

# Finance & Performance Committee Meeting

Wed 22 May 2024, 14:00 - 15:15

Microsoft Teams

## Agenda

---

14:00 - 14:10  
10 min

### 1. Standing Items (14:00 - 14:10)

*John Union*

#### 1.1. Welcome and Introductions

#### 1.2. Apologies for Absence

#### 1.3. Declarations of Interest

#### 1.4. Minutes from the Finance and Performance Committee meeting – 17 April 2024

 1.4 Finance and Performance Minutes 17.04.24.pdf (4 pages)

#### 1.5. Actions following the Finance and Performance Committee meeting held on 17 April 2024

 1.5 Finance and Performance Action Log.pdf (1 pages)

#### 1.6. Chair's Actions since previous meeting

---

14:10 - 15:00  
50 min

### 2. Items for Review and Assurance (14:10 - 15:00)

#### 2.1. Financial Report – Month 1 (14:10 - 14:40)

*Catherine Phillips / Robert Mahoney*


30 minutes

 2.1 Public Finance Committee SUMMARY Finance Position Report for Month 1.pdf (10 pages)

#### 2.2. Operational Performance (14:40 - 15:00)

*Paul Bostock*

20 minutes

 2.3 Operational Performance report cover paper.pdf (6 pages)

 2.3a Integrated Performance Report.pdf (36 pages)

---

15:00 - 15:00  
0 min

### 3. Items for Approval / Ratification

No Items

---

Saunders Wathan  
17/05/2024 11:05

15:00 - 15:00 **4. Items for Information and Noting (15:05)**

0 min

**4.1. Monthly Monitoring Return – Month 12 & Month 1 (24/25)**

*Catherine Phillips / Robert Mahoney*

-  4.1a WG 2023\_24 month 12 & 2024\_25 month 1 MMR Covering Report.pdf (2 pages)
-  4.1b CV Financial Monitoring Returns 2023-24 - Month 12.pdf (10 pages)
-  4.1c 2023-24 MMR Template - Cardiff Vale UHB Month 12.pdf (6 pages)
-  4.1d CV Financial Monitoring Returns 2024-25 - Month 1.pdf (6 pages)
-  4.1e 2024-25 MMR Template - Cardiff Vale UHB Month 1.pdf (5 pages)

---

15:00 - 15:00 **5. Any Other Business**

0 min

---

15:00 - 15:00 **6. Review and Final Closure**

0 min

**6.1. Items to be deferred to Board / Committee**

*John Union*

**6.2. To note the date, time and venue of the next Committee meeting:**

**Wednesday 19 June 2024 via MS Teams**

Saunders, Nathan  
17/05/2024 20:11:05

**Minutes of the Public Finance and Performance Committee Meeting  
Held on 17 April 2024  
Via MS Teams**

<b>Chair:</b>		
John Union	JU	Independent Member – Finance
<b>Present:</b>		
David Edwards	DE	Independent Member – Information Communication & Technology
<b>In Attendance:</b>		
Paul Bostock	PB	Chief Operating Officer
Marie Davies	MD	Interim Executive Director of Strategic Planning
Andrew Gough	AG	Deputy Director of Finance (Strategic)
Robert Mahoney	RM	Deputy Director of Finance (Operational)
Catherine Phillips	CP	Executive Director of Finance
Matt Phillips	MP	Director of Corporate Governance
Suzanne Rankin	SR	Chief Executive Officer
Jason Roberts	JR	Executive Nurse Director
<b>Secretariat:</b>		
Nathan Saunders	NS	Senior Corporate Governance Officer
<b>Apologies:</b>		
Ceri Phillips	CP	UHB Vice Chair
Charles Janczewski	CJ	UHB Chair

Item No	Agenda Item	Action
<b>FPC 24/04/001</b>	<b>Welcome &amp; Introduction</b>  The Committee Chair (CC) welcomed everyone to the meeting including Marie Davies, the Interim Executive Director of Strategic Planning (IEDSP) as it was her first meeting attended in her capacity as IEDSP.	
<b>FPC 24/04/002</b>	<b>Apologies for Absence</b>  Apologies for Absence were noted.  <b>The Finance and Performance Committee resolved that:</b>  a) Apologies for Absence were noted.	
<b>FPC 24/04/003</b>	<b>Declarations of Interest</b>  No Declarations of Interest were noted.	
<b>FPC 24/04/004</b>	<b>Minutes of the Finance and Performance Meeting held on 20 March 2024</b>  The minutes of the meeting held on 20 March 2024 were received.  <b>The Finance Committee resolved that:</b>  a) The minutes of the Finance and Performance Committee meeting held on 20 March 2024, were held as a true and accurate record of the meeting.	
<b>FPC 24/04/005</b>	<b>Actions following the Finance and Performance Committee meeting on 20 March 2024</b>  The Action log was received.  <b>The Finance and Performance Committee resolved that:</b>  a) The Action Log for the Finance and Performance Committee was noted.	

<p><b>FPC</b> <b>24/04/006</b></p>	<p><b>Chairs Action since previous meeting</b></p> <p>There had been no Chair's Actions taken since the last meeting</p>	
<p><b>FPC</b> <b>24/04/007</b></p>	<p><b>1) Financial Report – Month 12</b></p> <p>The Financial Report – Month 12 was received.</p> <p>A summary was provided to the Committee which stated:</p> <p><i>At month 12 the Health Board reported to Welsh Government (WG) that it would meet its control target of a £16.460m deficit for the end of 2023-24.</i></p> <p>The Operational Deputy Director of Finance (ODDF) advised the Committee that due to the time of year, a summarised report had been received which was finalised the previous Friday.</p> <p>He added that the Finance Team would now prepare a comprehensive set of accounts for submission to WG on 3 May 2024 with further submissions to WG on 10 May 2024 which would then be audited by Audit Wales.</p> <p>It was noted that the Health Board had come in £55,000 under the target of £16.460m and so had it the achieved control target set by WG.</p> <p>The ODDF advised the Committee that the Health Board had also met its Creditor Compliance Target.</p> <p>He added that the Health Board did not meet its rolling three year financial statutory duty in 2023/24 but that it had been known that would occur due to the 3 year rolling plan and on that rolling 3 year break even, the Health Board were overspent by £43m.</p> <p>It was noted that to get back into the compliance phase the Health Board would need to achieve 3 years of balance.</p> <p>The Committee were presented with a graph which showed the total operational and savings programme deficits and the impact of the additional savings actions on that total variance.</p> <p>The ODDF noted that after a peak in the operational overspend at month 6, the additional actions enabled the Health Board to hit the £16.460m revised forecast deficit as well as the additional 10% Improvement required by WG which was achieved through the review, management and scheduling of specific expenditure programmes.</p> <p>The Committee were advised that the tables within the report;</p> <ul style="list-style-type: none"> <li>• Financial Performance for the period ended 30th March 2024</li> <li>• Summary of Month 12 COVID 19 Net Expenditure</li> </ul> <p>Summarised where the different parts of the Organisation ended up against the plan as well as the COVID 19 net expenditure which confirmed that £3m had been saved against COVID related expenditure.</p> <p>It was noted that the Health Board had set a savings target of £32 and had achieved a saving of £32.59m which was an overachievement by £590,000, a record by the Health Board in terms of delivery.</p> <p>The ODDF advised the Committee that the Health Board had finished the financial year in a positive cash flow balance.</p> <p>He added that the Key Performance Indicators identified within the report indicated that the Health Board had obtained a red RAG rating in terms of delivering on the 2023/24 draft financial plan but there had been compliance with the Capital Resource limit</p> <p>The CC asked the ODDF to pass on the thanks of the Committee to the Finance team for all of their hard work.</p>	

Saunders, Neil  
17/05/2024 20:11:05

	<p>He asked if a summary of the £32m savings and the additional £8m could be received at the next meeting.</p> <p>The Independent Member – ICT (IMICT) requested that the Total Variance Graph seen within the report stay for the reports in 2024/25 as it showed how things were tracking.</p> <p>He asked how confident the Finance team could be that recurrent savings would be reached.</p> <p>The Strategic Deputy Director of Finance (SDDF) responded that in an Organisation the size of the Health Board, there would always be non-recurring savings as part of its savings programme and noted that as the Health Board moved into 2024/25 a review of all of the non-recurrent savings would be held on the savings made in 2023/24 because there was a chance some of them could be made recurrent.</p> <p><b>The Finance and Performance Committee resolved:</b></p> <ul style="list-style-type: none"> <li>a) The draft reported year end deficit of £16.405m which is within the £16.460m control total was noted.</li> <li>b) The Health Board meeting annual public sector payment compliance performance target of 95% was noted.</li> <li>c) The Health Board remaining within its capital resource limit with a draft underspend of £0.086m against an allocation of £45.663m was noted.</li> </ul>	
<p><b>FPC 24/04/008</b></p>	<p><b>Savings Tracker 2024/25</b></p> <p>The Savings Tracker 2024/25 was received.</p> <p>The SDDF advised the Committee that the savings tracker received went up to the 4<sup>th</sup> May 2024.</p> <p>He added that the target set for 2024/25 was £47.2m and that it was always known that the Organisation would need to save at least £32m in 2024/25 to get on the route to financial sustainability but that the non recurrent savings in 2023/24 had added a further £15.2m to that target.</p> <p>It was noted that the Finance team had identified £21.2m of savings which included the red scheme savings of £13m which could not be assured until they had become green or amber.</p> <p>The SDDF advised the Committee that of the total savings identified for 24/25, £11.5m were in green and amber schemes which should provide real assurance to the Committee.</p> <p>He added that where some of the good savings could be achieved in 2024/25 was around workforce reshaping and noted that there was a £15.6m target against workforce.</p> <p>The Committee was advised that great progress has been observed against medicines management procurement themes and a very solid bed plan was in place aligned to the Health Boards length of stay reduction across the organisation.</p> <p>It was noted that the one theme that provided challenge was Continuing Healthcare (CHC) and that Finance team had been working with internal and national colleagues around how to drive the scheme because CHC was a huge area of growth.</p> <p>The SDDF summarised the discussion and noted that:</p> <p>The Health Board had identified over 50% of the 2024/25 savings to date and were in a much stronger position compared to the previous year but it was noted that the target was also bigger which would provide additional challenges.</p> <p>He added that meetings on financial sustainability were held fortnightly which had helped drive traction against weekly action trackers.</p> <p>The CC asked if more detail could be provided on the workforce reshaping at a future meeting.</p> <p>The Chief Operating Officer (COO) responded that of all of the schemes, workforce reshaping was the most challenging to deliver and a deep dive could be helpful at the June 2024 meeting.</p>	

Saunders Nairn  
17/05/2024 20:11:05

	<p><b>The Finance and Performance Committee resolved:</b></p> <p>a) The progress against the 2024/25 Savings Tracker was noted.</p>	
<p><b>FPC 24/04/009</b></p>	<p><b>Operational Performance</b></p> <p>The Operational Performance update was received.</p> <p>The Chief Operating Officer (COO) advised the Committee that the Operations and Information Teams had redesigned the Integrated Performance Report (IPR) for 2023/24 to better meet the requirements of the Board, it's Committees and improve performance reporting for the Health Board as a whole, both internally and externally.</p> <p>He added that the updated report incorporated progress against the ministerial priorities and Health Board performance ambitions/IMTP priorities.</p> <p>The Committee was advised that it also included performance against the NHS Performance Framework, which was finalised in June 2023 and had been received by the Committee for information.</p> <p>It was noted that there had not been a large amount of changes between the previous version of the IPR and the new redesign and the COO advised the Committee that the IPR could change again as the Welsh Government (WG) Cabinet Secretary had written to Health Boards again.</p> <p>The COO advised the Committee that in addition to updating the measures in line with national reporting, the design of the IPR for 2024/25 would be reviewed to respond to the recommendations of the Audit Wales Structured Assessment, issued in December 2023.</p> <p>He added that Audit Wales had looked at the redesigned IPR and had been pleased with the changes that had been made and noted that any recommendations provided by Audit Wales had been responded to by the Health Board.</p> <p>The COO concluded that the NHS Wales Performance Framework would be received by the Board at their development session in April.</p> <p><b>The Finance and Performance Committee resolved:</b></p> <p>a) The year to date position against key organisational performance indicators for 2023-24 and the update against the Operational Plan programmes were noted.</p>	
<p><b>FPC 24/04/010</b></p>	<p><b>Finance Committee Annual Report 2023/24</b></p> <p>The Finance Committee Annual Report 2023/24 was received.</p> <p><b>The Finance and Performance Committee resolved:</b></p> <p>a) The draft Annual Report 2023/24 of the Finance &amp; Performance Committee was noted b) The Annual Report was recommended to the Board for approval.</p>	
<p><b>FPC 24/04/011</b></p>	<p><b>Any Other Business</b></p> <p>No other business was raised.</p>	
	<p><b>Date &amp; time of next Meeting</b></p> <p>Wednesday 22 May 2024 via Teams</p>	

Saunders, Nathan  
17/05/2024 20:11:05

## Public Action Log

Finance and Performance Committee Meeting  
22 May 2024

Completed actions					
REF	SUBJECT	AGREED ACTION	ACTIONED TO	DATE	STATUS/COMMENTS
<b>FPC 24/04/007</b>	Financial Report – Month 12	Summary of the £32.590m savings.	Rob Mahoney	19.06.2024	<b>COMPLETED</b> Added to Forward Plan for June meeting - Financial Report
<b>FPC 24/04/008</b>	Savings Tracker 2024/25	Workforce Reshaping Work Update	Paul Bostock	19.06.2024	<b>COMPLETED</b> Added to Forward Plan for June meeting.
<b>FPC 24/04/008</b>	Savings Tracker 2024/25	Continuing Health Care Update to be added to every other meeting	Andrew Gough	17.07.2024	<b>COMPLETED</b> Added to Forward Plan for July meeting and every other from then.
Actions referred to Board/Committees					

Saunders, Nathan  
17/05/2024 20:11:05

Report Title:	Finance Report for the Period Ended 30 <sup>th</sup> April 2024			Agenda Item no.	2.1
Meeting:	Finance Committee	Public	<input checked="" type="checkbox"/>	Meeting Date:	22 <sup>nd</sup> May 2024
		Private	<input type="checkbox"/>		
Status <i>(please tick one only):</i>	Assurance	<input checked="" type="checkbox"/>	Approval	<input type="checkbox"/>	Information
Lead Executive:	<b>Executive Director of Finance</b>				
Report Author (Title):	<b>Deputy Director of Finance (Operational)</b>				

## Main Report

### Background and current situation:

#### Summary

At month 1 the UHB is reporting an overspend of £4.267m.

This is comprised of £2.445m unidentified savings, £0.497m of operational overspend and the planned deficit of £1.325m (one twelfth of the annual planned deficit of £15.9m set out in 2024-25 financial plan approved by the UHB Board and submitted to Welsh Government.).

The UHB expects to recover the month 1 operational and savings overspend to deliver the £15.900m planned deficit.

**Table 1: Month 1 Financial Position 2024/25**

	Month 1 Position £m	Forecast Year-End Position £m
Planned deficit	1.325	15.900
Savings Programme	2.445	0.000
Operational position (Surplus) / Deficit	0.497	0.000
<b>Financial Position £m (Surplus) / Deficit £m</b>	<b>4.267</b>	<b>15.900</b>

#### Financial Plan Approved by Board and submitted to Welsh Government

The UHB's Financial Plan in 2024-25 reflected the following key components:

- Brought forward underlying deficit of £60.9m
- 2024-25 Demand and cost growth and unavoidable investments of £45.4m

This brought the UHB's draft 2024-25 position to £106.3m deficit before the following new funding and savings programmes:

- Additional Allocations of £37.3m
- Anticipated pass-through funding on Long Term Agreements of £5.9m (3.67%)
- Savings plans to reduce expenditure by £47.2m

This resulted in a 2024-25 planning deficit of £15.9m that was approved by the UHB Board for submission to Welsh Government.

Discussions continue between the UHB and Welsh Government over the acceptability of this financial plan.

**This represents a failure of the statutory requirement to deliver a balanced financial plan over a three-year rolling period. The Financial plan has not been approved by Ministers and will also fail this statutory duty if this situation remains.**

## Long Term Agreements

NHS organisations are expected to have concluded discussions and signed contracts (Long Term Agreements and Service Level Agreements) between each other by the end of June 2024. Failure to do so obliges parties to submit arbitration briefs to Welsh Government to deliberate on and make a ruling.

The UHB's Financial Plan was based on the clear planning instructions from Welsh Government that all LTAs and SLAs should reflect uplifts in line with the general 2024-25 funding uplift provided in the 2024-25 Allocation Letter of 3.67%. This uplift was reflective of the increased cost of providing healthcare and delivering services by provider organisations.

The UHB has received offers, from a number of commissioners, which offer a lower percentage uplift than 3.67%. Commissioners have suggested that Cardiff and Vale UHB should provide additional activity and services if the UHB wishes to increase its overall income by 3.67%.

The current range of offers from commissioners could cause up to a £5.274m shortfall in the income anticipated in the UHB Financial Plan approved by the UHB Board.

The Director of Finance is currently engaged in discussions with commissioner organisation colleagues to resolve this issue. Failure to resolve this disagreement may oblige the UHB to pursue the Welsh Government arbitration process. This places the UHB at risk of a potential adverse judgment that would impact it's Financial Plan by up to £5.274m.

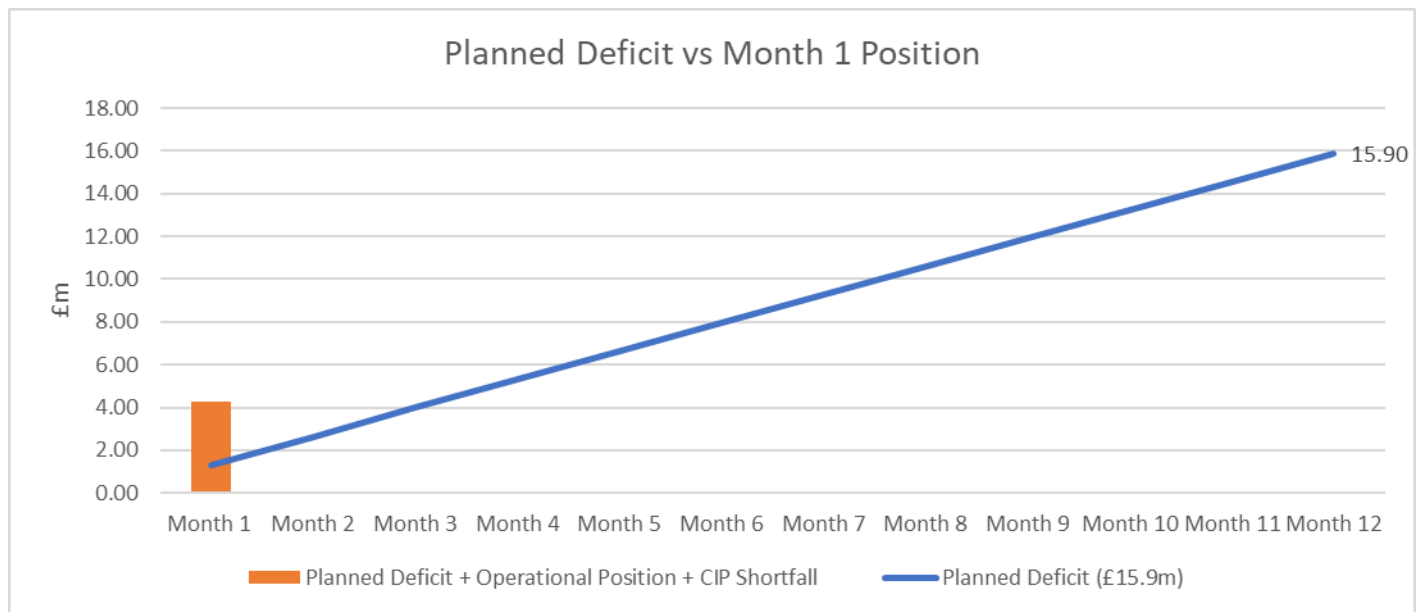
## Summary Financial Table

The following table analyses the £4.267m overspend at Month 1, between Income, Pay and Non-Pay.

**Table 2: Summary Financial Position for the period ended 30<sup>th</sup> April 2024**

Income/Pay/Non Pay	Memorandum	Current	Total
	Annual	Period	Variance
	Budget	Actual	(Fav)/Adv
	£m	£m	£m
<b>In Month</b>			
Income	(157.770)	(157.310)	(0.864)
Pay	74.813	74.926	0.113
Non Pay	82.958	85.327	3.694
Sub Total £m	0.000	2.942	2.942
2024/25 Planned Deficit	15.900	1.325	1.325
Variance to Plan £m	15.900	4.267	4.267
<b>Cumulative</b>			
Income	(157.770)	(158.635)	(0.864)
Pay	74.813	74.926	0.113
Non Pay	82.958	86.652	3.694
Sub Total £m	0.000	2.942	2.942
2024/25 Planned Deficit	15.900	1.325	1.325
Variance to Plan £m	15.900	4.267	4.267

## Graph 1– Total Variance compared to a straight-line Projection of the Planned Deficit



Graph 1 shows the reported position at month 1 compared to the planned deficit. The actual position is £2.942m above the planned deficit because of the combined operational deficit and savings gap. The forecast position assumes that this will be recovered over the course of the year, through management action to ensure that services operate within delegated budgets.

## 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 1 by Clinical Board is shown in Table 3.

**Table 3: Financial Performance for the period ended 30<sup>th</sup> April 2024**

Clinical Board	Operational Position	Savings Position	Total	Prior Month
	(Surplus) / Deficit	(Surplus) / Deficit	(Surplus) / Deficit	(Surplus) / Deficit
	Variance	Variance	Variance	Variance
Cumulative	£m	£m	£m	£m
Clinical Diagnostics & Therapeutics	138	201	339	
Children & Women	163	258	421	
Capital Estates and Facilities	73	147	220	
Executives	(53)	121	68	
Genomics	(12)	0	(12)	
Medicine	520	281	801	
Mental Health	61	227	288	
PCIC	280	393	673	
Specialist	172	293	465	
Surgery	108	358	466	
Clinical Board budgets to be delegated	(952)	0	(952)	
<b>Sub-Total Delegated Position</b>	<b>497</b>	<b>2,280</b>	<b>2,777</b>	
Central Budgets & Commissioning	(0)	165	165	
<b>Total (Surplus)/Deficit</b>	<b>497</b>	<b>2,445</b>	<b>2,942</b>	
Planned Deficit	1,325	0	1,325	
<b>Total Operational (Surplus)/Deficit</b>	<b>1,822</b>	<b>2,445</b>	<b>4,267</b>	

The UHB reported an overspend of £2.942m against the draft financial plan in month.

The £2.445m deficit against the £47.2m savings plan is due to the straight-line phasing of the gap against the target over months 1 to 12. The position is expected to be recovered as further schemes are developed in year.

The pressures against the operational position reported across delegated Clinical Board positions have been partially offset by a release of the budget identified to manage operational pressures. This budget will be delegated to operational Clinical Boards positions once the budget reviews being held between Clinical Boards with the Director of Finance and Chief Operating Officer have concluded.

Pressures against medical staff budgets persist across the UHB. Additional pressures are also reported against both primary and secondary care drugs and clinical supplies.

The overspend in Medicine is driven by medical staff and registered nursing, in part due to the legacy of the operational footprint predominantly designed to address Covid demands and infection control. The overspend in PCIC is due to the additional cost of primary care prescribing above plan and the impact of the revised optometry contract.

Further review of the month end position at April has been scheduled with Clinical Boards so that remedial action to address the month 1 position can be worked through.

### Welsh Government COVID 19 Allocations & Expenditure

The expenditure for Month 1 is summarised in Table 4 below.

**Table 4: Summary of Month 12 COVID 19 Net Expenditure**

	Month 1 £m	Forecast £m	Funded by WG £m	Variance to Plan/Funding £m
Health Protection/Vaccination & PPE	0.753	9.040	9.040	0.000
Long Covid	0.095	1.144	1.144	0.000
<b>Sub Total WG Funded Covid Expenditure £m</b>	<b>0.849</b>	<b>10.184</b>	<b>10.184</b>	<b>0.000</b>

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

Welsh Government funded Health Protection, PPE and Long Covid expenditure is forecast to outturn in line with funding.

### Risks

Table 5 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 2024-25 year end with a current planned deficit of £15.9m.

**Table 5: Risk Register at April 2024**

Risks	Rating	Comment
The submitted IMTP has a planned deficit of £15.9m for 2024/25. The Health Board does not have a plan to achieve its revenue statutory breakeven duty without reliance on WG financial support.	20	The UHB has developed a plan to address the deficit in line with Welsh Government (WG) expectations in 2024/25 and continues to plan to break even in FY26 and FY27. Progress is monitored through established governance reporting and monitoring arrangements through operational teams, Finance Committee, Board and WG. Internal Audit provides assurance that controls are in place.
Due to a planned deficit of £15.9m for 2024/25 there is a risk of failure to achieve an Approved Three year Financial plan (IMTP) with potential for additional escalation and intervention arrangements following Enhanced Monitoring arrangements being imposed by Welsh Government.	20	Work continues to address the recurrent deficit in the UHB's financial position. Progress is monitored through established governance reporting and monitoring arrangements through operational teams, Finance Committee, Board and WG. Internal Audit provides assurance that controls are in place.
Achievement of Capital statutory breakeven duty  The Health Board has a capital allocation, which it should not exceed on a three year rolling basis.	8	The current 2024-25 UHB Capital Plan is structured to remain within the Capital Resource Limit. Capital Management Group manages the capital programme and reports into the Management Executive. Governance reporting and monitoring arrangements through the Finance Committee, Board and WG. Internal Audit provides assurance that controls are in place.
Failure to adequately manage budget pressures. This is the responsibility of the primary budget holders.  If it was to occur it would compromise the achievement of the Revenue statutory breakeven duty. (Risk above)	20	The requirement to manage budget pressures is clearly communicated to primary budget holders. Standing Financial Instructions set spending limits. The position is reviewed through a Monthly Financial Clearance Meeting. In addition there are Executive Performance Reviews with Clinical Boards and Bi-weekly Finance and Operations meetings to ensure a multi-disciplinary approach to managing delegated budgets.
Deliver a recurrent cost improvement programme (CIP)  A recurrent CIP target of £47.2m has been set for 2024/25.  Failure to deliver will impact on the Health Boards ability to deliver the planned 2024/25 deficit of £15.9m.	20	The CIP target is clearly communicated to budget holders. CIP tracker in place with a weekly monitoring progress across the organisation. Monthly Financial Clearance Meeting, including specific focus on CRPs. Executive / Clinical Board Performance Reviews, monthly Sustainability Boards and Weekly Sustainability Meetings. Governance reporting and monitoring arrangements through the Finance Committee and Board.
2024-25 LTA framework in NHS Wales.	20	The UHB is expecting a 3.67% inflationary uplift via WHSSC and Health Board LTAs as a provider of services. The uplift is expected per WG cash allocation letter. WHSSC and Health Boards have a deadline of 30th June to confirm.  Not receiving the planned inflationary uplift will impact the UHB's ability to meet its 24/25 planned deficit.
Remain within Cash limit	20	The UHB will require cash support from WG for the 24/25 planned deficit of £15.9m alongside working capital for any movements from the 2023/24 balance sheet.
Dishonest retention of salary overpayments	9	Staff to be reminded of their duty to report any anomalies in their pay to their manager/NWSSP Payroll Services as soon as identified and to be made aware of the repercussions of failing to do so through payslip messaging, Counter Fraud awareness, use of intranet and all staff communications.  All staff to be encouraged to complete the new Counter Fraud E-Learning training course via the ESR learning portal.  NWSSP Payroll Staff to be provided with standard work instructions setting out timeline of actions to follow when making a change to an employee's payroll account.  Agreement and roll out of an All Wales Overpayments Policy that NWSSP Payroll Services can apply consistently across all NHS Wales Organisations. (In progress)

Saunders, Nathan  
17/05/2024 20:11:05

## Savings Programme Update

At month 1, £18.181m of green and amber savings were identified against the £47.2m savings target. £11.323m of the schemes were recurrent.

