	0	0	0	0	0	0	139	204
26													0	0
27	-171	227	227	162	225	225	225	225	225	225	234	234	-171	2,265
28	-155	78	78										-155	0
29	0	0	0	0	0	0	0	0	0	0	0	0	0	1
30													0	0
31													0	0
32													0	0
33													0	0
34													0	0
35													0	0
36	-1,888	-1,656	-1,656	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,733	-1,888	-20,800
37	0	0	0	0	0	0	0	0	0	0	0	0	0	0