

2015/16 Financial Performance—November 2015

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Trust Board paper S

Executive Summary

Context

The Trust is planning for a deficit of £34.1m in 2015/16 following a request from the NTDA to improve the deficit by £2m. In addition to the above, the Department of Health has issued guidance on the limits to nurse agency spend from Quarter 3 onwards.

Questions

1. What is our financial performance YTD?
2. What is our performance against the nurse agency ceiling guidance?
3. How will we deliver the planned deficit?
4. What are the risks to delivery?

Conclusion

1. YTD, the Trust has a deficit of £31.0m compared to a planned deficit of £29.3m, therefore we are £1.7m adverse to plan
2. From October onwards, we were required to measure performance against the qualified nurse agency ceiling. In November, our qualified nurse agency spend was 5.4% of total qualified nursing spend against a target of 4%. There was no use of off framework agencies
3. All CMGs and Directorates have agreed control totals that collectively deliver the planned deficit. This requires a reduction to the current run rate and actions are in place to support this. In addition, four CMGs require additional support in order to achieve their control totals
4. The most significant risks to delivery include the continuation of the current run rate, management of emergency activity over winter and settlement of income with commissioners
5. This paper has been considered by the Integrated Finance, Performance & Investment Committee (17th December 2015).

Input Sought

1. **Note** the financial performance at Month 8

2. **Note** the mechanism for the delivery of the forecast
3. **Note** the risks to the delivery of the forecast

For Reference

Edit as appropriate:

1. The following objectives were considered when preparing this report:

Safe, high quality, patient centred healthcare	[Yes / No / Not applicable]
Effective, integrated emergency care	[Yes / No / Not applicable]
Consistently meeting national access standards	[Yes / No / Not applicable]
Integrated care in partnership with others	[Yes / No / Not applicable]
Enhanced delivery in research, innovation & ed'	[Yes / No / Not applicable]
A caring, professional, engaged workforce	[Yes / No / Not applicable]
Clinically sustainable services with excellent facilities	[Yes / No / Not applicable]
Financially sustainable NHS organisation	[Yes / No / Not applicable]
Enabled by excellent IM&T	[Yes / No / Not applicable]

2. This matter relates to the following governance initiatives:

Organisational Risk Register	[Yes /No / Not applicable]
Board Assurance Framework	[Yes / No / Not applicable]

3. Related Patient and Public Involvement actions taken, or to be taken: Not applicable

4. Results of any Equality Impact Assessment, relating to this matter: Not applicable

5. Scheduled date for the next paper on this topic: 04/02/2016

6. Executive Summaries should not exceed 1 page. [My paper does ~~/does not~~ comply]

7. Papers should not exceed 7 pages. [My paper ~~does~~ / does not comply]

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

DATE: 7TH JANUARY 2016

REPORT FROM: PAUL TRAYNOR – CHIEF FINANCIAL OFFICER

SUBJECT: 2015/16 FINANCIAL PERFORMANCE – NOVEMBER 2015 (MONTH 8)

1. INTRODUCTION AND CONTEXT

1.1. This paper provides the Trust Board with an update on performance against the Trust's key financial duties, namely:

- Delivery against the planned deficit
- Achieving the External Financing Limit (EFL)
- Achieving the Capital Resource Limit (CRL)

1.2. The paper provides further commentary on financial performance by the CMGs and Corporate Directorates, risks and assumptions and makes recommendations on actions.

1.3. The financial plan was re-submitted to the NTDA on 11th September 2015. All figures are reported compared to this revised plan.

2. KEY FINANCIAL DUTIES

2.1. The following table summarises the year to date (YTD) position as at the end of November and full year forecast against the financial duties of the Trust:

Financial Duty	Year to date Plan £m	Year to date Actual £m	RAG	Full Year Plan £m	Full Year Actual £m	RAG
Delivering the Planned Deficit	(29.3)	(31.0)	A	(34.1)	(34.1)	A
Achieving the EFL	37.7	32.3	A	49.2	49.2	A
Achieving the Capital Resource Limit	33.5	24.2	A	49.2	49.2	A

2.2 We are permitted to underspend against the EFL. We are underspent against the EFL plan due to a net increase in payables on the balance sheet which has reduced the requirement for external financing. We expect to achieve the full year EFL.