The progress in the identification of schemes during the year is shown in the graph below:

**Graph 2 - Progress in Identification of Schemes**

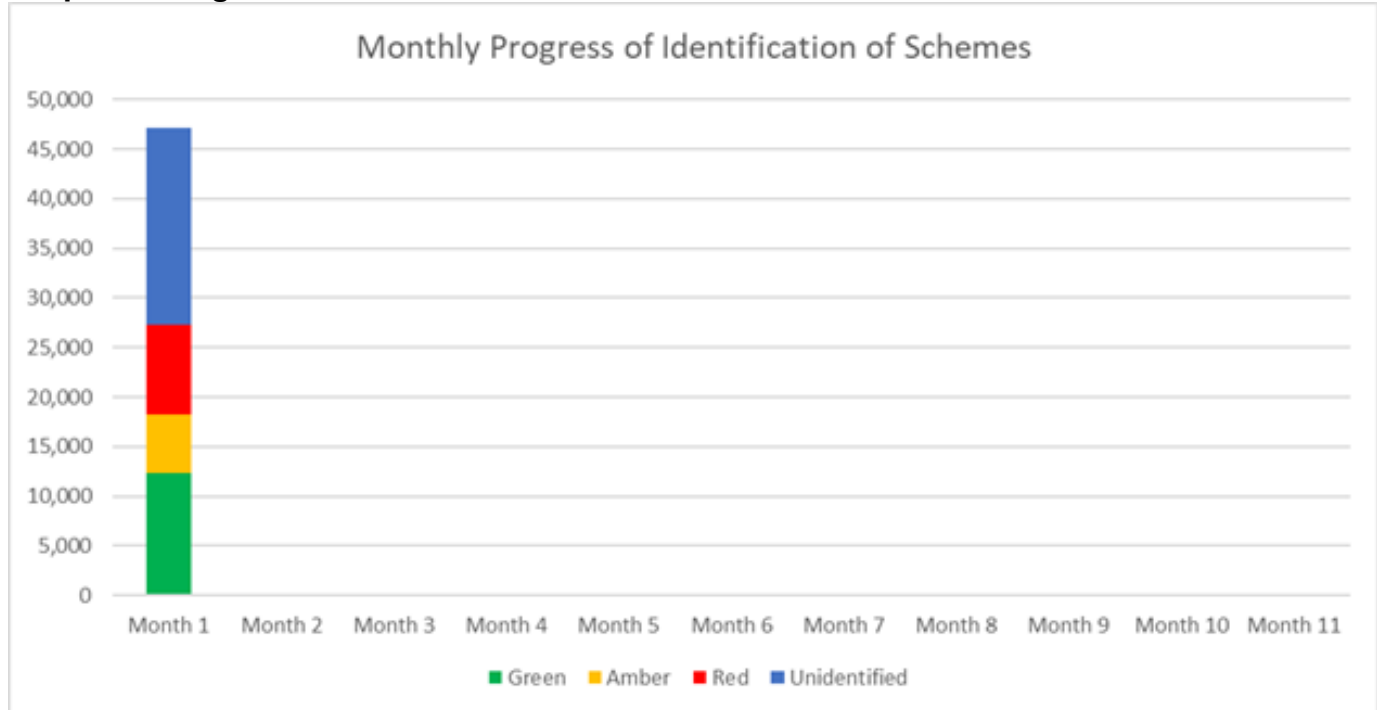


Table 6 illustrates that £27.325m of green, amber and red schemes were identified at month 1, representing 57.9% of the target.

**Table 6': Summary of Savings Schemes Progress**

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total Identified Savings (green, amber & red) £m	47.200	27.325	(19.875)

At month 1 **£16.137m** of the identified schemes were recurrent.

Further detail of the progress by Clinical Boards and Improvement Themes is provided by Tables 7.

Saunders, Nathan  
17/05/2024 20:11:05

**Table 7: Savings Schemes**

Clinical/Service Board	24-25	Green	Amber	Red	Total	Savings
	Opportunities				Savings	Shortfall
	£'000	£'000	£'000	£'000	£'000	£'000
Capital Estates and Facilities	947	698	262	100	1,060	(114)
Children and Women	1,304	402	233	147	782	521
Clinical Diagnostics and Therapeutics	1,199	306	209	9	524	675
Corporate Executives	501	0	0	0	0	501
Medicine	1,379	134	0	150	284	1,094
Mental Health	1,079	4	343	56	403	676
Primary, Community and Intermediate Care	2,423	358	1,067	635	2,060	363
Specialist Services	1,482	411	482	0	893	590
Surgical Services	1,689	140	478	133	752	937
<b>Subtotal - Grip and Control</b>	<b>12,000</b>	<b>2,452</b>	<b>3,074</b>	<b>1,231</b>	<b>6,757</b>	<b>5,243</b>
Medicines Management	4,530	631	1,149	1,310	3,090	1,440
Reducing Length of Stay	3,500	2,856	0	459	3,315	185
Optimising Planned Care	1,000	1,000	0	0	1,000	(0)
Income Generation	1,000	414	173	248	834	166
Continuing Healthcare	2,500	0	475	335	810	1,690
Facilities and Estates / Service Reconfiguration	500	0	0	606	606	(106)
Value/Clinical Variation	0	0	0	0	0	0
Procurement	5,000	1,948	632	413	2,994	2,006
Recording Patient Care	1,500	0	0	150	150	1,350
Other Digital Benefits	0	0	0	50	50	(50)
Workforce - Temporary Pay	7,403	2,747	400	4,313	7,460	(57)
Workforce Reshaping	8,268	230	0	30	260	8,008
<b>Subtotal Cost Improvement Themes</b>	<b>35,200</b>	<b>9,826</b>	<b>2,829</b>	<b>7,913</b>	<b>20,568</b>	<b>14,633</b>
<b>Total Savings Position</b>	<b>47,200</b>	<b>12,278</b>	<b>5,903</b>	<b>9,144</b>	<b>27,325</b>	<b>19,876</b>

Key:

Green Schemes: Complete, appropriate to complexity, project plan in place, brief available reflecting timescales, milestones, enablers and risk considered. Complete project brief provides clear base for financial assessment.

Amber Schemes: Clear components of project plan in place with elements not fully confirmed and addressed.

Red schemes: Pipeline schemes yet to be finalised.

### Cash Flow Forecast

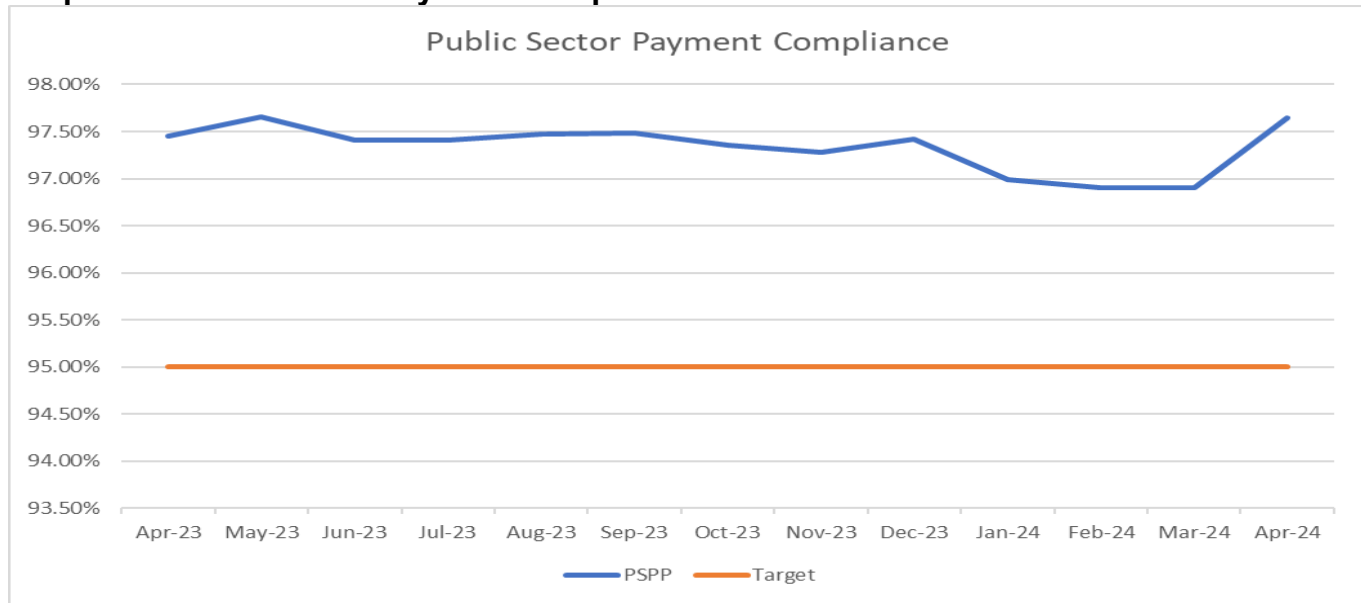
**The closing cash balance at the end of April, was £11.379m.**

In due course, the UHB expects to seek Finance Committee and Board approval to request £15.900m strategic cash support from Welsh Government to cover the cash shortfall arising from the forecast deficit.

### Public Sector Payment Compliance

The UHB's public sector payment compliance performance is above the target of 95%. Performance for the month to the end of April was 97.6% for the year to date as illustrated in Graph 2 below.

**Graph 2 – Public Sector Payment Compliance**



**Capital**

The UHBs approved capital resource limit is £33.932m in line with the latest CRL received from Welsh Government on the 18th April 2024. This comprises of £13.654m discretionary funding and £20.278m towards specific projects (including Efab, Interventional Neuroradiology Equipment, Mortuary, UHW Lift Refurb and upgrade).

The capital programme is planned and monitored through the UHBs Capital Management Group (CMG) and the UHB forecasts that it will remain within its CRL in 2024-25.

**Table 7: Finance - Key Performance Indicator Dashboard at April 2025**

Measure	STATUS REPORT				
	April 2024	RAG Rating	Latest Trend	Target	Time Period
Deliver 2024/25 Draft Financial Plan	£4.267m deficit at month 1 being £1.325 m forecast deficit, £2.445m savings gap and £0.497m operational overspend.	R	↓	Deliver 2023/24 £15.900m Revised Planned Deficit	M1 2024-25
Return to Financial Balance and approved IMTP status	Achieve financial sustainability and recurrent financial balance by the end of 2025/26	R	↓	Reduce c/f underlying deficit to £15.900m at year end	M1 2024-25
Management of operational budget pressures	The UHB reported a 0.497m operational overspend at month 1.	R	↓	Operational Spend to be maintained within Budgets	M1 2024-25
Delivery of recurrent £47.2m savings target	£18.181m Green and Amber schemes identified at month 1 of which £11.323m were recurrent.	R	⊙	£47.2m	M1 2024-25
Remain within Cash Limit	The UHB forecasts to remain within its 2024/25 cash limit, on the assumption that strategic cash support is provided for the forecast deficit.	G	⊙	To remain within Cash Limit	M1 2024-25

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

The UHB 2024-25 Financial Plan is based on a forecast deficit of £15.900m. The month 1 position is a reported overspend of £4.267 which is £2.942m above the £1.325m straight line profile of the planned deficit.

As at month 1 £18.181 of green and amber savings schemes were identified against the £47.2m savings target. Further work, focus and resolve is required to identify sufficient schemes to deliver this target.

Public Sector Payments are above the 95% target and the UHB forecast that it will remain within its capital Resource Limit.

**Recommendation:**

At Month 1 the Committee are requested to:

- **NOTE** the reported year to date overspend of £4.267m and the forecast deficit of £15.900m.
- **NOTE** the month 1 operational overspend against plan of £0.497m with a further £2.445m savings gap
- **NOTE** the progress against the savings target, with £18.181m (39%) of green and amber schemes identified at Month 1 against the £47.2m target.
- **NOTE** that delivery of the forecast is also predicated on the confirmation of all expected income streams.

**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:**

*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	
<b>Approval/Scrutiny Route:</b>	
Finance Committee	Date: 22 <sup>th</sup> May 2024

Saunders, Nathan  
17/05/2024 20:11:05

Report Title:	Operational Performance Report		Agenda Item no.	2.3
Meeting:	Finance and Performance Committee	Public <input checked="" type="checkbox"/>	Meeting Date:	22/05/24
Status <i>(please tick one only):</i>	Assurance <input checked="" type="checkbox"/>	Approval <input type="checkbox"/>	Information <input type="checkbox"/>	
Lead Executive:	Chief Operating Officer			
Report Author (Title):	Head of Performance			

**Main Report**  
Background and current situation:

**Background and current situation:**

The Operations and Information Teams have redesigned the Integrated Performance Report to better meet the requirements of the Board, it's Committees and improve performance reporting for the Health Board as a whole, both internally and externally. This updated report incorporates progress against the ministerial priorities and our performance ambitions/IMTP priorities. It will also include performance against the NHS Performance Framework, which was finalised in June 2023

The sections of the full report covering Operation Performance, which are pertinent to the Finance and Performance Committee are:  
Section 1: Ministerial Priorities  
Section 2: Quadruple Aim 2

These sections will be refreshed for next month's committee in line with the 24/25 Performance Framework.

This report is intended to be iterative and feedback from the Committee will be useful as we develop this resource.

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

As we emerge from the winter period we continue our focus on ambulance handovers, in particular reducing the number of patients waiting over 1 hour before handover. The first four months of the year have seen a notable increase in operational pressures across Wales and we saw the average ambulance handover time remain higher than in December 2023. Despite this, we continue to meet our commitment on reducing the number of lost hours.

The number of 1-hour ambulance handovers reduced in November (306) and December (172) from the number reported in October (516). In Q4 the number of 1-hour handovers was higher but when compared to Q4 22/23, total lost hours reduced from c3,600 to 2,200 and the number of 1-hour handover delays has reduced from 1,780 to 1,056. April 2024 saw a small reduction in lost hours compared to March 2024 and the same month last year.

Through Q3 considerable improvement was made on patients waiting 12-hours in the EU. We reported an increase in December and January but saw a modest reduction in February. March and April also saw small increases in 12 hour waits. Reducing the number of patients waiting 12 and 24-hours in the EU remains a priority and has been an area of specific focus for the EU and patient flow teams through some very challenging weeks.

Performance against the standards within the National Falls and Fragility Fracture Audit Programme (FFFAP) has shown some improvement against our historic trends. However, the improvements are not necessarily reflected by the annualised KPI metrics. Rapid fracture pathway improvements have

led to a significant reduction in the median time taken for patients to get to the ward. Compliance with the KPI for Admission to a Specialist Ward and Prompt Surgery remains well above the NHFD average. Using the annualised NHFD data, the UHB are above the national average for 7 of the 8 KPIs. While we are below the average using annualized data for KPI5 (Not Delirious Post-op), compliance has improved from March this year with August and September and November's performance well above the national average.

March saw an improvement in our compliance against some key SSNAP measures for our Stroke Pathway. The percentage of patients directly admitted to the stroke unit within 4-hours increased to 62.5% and remains significantly above the all Wales average. Our percentage compliance and median time to ward and CT scan remains improved from our performance in 2022, we continue to work across Clinical Boards to progress the Stroke Service Improvement Plan. Our SSNAP grade improved to A for the period July-September 2023, this is a significant improvement from the previous quarters and a reflection of the work undertaken by the teams. Our most recent review saw a drop to Grade B but performance remains improved from last year. We continue to experience challenges in increasing the number of patients thrombolysed and this remains an area of continued focus, working with colleagues from the NHS Executive.

March saw our thrombolysis rate maintained at over 20% with 20.7% of patients thrombolysed. This remains above the Wales average. At a previous IQPD meeting with Welsh Government the Health Board presented our actions against the key recommendations from an HEIW review into the stroke pathway, including work on stroke/prevention awareness, the emergency pathway, implementation of AI software improving thrombolysis and thrombectomy rates and improvements to our rehabilitation provision. A plan for investing in the front end of our stroke pathway has received approval at Investment Group and will now progress for consideration at Senior Leadership Board and Board.

Our compliance with the 62-day single cancer pathway standard improved in December to 70.2%, our highest performance since the development of the Single Cancer Pathway. As forecasted we saw a drop in compliance to 64.4% in January and 60.8% in February, with continued Junior Doctor industrial action a factor through Q4. In March our SCP performance improved to 62.3%.

We continue to treat our longest waiting patients as a priority and continue our pathway work to improve times to first outpatient appointment, diagnostic and diagnosis reporting, as well as definitive treatment. As a result, we have seen a reduction in the number of patients waiting over 62 and 104 days for their definitive treatment. Challenges within endoscopy are being addressed with improvements noted in the endoscopy backlog and the SCP compliance for upper and lower GI cancers. Capacity challenges are currently causing delays within our Pathology service, which has the potential to impact reporting of cancer specimens. The teams are working closely to minimise delays and the PTL is reviewed weekly to monitor the impact on waiting times for all tumour sites.

Every quarter the UHB submits a refreshed position on our historic data to capture any treatments from previous months which have been confirmed as cancer since the original submission. The table below shows the rolling 12-month position including the latest data refresh for Q2 where we have seen improvements in the monthly compliance for July and September.

SCP compliance	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
Original submission	42.6%	54.8%	57.8%	58.5%	55.1%	61.5%	62.2%	64.2%	61.7%	62.0%	65.6%	66.4%	56.6%
Compliance following quarterly refresh	50.3%	56.9%	60.0%	62.8%	57.5%	62.9%	63.5%	66.0%	64.5%	63.6%	67.5%	65.9%	57.8%

The numbers of patients waiting on an RTT waiting list has increased this month. We continue to focus on long-waiting cohorts and Cancer pathways with weekly scrutiny against the national standards and ministerial ambitions. We eliminated 3-year Outpatient waits in September and have maintained this since then. In December the Health Board delivered on our commitment to reduce the number of patients waiting 2 years for treatment to <3% of the waiting list.

At the end of March there were, 2681 patients waiting 2 years for treatment, which represents 1.8% of patients on a waiting list. While this has not delivered the Ministerial and UHB ambition to have fewer than 1% of patients waiting longer than 2 years, it is a considerable improvement from previous months. We have seen a significant reduction in the number of long waiting patients through the year, as well as halving the number of specialties with 2-year waits, for 14 in April 2023 to 7 in March 2024. This highlights our commitment to reducing the number of long waiting patients, while balancing urgent, emergency and cancer demands.

We did not deliver on our commitment to reduce 52-week outpatient waits to fewer than 9000. Our work to eliminate 3-year outpatient waits and reduce the number of 2-year waits has improved outpatient waiting times, but we continue to see high volumes of 52-week outpatient waits within some of our treatment specialties where we are focusing on reducing long waits across the pathway. We continue to address outpatient waits through activity, validation and pathway redesign to ensure only those who need secondary care intervention are referred. This is not a UHB wide issue and we have seen a reduction in the number of specialties reporting 52-week waits. We continue to work with specialties, particularly in Paediatrics and Medicine, to reduce to or maintain their outpatient waits below 52 weeks.

Through our planned care programme we are increasing the visibility of productivity and efficiency data. Outpatient, diagnostic and theatre productivity are central to reducing waiting times for patients and delivery of the Ministerial ambitions, we have included trended data in these areas as part of the attached IPR and will expand the number of measures in line with GIRFT recommendations once the datasets have been agreed. A particular area for improvement is outpatient DNA rates, this will be partially addressed through the reintroduction of the Patient Participation Booking system, but also through improved patient engagement at specialty level.

We have seen a reduction in the number of 100% delayed follow-up outpatient appointments in recent months. We have widened our focus to all patients who are delayed, not just those who are 100% beyond their follow-up target. From April 2024 we will only be reporting the total number of patients who are a delayed follow-up as we work to reduce this cohort of patients. At the time of writing there are 55,429 patients who are past their target date for a follow-up appointment, of these 39 are over 2 years past their target date as shown below:

		Overdue Follow-up Outpatients					
Clinical Board	Months past target date	03/04/2024	09/04/2024	15/04/2024	22/04/2024	30/04/2024	07/05/2024
Total	Total overdue	57034	57775	56703	56473	55457	55429
	Over 18 months	983	911	685	498	267	231
	Over 24 months	266	253	161	108	66	39
Surgery	Over 18 months	338	315	216	125	56	55
	Over 24 months	167	156	77	30	13	12
Children & Women	Over 18 months	252	186	145	88	87	53
	Over 24 months	41	32	26	23	20	5
Specialist	Over 18 months	272	285	201	187	71	69
	Over 24 months	47	54	48	47	27	17
Medicine	Over 18 months	113	117	113	86	40	41
	Over 24 months	9	9	6	4	2	1

Clinical Boards are working through their action plans to reduce these numbers with specific focus on the longest delays. The table above shows the reduction in the total number of delayed appointments and the impact of the focused work on the longest delays. There are a small group of patients who have been given appointments in the coming weeks and others who have had their follow-up target extended following clinical validation and notes reviews. We continue to validate the waiting lists and work is ongoing to refine our patient management systems to improve data quality of follow-up outpatient lists. The use of See on Symptoms (SOS) and Patient Initiated Follow-up (PIFU) pathways is an important tool in the management of follow-up services and we continue to develop their use across our services with additional clinical support from specialties who have successfully implemented these pathways. The number of patients overdue for follow-up appointments will be an area of significant focus in the coming months.

The waiting list position for Diagnostics has deteriorated in recent months, with particular challenges in Radiology and Endoscopy. It is anticipated that the upcoming development of a Community Diagnostic Hub, and interim use of mobile facilities will address radiological backlogs. From December we have seen sustained improvements for MRI and CT, however, the number of patients waiting 8 weeks for a non-obstetric Ultrasound continues to grow.

Endoscopy capacity has been focused on Cancer, Urgent and long waiting surveillance patients. The service has an improvement plan, with additional theatre and insourcing capacity, aligned to a longer-term workforce plan to further address the deterioration in the length of wait. While the number of 8-week waits has continued to increase through Q4, albeit at a slower rate than through the rest of the year.

We report monthly on the numbers of delayed pathways of care and our acute ward length of stay. These metrics have been included in the productivity and efficiency section of the IRP with trending of the delayed pathways of care and the monthly snapshot of patients in acute beds with a length of stay greater than 7 and 21 days. Through Q2 and Q3 we saw a reduction in the percentage of our acute beds occupied by patients with a >21-day length of stay, although the number of patients with long lengths of stay increased as we moved into the new year with a small increase noted in January and February.

The proportion of beds occupied by long length of stay patients has fluctuated in recent months as additional beds have been opened and closed in line with the winter plan. The number of delayed pathways of care reduced in March 2024 and we continue to work with colleagues across the health and social care system to reduce delays in patient's care pathways. Reducing the time patients spend in hospital is a current operational focus. The ongoing work focusses on patients and family, our clinicians, integrated discharge service, hub and flow teams. It is anticipated that this work will result in an improved experience and shorter length of stay for patients, and deliver operation benefits such as improved flow, taking some pressure out of the Emergency Unit.

Demand for adult and children's Mental Health services remains significantly above pre-Covid levels, including an increased presentation of patients with complex mental health and behavioral needs. Part 1a compliance for adults fell to below 50% in April 2023 following an exceptionally high number of referrals in March 2023. However, the teams have managed to recover their waiting list position and June's reported compliance with the 28-day standard returned to 100%, and has remained at over the 80% standard each month until January. October 2023 saw the highest recorded number of referrals and Part 1a performance was expected to deteriorate from January 2024.

As forecasted, in January we reported 37.5% compliance with the 28-day standard and while this has improved to 90% in February, the team expect this performance to fluctuate in the coming months as the service work through the referrals to recover the position. In March 2024 we reported 54% compliance. Part 2 compliance remains challenged, an improvement trajectory has been shared with NHS Executive colleagues, with Part 1 service developments supporting improvements to Part 2 compliance.

For children and young people, Part 1a compliance dropped below the 80% standard at 78% in January as a result of a number of factors including workforce challenges and the number of complex cases. Part 1a compliance improved to 91% in February and 92% in March. Part 1b remains challenged as the team work through the backlog, further impacted by an increased in referrals through the summer months. A full demand and capacity review has taken place which acknowledges the services reduced capacity to deliver interventions within 28 days due to vacancies and sickness. The team are developing a psychoeducation resource and looking to recruit additional support workers to deliver this. A recovery plan was presented as part of the Executive led Clinical Board Review sessions which sees recovery of compliance by the end of Q2.

As we move into the new financial year we currently have a high number of GP practices in high escalation (level 3 and 4), reflecting the pressures on all parts of our health system. Our primary care teams continue to support practices as required and work has been ongoing at a national level to negotiate changes to the GMS contract for 2023-24. Despite a lack of consensus, there has been a mutual decision to conclude negotiations for this year's settlement which will see a £20m financial investment into GMS across Wales.

We have recently received updated guidance from Welsh Government on their expectations for performance improvement across NHS Wales this year, with key performance indicators aligned to the 5 priority areas: Urgent and Emergency Care, Cancer, Diagnostics, Elective care and Mental Health. We are currently developing trajectories to delivery on milestones described in the guidance. Further details will be shared at the next Board meeting, with performance tracking against the UHB's commitments and National milestones.

**Recommendation:**

The Finance and Performance Committee is asked to **NOTE** the year to date position against key organisational performance indicators for 2023-24 and the update against the Operational Plan programmes.

**Link to Strategic Objectives of Shaping our Future Wellbeing:**

*Please tick as relevant*

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

**Five Ways of Working (Sustainable Development Principles) considered**

*Please tick as relevant*

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

**Impact Assessment:**

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

Risk: No

Safety: No

Financial: No

Workforce: No

Legal: No

Reputational: No

*Handwritten watermark:*  
 Saunders Mathew  
 17/05/2024 20:11:05

Socio Economic: No	
Equality and Health: No	
Decarbonisation: No	
<b>Approval/Scrutiny Route:</b>	
Committee/Group/Exec	Date:

Saunders, Nathan  
17/05/2024 20:11:05

# Cardiff and Vale Integrated Performance Report

May 2024

Saunders, Nathan  
17/05/2024 20:11:05



# Report Contents

1. [Ministerial Priorities](#)

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

*Click on a hyperlink to navigate directly to the section required*

Saunders, Nathan  
17/05/2024 20:11:05

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

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

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

Priority	Aim	C&V Commitment	Commitment to meet ministerial ambition?	By When	In Month Performance against C&V commitment	Link in Performance Report
Delayed Transfers of Care	<b>Reduction in backlog of delayed transfers</b> Measure: number of delayed transfers of care. Reporting period: monthly	217	Yes	June 2023	183 April	<a href="#">Hyperlink to section</a>
Primary Care Access to Services	<b>Improved access to GP and Community Services</b> Measure: >95% achievement of core access to in-hours GMS Services Reporting: monthly	95%	Yes	June 2023	98% December	<a href="#">Hyperlink to section</a>
	<b>Increased access to dental services</b> Measure: 50% of expected new patient target Reporting: monthly	50%	Yes	June 2023	139% December	<a href="#">Hyperlink to section</a>
	<b>Improved use of community pharmacy</b> Measure: >90% of all eligible community pharmacies providing CCPS (June 2023) Reporting: monthly	90%	Yes	June 2023	98% December	<a href="#">Hyperlink to section</a>
	<b>Improved use of optometry services</b> Measure: Reduce number of patients referred from primary care (optometry and General Medical Practitioners) into secondary care Ophthalmology services Reporting: monthly	877	Yes	Dec 2023	656 December	<a href="#">Hyperlink to section</a>
Urgent and Emergency Care	<b>Implementation of a 24/7 urgent care service, accessible via NHS 111 Wales</b> Measure: Performance response time in NHS 111 Reporting: TBC	tbc	tbc	June 2023	tbc	<a href="#">Hyperlink to section</a>
	<b>Implementation of Same Day Emergency Care services</b> Measure: Increase in SDEC attendances Reporting: monthly	1233	Yes	June 2023	1715 March	<a href="#">Hyperlink to section</a>
	<b>Honour commitments that have been made to reduce handover waits</b> Measure: Eliminate 4 hour ambulance handover delays Reporting: monthly	0	Yes	June 2023	0 March	<a href="#">Hyperlink to section</a>

Saunders, Nathan  
17/05/2024 20:11:05

Performance Key: Meeting standard / trajectory over target/trajectory

Priority	Aim	C&V Commitment	Commitment to meet ministerial ambition?	By When	In Month Performance against C&V commitment	Link Performance Report	
Planned Care, Recovery, Diagnostics and Pathways of Care	<b>Achieve RTT waiting time targets</b> Measure 1: 52 week new outpatient target by March 2024 Reporting: monthly	8999	No	Mar 2024	11759 March	<a href="#">Hyperlink to section</a>	
	Measure 2: 104 week treatment target by December 2023 Reporting: monthly	3788	Yes	Dec 2023	2681 March	<a href="#">Hyperlink to section</a>	
	<b>Set foundations for achieving waiting list targets</b> Measure: Reduce outpatient overdue follow by 25% against 2019/20 levels Reporting: monthly	37623	Yes	Mar 2024	28020 March	<a href="#">Hyperlink to section</a>	
	<b>Implement regional diagnostic hubs</b> Measure 1: progress reporting on regional diagnostic hub Reporting: quarterly	Go-Live	Yes	Dec 2023	Q1 24/25	<a href="#">Hyperlink to section</a>	
	Measure 2: Achieve 8-week diagnostic Reporting: monthly	0	No	June 2025	14454 March	<a href="#">Hyperlink to section</a>	
	<b>Implement straight to test model</b> Measure: progress reporting on straight to test Reporting: quarterly	Go-Live	Yes	Sept 2023	On track	<a href="#">Hyperlink to section</a>	
Cancer	<b>Achieve SCP target</b> Measure: 75% of patients starting their first definitive cancer treatment within 62 days Reporting: monthly	75%	Yes	June 2023	62.3% March	<a href="#">Hyperlink to section</a>	
	<b>Implement the national cancer pathways within the national target</b> Measure: progress reporting on national cancer pathways Reporting: quarterly	Go-Live	Yes	Sept 2023	Planning ongoing	<a href="#">Hyperlink to section</a>	
Mental Health and CAMHS	<b>Achieve waiting time performance for Local Primary Mental Health Support Services and Specialist CAMHS</b> Reporting (for all): monthly	Measure 1: Part 1a (adults)	80%	Yes	June 2023	53.9% Mar	<a href="#">Hyperlink to section</a>
		Measure 2: Part 1b (adults)	80%	Yes	June 2023	100% Mar	
		Measure 3: Part 2 (adults)	80%	Yes	June 2023	55.2% Mar	
		Measure 4: Part 1a (children)	80%	Yes	June 2023	91% Mar	
		Measure 5: Part 1b (children)	80%	Yes	June 2023	23% Mar	
		Measure 6: Part 2 (children)	80%	Yes	June 2023	83.6% Mar	
	<b>Implement 111 press 2 on a 24/7</b> Measure: progress on implementing NHS 111 press 2 Reporting: quarterly	Go-Live	Yes	Sept' 2023	Delivered	<a href="#">Hyperlink to section</a>	

Saunders, Nathan  
17/05/2024 20:11:05

# Section 2: Cardiff and Vale Performance Report

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

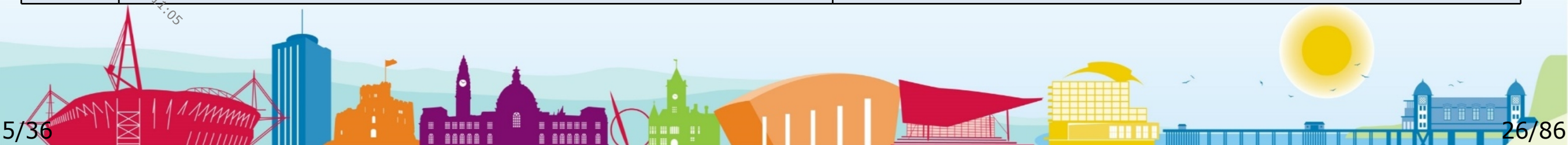
Detail on what is included under each quadruple aim is provided below.

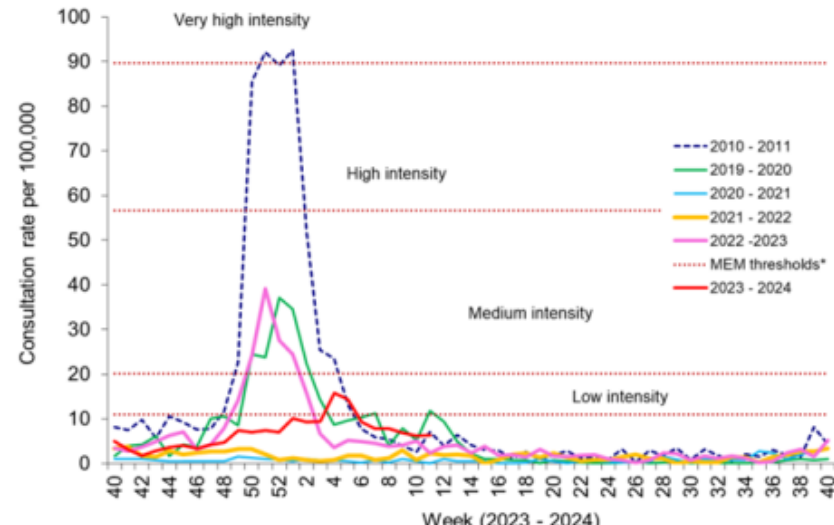
A summary of performance is provided against the priority UHB ambition under each aim, including detail of annual plan commitments. Performance against the relevant NHS Performance Frameworks measures is provided under each aim (under development)

[Return to Main Menu](#)

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

Saunders, Nathan  
17/05/2024 20:11:05



Priority	Performance Summary	Reported Period	On target?	Data
Health Protection	<p><b>Seasonal respiratory infections</b></p> <p><b>Immunisation</b> – COVID-19 and influenza Eligible cohorts have been receiving the COVID-19 Autumn/Winter Booster which has now concluded, while awaiting the final data 104,478 doses were given in Cardiff and Vale as of the 29th of February 2024, and 54.82% uptake to date (Wales average 53.44% uptake). As of the 25th of March 2024 UHB COVID-19 Staff vaccination uptake reached 41% with 37% uptake of influenza vaccination according to UHB data. (Target is 75%).</p> <p>The spring booster campaign is now underway and has delivered 11,336 vaccines since the 2nd of April when the campaign started. Eligibility groups are individuals aged 6 months and over who are immunosuppressed, residents in a care home for older adults, adults aged 75 years and over. This amounts to an eligible population of 55,751 in Cardiff and the Vale and the current coverage is therefore 20.79%.</p> <p><b>Surveillance</b> Influenza activity is currently low and stable. Hospital admissions for Covid-19 in C&amp;V are currently low and stable, though across Wales there has been a slight increase in the last week of April. There are currently <b>2</b> Covid-19 outbreaks and <b>1</b> incident in hospital, and <b>zero</b> influenza incidents or outbreaks. Since the start of April 2024, <b>9</b> bed days have been lost due to Covid-19 incidents or outbreaks, and <b>6</b> bed days have been lost due to influenza incidents or outbreaks <b>16%</b> of C&amp;V UHB staff sickness during March 2024 was due to influenza/COVID-19/respiratory conditions (data for April awaited). Omicron sub-variant JN.1 remains the most prevalent variant in Wales and globally. RSV activity in under 5s remains at low intensity. Pertussis/Whooping cough is rising across Wales.</p>	Week 13	Below target	<p><a href="#">Wales COVID-19 vaccination surveillance weekly report.pdf</a></p> <p>Infant COVID-19 vaccination. <a href="https://public.tableau.com/app/profile/public.health.wales.health.protection/viz/RapidCOVID-19virology-Public/Vaccination">https://public.tableau.com/app/profile/public.health.wales.health.protection/viz/RapidCOVID-19virology-Public/Vaccination</a></p> <p>Weekly COVID-19 vaccination report by health board <a href="https://www2.nphs.wales.nhs.uk/CommunitySurveillanceDocs.nsf/3dc04669c9e1eaa880257062003b246b/cf7a9a9adcddb0a8025866b003a51a1/\$FILE/Wales%20COVID-19%20vaccination%20surveillance%20weekly%20report.pdf">https://www2.nphs.wales.nhs.uk/CommunitySurveillanceDocs.nsf/3dc04669c9e1eaa880257062003b246b/cf7a9a9adcddb0a8025866b003a51a1/\$FILE/Wales%20COVID-19%20vaccination%20surveillance%20weekly%20report.pdf</a></p>  <p>Source: <a href="#">PHW weekly flu/ARI report</a></p>

Saunders, Nathan  
17/05/2024 20:11:05

[Return to Main Menu](#)

C&V Priorities and Annual Plan Commitments

[Return to Section Menu](#)

Priority	Performance Summary	Reported Period	On target?	Data
Health Protection	<p><b>Routine childhood immunisation</b></p> <ul style="list-style-type: none"> <li>79.1% of children are up to date with vaccination at age 4, which is below the target of 95% and a Welsh average of 84.7%</li> </ul>	Q2 2023/24 Oct 2023 – Dec 2023	Below target	<p>Cardiff &amp; Vale UHB quarterly COVER trends</p> <p>Cardiff and Vale UHB</p> <p>Uptake (%)</p> <p>95%</p> <p>90.0%</p> <p>85.0%</p> <p>80.0%</p> <p>75.0%</p> <p>70.0%</p> <p>65.0%</p> <p>60.0%</p> <p>55.0%</p> <p>50.0%</p> <p>2013q2 2013q4 2014q2 2014q4 2015q2 2015q4 2016q2 2016q4 2017q2 2017q4 2018q2 2018q4 2019q2 2019q4 2020q2 2020q4 2021q2 2021q4 2022q2 2022q4 2023q2 2023q4</p> <p>Choose Area</p> <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Cardiff and Vale UHB</li> <li><input type="radio"/> Cardiff</li> <li><input type="radio"/> Vale of Glamorgan</li> </ul> <p>Choose Vaccine (Age)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> (All)</li> <li><input type="checkbox"/> 5 in 1 primary (1 year)*</li> <li><input type="checkbox"/> PCV primary (1 year)</li> <li><input type="checkbox"/> MenB (2 doses, 1 year)</li> <li><input type="checkbox"/> Rotavirus (2 doses, 1 year)</li> <li><input type="checkbox"/> Hib/MenC booster (2 years)</li> <li><input type="checkbox"/> PCV final (2 years)</li> <li><input type="checkbox"/> MMR (1 dose, 2 years)</li> <li><input type="checkbox"/> MenB (Complete course, 2 years)</li> <li><input checked="" type="checkbox"/> Up to date* (4 years)</li> <li><input type="checkbox"/> 4 in 1 pre-school booster (5 years)</li> <li><input type="checkbox"/> MMR (2 doses, 5 years)</li> <li><input type="checkbox"/> 3 in 1 teenage booster (16 years)</li> <li><input type="checkbox"/> MMR (1 dose, 16 years)</li> <li><input type="checkbox"/> MMR (2 doses, 16 years)</li> </ul> <p>Vaccine (age)</p> <ul style="list-style-type: none"> <li>Up to date* (4 years)</li> </ul> <p>Source quarterly <a href="#">COVER</a> data</p>
Health Protection	<p><b>Health Protection System</b></p> <ul style="list-style-type: none"> <li>The Cardiff and Vale Health Protection Plan has been agreed and signed off by both Cardiff and Vale PSBs.</li> <li>An updated action plan for 2024/25 will be developed to further strengthen the partnership approach; a workshop is planned for 28th May 2024</li> <li>In view of the measles outbreak in ABUHB area and wider elsewhere in the UK, measles preparedness work continues to plan for future measles cases.</li> </ul>	Q1 2024/25	On target	n/a

Saunders, Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reported Period	On target?	Data																																																												
Health Improvement	<p><b>Healthy weight:</b></p> <ul style="list-style-type: none"> <li>74.6% of reception aged children in Cardiff and Vale of Glamorgan are categorised as healthy weight (Child Measurement Programme, 2021/22). Cardiff and Vale have the second highest proportion of healthy weight children compared to other Health Board areas based on the latest available data (only six Health Board's participated so no Welsh average; however, the English average for 2021/22 was 76.5%). The healthy weight target for 2022/23 is 75%, data awaited. Data produced annually.</li> <li>40% of adults in Cardiff and Vale of Glamorgan are a healthy weight, as compared to 36% of the Welsh average (NSfW, 2021/22+2022/23); 39% are eating five portions of fruit/vegetables a day, compared to 30% in Wales (NSfW, 2021/22+2022/23) and 68% are meeting physical activity guidelines of being active for at least 150 minutes per week, as compared to 57% in Wales (NSfW, 2021/22+2022/23)*. There are no comparable data in other UK countries due to different methodologies being used.</li> <li>Differences remain between our most and least deprived communities with levels of healthy weight lower, and consumption of fruit and vegetables/physical activity levels also lower in the most deprived areas of Cardiff and Vale.</li> </ul> <p><b>Weight management services</b></p> <ul style="list-style-type: none"> <li>% people with body mass index (BMI)&gt;30 who can be treated through:                             <ul style="list-style-type: none"> <li>Level 2 services: 1.6% (target: 1.5%)</li> <li>Level 3 services: 0.2% (target: 0.5%)</li> </ul> </li> </ul>	Q3 2023/24	<p><b>Healthy weight:</b></p> <p>Below target</p> <p><b>Weight management services:</b></p> <p>Level 2 above target Level 3 below target</p>	<p>Cardiff and Vale of Glamorgan Child Measurement Programme - Healthy Weight trend - Reception Year children</p> <table border="1"> <caption>Cardiff and Vale of Glamorgan Child Measurement Programme - Healthy Weight trend - Reception Year children</caption> <thead> <tr> <th>Year</th> <th>Cardiff and Vale UHB</th> <th>Cardiff</th> <th>Vale of Glamorgan</th> <th>Wales</th> </tr> </thead> <tbody> <tr><td>2011/12</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2012/13</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2013/14</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2014/15</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2015/16</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2016/17</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2017/18</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2018/19</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2019/20</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2020/21</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> <tr><td>2021/22</td><td>74.6</td><td>74.6</td><td>74.6</td><td>74.6</td></tr> </tbody> </table>	Year	Cardiff and Vale UHB	Cardiff	Vale of Glamorgan	Wales	2011/12	74.6	74.6	74.6	74.6	2012/13	74.6	74.6	74.6	74.6	2013/14	74.6	74.6	74.6	74.6	2014/15	74.6	74.6	74.6	74.6	2015/16	74.6	74.6	74.6	74.6	2016/17	74.6	74.6	74.6	74.6	2017/18	74.6	74.6	74.6	74.6	2018/19	74.6	74.6	74.6	74.6	2019/20	74.6	74.6	74.6	74.6	2020/21	74.6	74.6	74.6	74.6	2021/22	74.6	74.6	74.6	74.6
Year	Cardiff and Vale UHB	Cardiff	Vale of Glamorgan	Wales																																																												
2011/12	74.6	74.6	74.6	74.6																																																												
2012/13	74.6	74.6	74.6	74.6																																																												
2013/14	74.6	74.6	74.6	74.6																																																												
2014/15	74.6	74.6	74.6	74.6																																																												
2015/16	74.6	74.6	74.6	74.6																																																												
2016/17	74.6	74.6	74.6	74.6																																																												
2017/18	74.6	74.6	74.6	74.6																																																												
2018/19	74.6	74.6	74.6	74.6																																																												
2019/20	74.6	74.6	74.6	74.6																																																												
2020/21	74.6	74.6	74.6	74.6																																																												
2021/22	74.6	74.6	74.6	74.6																																																												

*For areas of underperformance please see cover paper for details on actions being taken*

Saunders, Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reported Period	On target?	Data																																																			
Health Improvement	<p><b>Tobacco</b></p> <ul style="list-style-type: none"> <li>13% of Cardiff and Vale of Glamorgan smoke, one of the lowest prevalence rates in Wales</li> <li>NHS Wales Performance Measure - Percentage of adult smokers who make a quit attempt via smoking cessation services - Target = 5% annually.</li> </ul> <p>In <b>Quarter 3</b> 0.6 % of smokers set a firm quit date (this is below target). 68% of these quit smoking at 4 weeks (in total from Help Me Quit [HMQ], Pharmacy Level 3 and Hospital Smoking Cessation Service combined) . This breaks down by service as follows:</p> <ul style="list-style-type: none"> <li>o HMQ community – 79% of Treated Smokers had quit smoking at 4 weeks.</li> <li>o Level 3 Pharmacy –39% of Treated Smokers had quit smoking at 4 weeks.</li> <li>o Hospital Service - 74% of Treated Smokers had quit smoking at 4 weeks.</li> </ul>	Quarter 3 2023/24	<p>Smokers setting quit date:</p> <p><b>Below target for percentage of adult smokers who make a quit attempt</b></p> <p><b>Meeting or exceeding target for 4 week quits</b></p>	<p>Graph showing 4 week quit rates by service, in percentages</p> <table border="1"> <caption>Approximate data from the 4-week quit rates graph</caption> <thead> <tr> <th>Year</th> <th>Quarter</th> <th>HMQ (%)</th> <th>L3 (%)</th> <th>Hospital (%)</th> <th>QTR TOTALS (%)</th> <th>Tier 1 Target (%)</th> </tr> </thead> <tbody> <tr> <td rowspan="4">2022-2023</td> <td>Quarter 1</td> <td>78</td> <td>30</td> <td>78</td> <td>65</td> <td>40</td> </tr> <tr> <td>Quarter 2</td> <td>75</td> <td>80</td> <td>80</td> <td>75</td> <td>40</td> </tr> <tr> <td>Quarter 3</td> <td>72</td> <td>35</td> <td>82</td> <td>65</td> <td>40</td> </tr> <tr> <td>Quarter 4</td> <td>78</td> <td>35</td> <td>80</td> <td>72</td> <td>40</td> </tr> <tr> <td rowspan="3">2023/24</td> <td>Quarter 1</td> <td>70</td> <td>25</td> <td>45</td> <td>60</td> <td>40</td> </tr> <tr> <td>Quarter 2</td> <td>75</td> <td>25</td> <td>80</td> <td>68</td> <td>40</td> </tr> <tr> <td>Quarter 3</td> <td>78</td> <td>38</td> <td>78</td> <td>70</td> <td>40</td> </tr> </tbody> </table>	Year	Quarter	HMQ (%)	L3 (%)	Hospital (%)	QTR TOTALS (%)	Tier 1 Target (%)	2022-2023	Quarter 1	78	30	78	65	40	Quarter 2	75	80	80	75	40	Quarter 3	72	35	82	65	40	Quarter 4	78	35	80	72	40	2023/24	Quarter 1	70	25	45	60	40	Quarter 2	75	25	80	68	40	Quarter 3	78	38	78	70	40
Year	Quarter	HMQ (%)	L3 (%)	Hospital (%)	QTR TOTALS (%)	Tier 1 Target (%)																																																	
2022-2023	Quarter 1	78	30	78	65	40																																																	
	Quarter 2	75	80	80	75	40																																																	
	Quarter 3	72	35	82	65	40																																																	
	Quarter 4	78	35	80	72	40																																																	
2023/24	Quarter 1	70	25	45	60	40																																																	
	Quarter 2	75	25	80	68	40																																																	
	Quarter 3	78	38	78	70	40																																																	

Saunders, Nathan  
17/05/2024 20:11:05

## Smoking and substance misuse

### NHS Wales Performance Framework measures

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend			
1.	Percentage of adult smokers who make a quit attempt via smoking cessation services	1 April 23 2023 to 31 March 2023	0.8% (per quarter)	0.6% <b>Below target</b>	Q1	Q2	Q3	Q4
					0.6%	0.6%	0.6%	
2.	Percentage of adult smokers who make a quit attempt via smoking cessation services who are CO-validated as quit at 4 weeks. <b>CO validated quits are being recorded from 1.4.24 as per guidance from Welsh Gov.</b>	No data yet available. Data to be supplied by substance misuse team and updated by UHB analysis team						
3.	Percentage of people who have been referred to health board services who have completed treatment for substance misuse (drugs and alcohol)							

### Chair’s objectives

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend
n/a	% of pregnant people undergoing CO testing at their initial booking appointment	Q4	100%	97%	
n/a	% of pregnant smokers who are referred to smoking cessation support following initial booking assessment	23/24	100%	46%	

Saunders, Nathan  
17/05/2024 20:11:05

## Immunisation and vaccination

*NHS Wales Performance Framework measures and Chair’s objectives*

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend			
					Q1	Q2	Q3	Q4
4.	Percentage of children who are up to date with the scheduled vaccinations by age 5 ('4 in 1' preschool booster, the Hib/MenC booster and the second MMR dose)	1 October 2023 to 30 December 2023	95%	85.7% Below target	83.7	83.5	85.7	84.8
5.	Percentage of children receiving the Human Papillomavirus (HPV) vaccination by the age of 15 <i>Applicable during: 01.04.2023 - 30.06.2023 and 01.01.2024 - 31.03.2024 (still awaiting data for the 2024 HPV campaign)</i>	1 January 2023 to 30 June 2023	90%	74.4% Below target	74.4	72.6	70.3	71.3
6.	Percentage uptake of the influenza vaccination amongst adults aged 65 years and over <i>Applicable during: 01.09.2023 - 31.03.2024 (autumn booster campaign concluded)</i>	1 September 2023 to 31 March 2024	75%	72.8% Below target	72.8%	72.8%	70.9%	72.6%
7.	Percentage uptake of the COVID-19 vaccination for those eligible <i>Applicable during: Spring Booster 01.04.2023 - 30.06.2023 Autumn Booster 01.09.2023 - 31.03.2024 (autumn booster campaign concluded)</i>	1 April – 30 June 2024 (Spring booster)	75%	20.79% Below target	As of 25/04/24			
					20.79%			

Saunders Nathan  
17/05/2024 20:11:05

## Weight Management Services

### *Chair's objectives*

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend			
n/a	% of people with BMI > 30 that can be treated through Level 2 Weight Management Services	April 2024	1.5%	1.6%				
n/a	% of people with BMI > 30 that can be treated through Level 3 Weight Management Services	April 2024	0.5%	0.2%				

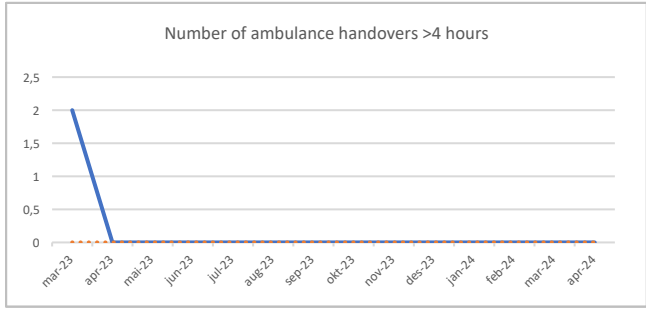
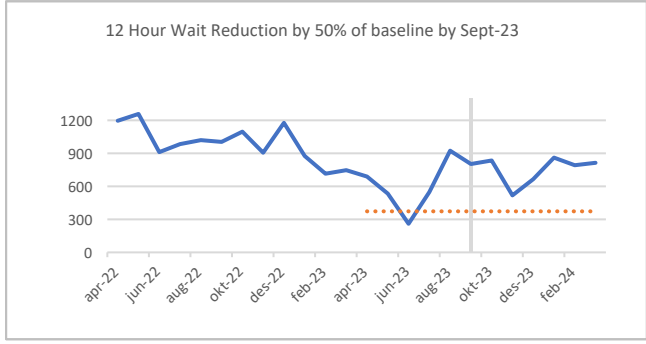
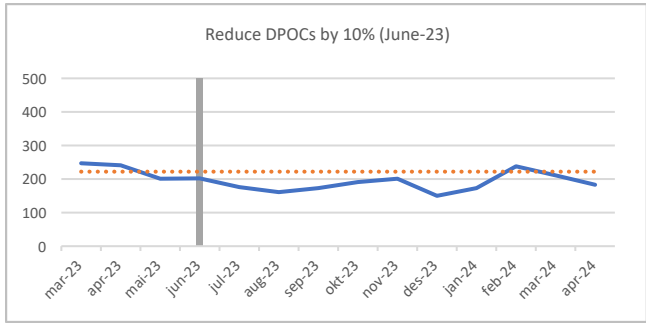
Saunders, Nathan  
17/05/2024 20:11:05

## Screening

### *NHS Wales Performance Framework measures*

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
8.	Percentage of patients offered an index colonoscopy procedure within 4 weeks of booking their Specialist Screening Practitioner assessment appointment	Feb-24	90%	<b>25.2%</b>	<table border="1"> <tr> <th>Nov-23</th> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> </tr> <tr> <td>19.00%</td> <td>22.90%</td> <td>22.50%</td> <td>25.20%</td> </tr> </table>	Nov-23	Dec-23	Jan-24	Feb-24	19.00%	22.90%	22.50%	25.20%
Nov-23	Dec-23	Jan-24	Feb-24										
19.00%	22.90%	22.50%	25.20%										
9.	Percentage of well babies entering the new-born hearing screening programme who complete screening within 4 weeks	Dec-23	90%	<b>92.9%</b>	<table border="1"> <tr> <th>Sep-23</th> <th>Oct-23</th> <th>Nov-23</th> <th>Dec-23</th> </tr> <tr> <td>96.90%</td> <td>96.90%</td> <td>97.00%</td> <td>92.90%</td> </tr> </table>	Sep-23	Oct-23	Nov-23	Dec-23	96.90%	96.90%	97.00%	92.90%
Sep-23	Oct-23	Nov-23	Dec-23										
96.90%	96.90%	97.00%	92.90%										
10.	Percentage of eligible new-born babies who have a conclusive bloodspot screening result by day 17 of life	Mar-24	95%	<b>96.1%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>96.00%</td> <td>95.10%</td> <td>95.90%</td> <td>96.10%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	96.00%	95.10%	95.90%	96.10%
Dec-23	Jan-24	Feb-24	Mar-24										
96.00%	95.10%	95.90%	96.10%										

Saunders, Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reporting Period	Data																														
<p><b>Ambulance Handover</b></p> <p>Annual Plan Commitments:</p> <ul style="list-style-type: none"> <li>Zero 4-hour ambulance delays (June 23)</li> <li>Reduce average lost minutes to 30 (Sept 23)</li> </ul>	<ul style="list-style-type: none"> <li>The number of ambulance handovers &gt;4 hours has reduced from 230 in November 2022 to zero since April 2023. We are now giving the same focus to patients waiting 2-hours for an ambulance handover. In June there were two 2-hour holds, a reduction from 206 in March 2023. we reported 8 in March 2024, a reduction from the previous month.</li> <li>Average lost minutes per arrival at UHW remains has increased slightly to 22 minutes in March from 17 in December. Average lost minutes per arrival for the Health Board was 19. This performance remains better than our annual plan commitment.</li> </ul>	<p>Apr-24</p>	 <p>Number of ambulance handovers &gt;4 hours</p> <table border="1"> <caption>Data for Number of ambulance handovers &gt;4 hours</caption> <thead> <tr><th>Month</th><th>Count</th></tr> </thead> <tbody> <tr><td>mar-23</td><td>2</td></tr> <tr><td>apr-23</td><td>0</td></tr> <tr><td>may-23</td><td>0</td></tr> <tr><td>jun-23</td><td>0</td></tr> <tr><td>jul-23</td><td>0</td></tr> <tr><td>aug-23</td><td>0</td></tr> <tr><td>sep-23</td><td>0</td></tr> <tr><td>okt-23</td><td>0</td></tr> <tr><td>nov-23</td><td>0</td></tr> <tr><td>des-23</td><td>0</td></tr> <tr><td>jan-24</td><td>0</td></tr> <tr><td>feb-24</td><td>0</td></tr> <tr><td>mar-24</td><td>0</td></tr> <tr><td>apr-24</td><td>0</td></tr> </tbody> </table>	Month	Count	mar-23	2	apr-23	0	may-23	0	jun-23	0	jul-23	0	aug-23	0	sep-23	0	okt-23	0	nov-23	0	des-23	0	jan-24	0	feb-24	0	mar-24	0	apr-24	0
Month	Count																																
mar-23	2																																
apr-23	0																																
may-23	0																																
jun-23	0																																
jul-23	0																																
aug-23	0																																
sep-23	0																																
okt-23	0																																
nov-23	0																																
des-23	0																																
jan-24	0																																
feb-24	0																																
mar-24	0																																
apr-24	0																																
<p><b>Emergency Department</b></p> <p>Annual Plan Commitments:</p> <ul style="list-style-type: none"> <li>Zero 24-hour ED waits (June 23)</li> <li>Reduce 12-hour ED waits by 50% (Sept 23)</li> </ul>	<ul style="list-style-type: none"> <li>In April, 17 patients waited 24-hours in the EU footprint without a stop-clock, a small increase from the 14 patients in March.</li> <li>12-hour ED waits increased from 814 in March to 829 in April and remains above our IMTP ambition.</li> </ul>	<p>Apr-24</p>	 <p>12 Hour Wait Reduction by 50% of baseline by Sept-23</p> <table border="1"> <caption>Data for 12 Hour Wait Reduction by 50% of baseline by Sept-23</caption> <thead> <tr><th>Month</th><th>Count</th></tr> </thead> <tbody> <tr><td>apr-22</td><td>1200</td></tr> <tr><td>jun-22</td><td>1000</td></tr> <tr><td>aug-22</td><td>1000</td></tr> <tr><td>okt-22</td><td>1000</td></tr> <tr><td>des-22</td><td>1000</td></tr> <tr><td>feb-23</td><td>700</td></tr> <tr><td>apr-23</td><td>700</td></tr> <tr><td>jun-23</td><td>300</td></tr> <tr><td>aug-23</td><td>300</td></tr> <tr><td>okt-23</td><td>300</td></tr> <tr><td>des-23</td><td>300</td></tr> <tr><td>feb-24</td><td>300</td></tr> </tbody> </table>	Month	Count	apr-22	1200	jun-22	1000	aug-22	1000	okt-22	1000	des-22	1000	feb-23	700	apr-23	700	jun-23	300	aug-23	300	okt-23	300	des-23	300	feb-24	300				
Month	Count																																
apr-22	1200																																
jun-22	1000																																
aug-22	1000																																
okt-22	1000																																
des-22	1000																																
feb-23	700																																
apr-23	700																																
jun-23	300																																
aug-23	300																																
okt-23	300																																
des-23	300																																
feb-24	300																																
<p><b>Delayed Pathways of Care, LOS and Beds</b></p> <p>Annual Plan Commitments:</p> <ul style="list-style-type: none"> <li>Reduce DPOCs by 10% (June-23)</li> <li>Reduce &gt;21 day LOS by 5% (June-23)</li> <li>Re-establish dedicated AOS beds (Sept)</li> </ul>	<ul style="list-style-type: none"> <li>Delayed pathways of care remain a national challenge, the April 2024 census reported 183 delayed pathways, a decrease from March and below our commitment of 217</li> <li>We are currently tracking the numbers of stranded (7-day LOS) and superstranded (&gt;21-day LOS) patients in our Acute beds. This is a more operationally useful measure than LOS measures which include rehabilitation and integrated care beds. We will be monitoring these going forward against the standards of &lt;40% stranded and &lt; 20% superstranded. At the time of writing our analysis showed 32% and 57% respectively.</li> <li>Work continues to evaluate the most appropriate and effective approach for the Acute Oncology Service (AOS).</li> </ul>	<p>Apr-24</p>	 <p>Reduce DPOCs by 10% (June-23)</p> <table border="1"> <caption>Data for Reduce DPOCs by 10% (June-23)</caption> <thead> <tr><th>Month</th><th>Count</th></tr> </thead> <tbody> <tr><td>mar-23</td><td>250</td></tr> <tr><td>apr-23</td><td>250</td></tr> <tr><td>may-23</td><td>200</td></tr> <tr><td>jun-23</td><td>200</td></tr> <tr><td>jul-23</td><td>180</td></tr> <tr><td>aug-23</td><td>180</td></tr> <tr><td>sep-23</td><td>180</td></tr> <tr><td>okt-23</td><td>180</td></tr> <tr><td>nov-23</td><td>180</td></tr> <tr><td>dec-23</td><td>180</td></tr> <tr><td>jan-24</td><td>180</td></tr> <tr><td>feb-24</td><td>250</td></tr> <tr><td>mar-24</td><td>200</td></tr> <tr><td>apr-24</td><td>200</td></tr> </tbody> </table>	Month	Count	mar-23	250	apr-23	250	may-23	200	jun-23	200	jul-23	180	aug-23	180	sep-23	180	okt-23	180	nov-23	180	dec-23	180	jan-24	180	feb-24	250	mar-24	200	apr-24	200
Month	Count																																
mar-23	250																																
apr-23	250																																
may-23	200																																
jun-23	200																																
jul-23	180																																
aug-23	180																																
sep-23	180																																
okt-23	180																																
nov-23	180																																
dec-23	180																																
jan-24	180																																
feb-24	250																																
mar-24	200																																
apr-24	200																																