2.3 Key Statements

- In month adverse variance to plan of £0.7m
- Year to date (YTD) adverse variance to plan of £1.7m, a deficit YTD of £31.0m
- In month CIP over-delivery of £0.2m resulting in a year to date CIP delivery position of £27.3m, £1.3m adverse to plan
- Capital spend YTD is £24.2m against a plan of £33.5m

3. FINANCIAL POSITION AS AT END OF NOVEMBER 2015 COMPARED TO PLAN

3.1 In month, the Trust is reporting an I&E deficit of £3.0m compared to an in month plan of £2.3m deficit so is £0.7m adverse to plan in month. The key drivers to this performance are:

- Patient care income is £0.7m below plan. Under-performance within emergency activity (£0.3m), non-elective activity (£0.4m) and elective work (£0.9m) is partially offset by 'pass through' income streams relating to the new 'front door' arrangements and over-performance within excluded drugs and devices
- The under-performance within non-elective and elective activity is causing financial pressures within RRCV, MSS and Women's & Children's. The latter two CMGs being impacted by the increased levels of cancelled operations that are almost three times higher than the normal monthly levels
- The under-performance within emergency activity is causing financial pressures within ESM, and although activity has been high within the month, it has not been as high as planned
- Pay controls continue their trend from the prior month and continue to be exercised effectively. The over-spend within the month is being compensated for by 'pass-through' income streams within patient care and other income. The performance against the nursing agency cap is 5.4% against the prior month performance of 5.6% and a cap of 4%
- The non-pay overspend relates to elective care outsourcing work with the independent spend within Endoscopy (CHUGGS) and Orthopaedics (MSS)
- CIP has over-delivered within the month by £0.2m against a planned level of £3.9m

3.2 The position above has created the need for additional review and support to four CMGs to ensure the achievement of their year-end control totals:

- RRCV - The in-month financial pressure for RRCV is primarily related to a lower than planned level of activity from specialised commissioners. The potential of a year-end agreement will mitigate this impact and any further deterioration against the control total
- ESM – The in-month financial pressure for ESM is primarily related to a lower than planned level of emergency activity. Although these activity levels are significantly higher than prior year comparatives, they are lower than the CMG had planned for. Changes to the 'front door' are forecast to create significant cost pressures within the CMG and a review of these investments and associated income flows (i.e. Vanguard funds) will be required to ensure the CMG can achieve their control total. This is, of course, in the context of the recent CQC visit and improvement requirements
- Women's & Children's – The in-month financial pressure for W&C is primarily related to lower than planned income coupled with cost pressures associated with additional staffing levels over and above planned levels. The potential year-end agreement with specialised commissioners will mitigate some of this pressure but a focused piece of work around staffing levels is required

- MSS – The in-month financial pressure for MSS is primarily related to lower than planned elective work due to higher levels of cancelled operations compounded by the continued usage of the independent sector. Mitigation strategies of delivering more activity within the same or smaller cost base will be explored to ensure achievement of the year-end control total

3.3 YTD, the Trust is reporting an I&E deficit of £31.0m compared to a plan of £29.3m, so is £1.7m adverse to the plan, as per Table 1. Also included is the forecast outturn.

3.4 Detail of the income and expenditure position can be seen in Appendix 1 along with the YTD position by CMG and Directorate in Appendix 2.