Saunders, Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reporting Period	Data
<p><b>ED Attendances</b></p> <p>Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>Reduction of ED majors' attendances of 5% compared to same period 2022/23 (every quarter)</li> </ul>	<ul style="list-style-type: none"> <li>In April 2024 we reported 11,484 EU attendances, almost unchanged from the 11,489 reported in March</li> <li>The number of EU Majors attendances in April 2024 was 6186 a decrease from March and remaining below our ambition of 6507.</li> </ul>	<p>Apr-24</p>	
<p><b>Same Day Emergency Care</b></p> <p>Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>10% increase in the total number of patients managed through SDEC (June 2023)</li> <li>Reduced number of unplanned re-presentations within 7-days of SDEC attendance (September 2023)</li> <li>Improve % of take managed in SDEC without requiring admission</li> </ul>	<ul style="list-style-type: none"> <li>In March 2024 we saw 1,214 patients seen via surgical SDEC and 501 via the medical SDEC. In total 1,715 patients were seen, above our commitment of a 10% increase by the end of Q1</li> <li>A new process for national submissions has been undertaken and we hope to report on the other measures once complete. We are reviewing our SDEC reporting in line with next year's national performance framework.</li> </ul>	<p>Mar-24</p>	

Saunders, Nathan  
 17/05/2024 20:11:05

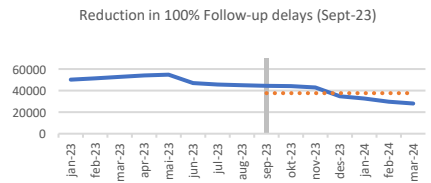
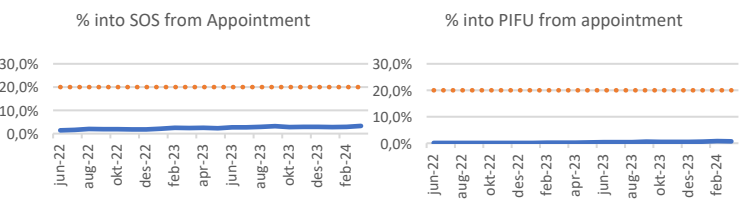
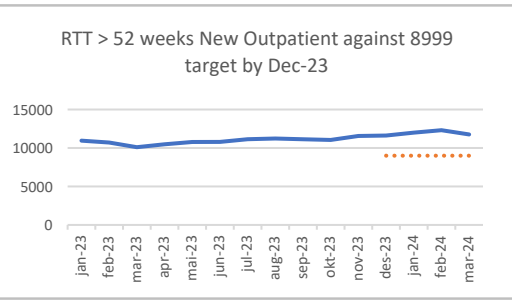
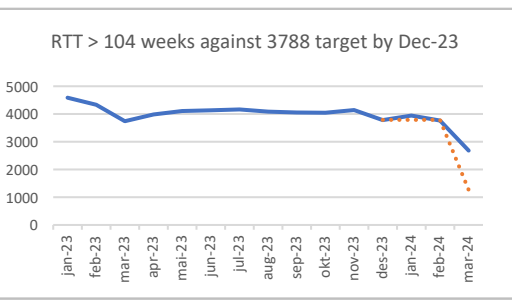
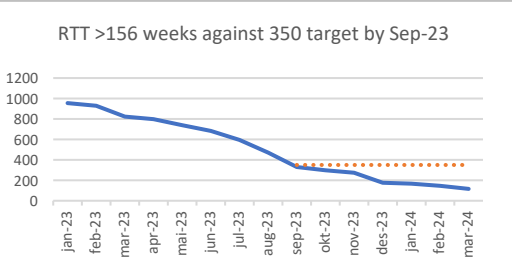
Priority	Performance Summary	Reporting Period	Data
<p><b>Urgent Primary Care</b></p> <p>Annual Plan Commitments:</p> <ul style="list-style-type: none"> <li>80% appointment utilisation in UPCCs (June 2023), 85% (September 2023), 90% (March 2024)</li> <li>All clusters to have adequate access to UPCC capacity (September 2023)</li> <li>NHS 111 - &gt;90% urgent calls logged and returned within 1 hr (December 2023)</li> <li>Increased redirections from ED to UPCC (March 2024)</li> </ul>	<ul style="list-style-type: none"> <li>Average utilisation of &gt;90% achieved across Cardiff and Vale from September, increasing to 97% in December and remaining high at 96% in January and February, increasing to 97% for March 2024</li> <li>Delivery plan in place to develop Urgent Care Centers as part of the 6 Goals Programme, to achieve full and equitable access across Cardiff and Vale currently at 86% coverage of the C&amp;V population</li> <li>Calls to CAV247/OOH service - Q1 = 93%, Q2 = 87%, Q3 = 88%, Q4 = 87%</li> <li>Work in progress – Pilot commenced to re-direct ED patients to UPCC slots. Work ongoing to expand this to 24/7 and to include Paediatrics. Total referrals for Q1 = 63, Q2 = 122 Q3 = 112 Q4 = 63</li> </ul>	<p>Mar-24</p> <p>Q4-Mar 24</p>	
<p><b>Community Services</b></p> <ul style="list-style-type: none"> <li>Home Visit (P2) f2f in 2 hrs &gt;90% (June 2023)</li> </ul>	<ul style="list-style-type: none"> <li>The Health Board was 100% compliant in March 2024 against the standard of 100% for 'Emergency' GP OOH patients requiring a home visit within one hour, with 5 of 5 patients receiving their visit with one hour.</li> <li>There were no recorded patients that required an 'Emergency' appointment at a primary care center in March</li> <li>The Health Board was 85% compliant against the commitment of 90% for 'Urgent' GP OOH patients requiring a home visit within 2 hours, with 95 of 112 patients receiving their visit within 2 hours</li> </ul>	<p>Mar-24</p>	

Saunders Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reporting Period	Data
<p><b>Fracture Neck of Femur</b> IMTP Commitments:</p> <ul style="list-style-type: none"> <li>75% admitted within 4 hours (June-23)</li> <li>85% to theatre within 36 hours (December-23)</li> </ul>	<p>Performance against the standards within the National Falls and Fragility Fracture Audit Programme (FFFAP) has shown some improvement. In March 2024 the annualised data shows 42% of patients were admitted to a specialist ward with a nerve block within 4 hours.</p> <p>In March, 64.4% of patients received surgery within 36 hours, this has been increasing since August 2022 and our performance is above the national average of 58.3% over the last 12 months.</p>	<p>Mar-24</p>	
<p><b>Stroke</b> IMTP Commitments:</p> <ul style="list-style-type: none"> <li>70% scanned within 1 hour (June-23)</li> <li>90% admitted within 4 hours (Sept-23)</li> <li>20% thrombolysis rate (Sept-23)</li> </ul>	<p>While overall Stroke performance remains below the standards set out in the Acute Stroke Quality Improvement Measures and The Sentinel Stroke National Audit Programme (SSNAP), we have seen recent improvements in compliance from our historic trends. In March:</p> <ul style="list-style-type: none"> <li>16.7% of patients were thrombolysed within 45 minutes of arrival, the All-Wales average was 17.8%</li> <li>The percentage of CT scans that were started within 1 hour in March was 62.1%, the All-Wales average was 56.24%</li> <li>The percentage of patients who were admitted directly to a stroke unit within 4 hours was 62.5% in March, the All-Wales average was 32.0%</li> </ul> <p>The UHB has held a number of internal Stroke summits and improvements to the stroke pathway are now being implemented including increased Clinical Nurse Specialists during out of hours, additional middle grade medical cover for the Emergency Unit and ringfencing of additional stroke beds to deploy the pull model from EU effectively.</p>	<p>Mar-24</p>	
<p><b>Intensive Care Unit</b> IMTP Commitments:</p> <ul style="list-style-type: none"> <li>Patient at risk team 24/7 (Sept 23)</li> <li>ITU - 1 additional staffed bed (Sept 23)</li> <li>ITU - 2 additional staffed beds (March 24)</li> </ul>	<ul style="list-style-type: none"> <li>The patient at risk team (PART) is now a 24/7 service. This expansion is important for supporting the wards and ITU with the save management and transfer of patients.</li> <li>3 additional ITU Level 3 beds will be resourced over the course of this financial year. The first of those beds was resourced from September 2023 following successful recruitment of staff</li> </ul>	<p>Dec-23</p>	

Jaunders, Nathan  
 17/05/2024 20:11:05



Priority	Performance Summary	Reporting Period	Data
<p><b>Outpatient Follow-up Management</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>Follow up outpatients—reduce 100% delayed follow up by 25% on Jan'23 baseline of 50163 (September 2023)</li> <li>SOS and PIFU –10% of appropriate outpatient appointments (September 2023); 20% (March 2024)</li> <li>SOS and PIFU –20% of appropriate outpatient appointments</li> </ul>	<ul style="list-style-type: none"> <li>In total there were 175,130 patients awaiting a follow-up outpatient appointment at the end of March</li> <li>Of these, there were 28,020 patients who were 100% delayed for their follow-up outpatient appointment, a significant decrease noted from February</li> <li>3.3% of outpatient appointments saw patients moving into a See on Symptoms pathway</li> <li>0.7% of outpatient appointments saw patients moving into Patient Initiated Follow-up pathway</li> </ul>	<p>Mar-24</p> <p>Mar-24</p>	 
<p><b>52 Week New Outpatient</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>&lt;8999 &gt; 52 weeks (March 2024)</li> </ul>	<ul style="list-style-type: none"> <li>We have developed a weekly monitoring and assurance process to update on progress against our key long waiting cohorts. Weekly updates and assurance is provided to the Chair and CEO for all long waiting patient groups.</li> <li>In March, 11,759 patients had waited 52 weeks for their outpatient appointment, an decrease from February but still above our ambition. We continue to work with our high volume specialties to reduce this as we move through Q1.</li> </ul>	<p>Mar-24</p>	
<p><b>104 Week Treatment</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>3788 patients &gt; 104 week waits for treatment (December 2023)</li> <li>1263 patients &gt; 104 week waits for treatment (March 2024)</li> </ul>	<ul style="list-style-type: none"> <li>In December the Health Board met its commitment to have no more than 3% of patients waiting more than 104 weeks for treatment. We closed March with 2681 patients waiting longer than 104 weeks which accounts for 1.82% of the total waiting list. This is above the ambition of 1% but represents a significant improvement from previous months.</li> <li>Focussed work is ongoing to support key specialties reduce continue to reduce the number of patients with 2 year waits for treatment</li> </ul>	<p>Mar-24</p>	
<p><b>156 Week Waits</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>&lt;350 patients &gt;156 week wait for treatment (September 2023)</li> <li>0 patients &gt;156 week wait for treatment (December 2023)</li> </ul>	<ul style="list-style-type: none"> <li>At the end of September there were 330 patients waiting 156 weeks for treatment, lower than our commitment. We continue to see a reduction in the number of patients waiting over 3 years and reported 116 in March. Focussed work is ongoing to support key specialties reduce continue to reduce the number of patients with 3 year waits for treatment.</li> </ul>	<p>Mar-24</p>	

[Return to Main Menu](#)

C&V Priorities and Annual Plan Commitments

[Return to Section Menu](#)

Priority	Performance Summary	Reporting Period	Data																														
<p><b>Community Pharmacy</b> Annual Plan Commitment:</p> <ul style="list-style-type: none"> <li>&gt;90% of all eligible community pharmacies providing CCPS (June 2023)</li> <li>10% increase in pharmacy independent provider access (December 2023)</li> </ul>	<p>100% of all eligible community pharmacies providing CCPS</p> <ul style="list-style-type: none"> <li>100 Community Pharmacies currently eligible to provide CCPS</li> <li>100/100 Community Pharmacies signed up to deliver CCPS.</li> </ul> <p>4338 PIP consultations undertaken in Q4, increased from 3537, 3502 and 2395 in previous quarters. There has been an increase to 34% of pharmacies providing PIP services.</p>	Mar-24	<table border="1"> <tr> <td>PIP consultations</td> <td>Dec-23</td> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> </tr> <tr> <td></td> <td>1263</td> <td>1305</td> <td>1627</td> <td>1406</td> </tr> </table>	PIP consultations	Dec-23	Jan-24	Feb-24	Mar-24		1263	1305	1627	1406																				
PIP consultations	Dec-23	Jan-24	Feb-24	Mar-24																													
	1263	1305	1627	1406																													
<p><b>GMS Escalation</b> Annual Plan Commitment:</p> <ul style="list-style-type: none"> <li>&gt;95% of practices reporting escalation levels (June 2023)</li> <li>&gt;95% achievement of core access to in-hours GMS Services (September 2023)</li> </ul>	<ul style="list-style-type: none"> <li>Average of 97% of Practices reporting escalation levels, with 100% reported in March 24 – Significant increase in number of practices at level 3 or above (29 practices as at March 24 = 51%)</li> <li>98% achievement of core access standards to in hours GMS</li> </ul>	Q4-Mar 2024	<table border="1"> <tr> <td rowspan="2">Escalation reporting</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> </tr> <tr> <td>88.0%</td> <td>92.0%</td> <td>97.0%</td> </tr> <tr> <td rowspan="2">Access Standards</td> <td>Q2</td> <td>Q3</td> <td>Q4</td> </tr> <tr> <td>98.0%</td> <td>98.0%</td> <td>98.0%</td> </tr> </table>	Escalation reporting	Q2	Q3	Q4	88.0%	92.0%	97.0%	Access Standards	Q2	Q3	Q4	98.0%	98.0%	98.0%																
Escalation reporting	Q2	Q3	Q4																														
	88.0%	92.0%	97.0%																														
Access Standards	Q2	Q3	Q4																														
	98.0%	98.0%	98.0%																														
<p><b>Dental</b> Annual Plan Commitment:</p> <ul style="list-style-type: none"> <li>50% of expected target for new patients, urgent and historic (June 2023); 90% (March 2024)</li> </ul>	<ul style="list-style-type: none"> <li>% of Primary Care Dental Services Contract value (GDS) delivered for new patients seen – 178.2%</li> <li>% of Primary Care Dental Services Contract value (GDS) delivered for new urgent patients seen - 91.5%</li> <li>% of Primary Care Dental Services Contract value (GDS) delivered for historic patients seen – 81.6%</li> </ul> <p>In May 2021 the Centralised Dental Waiting List was established to indicate demand for access to NHS Dental Services and provide a pathway for patients to access general dental services. The number of patients requesting to be added has been increasing faster than allocation of patients to practices.</p>	Q4-Mar 2024	<table border="1"> <tr> <td></td> <td>Dec-23</td> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> </tr> <tr> <td>New</td> <td>139.27%</td> <td>151.72%</td> <td>164.46%</td> <td>178.19%</td> </tr> <tr> <td>New Urgent</td> <td>63.25%</td> <td>75.64%</td> <td>83.66%</td> <td>91.50%</td> </tr> <tr> <td>Historic</td> <td>64.69%</td> <td>70.99%</td> <td>76.57%</td> <td>81.55%</td> </tr> </table> <table border="1"> <tr> <td></td> <td>Dec-23</td> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> </tr> <tr> <td>CDWL volume</td> <td>24,636</td> <td>25,064</td> <td>26,115</td> <td>25,856</td> </tr> </table>		Dec-23	Jan-24	Feb-24	Mar-24	New	139.27%	151.72%	164.46%	178.19%	New Urgent	63.25%	75.64%	83.66%	91.50%	Historic	64.69%	70.99%	76.57%	81.55%		Dec-23	Jan-24	Feb-24	Mar-24	CDWL volume	24,636	25,064	26,115	25,856
	Dec-23	Jan-24	Feb-24	Mar-24																													
New	139.27%	151.72%	164.46%	178.19%																													
New Urgent	63.25%	75.64%	83.66%	91.50%																													
Historic	64.69%	70.99%	76.57%	81.55%																													
	Dec-23	Jan-24	Feb-24	Mar-24																													
CDWL volume	24,636	25,064	26,115	25,856																													
<p><b>Optometry</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>&gt;90% of eligible practices offering Clinical Community Optometry Services (CCOS) (June 2023); 95% (December 2023)</li> </ul>	<ul style="list-style-type: none"> <li>Contract reform and implementation still in progress, currently 20 practices offer and Optometry Independent Prescribing service (33%)</li> </ul>	Q4-Mar 2024	Data refreshed for 24/25 following contract reform implementation																														
<p><b>Respiratory</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>50% of backlog of suspected COPD patients receive spirometry (June 2023); 100% March 2024)</li> </ul>	<ul style="list-style-type: none"> <li>Community Spirometry service available in both Cardiff and Vale regions.</li> <li>Total of 2,759 appointments offered, of which 1,864 Patients appointed (67% utilisation), current waiting list of 254.</li> <li>Phase 2 service implemented from November to include post bronchodilator spirometry and reversibility/FeNO testing for patients who are suspected of having asthma. Increased number of clinics in Community from January 2024.</li> </ul>	Q4-Mar 2024																															

Priority	Performance Summary	Reporting Period	Data
<p><b>Cancer</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>&gt;75% compliance with the 62-day SCP standard (June 2023), 80% (December 2023)</li> <li>Develop draft UHB strategy to deliver national cancer pathways (June 2023)</li> </ul>	<ul style="list-style-type: none"> <li>Our compliance with the 62-day single cancer pathway standard improved in December to 70.2%, our highest performance since the introduction of the Single Cancer Pathway. As forecasted we saw a drop in compliance to 60.8% in February, which has raised slightly to 62.3% in March. We continue to address the backlog of long waiting patients. At the time of writing there are a total of 2164 suspected cancer patient on the SCP. 212 have waited over 62 days, of which 57 have waited over 104 days. There have been a number of actions taken to improve the oversight and operational grip of the process for overseeing patients. Three cancer summits have taken place with the tumour group leads and operational teams to understand the demand, the causes for delay in the 62-day pathway and what actions are required to reduce the delays experienced by our patients.</li> <li>The UHB draft strategy has been developed including working with national cancer pathways</li> </ul>	<p>Mar-24</p> <p>No date</p>	<p>% Compliance patients starting cancer treatment within 62 days (75% by Jun-23)</p>
<p><b>Therapies</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>0 patients waiting over 14 weeks (excluding audiology) (June 2023)</li> </ul>	<ul style="list-style-type: none"> <li>Excluding Audiology there were 1337 patients waiting over 14-weeks for Therapy in at the end of March.</li> <li>We have eliminated 14 week breaches in Audiology so in total there were 1337 patients waiting longer 14 weeks for Therapy, a decrease from December, January and February due to a reduction in Audiology and podiatry breaches.</li> </ul>	<p>Mar-24</p>	<p>0 patients waiting &gt;14 weeks (excl. Audiology)</p>
<p><b>Diagnostics</b> Annual Plan Commitment</p> <ul style="list-style-type: none"> <li>90% of patients within 8-weeks (excl. endoscopy) (December 2023)</li> <li>Endoscopy – urgent &lt;6weeks; SCP&lt;14days; 0 surveillance patients 100% past target date (December 2023)</li> <li>Regional Diagnostic Centre go-live (December 2023)</li> </ul>	<ul style="list-style-type: none"> <li>Excluding endoscopy there were 9177 diagnostic patients waiting longer than 8 weeks for a Diagnostic at the end of March. In total there were 14454 patients waiting longer than 8 weeks for a diagnostic test, an increase from February.</li> <li>49% of patients seen within 8 weeks in March (excluding Endoscopy), a deterioration from February.</li> <li>Planning for the Community Diagnostic Hub is underway following agreement of central funding from WG. Expected go-live is estimated to be Q1 2024/25. Plans are in place to provide additional diagnostic capacity through mobile units in advance of this.</li> </ul>	<p>Mar-24</p> <p>No date</p>	<p>90% of patients within 8 weeks (excl. Endo)</p>

Priority	Performance Summary	Reporting Period	Data
<p><b>Whole System Evaluation</b> Annual Plan Commitment:</p> <ul style="list-style-type: none"> <li>• Undertake high impact evaluations of three key specialities (June 2023)</li> <li>• Undertake high impact evaluations of three key specialities (Sept 2023)</li> </ul>	<p>Evaluations completed in Therapies and Cardiac Services. At the Theatres Summit in September. Endoscopy, Gynecology and dental services presented their evaluations. Work is ongoing to expand the evaluation process across key specialities and we are refining how we approach this across the UHB, working with colleagues from the NHS Executive.</p>	<p>Mar-24</p>	
<p><b>Supporting Patients Whilst Waiting</b> Annual Plan Commitment:</p> <ul style="list-style-type: none"> <li>• Produce models of care (June 2023)</li> <li>• Develop pathways (Sept 2023)</li> <li>• Expand services (December 2023)</li> </ul>	<p>Models of care and pathways have so far been produced for 8 services including Prepare Well (Orthopaedics), ESCAPE Pain and Cancer Prehab2Rehab</p> <p>This workstream has been realigned with a national focus the 3 Ps programme and delivery of Single Point of Access from Q1 24/25:</p> <ul style="list-style-type: none"> <li>- Promoting healthy behaviours</li> <li>- Preventing deconditioning whilst waiting</li> <li>- Preparing for treatment and recovery</li> </ul>	<p>Mar-24</p>	

Saunders, Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reporting Period	Data																																																												
<p><b>Children’s Mental Health</b> Annual Plan Commitments:</p> <ul style="list-style-type: none"> <li>&gt;80% Part 1a performance – SCAMHS</li> <li>Part 1b – 10% improvement (September 2023); further 10% (December 2023); achieve &gt;80% compliance (March 2023)</li> <li>Reduce SCAMHS Intervention longest wait to no longer than 6 weeks</li> </ul>	<p>Part 1a compliance was above the 80% standard at 91% in March 2024.</p> <p>Part 1b performance increased to 23% but remains low due to additional assessments undertaken to meet Part 1a, high referral levels in June and July 23 and continued workforce challenges. The number waiting continues to increase but the longest wait reduced in February. The number waiting over 16 weeks remains low.</p> <p>There have been data quality issues and a thorough improvement in the capture of data which has further impacted reported performance. The implementation of a new PARIS module has improved data capture.</p>	<p>Mar-24</p>	<table border="1"> <caption>EWMH performance</caption> <thead> <tr> <th>Month</th> <th>Part 1A (assessment) % Compliance</th> <th>Part 1B (Intervention) % Compliance</th> <th>Part 2 % Patients with a valid CTP</th> </tr> </thead> <tbody> <tr><td>May-23</td><td>85</td><td>5</td><td>88</td></tr> <tr><td>Jun-23</td><td>88</td><td>5</td><td>88</td></tr> <tr><td>Jul-23</td><td>85</td><td>5</td><td>88</td></tr> <tr><td>Aug-23</td><td>90</td><td>5</td><td>80</td></tr> <tr><td>Sep-23</td><td>88</td><td>20</td><td>88</td></tr> <tr><td>Oct-23</td><td>95</td><td>10</td><td>85</td></tr> <tr><td>Nov-23</td><td>92</td><td>5</td><td>88</td></tr> <tr><td>Dec-23</td><td>90</td><td>5</td><td>88</td></tr> <tr><td>Jan-24</td><td>85</td><td>15</td><td>85</td></tr> </tbody> </table>	Month	Part 1A (assessment) % Compliance	Part 1B (Intervention) % Compliance	Part 2 % Patients with a valid CTP	May-23	85	5	88	Jun-23	88	5	88	Jul-23	85	5	88	Aug-23	90	5	80	Sep-23	88	20	88	Oct-23	95	10	85	Nov-23	92	5	88	Dec-23	90	5	88	Jan-24	85	15	85																				
Month	Part 1A (assessment) % Compliance	Part 1B (Intervention) % Compliance	Part 2 % Patients with a valid CTP																																																												
May-23	85	5	88																																																												
Jun-23	88	5	88																																																												
Jul-23	85	5	88																																																												
Aug-23	90	5	80																																																												
Sep-23	88	20	88																																																												
Oct-23	95	10	85																																																												
Nov-23	92	5	88																																																												
Dec-23	90	5	88																																																												
Jan-24	85	15	85																																																												
<p><b>Adult Mental Health</b> Annual Plan Commitments:</p> <ul style="list-style-type: none"> <li>&gt;80% Part 1a performance</li> <li>&gt;80% Part 1b performance</li> </ul>	<p>Demand for adult and children’s Mental Health services remains significantly above pre-Covid levels, with referrals for the Local Primary Mental Health Support Service (LPMHSS) at 1390 referrals in March 2024. As highlighted at the previous Board meetings, this demand increase includes an increased presentation of patients with complex mental health and behavioral needs.</p> <p>Significant work has been undertaken to improve access times to adult primary mental health:</p> <ul style="list-style-type: none"> <li>Part 1a: as forecasted. in February the percentage of Mental Health assessments undertaken within 28 days dipped to 54%</li> <li>Part 1b compliance remains at 100%</li> </ul>	<p>Mar-24</p>	<table border="1"> <caption>MH Part1a against 80% standard</caption> <thead> <tr> <th>Month</th> <th>% Compliance</th> </tr> </thead> <tbody> <tr><td>feb-23</td><td>100</td></tr> <tr><td>mar-23</td><td>100</td></tr> <tr><td>apr-23</td><td>54</td></tr> <tr><td>mai-23</td><td>100</td></tr> <tr><td>jun-23</td><td>100</td></tr> <tr><td>jul-23</td><td>100</td></tr> <tr><td>aug-23</td><td>100</td></tr> <tr><td>sep-23</td><td>100</td></tr> <tr><td>okt-23</td><td>100</td></tr> <tr><td>nov-23</td><td>100</td></tr> <tr><td>des-23</td><td>100</td></tr> <tr><td>jan-24</td><td>100</td></tr> <tr><td>feb-24</td><td>54</td></tr> <tr><td>mar-24</td><td>100</td></tr> </tbody> </table> <table border="1"> <caption>MH Part1b against 80% standard</caption> <thead> <tr> <th>Month</th> <th>% Compliance</th> </tr> </thead> <tbody> <tr><td>feb-23</td><td>100</td></tr> <tr><td>mar-23</td><td>100</td></tr> <tr><td>apr-23</td><td>100</td></tr> <tr><td>mai-23</td><td>100</td></tr> <tr><td>jun-23</td><td>100</td></tr> <tr><td>jul-23</td><td>100</td></tr> <tr><td>aug-23</td><td>100</td></tr> <tr><td>sep-23</td><td>100</td></tr> <tr><td>okt-23</td><td>100</td></tr> <tr><td>nov-23</td><td>100</td></tr> <tr><td>des-23</td><td>100</td></tr> <tr><td>jan-24</td><td>100</td></tr> <tr><td>feb-24</td><td>100</td></tr> <tr><td>mar-24</td><td>100</td></tr> </tbody> </table>	Month	% Compliance	feb-23	100	mar-23	100	apr-23	54	mai-23	100	jun-23	100	jul-23	100	aug-23	100	sep-23	100	okt-23	100	nov-23	100	des-23	100	jan-24	100	feb-24	54	mar-24	100	Month	% Compliance	feb-23	100	mar-23	100	apr-23	100	mai-23	100	jun-23	100	jul-23	100	aug-23	100	sep-23	100	okt-23	100	nov-23	100	des-23	100	jan-24	100	feb-24	100	mar-24	100
Month	% Compliance																																																														
feb-23	100																																																														
mar-23	100																																																														
apr-23	54																																																														
mai-23	100																																																														
jun-23	100																																																														
jul-23	100																																																														
aug-23	100																																																														
sep-23	100																																																														
okt-23	100																																																														
nov-23	100																																																														
des-23	100																																																														
jan-24	100																																																														
feb-24	54																																																														
mar-24	100																																																														
Month	% Compliance																																																														
feb-23	100																																																														
mar-23	100																																																														
apr-23	100																																																														
mai-23	100																																																														
jun-23	100																																																														
jul-23	100																																																														
aug-23	100																																																														
sep-23	100																																																														
okt-23	100																																																														
nov-23	100																																																														
des-23	100																																																														
jan-24	100																																																														
feb-24	100																																																														
mar-24	100																																																														

Saunders, Nathan  
17/05/2024 20:11:05



No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend																
10.	Percentage of GP practices that have achieved all standards set out in the National Access Standards for In-hours	Mar-24	100%	<b>98%</b>	<table border="1"> <thead> <tr> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> </tr> </thead> <tbody> <tr> <td>98%</td> <td>98%</td> <td>98%</td> <td>98%</td> </tr> </tbody> </table>	Q1	Q2	Q3	Q4	98%	98%	98%	98%								
Q1	Q2	Q3	Q4																		
98%	98%	98%	98%																		
11.	Percentage of primary care dental services (GDS) contract value delivered (for courses of treatment for new, new urgent and historic patients)	Mar-24	30% (Sept 23) 100% (Mar 24)	<b>New 178.2%</b> <b>New Urgent 91.5%</b> <b>Historic 81.6%</b>	<table border="1"> <thead> <tr> <th></th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> </thead> <tbody> <tr> <td>New</td> <td>151.72%</td> <td>164.46%</td> <td>178.19%</td> </tr> <tr> <td>New Urgent</td> <td>75.64%</td> <td>83.66%</td> <td>91.50%</td> </tr> <tr> <td>Historic</td> <td>70.99%</td> <td>76.57%</td> <td>81.55%</td> </tr> </tbody> </table>		Jan-24	Feb-24	Mar-24	New	151.72%	164.46%	178.19%	New Urgent	75.64%	83.66%	91.50%	Historic	70.99%	76.57%	81.55%
	Jan-24	Feb-24	Mar-24																		
New	151.72%	164.46%	178.19%																		
New Urgent	75.64%	83.66%	91.50%																		
Historic	70.99%	76.57%	81.55%																		
12.	Number of patients referred from primary care (optometry and General Medical Practitioners) into secondary care Ophthalmology services	Mar-24	Reduction by Mar 24	<b>791</b>	<table border="1"> <thead> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> </thead> <tbody> <tr> <td>677</td> <td>850</td> <td>793</td> <td>791</td> </tr> </tbody> </table>	Dec-23	Jan-24	Feb-24	Mar-24	677	850	793	791								
Dec-23	Jan-24	Feb-24	Mar-24																		
677	850	793	791																		
13.	Number of consultations delivered through the Pharmacist Independent Prescribing Service (PIPS)	Mar-24	Increase against 22/23	<b>1627</b>	<table border="1"> <thead> <tr> <th>Nov-23</th> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> </tr> </thead> <tbody> <tr> <td>926</td> <td>1263</td> <td>1305</td> <td>1627</td> </tr> </tbody> </table>	Nov-23	Dec-23	Jan-24	Feb-24	926	1263	1305	1627								
Nov-23	Dec-23	Jan-24	Feb-24																		
926	1263	1305	1627																		
14.	Percentage of Local Primary Mental Health Support Service (LPMHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for people aged under 18 years	Mar-24	80%	<b>91%</b>	<table border="1"> <thead> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> </thead> <tbody> <tr> <td>95%</td> <td>78%</td> <td>91%</td> <td>91%</td> </tr> </tbody> </table>	Dec-23	Jan-24	Feb-24	Mar-24	95%	78%	91%	91%								
Dec-23	Jan-24	Feb-24	Mar-24																		
95%	78%	91%	91%																		
15.	Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for people aged under 18 years	Mar-24	80%	<b>23%</b>	<table border="1"> <thead> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> </thead> <tbody> <tr> <td>4%</td> <td>14%</td> <td>19%</td> <td>23%</td> </tr> </tbody> </table>	Dec-23	Jan-24	Feb-24	Mar-24	4%	14%	19%	23%								
Dec-23	Jan-24	Feb-24	Mar-24																		
4%	14%	19%	23%																		
16.	Percentage of Local Primary Mental Health Support Service (LMPHSS) assessments undertaken within (up to and including) 28 days from the date of receipt of referral for adults aged 18 years and over	Mar-24	80%	<b>54%</b>	<table border="1"> <thead> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> </thead> <tbody> <tr> <td>85.6%</td> <td>37.5%</td> <td>91.0%</td> <td>53.9%</td> </tr> </tbody> </table>	Dec-23	Jan-24	Feb-24	Mar-24	85.6%	37.5%	91.0%	53.9%								
Dec-23	Jan-24	Feb-24	Mar-24																		
85.6%	37.5%	91.0%	53.9%																		
17.	Percentage of therapeutic interventions started within (up to and including) 28 days following an assessment by Local Primary Mental Health Support Service (LPMHSS) for adults aged 18 years and over	Mar-24	80%	<b>100%</b>	<table border="1"> <thead> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> </thead> <tbody> <tr> <td>100.0%</td> <td>100.0%</td> <td>100.0%</td> <td>100.0%</td> </tr> </tbody> </table>	Dec-23	Jan-24	Feb-24	Mar-24	100.0%	100.0%	100.0%	100.0%								
Dec-23	Jan-24	Feb-24	Mar-24																		
100.0%	100.0%	100.0%	100.0%																		

Saunders Nathan  
17/05/2024 20:11:05



No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
18.	Percentage of emergency responses to red calls arriving within (up to and including) 8 minutes	Apr-24	65%	<b>51%</b>	<table border="1"> <tr> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> <th>Apr-24</th> </tr> <tr> <td>48%</td> <td>44%</td> <td>54%</td> <td>51%</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	48%	44%	54%	51%
Jan-24	Feb-24	Mar-24	Apr-24										
48%	44%	54%	51%										
19.	Median emergency response time to amber calls	Mar-24	12m improvement trend	<b>01:14:44</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>01:38:43</td> <td>01:16:33</td> <td>01:17:05</td> <td>01:14:44</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	01:38:43	01:16:33	01:17:05	01:14:44
Dec-23	Jan-24	Feb-24	Mar-24										
01:38:43	01:16:33	01:17:05	01:14:44										
20.	Median time from arrival at an emergency department to triage by a clinician (minutes)	Mar-24	12m reduction trend	<b>20</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>19</td> <td>20</td> <td>21</td> <td>20</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	19	20	21	20
Dec-23	Jan-24	Feb-24	Mar-24										
19	20	21	20										
21.	Median time from arrival at an emergency department to assessment by a senior clinical decision maker (minutes)	Mar-24	12m reduction trend	<b>68</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>59</td> <td>57</td> <td>67</td> <td>68</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	59	57	67	68
Dec-23	Jan-24	Feb-24	Mar-24										
59	57	67	68										
22.	Percentage of patients who spend less than 4 hours in all major and minor emergency care (i.e. A&E) facilities from arrival until admission, transfer or discharge	Apr-24	95%	<b>64.7%</b>	<table border="1"> <tr> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> <th>Apr-24</th> </tr> <tr> <td>63.6%</td> <td>64.5%</td> <td>64.6%</td> <td>64.7%</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	63.6%	64.5%	64.6%	64.7%
Jan-24	Feb-24	Mar-24	Apr-24										
63.6%	64.5%	64.6%	64.7%										
23.	Number of patients who spend 12 hours or more in all hospital major and minor emergency care facilities from arrival until admission, transfer, or discharge	Apr-24	0 (Mar 2024)	<b>829</b>	<table border="1"> <tr> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> <th>Apr-24</th> </tr> <tr> <td>861</td> <td>792</td> <td>814</td> <td>829</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	861	792	814	829
Jan-24	Feb-24	Mar-24	Apr-24										
861	792	814	829										
24.	Percentage of patients starting their first definitive cancer treatment within 62 days from point of suspicion (regardless of the referral route)	Mar-24	80% (Mar 2026)	<b>62.3%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>70.2%</td> <td>64.4%</td> <td>60.8%</td> <td>62.3%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	70.2%	64.4%	60.8%	62.3%
Dec-23	Jan-24	Feb-24	Mar-24										
70.2%	64.4%	60.8%	62.3%										
25.	Number of patients waiting more than 8 weeks for a specified diagnostic	Mar-24	0 (Mar 2024)	<b>14454</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>14572</td> <td>14329</td> <td>13908</td> <td>14454</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	14572	14329	13908	14454
Dec-23	Jan-24	Feb-24	Mar-24										
14572	14329	13908	14454										
26.	Percentage of children (aged under 18 years) waiting 14 weeks or less for a specified Allied Health Professional	Mar-24	Improvement trend	<b>77.99%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>81.59%</td> <td>79.74%</td> <td>77.94%</td> <td>77.99%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	81.59%	79.74%	77.94%	77.99%
Dec-23	Jan-24	Feb-24	Mar-24										
81.59%	79.74%	77.94%	77.99%										
27.	Number of patients (all ages) waiting more than 14 weeks for a specified therapy	Mar-24	0 (Mar 2024)	<b>1337</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>1804</td> <td>1591</td> <td>1405</td> <td>1337</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	1804	1591	1405	1337
Dec-23	Jan-24	Feb-24	Mar-24										
1804	1591	1405	1337										

Saunders, Nathan  
17/05/2024 20:11:05



[Return to Main Menu](#)

NHS Wales Performance Framework Measures

[Return to Section Menu](#)

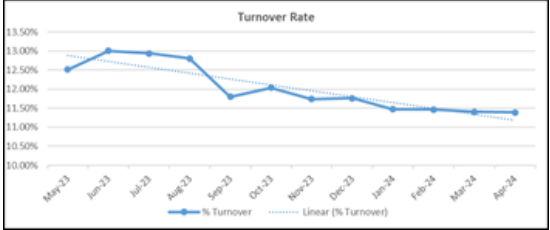

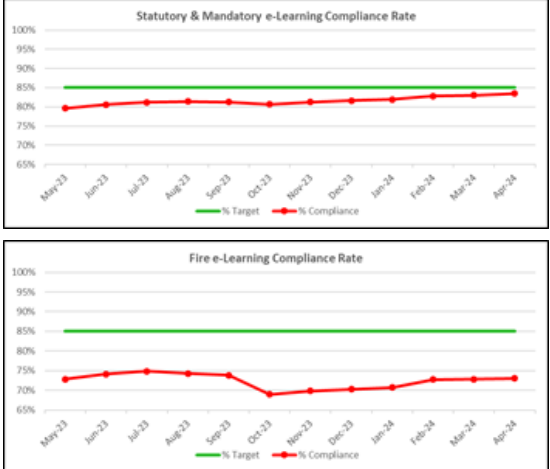

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
28.	Number of patients waiting more than 52 weeks for a new outpatient appointment	Mar-24	Improvement trajectory towards 0	<b>11759</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>11617</td> <td>11993</td> <td>12310</td> <td>11759</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	11617	11993	12310	11759
Dec-23	Jan-24	Feb-24	Mar-24										
11617	11993	12310	11759										
29.	Number of patients waiting more than 36 weeks for a new outpatient appointment	Mar-24	Improvement trajectory towards 0	<b>22270</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>21353</td> <td>21866</td> <td>22165</td> <td>22270</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	21353	21866	22165	22270
Dec-23	Jan-24	Feb-24	Mar-24										
21353	21866	22165	22270										
30.	Number of patients waiting for a follow-up outpatient appointment who are delayed by over 100%	Mar-24	Improvement trajectory towards 0	<b>28020</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>34737</td> <td>32644</td> <td>29685</td> <td>28020</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	34737	32644	29685	28020
Dec-23	Jan-24	Feb-24	Mar-24										
34737	32644	29685	28020										
31	Number of patients waiting more than 104 weeks for referral to treatment	Mar-24	Improvement trajectory towards 0	<b>2681</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>3780</td> <td>3943</td> <td>3764</td> <td>2681</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	3780	3943	3764	2681
Dec-23	Jan-24	Feb-24	Mar-24										
3780	3943	3764	2681										
32.	Number of patients waiting more than 52 weeks for referral to treatment	Mar-24	Improvement trajectory towards 0	<b>31124</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>28842</td> <td>29854</td> <td>30757</td> <td>31124</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	28842	29854	30757	31124
Dec-23	Jan-24	Feb-24	Mar-24										
28842	29854	30757	31124										
33.	Percentage of patients waiting less than 28 days for a first appointment for specialist Child and Adolescent Mental Health Services (sCAMHS) – now EWMHS	Mar-24	80%	<b>91%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>95%</td> <td>78%</td> <td>91%</td> <td>91%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	95%	78%	91%	91%
Dec-23	Jan-24	Feb-24	Mar-24										
95%	78%	91%	91%										
34.	Percentage of children and young people waiting less than 26 weeks to start an ADHD or ASD neurodevelopment assessment	Mar-24	80%	<b>19%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>26%</td> <td>22%</td> <td>22%</td> <td>19%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	26%	22%	22%	19%
Dec-23	Jan-24	Feb-24	Mar-24										
26%	22%	22%	19%										
35.	Percentage of patients waiting less than 26 weeks to start a psychological therapy in Specialist Adult Mental Health	Mar-24	80%	<b>56%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>63%</td> <td>62%</td> <td>63%</td> <td>56%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	63%	62%	63%	56%
Dec-23	Jan-24	Feb-24	Mar-24										
63%	62%	63%	56%										

Saunders, Nathan  
17/05/2024 20:11:05



Measure		Internal standard	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Trend
Outpatients	% DNAs - New appointments	5%	12.5%	11.2%	11.1%	9.9%	10.2%	11.2%	10.9%	10.6%	10.3%	10.3%	10.1%	11.4%	
	% DNAs - Follow-up appointments	5%	13.0%	13.0%	12.7%	12.1%	12.2%	12.3%	12.1%	12.2%	13.2%	13.0%	12.4%	14.3%	
Endoscopy	% room utilisation	90%	75%	87%	82%	95%	91%	95%	88%	87%	76%	70%	73%	83%	
	% utilisation (activity points available)	95%	71%	75%	74%	93%	83%	90%	82%	79%	69%	84%	94%	83%	
Theatres	Average turnaround time (minutes)	10	15.2	14.5	17.5	16.0	18.2	16.1	17.2	16.5	17.1	18.3	16.4	16.7	
	% of theatre session utilisation	95%	87%	90%	81%	81%	81%	83%	84%	88%	80%	75%	76%	73%	
	% in session utilisation	85%	77%	78%	77%	79%	78%	78%	80%	77%	77%	77%	80%	78%	
	<24 hour elective cancellations		238	314	344	293	292	255	308	338	322	267	289	209	
	% theatre activity as Daycase	TBC - will be added following confirmation of GIRFT dataset													
	High Volume Low Complexity' volume	TBC - will be added following confirmation of GIRFT dataset													
Waiting list	Total RTT waiting list volume	N/A	126262	128670	131664	134603	135686	136185	140725	141684	141828	142758	145810	147620	
Inpatient	Delayed pathways of Care - Mental Health	217		43	39	45	36	36	31	41	36	37	38	41	
	Delayed Pathways of Care - non-Mental Health			204	178	171	140	124	142	150	114	173	200	170	
	7 day LOS on Acute Wards (snapshot)	<40%				58.1%	58.9%	57.2%	59.3%	57.6%	56.5%	56.8%	59.2%	57.7%	
	21 day LOS on Acute Wards (snapshot)	<20%				31.3%	34.4%	33.7%	32.2%	28.7%	28.0%	29.8%	32.5%	32.9%	

Saunders Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reported Period	Data
<p><b>Turnover</b></p>	<p>The overall trend is downwards since May-23; the rates have fallen from 13.01% at Jun-23 to 11.39% in Apr-24 UHB wide. This is a net 1.62% decrease, which represents 230 WTE fewer leavers.</p> <p>The top 5 reasons recorded for leaving are; 'Voluntary Resignation - Other/Not Known', 'Voluntary Resignation – Relocation', 'Retirement Age', 'Voluntary Resignation - Work Life Balance' and 'Voluntary Resignation – Promotion'.</p>	<p>Apr-2024</p>	
<p><b>Sickness Absence</b></p>	<p>Rates remain high; although the rates appear to be the falling towards more 'normal' levels. The monthly sickness rate for Apr-24 was 5.36%. The 12-month cumulative rate has fallen steadily over the past 12 months to 6.23% (by comparison with Apr-23, which was 6.87%).</p>	<p>Apr-2024</p>	
<p><b>Statutory and Mandatory Training</b></p>	<p>The overall compliance rates rose for Apr-24 to 83.51%, 1.49% below the overall target. The compliance for Capital, Estates &amp; Facilities, All-Wales Genomics Services, Clinical Diagnostics &amp; Therapeutics, Children &amp; Women's, Corporate Executives and PCIC are above the 85% target, and Specialist Services and Mental Health are above 80% compliance.</p> <p>The compliance with Fire training was 73.03% for Apr-23. All Wales Genomics Service have reached 85.37%, but the compliance for all of the other Clinical Boards is below the 85% compliance target.</p>	<p>Apr-2024</p>	
<p><b>Values Based Appraisal</b></p>	<p>VBA compliance continues to rise, to 82.09% for Apr-24. All Wales Genomics Service, Children &amp; Women's and Capital, Estates &amp; Facilities have exceeded the 85% target. Surgical Services, PCIC, Medicine, Corporate and Mental Health are over 80%.</p>	<p>Apr-2024</p>	

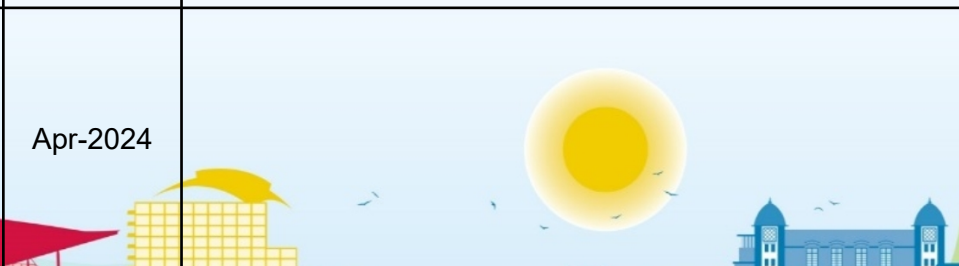
Saunders, Nathan  
17/05/2024 20:11:05



Priority	Performance Summary	Reported Period	Data
<b>Employee Relations</b>	As can be seen in the graph the number of employee relations cases the People Services team are supporting has risen in the past 12 months and have again exceeded the UHB Target. The People Services Team continue to analyse trends of employee relations cases to develop bespoke training packages or additional toolkits/support services where appropriate.	Apr-2024	<p>The graph shows four data series: Disciplinary (blue), Target Disciplinary Cases (green), Respect and Resolution (red), and Appeals (grey). The Y-axis ranges from 0 to 30. The X-axis shows months from May-23 to Apr-24. Disciplinary cases have generally exceeded the target, peaking in Nov-23 and Feb-24.</p>
<b>Job Plans</b>	The vast majority of clinicians have now engaged with job planning and have a job plan in the system, however only 27.46% have an agreed job plan that has been signed off within the past 12 months. Focus now need to turn to ensuring that job plans are reviewed and signed off in a timely fashion.	Apr-2024	<p>The graph shows two data series: % Target (green) and % Compliance (red). The Y-axis ranges from 0% to 100%. The X-axis shows months from May-23 to Apr-24. The target is constant at approximately 85%, while compliance fluctuates between 25% and 35%.</p>
<b>Medical Appraisals</b>	The rate of compliance with Medical Appraisal has fallen for the past 5 months. At Apr-24 the compliance was 80.32% and remains below the 85% target.	Apr-2024	<p>The graph shows two data series: % Target (green) and % Compliance (red). The Y-axis ranges from 50% to 100%. The X-axis shows months from May-23 to Apr-24. The target is constant at 85%, while compliance fluctuates between 80% and 88%.</p>
<b>Staff in Post</b>	The overall Health Board Staffing Numbers have increased in the last 12 months by 464 WTE, to 15,021.52 WTE. The change in the split between permanent and fixed-term as shown in the graph is largely due to validation of the ESR data held for staff contract type.	Apr-2024	<p>The graph shows two data series: Permanent (Left Axis, blue) and Fixed-Term Temp (Right Axis, orange). The left Y-axis ranges from 11,400 to 14,900. The right Y-axis ranges from 200 to 2,200. The X-axis shows months from May-23 to Apr-24. Both series show an overall upward trend.</p>
<b>Variable Pay (Bank, Agency, Overtime..)</b>	The trend of proportion of the pay bill spend on variable pay (Bank, Agency, overtime etc.) continues to fall. At May-23 the percentage was 10.278% of the total spend on pay, but in Apr-24 had fallen to 7.60%. It must however be borne in mind that the total pay bill is increasing.	Apr-2024	<p>The graph shows two data series: % Variable Pay (blue) and Linear (% Variable Pay) (dotted line). The Y-axis ranges from 7.00% to 11.00%. The X-axis shows months from May-23 to Apr-24. The variable pay percentage shows a clear downward trend from over 10% to 7.60%.</p>

Saunders, Nathan  
17/05/2024 10:11:05

**Staff Influenza Vaccination Programme** The 2023-24 winter vaccination programme closed at the end of Mar-24.



No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
36.	Percentage of sickness absence rate of staff	Apr-24	6%	<b>5.36%</b>	<table border="1"> <tr> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> <td>Apr-24</td> </tr> <tr> <td>6.93%</td> <td>6.41%</td> <td>5.87%</td> <td>5.36%</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	6.93%	6.41%	5.87%	5.36%
Jan-24	Feb-24	Mar-24	Apr-24										
6.93%	6.41%	5.87%	5.36%										
37.	Staff turnover measure tbc starters and leavers and/or vacancies?	Apr-24	7%-9%	<b>11.39%</b>	<table border="1"> <tr> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> <td>Apr-24</td> </tr> <tr> <td>11.47%</td> <td>11.47%</td> <td>11.41%</td> <td>11.39%</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	11.47%	11.47%	11.41%	11.39%
Jan-24	Feb-24	Mar-24	Apr-24										
11.47%	11.47%	11.41%	11.39%										
38.	Agency spend as a percentage of the total pay bill	Apr-24	12 month reduction trend	<b>0.91%</b>	<table border="1"> <tr> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> <td>Apr-24</td> </tr> <tr> <td>1.16%</td> <td>1.39%</td> <td>0.60%</td> <td>0.91%</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	1.16%	1.39%	0.60%	0.91%
Jan-24	Feb-24	Mar-24	Apr-24										
1.16%	1.39%	0.60%	0.91%										
39.	Percentage headcount by organisation who have had a Personal Appraisal and Development Review (PADR)/medical appraisal in the previous 12 months (including doctors and dentists in training)	Apr-24	85%	<b>81.98%</b>	<table border="1"> <tr> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> <td>Apr-24</td> </tr> <tr> <td>69.41%</td> <td>74.52%</td> <td>80.36%</td> <td>81.98%</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	69.41%	74.52%	80.36%	81.98%
Jan-24	Feb-24	Mar-24	Apr-24										
69.41%	74.52%	80.36%	81.98%										

Saunders Nathan  
17/05/2024 20:11:05



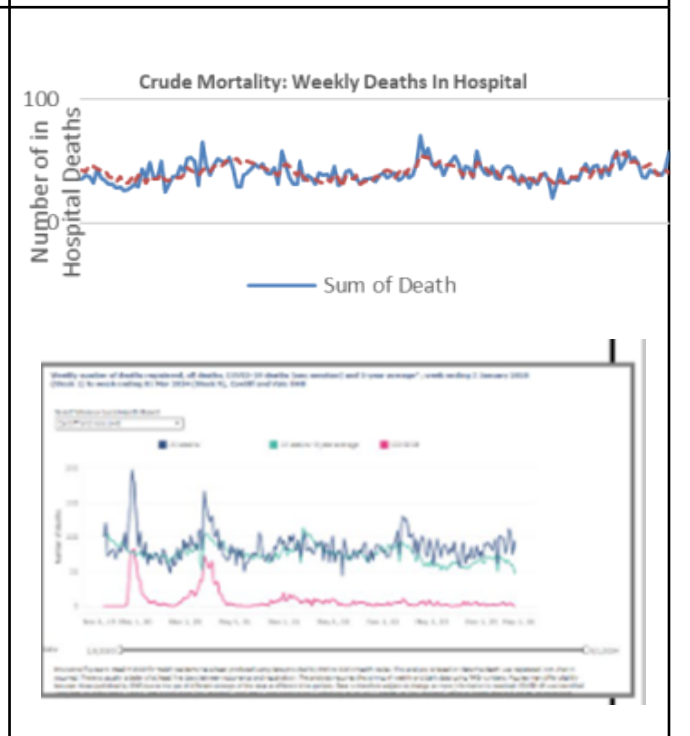
Priority	Performance Summary	Reported Period	Data																																				
<p><b>Concerns</b> 30 day performance</p>	<p><b>Welsh Government target for responding to concerns is 75% within 30 working days</b></p> <p><b>During March and April 24, the Health Board received :</b></p> <ol style="list-style-type: none"> <li>704 Concerns</li> <li>Closed 684 concerns</li> <li>81% closed within 30 working days (including Early Resolution)</li> <li>30 % closed under Early Resolution (within 2 days including day of receipt)</li> <li>201 Enquiries</li> <li>64 Compliments</li> <li>We currently have 298 active concerns</li> </ol> <p><b>Top 3 themes and trends</b></p> <ol style="list-style-type: none"> <li>Concerns around appointments (waiting times/cancellations)</li> <li>Communication</li> <li>Clinical Treatment and Assessment</li> </ol>	<p>March and April 2024</p>	<p><b>% of concerns closed within 30 working days including Early Resolution</b></p> <table border="1"> <caption>% of concerns closed within 30 working days including Early Resolution</caption> <thead> <tr> <th>Month</th> <th>Percentage</th> </tr> </thead> <tbody> <tr><td>Apr-23</td><td>82</td></tr> <tr><td>May-23</td><td>80</td></tr> <tr><td>Jun-23</td><td>78</td></tr> <tr><td>Jul-23</td><td>75</td></tr> <tr><td>Aug-23</td><td>78</td></tr> <tr><td>Sep-23</td><td>75</td></tr> <tr><td>Oct-23</td><td>70</td></tr> <tr><td>Nov-23</td><td>75</td></tr> <tr><td>Dec-23</td><td>75</td></tr> <tr><td>Jan-24</td><td>80</td></tr> <tr><td>Feb-24</td><td>78</td></tr> <tr><td>Mar-24</td><td>80</td></tr> <tr><td>Apr-24</td><td>78</td></tr> </tbody> </table>	Month	Percentage	Apr-23	82	May-23	80	Jun-23	78	Jul-23	75	Aug-23	78	Sep-23	75	Oct-23	70	Nov-23	75	Dec-23	75	Jan-24	80	Feb-24	78	Mar-24	80	Apr-24	78								
Month	Percentage																																						
Apr-23	82																																						
May-23	80																																						
Jun-23	78																																						
Jul-23	75																																						
Aug-23	78																																						
Sep-23	75																																						
Oct-23	70																																						
Nov-23	75																																						
Dec-23	75																																						
Jan-24	80																																						
Feb-24	78																																						
Mar-24	80																																						
Apr-24	78																																						
<p><b>Duty of Candour</b></p>	<ul style="list-style-type: none"> <li>Since April 1<sup>st</sup> 2023, 29,273 incidents have been reported by staff across the Health Board</li> <li>Approximately 33% incidents regraded with clinical input and feedback to the reporter</li> <li>Approximately 65 incidents reviewed per day by the Patient Experience Team</li> <li>We continue to support DOC awareness sessions across Primary and Secondary care</li> <li>Since April 1<sup>st</sup> 2023, we have triggered the DOC on 139 occasions</li> <li>We have internally audited the process and compliance</li> </ul>	<p>To March 2024</p>	<p><b>Incident grading changed following review</b></p> <table border="1"> <caption>Incident grading changed following review</caption> <thead> <tr> <th>Service</th> <th>No</th> <th>Yes</th> </tr> </thead> <tbody> <tr><td>Wales Genomics Service</td><td>100</td><td>100</td></tr> <tr><td>Surgical Services</td><td>100</td><td>1500</td></tr> <tr><td>Specialist Services</td><td>100</td><td>2200</td></tr> <tr><td>Primary, Community and Intermediate Care</td><td>100</td><td>1800</td></tr> <tr><td>Other Organisations</td><td>100</td><td>100</td></tr> <tr><td>Mental Health Services</td><td>100</td><td>1500</td></tr> <tr><td>Medicine Services</td><td>100</td><td>3500</td></tr> <tr><td>Executive and Corporate Services</td><td>100</td><td>100</td></tr> <tr><td>Clinical Diagnostics and Therapeutic Services</td><td>100</td><td>1000</td></tr> <tr><td>Children and Women's Services</td><td>100</td><td>1000</td></tr> <tr><td>Capital, Estates and Facilities</td><td>100</td><td>100</td></tr> </tbody> </table>	Service	No	Yes	Wales Genomics Service	100	100	Surgical Services	100	1500	Specialist Services	100	2200	Primary, Community and Intermediate Care	100	1800	Other Organisations	100	100	Mental Health Services	100	1500	Medicine Services	100	3500	Executive and Corporate Services	100	100	Clinical Diagnostics and Therapeutic Services	100	1000	Children and Women's Services	100	1000	Capital, Estates and Facilities	100	100
Service	No	Yes																																					
Wales Genomics Service	100	100																																					
Surgical Services	100	1500																																					
Specialist Services	100	2200																																					
Primary, Community and Intermediate Care	100	1800																																					
Other Organisations	100	100																																					
Mental Health Services	100	1500																																					
Medicine Services	100	3500																																					
Executive and Corporate Services	100	100																																					
Clinical Diagnostics and Therapeutic Services	100	1000																																					
Children and Women's Services	100	1000																																					
Capital, Estates and Facilities	100	100																																					