Table 1: Income & Expenditure Position

	November 2015			April - November 2015			Year End Forecast		
	Plan £m	Actual £m	Var (Adv) / Fav £m	Plan £m	Actual £m	Var (Adv) / Fav £m	Plan £m	Forecast £m	Var (Adv) / Fav £m
Income									
Patient income	62.1	61.4	(0.7)	487.2	486.4	(0.8)	736.6	742.4	5.8
Teaching, R&D	4.4	4.1	(0.3)	51.5	51.9	0.4	77.3	78.2	1.0
Other operating Income	5.3	6.2	0.9	25.4	26.4	1.0	38.5	39.9	1.3
Total Income	71.8	71.7	(0.1)	564.1	564.7	0.7	852.4	860.5	8.1
Operating expenditure									
Pay	(42.7)	(43.0)	(0.3)	(341.8)	(342.8)	(0.9)	(512.5)	(514.3)	(1.7)
Non-pay	(27.5)	(27.8)	(0.3)	(221.1)	(223.1)	(2.0)	(328.2)	(334.4)	(6.1)
Total Operating Expenditure	(70.2)	(70.8)	(0.6)	(562.9)	(565.9)	(3.0)	(840.8)	(848.6)	(7.9)
EBITDA	1.6	0.8	(0.7)	1.1	(1.2)	(2.3)	11.6	11.8	0.2
Net interest	(0.1)	(0.1)	0.0	(0.9)	(0.7)	0.2	(1.4)	(1.6)	(0.2)
Depreciation	(2.8)	(2.8)	(0.0)	(22.2)	(21.6)	0.6	(33.5)	(33.1)	0.3
Profit / (loss) of disposal of fixed asset	0.0	0.0	0.0	(0.0)	(0.0)	0.0	(0.0)	(0.0)	-
PDC dividend payable	(1.0)	(1.0)	-	(7.7)	(7.7)	(0.0)	(11.5)	(11.5)	(0.0)
Net deficit	(2.3)	(3.0)	(0.7)	(29.7)	(31.2)	(1.5)	(34.8)	(34.4)	0.3
EBITDA %		1.2%			-0.2%			1.4%	
Adjustments for donated assets	0.1	0.1	(0.0)	0.4	0.2	(0.2)	0.6	0.3	(0.3)
RETAINED SURPLUS / (DEFICIT)	(2.3)	(3.0)	(0.7)	(29.3)	(31.0)	(1.7)	(34.1)	(34.1)	(0.0)

3.5 The key statements to highlight YTD are:

- **Income**, £0.1m adverse to plan in month, £0.7m favourable to plan YTD
- **Pay costs**, £0.3m adverse to plan in month, £0.9m adverse to plan YTD
- **Non pay costs**, £0.3m adverse to plan in month, £2.0m adverse to plan YTD
- **Financing costs and donated assets adjustment**, in line with plan in month, £0.6m favourable to plan YTD

3.6 The **in month position** may be analysed as follows:

Income

3.7 Patient care income is £0.7m adverse to plan in month. This is made up as follows:

- Emergency activity £0.3m adverse to plan. Although activity is high, it is less than the growth planned for
- Elective activity £0.9m adverse to plan of which £0.5m relates to in-month cancelled operations
- Renal transplant and dialysis £0.2m adverse to plan
- ECMO £0.2m adverse to plan
- Items of income for which there is an offset within expenditure:

- New front door - £0.4m
- Excluded drugs and devices - £0.4m

3.8 Table 2 details the activity and £s variances by point of delivery YTD.

Table 2: Activity and Income by Point of Delivery

Case mix	Plan to Date (Activity)	Total YTD (Activity)	Variance YTD (Activity)	Variance YTD (Activity %)	Plan to Date (£000)	Total YTD (£000)	Variance YTD (£000)	Variance YTD (Activity %)
Day Case	66,300	66,187	(113)	(0.17)	37,723	37,628	(95)	(0.25)
Elective Inpatient	14,993	14,631	(362)	(2.42)	48,538	47,891	(647)	(1.33)
Emergency / Non-elective Inpatient	72,027	71,470	(557)	(0.77)	124,549	123,466	(1,083)	(0.87)
Marginal Rate Emergency Threshold (MRET)	0	0	0	0.00	(4,134)	(4,185)	(51)	1.24
Outpatient	603,795	597,383	(6,411)	(1.06)	74,113	74,245	131	0.18
Emergency Department	103,942	105,450	1,508	1.45	12,761	12,962	200	1.57
Penalties	0	0	0	0.00	0	0	0	0.00
Other	5,785,767	5,654,062	(131,705)	(2.28)	193,640	194,409	769	0.40
Grand Total	6,646,824	6,509,183	(137,641)	(2.07)	487,190	486,414	(776)	(0.16)

3.9 Table 3 below shows the current over-performance of patient care income by commissioner. This shows local CCG activity as significantly over plan offset with under-performance on the NHSE specialised contract.

Table 3: Income Position by Commissioner

	Plan to Date M8	Actual to Date M8	Variance to Date
LLR CCGs Acute Contract	£289.1m	£290.6m	£1.5m
NHSE Acute Contract	£147.8m	£144.4m	(£3.4m)
Other	£46.6m	£47.1m	£0.5m
Grand Total	£483.5m	£482.1m	(£1.4m)

3.10 Other operating income is £0.6m better than plan due to services provided to other Trusts, mainly recharges of staff and Pathology, £0.3m. In addition, charges raised to the University for utilities, car parking and space are £0.3m.

4. EXPENDITURE

4.1 Operating expenditure is £0.6m adverse to plan in month and £3.0m adverse to plan YTD.

4.2 Cost Improvement Programme

Table 4 below details the performance of the CIP programme compared to plan.

Overall, the Trust has delivered £4.1m of its £3.9m CIP plan in month, so is £0.2m ahead of plan. YTD, the Trust has delivered £27.3m of the £28.6m plan so is £1.3m behind plan.

Table 4: CIP Performance Compared to Plan

£000s	Month 8			YTD at Month 8			FOT		
	FYE of 1415 schemes	New 1516 schemes	Total	FYE of 1415 schemes	New 1516 schemes	Total	FYE of 1415	New 1516	Total
Plan	202	3,670	3,872	1,967	26,607	28,574	2,770	40,230	43,000
Actual	212	3,858	4,070	2,198	25,072	27,270	2,766	39,707	42,473
Variance	10	188	198	231	(1,535)	(1,304)	(4)	(523)	(527)

4.3 The specific CIP paper provides further detail on CIP performance.

Pay

4.4 Pay costs are £0.3m adverse to plan in month and £0.9m adverse to plan YTD.

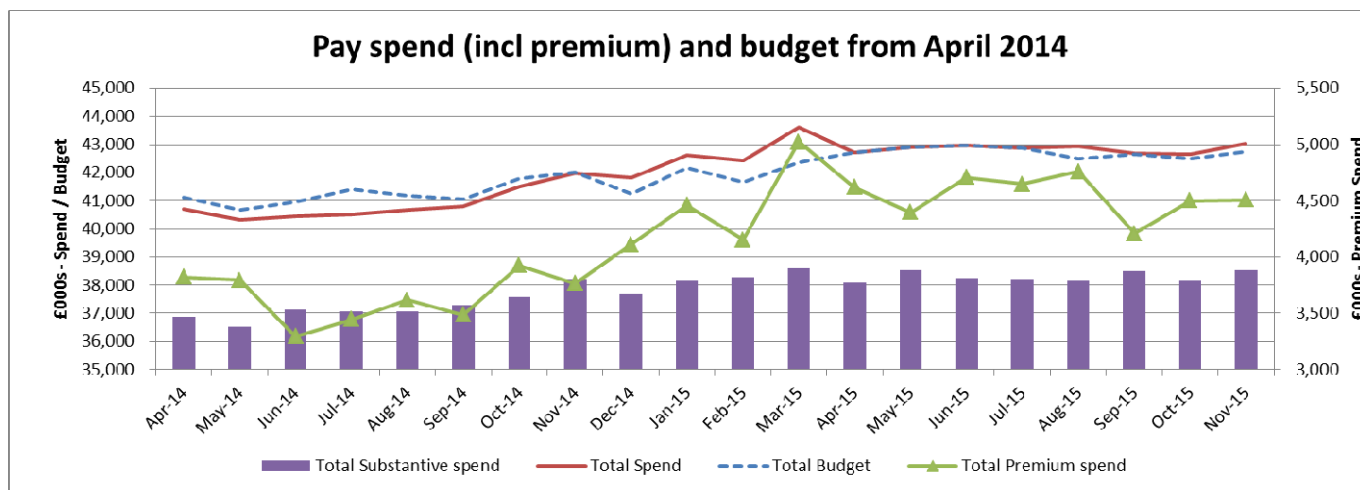
4.5 In month, £0.2m of medical and nursing spend was incurred for the UCC, offset with income. In addition, there were £0.1m of research pay costs offset in income and non pay.