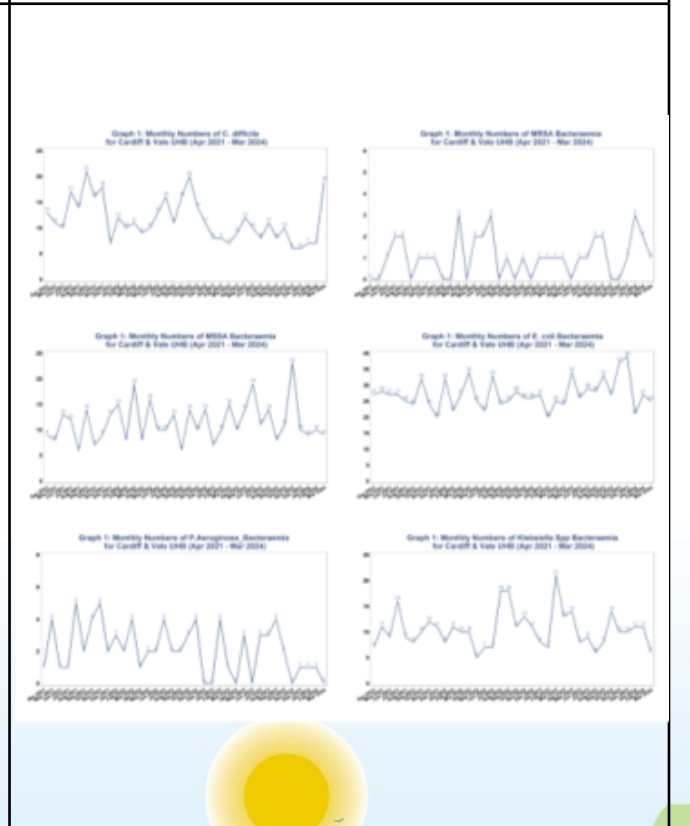
Saunders-Nayden  
17/05/2024 20:11:05



Priority	Performance Summary	Reported Period	Data
<p><b>Patient Feedback – Civica</b></p>	<ul style="list-style-type: none"> <li>We implemented the Civica feedback system in October 2022 randomly selecting 600 patients a day, we are now currently surveying up to 1000 patients daily via text, 600 chosen randomly from general hospital activity, 200 from EU activity and 200 from Mental Health activity. Over the past 12 months, we have sent 147,702 texts and are seeing a response of 17%.</li> <li>In March, we sent 13,948 texts and had 2444 completions (18% response).</li> <li>In April, we sent 13,947 texts and had 2236 completions (16% response).</li> <li>Of those respondents who were discharged during March/April and answered the rating question using the scale of 0-10 where 0 is bad and 10 is excellent, 86% were satisfied with our service.</li> <li>Currently, our response rate overall is 17% and whilst it's our understanding that this is higher than many organisations, we will be focussing on improving this over the next year.</li> </ul>	<p>Mar/Apr-24 (Random)</p> <p>Mar/Apr-24 (MH)</p> <p>Mar/Apr-24 (EU)</p>	
<p><b>Patient Safety</b></p>	<p>Cardiff and Vale reported 10 NRIs to NHS Executive in April 2024; 2 relate to the new national requirement to NRI report MBRRACE cases, and 3 relate to hospital acquired pressure damage.</p> <p>A higher than average number of closure forms were submitted in April 2024 (16) leaving us with 92 open NRIs and 45 of these are overdue for closure.</p> <p>Overall, from 1st April 2023 to 30th March 2024, C&amp;V UHB reported 134 NRIs. The top 5 NRI categories are illustrated in the second chart; clinical assessment/ diagnosis is the most prevalent reporting category, the improvement work aligned to this will be the theme for this 'World Patient Safety Day which is entitled <i>Improving diagnosis for Patient Safety. The increase in neonatal NRIs reflects the change in national reporting Criteria to include MBRRACE.</i></p> <p><b>Harm level</b> – 39% of the NRIs reported in this period were recorded with a post investigation harm level of moderate which triggers a DoC response. 43% had none or low harm attributed.</p>		

Saunders Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reported Period	Data
<p><b>Tier 1 Mortality</b></p>	<p><u>Inpatient Mortality</u>                      The Crude Inpatient Mortality chart demonstrates continued inpatient mortality in line with the five year average for the same reporting period.</p> <p>100% of patients that die as an inpatient now receive independent scrutiny from the medical examiner and plans are in place to start to review community deaths.</p> <p><u>All Cause Mortality</u>                      Excess deaths have been observed across Wales and UK since late 2022. Work undertaken by Public Health Wales demonstrates the relative excess mortality by disease, where there is any mention of the disease on the death certificate as opposed to being the underlying cause of death.</p> <p>94 deaths were recorded for Cardiff and the vale in week 9 compared 46.8 for the five year average for the same reporting week. This increase above the five year average has been consistent since January 2023</p>	<p>March 20 – March 24</p>	

<p><b>Infection Control</b></p>	<ul style="list-style-type: none"> <li>In April 24, there were 22 cases of <b>C. difficile</b>. The current rate is <b>52.94 cases per 100,000 population</b> which is <b>139% higher than the equivalent period in 2023/24</b>. The reduction expectation (RE) rate is unknown currently but based on previous 25 cases per 100,000 population, the current CAV rate is <b>111.76% below the RE</b>. CAV is currently the 4<sup>th</sup> across the 6 UHBS.</li> <li>There were 15 cases of <b>S. aureus bacteraemia</b>. The current rate is <b>36.1 cases per 100,000 population</b> which is <b>36% higher than the equivalent period in 2023/24</b>. The reduction expectation (RE) rate is unknown currently but based on previous 20 cases per 100,000 population, the CAV rate is <b>80.5% over the RE</b>. CAV is currently joint 1<sup>st</sup> across the 6 UHBS.</li> <li>There were 29 cases of <b>E. coli bacteraemia</b>. The current rate is <b>69.79 cases per 100,000 population</b> which is <b>20.5% higher than the equivalent period in 2023/24</b>. The reduction expectation (RE) rate is unknown currently but based on previous 67 cases per 100,000 population, the CAV rate is <b>4.16% over the RE</b>. CAV is currently joint 3<sup>rd</sup> across the 6 UHBS.</li> <li>There were 14 cases of <b>Klebsiella spp bacteraemia</b> which is <b>7.6% lower than the equivalent period last in 2023/24</b>. The current maximum number is unknown but based on previous reduction expectation of 58 cases, thus <b>CAV is 75.86% under the RE</b>. CAV current has the highest rate across the 6 UHBS.</li> <li>There were 2 cases of <b>P. aeruginosa bacteraemia</b> which is <b>higher than the equivalent period in 2024/25 with 0 cases</b>. The current maximum number is unknown but based on previous reduction expectation of 18 cases, thus <b>CAV is 88.9% under the RE</b>. CAV current has 3<sup>rd</sup> highest rate across the 6 UHBS.</li> </ul>	<p>x</p>	
---------------------------------	--	----------	---

Saunders, Nathan  
17/05/2024 20:11:05


Priority	Performance Summary	Reported Period	Data															
<p><b>Deliver 2023/24 Draft Financial Plan</b></p>	<p><b>Financial Plan Approved by Board and submitted to Welsh Government</b></p> <ul style="list-style-type: none"> <li>Brought forward underlying deficit of £60.9m</li> <li>2024/25 Demand and cost growth and unavoidable investments of £45.4m</li> <li>Allocations and inflationary uplifts of £37.3m</li> <li>Anticipated pass through funding on Long Term Agreements of £5.9m (3.67%)</li> <li>A £47.2m Savings programme</li> </ul> <p>This results in a 2024-25 planning deficit of £15.9m.</p> <p>At month 1, the UHB is reporting an overspend of £4.267m. This is comprised of 0.497m operational overspend, a savings gap of £2.445m and the planned deficit of £1.325m (1 twelfth of the revised forecast year end deficit of £15.900m).</p> <p>The UHB expects to recover the month 1 operational &amp; savings overspend to deliver the £15.900m planned deficit.</p>	<p>Apr-24</p>	<table border="1"> <thead> <tr> <th></th> <th>Month 1 Position £m</th> <th>Forecast Year-End Position £m</th> </tr> </thead> <tbody> <tr> <td>Planned deficit</td> <td>1.325</td> <td>15.900</td> </tr> <tr> <td>Savings Programme</td> <td>2.445</td> <td>0.000</td> </tr> <tr> <td>Operational position (Surplus) / Deficit</td> <td>0.497</td> <td>0.000</td> </tr> <tr> <td><b>Financial Position £m (Surplus) / Deficit £m</b></td> <td><b>4.267</b></td> <td><b>15.900</b></td> </tr> </tbody> </table>		Month 1 Position £m	Forecast Year-End Position £m	Planned deficit	1.325	15.900	Savings Programme	2.445	0.000	Operational position (Surplus) / Deficit	0.497	0.000	<b>Financial Position £m (Surplus) / Deficit £m</b>	<b>4.267</b>	<b>15.900</b>
	Month 1 Position £m	Forecast Year-End Position £m																
Planned deficit	1.325	15.900																
Savings Programme	2.445	0.000																
Operational position (Surplus) / Deficit	0.497	0.000																
<b>Financial Position £m (Surplus) / Deficit £m</b>	<b>4.267</b>	<b>15.900</b>																

<p><b>Delivery of recurrent £32m savings target</b></p>	<p>At month 1, the UHB has identified £18.181m of green and amber savings against the £47.2m savings target.</p> <p>The progress in the identification of schemes during the year is shown in the graph on the right</p>	<p>Apr-24</p>	<p>Graph - Progress of Identification of Schemes</p> <p>Monthly Progress of Identification of Schemes</p> <table border="1"> <caption>Estimated Data for Monthly Progress of Identification of Schemes</caption> <thead> <tr> <th>Month</th> <th>Green</th> <th>Amber</th> <th>Red</th> <th>Unidentified</th> </tr> </thead> <tbody> <tr> <td>Month 1</td> <td>12,000</td> <td>4,000</td> <td>5,000</td> <td>27,000</td> </tr> <tr> <td>Month 2</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 3</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 4</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 5</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 6</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 7</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 8</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 9</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 10</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>Month 11</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Month	Green	Amber	Red	Unidentified	Month 1	12,000	4,000	5,000	27,000	Month 2	0	0	0	0	Month 3	0	0	0	0	Month 4	0	0	0	0	Month 5	0	0	0	0	Month 6	0	0	0	0	Month 7	0	0	0	0	Month 8	0	0	0	0	Month 9	0	0	0	0	Month 10	0	0	0	0	Month 11	0	0	0	0
Month	Green	Amber	Red	Unidentified																																																											
Month 1	12,000	4,000	5,000	27,000																																																											
Month 2	0	0	0	0																																																											
Month 3	0	0	0	0																																																											
Month 4	0	0	0	0																																																											
Month 5	0	0	0	0																																																											
Month 6	0	0	0	0																																																											
Month 7	0	0	0	0																																																											
Month 8	0	0	0	0																																																											
Month 9	0	0	0	0																																																											
Month 10	0	0	0	0																																																											
Month 11	0	0	0	0																																																											

Saunders, Nathan  
17/05/2024 20:11:05

Priority	Performance Summary	Reported Period	Data
<p><b>Remain within capital resource limits</b></p>	<p>The UHBs approved capital resource limit (CRL) is £33.932m in line with the CRL received from Welsh Government on the 18th April 2024. This comprises of £13.654m discretionary funding and £20.278m towards specific projects (including Efab, Interventional Neuroradiology Equipment, Mortuary, UHW Lift Refurb and upgrade).</p> <p>The UHB is reporting that it will remain within its Capital Resource limit in 2024/25.</p>	<p>Apr-24</p>	
<p><b>Creditor payments compliance 30 day Non-NHS</b></p>	<p>The UHB’s public sector payment compliance performance is above the target of 95%. Performance for the month to the end of April was <b>97.6%</b> for the year to date as illustrated in the graph to the right.</p>	<p>Apr-24</p>	
<p><b>Remain within Cash Limit</b></p>	<p>The UHB forecasts to remain within its 2024/25 cash limit based on the assumption that Welsh Government will provide support for movements in working capital from the 2023-24 Balance Sheet and for the £15.900m 2024/25 planned deficit.</p>	<p>Apr-24</p>	
<p><b>Maintain Positive Cash Balance</b></p>	<p>The closing cash balance at the end of April 2024, was £11.379m.</p> <p>A detailed monthly cashflow forecast is included in the monthly monitoring return submission to Welsh Government.</p>	<p>Apr-24</p>	

Saunders, Nathan  
17/05/2024 20:11:05

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
40.	Percentage of episodes clinically coded within one reporting month post episode discharge end date	Apr-23	Improvement trend	70%	<table border="1"> <tr> <th>Jan-23</th> <th>Feb-23</th> <th>Mar-23</th> <th>Apr-23</th> </tr> <tr> <td>59%</td> <td>56%</td> <td>44%</td> <td>70%</td> </tr> </table>	Jan-23	Feb-23	Mar-23	Apr-23	59%	56%	44%	70%
Jan-23	Feb-23	Mar-23	Apr-23										
59%	56%	44%	70%										
41.	Percentage of all classifications' coding errors corrected by the next monthly reporting submission following		90%	Work in progress									
42.	Percentage of calls ended following WAST telephone assessment (Hear and Treat)		17% or more	Work in progress									
43.	Number of Pathways of Care delayed discharges		12 month reduction trend	Work in progress									
44.	Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for people aged under 18 years	Mar-24	90%	<b>83.6%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>86.5%</td> <td>85.3%</td> <td>88.0%</td> <td>83.6%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	86.5%	85.3%	88.0%	83.6%
Dec-23	Jan-24	Feb-24	Mar-24										
86.5%	85.3%	88.0%	83.6%										
45.	Percentage of health board residents in receipt of secondary mental health services who have a valid care and treatment plan for adults 18 years and over	Mar-24	90%	<b>55.2%</b>	<table border="1"> <tr> <th>Dec-23</th> <th>Jan-24</th> <th>Feb-24</th> <th>Mar-24</th> </tr> <tr> <td>52.0%</td> <td>54.4%</td> <td>54.0%</td> <td>55.2%</td> </tr> </table>	Dec-23	Jan-24	Feb-24	Mar-24	52.0%	54.4%	54.0%	55.2%
Dec-23	Jan-24	Feb-24	Mar-24										
52.0%	54.4%	54.0%	55.2%										
46.	Number of patient experience surveys completed and recorded on CIVICA (Total partial/full survey completions, including SMS, Bedside and bespoke)	Feb/Mar-24	Month on month improvement	 <b>4489</b>	As noted IT issue is affecting returns-being addressed								

Saunders Nathan  
17/05/2024 20:11:05

No.	Performance Measure	Reported Period	Performance Standard	In Month Performance	Trend								
47.	Cumulative number of laboratory confirmed bacteraemia cases: <i>Klebsiella</i> sp and; <i>Pseudomonas aeruginosa</i>	Apr-24	<i>Klebsiella</i> sp - 58 <i>P. aeruginosa</i> – 18	<b>14</b> <b>2</b>	Not on trajectory to achieve the reduction expectation number  On trajectory to achieve the reduction expectation number								
48.	Cumulative rate of laboratory confirmed bacteraemia cases per 100,000 population: <i>E-coli</i> ; <i>S.aureus</i> (MRSA and MSSA)	Apr-24	<i>E. coli</i> – 67 cases per 100,000 population <i>S. aureus</i> – 20 cases per 100,000 population	<b>69.79 cases per 100,000 population</b> <b>36.1 cases per 100,000 population</b>	On trajectory to achieve the reduction expectation rate  Not on trajectory to achieve the reduction expectation rate								
49.	Cumulative rate of laboratory confirmed <i>C.difficile</i> cases per 100,000 population	Apr-24	25 cases per 100,000 population	<b>52.94 cases per 100,000 population</b>	On trajectory to achieve the reduction expectation rate								
50.	Percentage of confirmed COVID-19 cases within hospital which had a definite hospital onset of COVID-19	May-23	Reduction against 22/23	Work in progress	Work in progress								
51.	Percentage of ophthalmology R1 appointments attended which were within their clinical target date or within 25% beyond their clinical target date	Feb-24	95%	<b>56.23%</b>	<table border="1"> <tr> <td>Nov-23</td> <td>Dec-23</td> <td>Feb-24</td> <td>Feb-24</td> </tr> <tr> <td>55.21%</td> <td>55.50%</td> <td>56.26%</td> <td>56.23%</td> </tr> </table>	Nov-23	Dec-23	Feb-24	Feb-24	55.21%	55.50%	56.26%	56.23%
Nov-23	Dec-23	Feb-24	Feb-24										
55.21%	55.50%	56.26%	56.23%										
52.	Number of ambulance handovers over 1 hour	Apr-24	0 (Mar 24)	<b>1704</b>	<table border="1"> <tr> <td>Jan-24</td> <td>Feb-24</td> <td>Mar-24</td> <td>Apr-24</td> </tr> <tr> <td>1805</td> <td>1648</td> <td>1797</td> <td>1704</td> </tr> </table>	Jan-24	Feb-24	Mar-24	Apr-24	1805	1648	1797	1704
Jan-24	Feb-24	Mar-24	Apr-24										
1805	1648	1797	1704										
53.	Number of patient safety incidents that remain open 90 days or more	Apr-24	12-month reduction trend	<b>↓ 5,695</b>	First month reporting a reduction in this figure (March figure was 5,869).								

Saunders, Nathan  
17/05/2024 20:11:05

Report Title:	<b>2023-24 Month 12 Monthly Financial Monitoring Return &amp; 2024-25 Month 1 Monthly Financial Monitoring Return</b>			Agenda Item no.	4.1
Meeting:	<b>Finance Committee</b>	Public	X	Meeting Date:	<b>22<sup>nd</sup> May 2024</b>
		Private			
Status <i>(please tick one only):</i>	Assurance	x	Approval	Information	x
Lead Executive:	<b>Executive Director of Finance</b>				
Report Author (Title):	<b>Deputy Director of Finance</b>				
<b>Main Report</b>					
Background and current situation:					
<b>SITUATION</b>					
<p>WHC (2023) 012 - Welsh Government 2023/24 LHB, SHA &amp; Trust Monthly Financial Monitoring Return Guidance requires the UHB to provide a main Committee of the Board with copy of the monthly Financial Monitoring Return (consisting of the Narrative, Table A and Tables C to C4) in order to provide the Committee with transparency on the submission made to the Welsh Government. Guidance issued with the 2024/25 monthly Financial Monitoring Return template re-confirms that a copy of the MMR Narrative, Table A and Tables C to C3 should be provided to a main Committee of the Board.</p> <p>Copies of the March 2023/24 &amp; April 2024/25 MMR are attached.</p>					
Executive Director Opinion and Key Issues to bring to the attention of the Board/Committee:					
The extracts from the UHBs Monthly Financial Monitoring Return are provided for information and assurance.					
<b>Recommendation:</b>					
The Board / Committee are requested to:					
<b>NOTE</b> the extracts from the UHBs Monthly Financial Monitoring Returns.					
Link to Strategic Objectives of Shaping our Future Wellbeing: <i>Please tick as relevant</i>					
1. Reduce health inequalities		6. Have a planned care system where demand and capacity are in balance			
2. Deliver outcomes that matter to people		7. Be a great place to work and learn.			
3. All take responsibility for improving our health and wellbeing		8. Work better together with partners to deliver care and support across care sectors, making best use of our people and technology			
4. Offer services that deliver the population health our citizens are entitled to expect		9. Reduce harm, waste and variation sustainably making best use of the resources available to us			x
5. Have an unplanned (emergency) care system that provides the right care, in the right place, first time		10. Excel at teaching, research, innovation and improvement and provide an environment where innovation thrives			
Five Ways of Working (Sustainable Development Principles) considered. <i>Please tick as relevant</i>					

Prevention	Long term	x	Integration	Collaboration	Involvement
<b>Impact Assessment:</b> <i>Please state yes or no for each category. If yes please provide further details.</i>					
Risk: No					
Safety: No					
Financial: Yes As detailed above.					
Workforce: No					
Legal: No					
Reputational: Yes Yes, if forecast financial position is not delivered.					
Socio Economic: No					
Equality and Health: No					
Decarbonisation: No					
<b>Approval/Scrutiny Route:</b>					
Finance Committee		Date: 22 <sup>nd</sup> May 2024			

Saunders, Nathan  
17/05/2024 20:11:05

## THE WELSH GOVERNMENT FINANCIAL COMMENTARY

### FINANCIAL POSITION FOR THE TWELVE MONTH PERIOD ENDED 31<sup>st</sup> MARCH 2024

#### INTRODUCTION

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

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

This resulted in an initial 2023/24 planning deficit of £88.4m.

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

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

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

Additional allocations and savings targets changed this plan to a target out-turn of £16.460m deficit by the end of 2023-24.

**At month 12, the UHB reports a deficit of £16.404m. This is comprised of £0.056m savings/operational underspend and the revised planned deficit of £16.460m.**

## BACKGROUND

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

**Table 1: 2023/24 Initial Core Draft Plan**

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

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

The forecast year end position was amended in line with the revised target control total issued by Welsh Government on the 20<sup>th</sup> October 2023 as follows:

**Table 2: Movement from 2023/24 initial Core Draft Plan to Final Outturn at Month 12**

	Revised forecast £m
Planned Deficit @ month 6	88.400
<b>Less:</b>	
10% Improvement required	(8.840)
Recurrent Covid Legacy U/L Deficit Funding	(20.300)
Recurrent Inflationary Uplift	(25.100)
Non recurrent Inflation Uplift	(10.100)
Energy Funding	(7.600)
<b>Revised Forecast Deficit £m</b>	<b>16.460</b>
Savings/Operational surplus	(0.056)
<b>Financial Position £m (Surplus) / Deficit £m</b>	<b>16.404</b>

These financial monitoring returns have been prepared within the framework outlined by Welsh Government in the letter of October 20<sup>th</sup>, 2023, which included a control deficit of £16.460m for 2023-24. This report details the financial position of the UHB for the period ended 31<sup>st</sup> March 2024.

The UHB separately identifies non COVID 19 and COVID 19 expenditure against its submitted plan to assess the financial impact of COVID 19.

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

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

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

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

The identification and delivery of the initial planned £32m recurrent savings target supported by additional recovery actions was key to delivery of the planned in year and underlying position.

The forecast in year and underlying position were amended in month 7 in line with the additional funding and 10% cost savings improvement identified in Table 2.

The additional 10% Improvement required was met through the review, management and scheduling of specific expenditure programmes. The majority of the opportunities are non recurrent in nature and did not impact the underlying deficit.

The Underlying Position was reviewed at month 11 to reflect the initial assessment of pressures which will carry forward from 2023/24 to the 2024/25 IMTP. The assessment is an underlying deficit of £60.9m and this is outlined below at Table 3:

**Table 3 Underlying Deficit Carried Forward to 2024/25**

Unmitigated cost pressures	£m					TOTAL
	2019/20	2020/21	2021/22	2022/23	2023/24	
NICE & New High Cost Drugs	2.0	1.7	0.6	1.4	4.2	9.9
Commissioning & contracting	4.6	5.2	1.2	2.4	6.3	19.6
Local investments	2.3	1.5	0.8	1.4	3.7	9.6
<i>Subtotal investments</i>	8.8	8.3	2.6	5.1	14.2	39.0
<b>Cost pressures &amp; services growth</b>						
Non-pay inflation pressures	0.5	1.1	0.3	1.3	0.0	3.2
Continuing Health Care	0.7	1.2	0.5	2.0	3.4	7.9
Prescribing	0.0	1.2	0.6	1.4	3.0	6.1
Welsh Risk Pool	0.0	0.7	0.2	0.5	0.0	1.4
Local pressures	1.4	1.3	0.2	0.3	0.0	3.2
<i>Subtotal cost pressures &amp; growth</i>	2.7	5.5	1.8	5.5	6.4	21.9
<b>TOTAL</b>	<b>11.5</b>	<b>13.8</b>	<b>4.4</b>	<b>10.6</b>	<b>20.6</b>	<b>60.9</b>
			29.7	40.3	60.9	

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

The UHB's provisional year end position is a £16.404m deficit which is subject to External Audit scrutiny and review. The UHB does not expect any emerging risks to materially affect the reported year end position.

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

Table B confirms the year end position and reflects the analysis contained in the annual operating plan in Table A. The UHB is reporting a year end deficit of £16.404m as shown in Table 4.

**Table 4: Summary Financial Position for the period ended 31<sup>st</sup> March 2024**

	Month 12 Position £m
Planned deficit	16.460
Savings/Operational surplus	(0.056)
<b>Financial Position £m (Surplus) / Deficit £m</b>	<b>16.404</b>

The month 12 deficit of £16.404m comprised of the following:

- £16.460m planned deficit
- £0.056m savings/operational surplus

### Pressure on Achievement of Savings

At month 12, the UHB had identified £32.590m of green and amber schemes against the £32m savings target. To achieve this, a number of the schemes were delivered that were only non recurrent and this led to a £11.388m shortfall against the £32m recurrent target.

### Pressure on Operational Position

The UHB faced significant operational pressures in year as it continued to deliver services from an operational footprint still predominantly designed to address Covid demands and infection control.

Executive Performance Reviews with the UHBs Clinical Boards in the second half of the year focussed on the the remedial actions and additional savings required to mitigate and address the cost pressures which emerged in year. These included pressures in unscheduled care, continuing healthcare, mental health, prescribing, medical staff and commissioning income from WHSCC.

The UHB operational position improved again in month, falling from an overspend of £1.730m at month 11 to an underspend of £0.056m at year end. The improvement was in line with the forecast profile of savings delivery. Part of the savings and reduction in expenditure were due to non recurrent slippage in programme spend.

### PAY & AGENCY (TABLE B2)

The UHB recorded Agency costs of £0.689m in month primarily due to nursing pressures. £0.491m of the costs recorded in March related to registered nursing and midwifery. **Average reported costs in the last 5 months were £0.785m less than the average reported in the first 5**

months and this is also corroborated by workforce data used to monitor savings actions.

### COVID 19 ANALYSIS (TABLE B3)

Table B3 reports forecast outturn expenditure due to COVID-19 to be £12.874m. This includes expenditure related to the Covid funding for Health Protection (£8.800m), PPE (£2.500m) Long Covid (£0.954m), Anti-viral (£0.100m), and Nosocomial (£0.520m) allocations.

2023/24 Covid Expenditure is summarised in Table 5 below.

**Table 5: Summary of Forecast COVID 19 Net Expenditure**

	Month 12 £m	Forecast £m	Funded by WG or Financial Plan £m	Variance to Plan/Funding £m
Health Protection	8.800	8.800	8.800	0.000
PPE	2.500	2.500	2.500	0.000
Long Covid	0.954	0.954	0.954	0.000
Nosocomial	0.520	0.520	0.520	0.000
Anti-Viral	0.100	0.100	0.100	0.000
<b>Sub Total WG Funded Covid Expenditure £m</b>	<b>12.874</b>	<b>12.874</b>	<b>12.874</b>	<b>0.000</b>
Included in Financial Plan - COVID Local Response	31.000	31.000	34.200	(3.200)
<b>Total COVID Expenditure £m</b>	<b>43.874</b>	<b>43.874</b>	<b>47.074</b>	<b>(3.200)</b>

The UHB received Welsh Government COVID Funding totaling £12.874m.

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

At month 12, the UHB had identified £32.590m of green and amber against the £32m savings target.

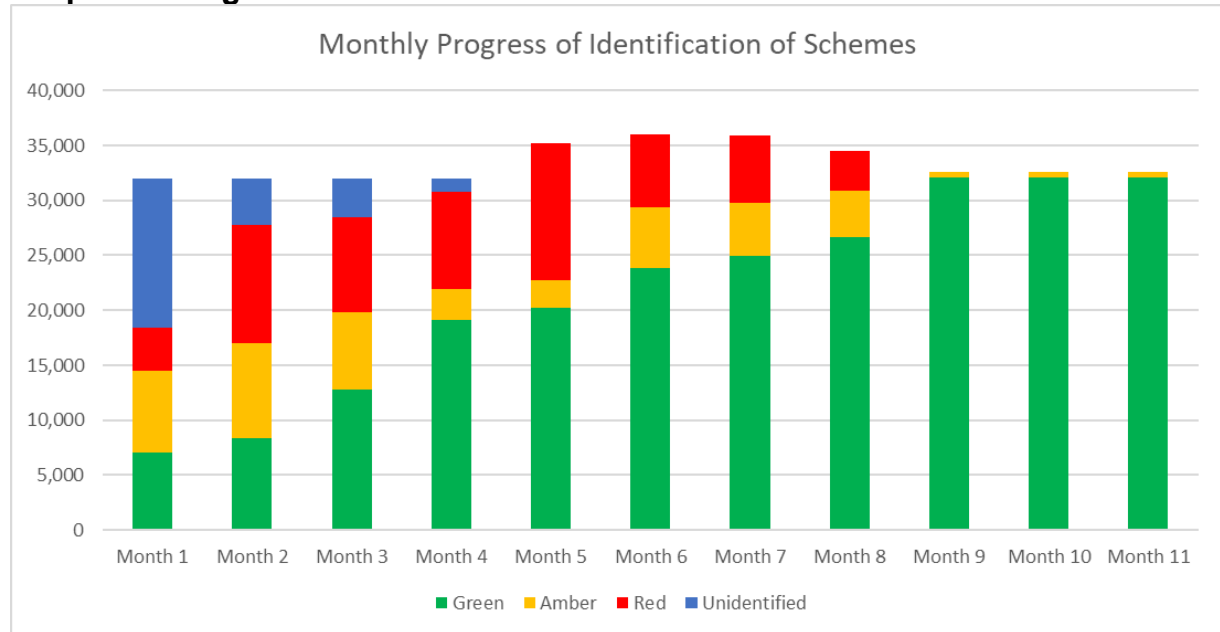
Overall performance in the identification of initial planned savings schemes is outlined in table 5 below:

**Table 5: Savings Schemes**

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total £m	32.000	32.590	0.590

Progress on the identification of schemes can be found in Graph 1 below.

### Graph 1 – Progress of Identification of Schemes



The additional 10% Improvement target of £8.8m was met through the review management and scheduling of specific expenditure programmes. The majority of the opportunities are non recurrent in nature and do not reduce the underlying deficit.

### INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)

The UHB progressed LTA discussions in line with the Welsh Government timetable.

The Welsh LTAs listed below were agreed through the UHBs governance framework and signed off:

- Aneurin Bevan
- Swansea Bay
- Hywel Dda
- Powys
- Cwm Taf Morgannwg
- Velindre.
- WHSCC

In addition to this, a covering letter was sent to WHSCC indicating that the UHB’s plans to review the cost of delivery in respect of WHSCC services alongside the appropriateness of current currencies. This is aimed at ensuring the costs of delivery are appropriately recovered.

Saunders Wathan  
17/05/2024 20:11:09

## **INCOME ASSUMPTIONS 2023/24 (TABLE E)**

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

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

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

The opening balances at the beginning of April 2023 reflect the closing balances in the 2022/23 Draft Accounts.

Property, plant & equipment is in line with the start of the year. This is due to the combined impact of annual indexation and a decrease in the carrying value of the assets reflecting monthly depreciation charges.

Overall trade and other debtors increased by £34m since the start of the year, largely due to an increase in the Welsh risk pool debtor (£25m).

The carrying value of trade creditors is line with 2023/24.

## **MONTHLY CASHFLOW FORECAST (TABLE G)**

The cash balance at the end of March was £2.780m.

£16.460m strategic cash support was provided by Welsh Government to cover the cash shortfall arising from the forecast deficit.

In addition, revenue working cash support of £34.000m was drawn down in respect of movements on the UHB balance sheet.

There are 2 errors reported on table G because the UHB did not draw down its revenue or Capital cash limit in full in 2023/24. This is consistent with the principle of not drawing cash in advance of need.

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

C&V successfully delivered its £45.603m Capital programme in 2023/24 with a surplus of £0.072m against the allocation.

The CRL reflects the Welsh Government letter issued on the 16<sup>th</sup> April 2024.

## **AGED WELSH NHS DEBTORS (TABLE M)**

At the 31<sup>st</sup> March 2024 there were no invoices raised by the UHB against other Welsh NHS bodies which had been outstanding for more than 17 weeks.

## **PUBLIC SECTOR PAYMENT PERFORMANCE (TABLE H)**

The UHB achieved its Public Sector Payment Performance target with 96.90% being achieved cumulatively for the year.

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

## **GMS & DENTAL (TABLES N & O)**

GMS and Dental expenditure is reported on tables N & O.

## **OTHER ISSUES**

The financial information reported in these monitoring returns aligns to the financial details included within Finance Committee and Board papers. These monitoring returns will be taken to the 22<sup>nd</sup> May 2024 meeting of the Finance Committee for information.

## **CONCLUSION**

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

The forecast year end position was amended in line with the additional funding and revised target control total confirmed by Welsh Government on the 20<sup>th</sup> October 2023.

At the beginning of 2023/24 the UHB had a brought forward underlying recurrent deficit of £40.3m. As a consequence of the recurrent cost pressures which emerged in year and the shortfall against the recurrent savings programme, the underlying deficit has increased to £60.9m.

The UHB is committed to achieving in year and recurrent financial balance as soon as possible. The 2024/25 Financial Plan includes a £47.2m savings plan and an ambition to return to recurrent financial balance by the end of 2025/26, through value and service transformation.

At month 12, the UHB is reporting an overspend of £16.404m. This is comprised of £0.056m savings/operational underspend and the revised planned deficit of £16.460m and is consistent with the UHBs control total agreed with Welsh Government.



**SUZANNE RANKIN**  
**CHIEF EXECUTIVE**

2<sup>nd</sup> May 2024



**CATHERINE PHILLIPS**  
**EXECUTIVE DIRECTOR OF FINANCE**

2<sup>nd</sup> May 2024

.....

.....

Table A - Movement of Opening Financial Plan to Forecast Outturn

This Table is currently showing 0 errors

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

	In Year Effect £'000	Non Recurring £'000	Recurring £'000	FYE of Recurring £'000
1 Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	-40,300	0	-40,300	-40,300
2 Planned New Expenditure (Non Covid-19) (Negative Value)	-94,523	0	-94,523	-94,523
3 Planned Expenditure For Covid-19 (Negative Value)	-13,465	-13,465		
4 Planned Welsh Government Funding (Non Covid-19) (Positive Value)	12,305	0	12,305	12,305
5 Planned Welsh Government Funding for Covid-19 (Positive Value)	13,465	13,465		
6 Planned Provider Income (Positive Value)	2,118	0	2,118	2,118
7 RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	0
8 Planned (Finalised) Savings Plan	14,042	4,098	9,944	11,113
9 Planned (Finalised) Net Income Generation	454	124	330	357
10 Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
11 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
12	0	0		
13 Planning Assumptions still to be finalised at Month 1	17,505	0	17,505	20,830
14 <b>Opening IMTP / Annual Operating Plan</b>	<b>-88,400</b>	<b>4,222</b>	<b>-92,622</b>	<b>-88,100</b>
15 Reversal of Planning Assumptions still to be finalised at Month 1	-17,505	0	-17,505	-20,830
16 Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive Value)	0	0		
17 Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets	0	0		
18 Other Movement in Month 1 Planned & In Year Net Income Generation	323	150	173	290
19 Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	-714	-178	-536	-332
20 Additional In Year Identified Savings - Forecast	27,300	18,494	8,806	14,063
21 Variance to Planned RRL & Other Income	0	0		
22 Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 plus virements (Positive Value - additional)	-590	-590		
23 Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0		
24 Additional In Year & Movement Expenditure for Covid-19 (Negative Value - additional/Positive Value - reduction)	590	590		
25 In Year Accountancy Gains (Positive Value)	0	0	0	0
26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	29	29		
27 Additional savings to be identified - In Year Pressures	-537	-537		-11,391
28 Roundings	0	0		
29 Additional Actions £16.020m - Red Schemes in development	0	0		
30	0	0		
31 10% Improvement required - actions still required	0	0		
32 Recurrent Covid Legacy U/L Deficit Funding	20,300	0	20,300	20,300
33 Recurrent Inflationary Uplift	25,100	0	25,100	25,100
34 Non recurrent Inflation Uplift	10,100	10,100		
35 Energy Funding	7,600	7,600		
36	0	0		
37	0	0		
38	0	0		
39	0	0		
40 <b>Forecast Outturn (- Deficit / + Surplus)</b>	<b>-16,404</b>	<b>39,880</b>	<b>-56,283</b>	<b>-60,900</b>
41 <b>Covid-19 - Forecast Outturn (- Deficit / + Surplus)</b>	<b>0</b>			
42 <b>Operational - Forecast Outturn (- Deficit / + Surplus)</b>	<b>-16,404</b>			

	Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	YTD £'000	In Year Effect £'000
1	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-3,358	-40,300	-40,300
2	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-7,877	-94,523	-94,523
3	-521	-943	-1,235	-1,220	-1,194	-1,171	-1,146	-1,203	-1,208	-1,208	-1,167	-1,245	-13,465	-13,465
4	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	1,025	12,305	12,305
5	521	943	1,235	1,220	1,194	1,171	1,146	1,203	1,208	1,208	1,167	1,245	13,465	13,465
6	177	177	177	177	177	177	177	177	177	177	177	177	2,118	2,118
7	1,925	254	-61	97	-74	-6	-383	-358	-341	-341	-356	-355	0	0
8	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	14,042	14,042
9	77	13	43	43	43	43	43	43	26	26	26	26	454	454
10													0	0
11													0	0
12													0	0
13		1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	1,591	17,505	17,505
14	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,367</b>	<b>-7,366</b>	<b>-88,400</b>	<b>-88,400</b>
15	0	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-1,591	-17,505	-17,505
16													0	0
17													0	0
18	0	-3	7	13	13	63	13	13	38	38	63	63	323	323
19	0	0	-383	-232	314	-48	-7	-293	38	-47	-28	-29	-714	-714
20	0	219	188	355	574	1,016	4,717	3,227	2,464	2,946	2,765	8,830	27,300	27,300
21													0	0
22	0	-231	23	23	-83	-59	-16	-49	-16	6	17	-205	-590	-590
23													0	0
24	0	231	-23	-23	83	59	16	49	16	-6	-17	205	590	590
25	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	-83	158	-5	-5	-5	-5	-5	-5	-5	-5	-5	-5	29	29
27	-1,446	298	576	229	-413	-541	2,711	-1,299	982	49	3,962	-5,645	-537	-537
28													0	0
29													0	0
30													0	0
31								684	0	899	-2,482	899	0	0
32								11,842	1,692	1,692	1,692	1,692	20,300	20,300
33								14,642	2,092	2,092	2,092	2,092	25,100	25,100
34								5,892	842	842	842	842	10,100	10,100
35								4,433	633	633	633	633	7,600	7,600
36													0	0
37													0	0
38													0	0
39													0	0
40	<b>-8,896</b>	<b>-8,287</b>	<b>-8,574</b>	<b>-8,597</b>	<b>-8,474</b>	<b>-8,473</b>	<b>35,279</b>	<b>-1,372</b>	<b>-182</b>	<b>181</b>	<b>576</b>	<b>414</b>	<b>-16,404</b>	<b>-16,404</b>
41	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
42	<b>-8,896</b>	<b>-8,287</b>	<b>-8,574</b>	<b>-8,597</b>	<b>-8,474</b>	<b>-8,473</b>	<b>35,279</b>	<b>-1,372</b>	<b>-182</b>	<b>181</b>	<b>576</b>	<b>414</b>	<b>-16,404</b>	<b>-16,404</b>

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

This Table is currently showing 0 errors

		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY YTD variance as %age of YTD	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000	
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar				Green	Amber	non recurring	recurring		
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000				£'000	£'000	£'000	£'000		£'000
1	CHC and Funded Nursing Care	Budget/Plan	8	8	8	8	8	8	8	8	8	8	8	100	100		100	0				
2		Actual/F'cast	8	27	30	53	68	86	103	124	129	142	147	147	1,067	1,067	100.00%	1,067	0	45	1,022	1,368
3		Variance	0	19	22	45	60	78	95	116	121	134	139	139	967	967	967.00%	967	0			
4	Commissioned Services	Budget/Plan	7	7	19	19	19	19	19	19	19	19	19	204	204		204	0				
5		Actual/F'cast	7	7	19	19	19	19	19	19	19	103	103	103	456	456	100.00%	456	0	125	331	1,249
6		Variance	0	0	0	0	0	0	0	0	0	84	84	84	252	252	123.34%	252	0			
7	Medicines Management (Primary & Secondary Care)	Budget/Plan	185	93	226	167	168	245	206	207	207	222	222	2,355	2,355		2,355	0				
8		Actual/F'cast	185	104	217	215	346	393	362	487	519	912	945	1,099	5,784	5,784	100.00%	5,784	0	897	4,887	6,435
9		Variance	0	11	(9)	48	178	148	156	280	313	705	723	878	3,429	3,429	145.62%	3,429	0			
10	Non Pay	Budget/Plan	214	226	383	283	428	263	268	268	268	268	268	3,425	3,425		3,425	0				
11		Actual/F'cast	214	257	344	344	589	354	3,431	768	541	707	696	6,420	14,665	14,665	100.00%	14,665	0	10,625	4,040	6,734
12		Variance	0	30	(39)	61	160	71	3,164	501	273	439	428	6,153	11,240	11,240	328.13%	11,240	0			
13	Pay	Budget/Plan	251	474	457	457	482	482	913	888	888	888	887	7,957	7,957		7,957	0				
14		Actual/F'cast	251	633	287	425	970	1,150	2,206	2,923	2,681	2,423	2,249	2,432	18,630	18,630	100.00%	18,630	0	10,721	7,908	9,032
15		Variance	0	159	(170)	(32)	487	668	1,293	2,035	1,793	1,535	1,360	1,545	10,673	10,673	134.13%	10,673	0			
16	Primary Care	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
17		Actual/F'cast	0	0	3	3	3	3	3	3	3	3	3	3	25	25	100.00%	25	0	0	25	25
18		Variance	0	0	3	3	3	3	3	3	3	3	3	3	25	25		25	0			
19	Total	Budget/Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,405	1,404	14,042	14,042		14,042	0				
20		Actual/F'cast	665	1,027	899	1,059	1,994	2,006	6,125	4,324	3,892	4,289	4,142	10,205	40,628	40,628	100.00%	40,628	0	22,414	18,214	24,844
21		Variance	0	219	(195)	124	888	967	4,710	2,934	2,502	2,899	2,737	8,801	26,586	26,586	189.34%	26,586	0			
22	Variance in month		0.00%	27.05%	(17.79%)	13.22%	80.34%	93.16%	332.81%	211.01%	179.96%	208.52%	194.76%	626.89%	189.34%							
23	In month achievement against FY forecast		1.64%	2.53%	2.21%	2.61%	4.91%	4.94%	15.07%	10.64%	9.58%	10.56%	10.20%	25.12%								

Saunders Nathan  
17/05/2024 20:11:05

Table C1- Savings Schemes Pay Analysis

1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY		Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000		
														YTD variance as %age of YTD Budget/Plan	Green	Amber	non recurring	recurring				
														£'000	£'000	£'000	£'000	£'000	£'000		£'000	£'000
Month	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar										
1	Changes in Staffing Establishment	Budget/Plan	245	92	195	195	195	626	626	626	626	626	625	4,873	4,873		4,873	0				
		Actual/F'cast	245	237	181	196	280	284	656	493	919	706	705	5,608	5,608	100.00%	5,608	0	512	5,096	5,296	
		Variance	0	145	(14)	1	85	89	30	(133)	293	80	80	80	735	735	15.07%	735	0			
4	Variable Pay	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0				
		Actual/F'cast	0	0	0	9	6	130	49	57	289	121	112	106	878	878	100.00%	878	0	878	0	0
		Variance	0	0	0	9	6	130	49	57	289	121	112	106	878	878		878	0			
7	Locum	Budget/Plan	0	0	0	0	25	25	25	0	0	0	0	0	75	75		75	0			
		Actual/F'cast	0	0	8	21	41	46	12	53	(32)	11	11	11	180	180	100.00%	180	0	85	95	200
		Variance	0	0	8	21	16	21	(13)	53	(32)	11	11	11	105	105	140.07%	105	0			
10	Agency / Locum paid at a premium	Budget/Plan	0	376	237	237	237	237	237	237	237	237	237	2,746	2,746		2,746	0				
		Actual/F'cast	0	376	66	165	595	492	1,412	690	687	876	712	803	6,874	6,874	100.00%	6,874	0	4,380	2,494	3,161
		Variance	0	0	(171)	(72)	358	255	1,175	453	450	639	475	566	4,128	4,128	150.33%	4,128	0			
13	Changes in Bank Staff	Budget/Plan	0	0	19	19	19	19	19	19	19	19	19	190	190		190	0				
		Actual/F'cast	0	0	19	19	19	19	19	19	19	19	19	19	190	190	100.00%	190	0	0	190	190
		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0			
16	Other (Please Specify)	Budget/Plan	6	6	6	6	6	6	6	6	6	6	6	72	72		72	0				
		Actual/F'cast	6	20	12	16	29	178	58	1,610	800	690	690	789	4,899	4,899	100.00%	4,899	0	4,867	32	186
		Variance	0	14	6	10	22	173	52	1,604	794	684	684	783	4,827	4,827	6657.90%	4,827	0			
19	Total	Budget/Plan	251	474	457	457	482	482	913	888	888	888	887	7,957	7,957		7,957	0				
		Actual/F'cast	251	633	287	425	970	1,150	2,206	2,923	2,681	2,423	2,249	2,432	18,630	18,630	100.00%	18,630	0	10,721	7,908	9,032
		Variance	0	159	(170)	(32)	487	668	1,293	2,035	1,793	1,535	1,360	1,545	10,673	10,673	134.13%	10,673	0			

Saunders Nathan  
17/05/2024 20:11:05

**Table C3- Savings Schemes SoCNE/SCNI Analysis**

	Month	1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast
		Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000		
1	Budget/Plan	251	474	457	457	482	482	913	888	888	888	888	887	7,957	7,957
2	Pay	251	633	287	425	970	1,150	2,206	2,923	2,681	2,423	2,249	2,432	18,630	18,630
3	Variance	0	159	(170)	(32)	487	668	1,293	2,035	1,793	1,535	1,360	1,545	10,673	10,673
4	Budget/Plan	214	226	396	296	441	296	280	280	280	280	280	280	3,551	3,551
5	Non Pay	214	257	356	357	601	367	3,444	781	553	803	792	6,517	15,042	15,042
6	Variance	0	30	(39)	61	160	71	3,164	501	273	523	512	6,237	11,492	11,492
7	Budget/Plan	39	40	40	62	63	63	93	93	93	93	108	108	894	894
8	Primary Care Drugs	39	40	78	92	240	219	262	336	374	416	431	585	3,113	3,113
9	Variance	0	0	38	30	177	156	169	243	281	323	323	477	2,219	2,219
7	Budget/Plan	146	53	185	105	105	182	114	114	114	114	114	114	1,461	1,461
8	Secondary Care Drugs	146	64	138	123	106	174	100	150	145	496	514	514	2,671	2,671
9	Variance	0	11	(47)	17	1	(8)	(13)	36	31	382	400	400	1,210	1,210
10	Budget/Plan	8	8	8	8	8	8	8	8	8	8	8	8	100	100
11	CHC/FNC	8	27	30	53	68	86	103	124	129	142	147	147	1,067	1,067
12	Variance	0	19	22	45	60	78	95	116	121	134	139	139	967	967
13	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Primary Care Contractor	0	0	3	3	3	3	3	3	3	3	3	3	25	25
15	Variance	0	0	3	3	3	3	3	3	3	3	3	3	25	25
16	Healthcare Services	7	7	7	7	7	7	7	7	7	7	7	7	79	79
17	Provided by Other NHS	7	7	7	7	7	7	7	7	7	7	7	7	79	79
18	Bodies	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Non Healthcare Services	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	Provided by Other NHS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	Bodies	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Other Private & Voluntary	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Sector	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Joint Financing & Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28	Budget/Plan	665	808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	14,042	14,042
29	Total	665	1,027	899	1,059	1,994	2,006	6,125	4,324	3,892	4,289	4,142	10,205	40,628	40,628
30	Variance	0	219	(195)	124	888	967	4,710	2,934	2,502	2,899	2,737	8,801	26,586	26,586

Saunders Nathan  
17/05/2024 20:11:05

This Table is currently showing 0 errors

Table C4 - Tracker

	£'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect	
Savings (Cash Releasing & Cost Avoidance)	Month 1 - Plan	665		808	1,093	935	1,106	1,038	1,415	1,390	1,390	1,390	1,405	1,404	14,042	14,042	4,098	9,944	1,170	11,113
	Month 1 - Actual/Forecast	665		808	711	704	1,420	990	1,408	1,097	1,429	1,343	1,378	1,375	13,327	13,327	3,919	9,408	1,374	10,781
	Variance	0		0	(383)	(232)	314	(48)	(7)	(293)	38	(47)	(28)	(29)	(714)	(714)	(178)	(536)	204	(332)
	In Year - Plan	0		219	268	494	592	1,058	4,660	3,376	2,496	2,605	2,718	8,591	27,076	27,076	19,099	7,977	5,793	13,770
	In Year - Actual/Forecast	0		219	188	355	574	1,016	4,717	3,227	2,464	2,946	2,765	8,830	27,300	27,300	18,494	8,806	5,257	14,063
	Variance	0		0	(79)	(139)	(18)	(43)	57	(149)	(32)	341	47	239	224	224	(605)	829	(536)	293
	Total Plan	665		1,027	1,361	1,429	1,698	2,097	6,075	4,766	3,886	3,996	4,123	9,995	41,118	41,118	23,197	17,921	6,962	24,883
	Total Actual/Forecast	665		1,027	899	1,059	1,994	2,006	6,125	4,324	3,892	4,289	4,142	10,205	40,628	40,628	22,414	18,214	6,630	24,844
Total Variance	0		0	(462)	(370)	296	(91)	50	(442)	6	294	19	210	(490)	(490)	(783)	293	(332)	(39)	
Net Income Generation	Month 1 - Plan	77		13	43	43	43	43	43	26	43	26	26	26	454	454	124	330	27	357
	Month 1 - Actual/Forecast	77		(6)	34	40	38	38	38	46	46	46	46	46	482	482	224	258	99	357
	Variance	0		(19)	(9)	(4)	(5)	(5)	(5)	(5)	20	20	20	20	28	28	100	(72)	72	0
	In Year - Plan	0		16	16	16	18	68	18	18	18	18	18	18	245	245	0	245	45	290
	In Year - Actual/Forecast	0		16	16	16	18	68	18	18	18	18	43	43	295	295	50	245	45	290
	Variance	0		0	0	0	0	0	0	0	0	0	25	25	50	50	50	0	(0)	0
	Total Plan	77		28	60	60	61	111	61	61	45	45	45	45	699	699	124	575	72	647
	Total Actual/Forecast	77		10	50	56	106	56	65	65	65	65	90	90	777	777	274	503	144	647
Total Variance	0		(19)	(9)	(4)	(5)	(5)	(5)	(5)	20	20	45	45	78	78	150	(72)	72	0	
Accountancy Gains	In Year - Plan	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Variance	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	Month 1 - Plan	742		821	1,137	978	1,149	1,081	1,458	1,433	1,417	1,417	1,432	1,430	14,495	14,495	4,222	10,273	1,197	11,470
	Month 1 - Actual/Forecast	742		803	744	743	1,458	1,028	1,446	1,135	1,475	1,390	1,424	1,421	13,809	13,809	4,143	9,665	1,473	11,138
	Variance	0		(19)	(392)	(235)	309	(53)	(12)	(298)	58	(27)	(8)	(9)	(686)	(686)	(78)	(608)	276	(332)
	In Year - Plan	0		234	284	510	611	1,127	4,678	3,394	2,514	2,624	2,736	8,609	27,321	27,321	19,099	8,222	5,838	14,060
	In Year - Actual/Forecast	0		234	205	372	592	1,084	4,735	3,245	2,482	2,964	2,808	8,874	27,595	27,595	18,544	9,051	5,302	14,353
	Variance	0		0	(79)	(139)	(18)	(43)	57	(149)	(32)	341	72	264	274	274	(655)	829	(536)	293
	Total Plan	742		1,055	1,421	1,489	1,759	2,208	6,136	4,827	3,931	4,040	4,168	10,040	41,817	41,817	23,321	18,496	7,034	25,530
	Total Actual/Forecast	742		1,037	949	1,115	2,051	2,112	6,181	4,380	3,957	4,354	4,232	10,295	41,404	41,404	22,688	18,717	6,774	25,491
Total Variance	0		(19)	(472)	(374)	291	(96)	45	(447)	26	314	64	255	(412)	(412)	(633)	221	(260)	(39)	

Summary of Forecast Month 1 & In Year (£000's) - Green & Amber	Cash-Releasing Saving (Pay)	Cash-Releasing Saving (Non Pay)	Cost Avoidance	Savings Total	Income Generation	Accountancy Gains
Planned Care	1,001	986	5	1,992	115	0
Unscheduled Care	3,114	0	0	3,114	0	0
Primary and Community Care (Excl Prescribing)	293	627	0	920	0	0
Mental Health	65	227	0	292	0	0
Clinical Support	282	515	0	796	214	0
Non Clinical Support (Facilities/Estates/Corporate)	355	1,061	0	1,416	194	0
Commissioning	0	1,001	0	1,001	30	0
Across Service Areas	13,521	11,907	216	25,645	214	0
CHC	0	1,042	0	1,042	0	0
Prescribing	0	3,183	0	3,183	0	0
Medicines Management (Secondary Care)	0	1,227	0	1,227	10	0
<b>Total</b>	<b>18,630</b>	<b>21,777</b>	<b>221</b>	<b>40,628</b>	<b>777</b>	<b>0</b>

Saunders Nathan  
17/05/2024 20:11:05

This Table is currently showing 2 errors

This table needs completing monthly from Month: 2

Table G - Monthly Cashflow Forecast

	April £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £,000	Total £,000	
<b>RECEIPTS</b>														
1	WG Revenue Funding - Cash Limit (excluding NCL) - LHB & SHA only	130,987	98,095	141,605	109,120	100,470	110,970	103,330	103,520	119,025	100,765	85,407	117,290	1,320,583
2	WG Revenue Funding - Non Cash Limited (NCL) - LHB & SHA only	1,190	1,190	650	525	1,425	2,150	1,575	435	1,555	530	980	2,005	14,210
3	WG Revenue Funding - Other (e.g. invoices)	1,788	1,320	1,310	1,354	2,951	2,006	1,489	1,381	2,865	1,385	3,050	1,662	22,561
4	WG Capital Funding - Cash Limit - LHB & SHA only	10,000	2,500	0	943	(518)	1,985	1,995	965	1,470	2,505	0	21,910	43,755
5	Income from other Welsh NHS Organisations	40,222	35,616	39,767	40,658	45,593	37,762	36,735	46,972	39,020	47,067	60,046	49,639	519,097
6	Short Term Loans - Trust only													0
7	PDC - Trust only													0
8	Interest Receivable - Trust only													0
9	Sale of Assets	0	0	0	0	0	0	0	0	0	0	0	0	0
10	Other - (Specify in narrative)	4,032	13,939	6,310	11,994	8,870	5,253	7,654	13,294	5,480	4,749	15,845	8,996	106,416
11	<b>TOTAL RECEIPTS</b>	<b>188,219</b>	<b>152,659</b>	<b>189,642</b>	<b>164,594</b>	<b>158,792</b>	<b>160,126</b>	<b>152,778</b>	<b>166,567</b>	<b>169,415</b>	<b>157,001</b>	<b>165,328</b>	<b>201,502</b>	<b>2,026,623</b>
<b>PAYMENTS</b>														
12	Primary Care Services : General Medical Services	6,777	6,107	7,281	5,773	5,947	6,024	6,261	6,300	6,806	6,225	8,628	6,699	78,827
13	Primary Care Services : Pharmacy Services	280	177	134	115	106	134	122	117	379	649	514	230	2,959
14	Primary Care Services : Prescribed Drugs & Appliances	18,097	0	18,283	0	9,279	17,876	0	9,284	18,736	0	9,215	9,661	110,430
15	Primary Care Services : General Dental Services	2,061	2,268	2,301	2,397	2,459	2,228	2,234	2,152	2,122	3,295	2,286	2,157	27,959
16	Non Cash Limited Payments	1,870	1,850	1,928	1,998	1,976	1,962	1,953	1,959	2,189	1,946	2,129	2,204	23,964
17	Salaries and Wages	65,920	69,595	79,720	74,501	70,537	66,932	68,310	70,285	68,262	68,825	69,322	69,874	842,084
18	Non Pay Expenditure	86,046	71,140	75,762	78,261	62,587	67,236	72,217	74,621	69,425	75,482	73,130	87,881	893,789
19	Short Term Loan Repayment - Trust only									0	0	0	0	0
20	PDC Repayment - Trust only									0	0	0	0	0
21	Capital Payment	7,201	852	2,602	1,990	486	863	1,379	287	861	1,680	1,746	23,897	43,842
22	Other items (Specify in narrative)	339	123	659	53	144	641	138	41	695	0	0	0	2,834
23	<b>TOTAL PAYMENTS</b>	<b>188,592</b>	<b>152,112</b>	<b>188,671</b>	<b>165,086</b>	<b>153,522</b>	<b>163,896</b>	<b>152,614</b>	<b>165,046</b>	<b>169,475</b>	<b>158,102</b>	<b>166,969</b>	<b>202,603</b>	<b>2,026,689</b>
24	Net cash inflow/outflow	(373)	547	971	(492)	5,270	(3,770)	164	1,521	(59)	(1,101)	(1,642)	(1,101)	
25	Balance b/f	2,846	2,473	3,019	3,990	3,498	8,768	4,998	5,162	6,683	6,624	5,523	3,881	
26	Balance c/f	2,473	3,019	3,990	3,498	8,768	4,998	5,162	6,683	6,624	5,523	3,881	2,780	

Prepared by: Nathan  
17/05/2024 20:11:05

## THE WELSH GOVERNMENT FINANCIAL COMMENTARY

### FINANCIAL POSITION FOR THE ONE MONTH PERIOD ENDED 30<sup>th</sup> APRIL 2024

#### INTRODUCTION

The Health Board submitted an initial draft financial plan to Welsh Government at the end of March 2024. The draft plan incorporated: -

- Brought forward underlying deficit of £60.9m
- 2024/25 Demand and cost growth and unavoidable investments of £45.4m
- Additional Allocations of £37.3m
- Anticipated pass-through funding on Long Term Agreements of £5.9m (3.67%)
- A £47.2m Savings programme

This results in a 2024/25 planning deficit of £15.9m.

The draft plan assumes that the 2024/25 cost of the RLW, being paid to staff directly employed by the UHB will be funded through the 2024-25 pay award funding in addition to non recurrent funding for the impact of the policy on the social/third sector.

**At month 1 the UHB is reporting an overspend of £4.267m.**

**This is comprised of £2.445m unidentified savings, £0.497m of operational overspend and the planned deficit of £1.325m (one twelfth of the annual planned deficit of £15.9m set out in 2024-25 draft financial plan approved by the UHB Board and submitted to Welsh Government.).**

#### BACKGROUND

The Board agreed and submitted a draft financial plan to Welsh Government at the end of March 2024. A summary of the draft financial plan submitted is provided in Table 1.

**Table 1: 2024/25 Draft Plan**

	£m	
	2024/25	2025/26
Planned Opening Deficit	16.5	15.9
Non Recurrent Welsh Government (WG) Funding 2023/24	17.2	
Shortfall on 2023/24 Recurrent Savings	15.2	
Recurrent Operational Pressures	12.0	
Estimated Demand growth / Inflationary Pressures	40.4	40.0
Essential service investments	5.0	5.0
<b>Gross Deficit £m</b>	<b>106.3</b>	<b>60.9</b>
WG Core Uplift	(37.3)	(24.0)
WG Core Uplift - pass through funding on LTAs	(5.9)	(36.9)
Savings Target	(47.2)	
<b>Planned Financial Position £m</b>	<b>15.9</b>	<b>0.0</b>

This represents the draft financial plan of the Health Board.

These financial monitoring returns have been prepared within the framework of the UHB's submitted Draft Financial Plan, which includes a planning deficit of £15.9m for 2024-25. This report details the financial position of the UHB for the period ended 30<sup>th</sup> April 2024.

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

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

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

- The UHB's 47.2m 2024/25 savings target is reported on lines 8 & 9;
- It is assumed that LTA inflation of £5.9m (3.67%) will be passed to the UHB from other Health Boards;
- The bought forward underlying deficit is £60.9m as outlined in the draft financial plan.

The identification and delivery of the £47.2m 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 financial 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 £4.267m and reflects the analysis contained in the annual operating plan in Table A. The UHB is reporting a deficit of £4.267m for the year to date and a forecast deficit of £15.900m as shown in Table 2.

**Table 2: Summary Financial Position for the period ended 30<sup>th</sup> April 2024**

	Month 1 Position £m	Forecast Year- End Position £m
Planned deficit	1.325	15.900
Savings Programme	2.445	0.000
Operational position (Surplus) / Deficit	0.497	0.000
<b>Financial Position £m (Surplus) / Deficit £m</b>	<b>4.267</b>	<b>15.900</b>

The month 1 deficit of £4.267m comprised of the following:

- £1.325m planned deficit
- £2.445m unachieved CRP gap
- £0.497m adverse variance against plan.

It is anticipated that the adverse operational variance of £0.497m and unachieved CRP gap at month 1 can be recovered as the year progresses and that the UHB will deliver its planned deficit position of £15.900m.

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

The UHB plan provides funding to cover both inflationary pressures incurred in 2023/24 and COVID consequential costs predominately relating to an increased bed base including Lakeside Wing. Further operational pressures were reported against medical staff budgets, continuing healthcare and drug prescribing in month 1 and progress in managing these costs will be closely monitored as the year progresses.

## PAY & AGENCY (TABLE B2)

The UHB recorded Agency costs of £0.681m in month primarily due to nursing pressures. £0.524m of the costs recorded in April related to registered nursing and midwifery.

## COVID 19 ANALYSIS (TABLE B3)

At month 1, Table B3 reported forecast outturn expenditure due to COVID-19 to be £10.184m. This includes expenditure related to the Covid funding for Health Protection and PPE (£9.040m) and Long Covid (£1.144m) allocations.

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

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

	Month 1 £m	Forecast £m	Funded by WG £m	Variance to Plan/Funding £m
Health Protection/Vaccination & PPE	0.753	9.040	9.040	0.000
Long Covid	0.095	1.144	1.144	0.000
<b>Sub Total WG Funded Covid Expenditure £m</b>	<b>0.849</b>	<b>10.184</b>	<b>10.184</b>	<b>0.000</b>

The UHB forecast is in line with the confirmed Welsh Government COVID Funding totaling £10.184m.

## Savings Programme 2024-25 (TABLE C, C1, C2, C3 & C4)

At month 1, the UHB had identified £18.181m (38.5%) of savings to deliver against the £47.3m savings target leaving a further £29.119m schemes unidentified. In addition, a further £9.144m of red schemes were identified.

Overall performance in the identification of savings schemes (including red schemes) is outlined in table 4 below:

**Table 4: Savings Schemes**

	Total Savings Target £m	Total Savings Identified £m	Total Savings (Unidentified) £m
Total Identified Savings (green, amber & red) £m	47.200	27.325	(19.875)

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

## INCOME/EXPENDITURE ASSUMPTIONS (TABLE D)

NHS organisations are expected to have concluded discussions and signed contracts (Long Term Agreements and Service Level Agreements) between each other by the end of June 2024. Failure to do so obliges parties to submit arbitration briefs to Welsh Government to deliberate on and make a ruling.

The UHB's Financial Plan was based on the clear planning instructions from Welsh Government that all LTAs and SLAs should reflect uplifts in line with the general 2024-25 funding uplift provided in the 2024-25 Allocation Letter of 3.67%. This uplift was reflective of the increased cost of providing healthcare and delivering services by provider organisations.

The UHB has received offers, from a number of commissioners, which offer a lower percentage uplift than 3.67%. Commissioners have suggested that Cardiff and Vale UHB should provide additional activity and services if the UHB wishes to increase its overall income by 3.67%.

The current range of offers from commissioners could cause up to a £5.274m shortfall in the income anticipated in the UHB Financial Plan approved by the UHB Board.

The Director of Finance is currently engaged in discussions with commissioner organisation colleagues to resolve this issue. Failure to resolve this disagreement may oblige the UHB to pursue the Welsh Government arbitration process. This places the UHB at risk of a potential adverse judgment that would impact its Financial Plan by up to £5.274m.

## INCOME ASSUMPTIONS 2024/25 (TABLE E)

Table E outlines the UHB's 2024/25 resource limit.

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

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

## AGED WELSH NHS DEBTORS (TABLE M)

At the 30<sup>th</sup> April 2024 there was 1 invoice raised by the UHB against other Welsh NHS bodies which had been outstanding for more than 17 weeks. This is now scheduled for payment.

## PUBLIC SECTOR PAYMENT PERFORMANCE

The UHB's public sector payment compliance performance is above the target of 95%. Performance for the month to the end of April was 97.6%

## 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 22<sup>nd</sup> May 2024 meeting of the Finance Committee for information.

## CONCLUSION

The UHB submitted a draft financial plan at the end of March 2024 which included a forecast deficit of £15.900m.

The UHB is committed to achieving in year and recurrent financial balance as soon as possible. The UHB currently has a draft financial plan for 2024-25 which aims to deliver financial stability and ensure that the underlying position is maintained. The plan includes a savings target of £47.2m.

The reported financial position for the first month is a reported overspend of £4.267 which is £2.942m above the £1.325m straight line profile of the planned deficit.



.....  
**SUZANNE RANKIN**  
**CHIEF EXECUTIVE**

14<sup>th</sup> May 2024



.....  
**CATHERINE PHILLIPS**  
**EXECUTIVE DIRECTOR OF**  
**FINANCE**

14<sup>th</sup> May 2024

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													YTD	In Year Effect	
	£'000	£'000	£'000	£'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			£'000
1 Underlying Position b/fwd from Previous Year - must agree to M12 MMR (Deficit - Negative Value)	-60,900	0	-60,900	-60,900	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-5,075	-60,900
2 Cost Pressures (Non Covid-19) (Negative Value)	-45,400	-45,400			-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-3,783	-45,400
3 Planned Expenditure For Covid-19 (Negative Value)	-10,184	-10,184			-822	-822	-848	-837	-837	-837	-837	-882	-882	-882	-849	-850	-822	-10,184	
4 Allocation Letter Revenue Funding Uplift / (Reduction)/ WG RRL / WG Income Uplift / (Reduction/ Non-Covid)	37,300	37,300			3,108	3,108	3,108	3,108	3,108	3,108	3,108	3,108	3,108	3,108	3,108	3,108	3,108	37,300	
5 Planned Welsh Government Funding for Covid-19 (Positive Value)	10,184	10,184			822	822	848	837	837	837	837	882	882	882	849	850	822	10,184	
6 Other Income Uplift / (Reduction)	5,900	5,900			492	492	492	492	492	492	492	492	492	492	492	492	492	5,900	
7 RRL Profile - phasing only (In Year Effect / Column C must be nil)	0	0	0	0	3,031	121	-267	-105	-638	-289	-422	-236	-237	-233	-233	-493	3,031	0	
8 Planned (Finalised) Green and Amber Savings Plan	16,973	8,503	8,469	9,927	864	1,058	1,446	1,284	1,817	1,468	1,470	1,463	1,464	1,459	1,460	1,720	864	16,973	
9 Planned (Finalised) Net Income Generation	592	477	116	121	38	60	60	60	60	60	191	12	12	12	12	12	38	592	
10 Planned Profit / (Loss) on Disposal of Assets	0	0	0	0														0	
11 Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0	0	0														0	
12	0	0	0	0														0	
13 Red, Pipeline and Planning Assumption Savings still to be finalised at Month 1	29,635	29,635				2,694	2,694	2,694	2,694	2,694	2,694	2,694	2,694	2,694	2,694	2,694	2,694	0	
14 <b>Opening IMTP / Annual Operating Plan</b>	<b>-15,900</b>	<b>36,415</b>	<b>-52,315</b>	<b>-50,852</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-1,325</b>	<b>-15,900</b>	
15 Reversal of Red, Pipeline and Planning Assumption Savings still to be finalised at Month 1	-29,635	-29,635	0	0	0	-2,694	-2,694	-2,694	-2,694	-2,694	-2,694	-2,694	-2,694	-2,694	-2,694	-2,694	-2,694	0	
16 Additional In Year & Movement from Planned Release of Previously Committed Contingencies & Reserves (Positive Value)	0	0	0	0														0	
17 Additional In Year & Movement from Planned Profit / (Loss) on Disposal of Assets	0	0	0	0														0	
18 Other Movement in Month 1 Planned & In Year Net Income Generation	0	0	0	0	0	2	2	2	2	2	-2	-2	-2	-2	-2	-2	-2	0	
19 Other Movement in Month 1 Planned Savings - (Underachievement) / Overachievement	39	45	-6	-458	25	35	5	5	-1	-1	-5	-5	-5	-5	-5	-5	25	39	
20 Additional In Year Identified Savings - Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21 Variance to Planned RRL & Other Income	0	0	0	0														0	
22 Additional In Year & Movement in Planned Welsh Government Funding for Covid-19 plus virements (Positive Value - additional)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23 Additional In Year & Movement in Planned Welsh Government Funding (Non Covid) (Positive Value - additional)	0	0	0	0														0	
24 Additional In Year & Movement Expenditure for Covid-19 (Negative Value - additional/Positive Value - reduction)	0	0	0	0														0	
25 In Year Accountancy Gains (Positive Value)	150	0	0	0	13	13	13	13	13	13	13	13	13	13	13	13	13	150	
26 Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	29,447	29,447			-2,980	2,912	2,942	2,942	2,948	2,948	2,956	2,956	2,956	2,956	2,956	2,956	-2,980	29,447	
27	0	0	0	0														0	
28	0	0	0	0														0	
29	0	0	0	0														0	
30	0	0	0	0														0	
31	0	0	0	0														0	
32	0	0	0	0														0	
33	0	0	0	0														0	
34	0	0	0	0														0	
35	0	0	0	0														0	
36	0	0	0	0														0	
37	0	0	0	0														0	
38	0	0	0	0														0	
39	0	0	0	0														0	
40 <b>Forecast Outturn (- Deficit / + Surplus)</b>	<b>-15,900</b>	<b>36,271</b>	<b>-52,321</b>	<b>-51,311</b>	<b>-4,267</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-1,058</b>	<b>-4,267</b>	<b>-15,900</b>	

Submitted by Nathan  
 17/07/2024 20:11:05

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

This Table is currently showing 0 errors

1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY YTD variance as %age of YTD	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000		
															Green	Amber	non recurring	recurring			
															£'000	£'000	£'000	£'000			
1	Pay	Budget/Plan	408	500	511	584	754	708	703	696	696	692	692	692	408	7,637	0	1,329			
2		Actual/F'cast	458	504	515	588	752	706	701	694	694	690	690	690	458	7,681	5.96%	6,299	1,383	3,624	4,058
3		Variance	49	4	4	4	(2)	(2)	(2)	(2)	(2)	(2)	(2)	(2)	49	45	12.12%	6,299	54		
4	Non-Pay	Budget/Plan	295	359	734	498	648	515	523	523	523	523	523	523	295	6,448		4,890	1,557		
5		Actual/F'cast	274	387	735	500	650	517	520	520	520	521	521	521	274	6,448	4.26%	4,890	1,557	4,415	2,033
6		Variance	(21)	28	2	2	2	2	(3)	(3)	(2)	(2)	(2)	(2)	(21)	(0)	(7.03%)	0	0		
7	Primary Care - Drugs & Appliances	Budget/Plan	98	98	98	98	98	98	98	98	98	98	98	98	98	1,178		678	500		
8		Actual/F'cast	98	98	98	98	98	98	98	98	98	98	98	98	98	1,178	8.33%	678	499	0	1,178
9		Variance	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(2)	(0.20%)	-2	-1		
10	Secondary Care Drugs	Budget/Plan	17	56	56	56	56	56	56	56	56	56	56	56	17	635		635	0		
11		Actual/F'cast	14	56	56	56	56	56	56	56	56	56	56	56	14	632	2.23%	632	0	0	632
12		Variance	(3)	0	0	0	0	0	0	0	0	0	0	0	(3)	(3)	(19.14%)	-3	0		
13	CHC/FNC	Budget/Plan	45	45	48	48	260	90	90	90	90	90	90	90	45	1,075		200	875		
14		Actual/F'cast	45	47	47	47	260	90	90	90	90	90	90	90	45	1,075	4.19%	200	875	510	565
15		Variance	0	2	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	0	(0)	0.00%	0	0		
16	Primary Care Contractor	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
17		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
19	Healthcare Services Provided by Other Healthboards	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
20		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
22	Non-healthcare Services Provided by Other Healthboards	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
23		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
24		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
25	Other Private & Voluntary Sector	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
26		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
27		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
28	Joint Financing & Other	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
29		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0
30		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
34	Total	Budget/Plan	864	1,058	1,446	1,284	1,817	1,468	1,470	1,463	1,464	1,459	1,460	1,720	864	16,973		6,404	0		
35		Actual/F'cast	889	1,093	1,452	1,289	1,816	1,467	1,465	1,458	1,459	1,455	1,455	1,715	889	17,012		12,697	4,314	8,548	8,464
36		Variance	25	35	5	5	(1)	(1)	(5)	(5)	(5)	(5)	(5)	(5)	25	39		6,294	4,314		
37	Variance in month		2.92%	3.30%	0.37%	0.42%	(0.05%)	(0.06%)	(0.34%)	(0.35%)	(0.34%)	(0.34%)	(0.34%)	(0.29%)	2.92%						
38	In month achievement against FY forecast		5.23%	6.42%	8.53%	7.58%	10.67%	8.62%	8.61%	8.57%	8.58%	8.55%	8.55%	10.08%							

Saunders Nathan  
17/05/2024 20:11:05

Table C1- Savings Schemes Pay Analysis

1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY		Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000												
														Apr £'000	May £'000	Jun £'000	Jul £'000	Aug £'000	Sep £'000		Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	YTD variance as %age of YTD Budget/Plan	Full-year forecast	Green	Amber	non recurring	recurring
																													£'000	£'000	£'000	£'000
Changes in Staffing Establishment	Budget/Plan	245	92	195	195	195	195	626	626	626	626	625	4,873	4,873			4,873	0														
	Actual/F'cast	245	237	181	196	280	284	656	493	919	706	705	5,608	5,608	100.00%	5,608	0	512	5,096	5,296												
	Variance	0	145	(14)	1	85	89	30	(133)	293	80	80	735	735	15.07%	735	0															
Variable Pay	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0			0	0														
	Actual/F'cast	0	0	0	9	6	130	49	57	289	121	112	106	878	878	100.00%	878	0	878	0	0											
	Variance	0	0	0	9	6	130	49	57	289	121	112	106	878	878		878	0														
Locum	Budget/Plan	0	0	0	0	25	25	25	0	0	0	0	0	75	75		75	0														
	Actual/F'cast	0	0	8	21	41	46	12	53	(32)	11	11	11	180	180	100.00%	180	0	85	95	200											
	Variance	0	0	8	21	16	21	(13)	53	(32)	11	11	11	105	105	140.07%	105	0														
Agency / Locum paid at a premium	Budget/Plan	0	376	237	237	237	237	237	237	237	237	237	2,746	2,746			2,746	0														
	Actual/F'cast	0	376	66	165	595	492	1,412	690	687	876	712	803	6,874	6,874	100.00%	6,874	0	4,380	2,494	3,161											
	Variance	0	0	(171)	(72)	358	255	1,175	453	450	639	475	566	4,128	4,128	150.33%	4,128	0														
Changes in Bank Staff	Budget/Plan	0	0	19	19	19	19	19	19	19	19	19	190	190			190	0														
	Actual/F'cast	0	0	19	19	19	19	19	19	19	19	19	190	190	100.00%	190	0	0	190	190												
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00%	0	0															
Other (Please Specify)	Budget/Plan	6	6	6	6	6	6	6	6	6	6	6	72	72			72	0														
	Actual/F'cast	6	20	12	16	29	178	58	1,610	800	690	690	789	4,899	4,899	100.00%	4,899	0	4,867	32	186											
	Variance	0	14	6	10	22	173	52	1,604	794	684	684	783	4,827	4,827	6657.90%	4,827	0														
Total	Budget/Plan	251	474	457	457	482	482	913	888	888	888	887	7,957	7,957			7,957	0														
	Actual/F'cast	251	633	287	425	970	1,150	2,206	2,923	2,681	2,423	2,249	2,432	18,630	18,630	100.00%	18,630	0	10,721	7,908	9,032											
	Variance	0	159	(170)	(32)	487	668	1,293	2,035	1,793	1,535	1,360	1,545	10,673	10,673	134.13%	10,673	0														

Saunders Nathan  
17/05/2024 20:11:05

Table C1- Savings Schemes Pay Analysis

	Month		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			Green	Amber	non recurring	recurring	
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000			£'000	£'000	£'000	£'000	
1	Budget/Plan		167	185	194	202	373	373	368	361	361	357	357	357	167	3,653	0	98			
2	Pay - General & Substantive	Actual/F'cast	167	189	198	207	371	371	366	359	359	354	354	354	167	3,649	3,551	98	403	3,246	3,989
3		Variance	0	4	4	4	(2)	(2)	(2)	(2)	(2)	(2)	(2)	(2)	0	(5)	3550.774467	0			
4	Budget/Plan		241	315	317	381	381	335	335	335	335	335	335	335	241	3,983	0	1,231			
5	Pay - Variable	Actual/F'cast	291	315	317	381	381	335	335	335	335	335	335	335	291	4,033	2,748	1,285	3,220	812	812
6		Variance	49	0	0	0	0	0	0	0	0	0	0	0	49	49	2,748	54			
7	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
8	Pay - Agency	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
10	Budget/Plan		408	500	511	584	754	708	703	696	696	692	692	692	408	7,637	0	1,329			
11	Total	Actual/F'cast	458	504	515	588	752	706	701	694	694	690	690	690	458	7,681	6,299	1,383	3,624	4,058	4,802
12		Variance	49	4	4	4	(2)	(2)	(2)	(2)	(2)	(2)	(2)	(2)	49	45	6,299	54			

Table C2- V&S Saving Categories

	Month		1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
1	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	Workforce	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4	Budget/Plan		116	154	154	154	154	154	154	154	154	154	154	154	116	1,813
5	Medicines Management	Actual/F'cast	112	154	154	154	154	154	154	154	154	154	154	154	112	1,808
6		Variance	(4)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(4)	(6)
7	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0
8	Procurement & Non-pay	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	CHC	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Pathway	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	Other - Commissioning	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19	Budget/Plan		0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	Other - Primary Care	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	Budget/Plan		116	154	154	154	154	154	154	154	154	154	154	154	116	1,813
23	Total	Actual/F'cast	112	154	154	154	154	154	154	154	154	154	154	154	112	1,808
24		Variance	(4)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(0)	(4)	(6)

Saunders Nathan  
17/05/2024 20:11:05

This Table is currently showing 0 errors

Table C3 - Tracker

E000		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Full-year Forecast	Non Recurring	Recurring	FYE Adjustment	Full-year Effect		
Savings (Cash Releasing & Cost Avoidance)	Month 1 - Plan	864	1,058	1,448	1,284	1,817	1,468	1,471	1,462	1,464	1,465	1,465	1,465	1,720	864	16,937	8,553	8,484	1,458	9,927	
	Month 1 - Actual/Forecast	869	1,052	1,452	1,289	1,816	1,467	1,465	1,458	1,459	1,459	1,459	1,459	1,715	869	17,072	8,546	8,484	1,259	9,489	
	Variance	-5	6	-4	-5	-1	-1	-1	-1	-1	-1	-1	-1	-1	-5	-106	-1	-1	199	538	
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Net Income Generation	Month 1 - Plan	38	80	80	80	80	80	80	80	80	80	80	80	80	38	38	38	38	38	38	38
	Month 1 - Actual/Forecast	38	80	80	80	80	80	80	80	80	80	80	80	80	38	38	38	38	38	38	38
	Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accountancy Gains	Month 1 - Plan	902	1,118	1,508	1,344	1,877	1,528	1,531	1,478	1,478	1,478	1,478	1,478	1,478	902	17,581	8,589	8,578	1,483	10,548	
	Month 1 - Actual/Forecast	927	1,105	1,514	1,351	1,878	1,529	1,532	1,480	1,479	1,480	1,480	1,480	1,728	927	17,697	8,592	8,579	1,978	9,589	
	Variance	25	-13	6	7	1	1	1	-2	-1	-2	-2	-2	25	25	116	-1	495	435	900	
	In Year - Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	In Year - Actual/Forecast	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Total</b>	<b>Month 1 - Plan</b>	<b>942</b>	<b>1,138</b>	<b>1,536</b>	<b>1,364</b>	<b>1,894</b>	<b>1,556</b>	<b>1,552</b>	<b>1,478</b>	<b>1,478</b>	<b>1,478</b>	<b>1,478</b>	<b>1,478</b>	<b>942</b>	<b>17,641</b>	<b>8,592</b>	<b>8,581</b>	<b>1,483</b>	<b>10,548</b>		
<b>Month 1 - Actual/Forecast</b>	<b>967</b>	<b>1,125</b>	<b>1,542</b>	<b>1,351</b>	<b>1,894</b>	<b>1,555</b>	<b>1,555</b>	<b>1,480</b>	<b>1,479</b>	<b>1,480</b>	<b>1,480</b>	<b>1,480</b>	<b>1,728</b>	<b>967</b>	<b>17,804</b>	<b>8,595</b>	<b>8,579</b>	<b>1,978</b>	<b>9,589</b>		
<b>Variance</b>	<b>25</b>	<b>-13</b>	<b>6</b>	<b>-13</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>-1</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>25</b>	<b>25</b>	<b>112</b>	<b>-1</b>	<b>495</b>	<b>435</b>	<b>941</b>		
<b>In Year - Plan</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		
<b>In Year - Actual/Forecast</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>		

Summary of Forecast Month 1 & In Year (E000's) - Green & Amber	Cash-Releasing Saving (Pay)	Cash-Releasing Saving (Non Pay)	Cost Avoidance	Savings Total	Income Generation	Accountancy Gains
All Service Areas	0	0	0	0	0	0
Scheduled Care	0	0	0	0	0	0
Unscheduled Care	0	0	0	0	0	0
Mental Health	0	0	0	0	0	0
Community Services	0	0	0	0	0	0
Primary Care	0	0	0	0	0	0
Commissioned Services - CHC	0	0	0	0	0	0
Commissioned Services - Specialised Services	0	0	0	0	0	0
Other Commissioned Services	0	0	0	0	0	0
Clinical Support	0	0	0	0	0	0
Non Clinical Support	0	0	0	0	0	0
Executive / Corporate Areas	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Saunders Nathan  
17/05/2024 20:11:05