4.6 Appendix 2 details this by CMG and Directorate with pay trends in Appendix 3.

4.7 The total pay bill compared to budget since April 2014 can be seen in Chart 1 below. This shows that premium pay spend has remained at the same level as the previous month. The overall paybill has increased by £360k in month.

4.8 The overall paybill is £1m higher than in November 2014, £0.3m in substantive staffing and £0.7m in premium staffing. There are 501 more worked WTE than one year ago, including 179 WTE nurses, 185 WTE non-clinical staff, 67 WTE medics and 71 WTE other clinical staff.

Chart 1: Paybill Budget and Actuals



4.9 The variance to plan by staff group can be seen in Table 5 below for both in month and YTD, including all premium costs.

4.10 In November, the number of WTEs worked was 207 below the plan. YTD, the number of WTEs worked less than plan amounts to a saving of £6.0m. However, premium pay costs of covering vacancies are a pressure of £6.9m. It is premium pay costs remaining higher than the revised plan that is resulting in a pay variance of £0.9m.

Table 5: Pay Spend by Type

Pay Type	In Month £000s			YTD £000s			WTE			Price variance £000s	Volume Variance £000s	Annualised Planned average cost £000s	Annualised actual average cost £000s
	Plan	Actual	Better / (worse)	Plan	Actual	Better / (worse)	Plan	Actual	Better / (worse)				
Non Clinical	6,361	6,241	120	49,667	49,473	194	2,605	2,589	16	(106)	299	28.6	28.7
Other Clinical	5,192	5,347	(156)	41,392	41,895	(503)	1,762	1,685	77	(2,308)	1,805	35.2	37.3
Medical & Dental	14,515	14,755	(239)	117,442	117,974	(531)	1,779	1,763	15	(1,553)	1,022	99.0	100.3
Nursing & Midwifery	16,671	16,678	(8)	133,326	133,425	(99)	5,610	5,511	99	(2,446)	2,347	35.7	36.3
Total	42,739	43,022	(283)	341,827	342,767	(940)	11,756	11,549	207	(6,952)	6,012	43.6	44.5

4.11 Reasons for in month variances from plan are as follows:

Medical

Medical staffing adverse variations are in ESM £0.2m relating to UCC (for which there is income) and ED costs

Non-Clinical

Pay underspends of £0.1m are within Corporate

Other Clinical

Other clinical overspends relate to Imaging - £0.05m and R&D - £0.05m. The latter is offset with income and non pay underspends

Non Pay

4.12 Operating non pay spend is £0.3m adverse to plan in month and £2.0m adverse to plan YTD.

4.13 Overspends in month relate to the following items offset with income:

- Excluded drugs and devices, £0.4m, mostly in CHUGGS
- Lakeside costs £0.3m

Other overspends of £0.4m relating to use of the independent sector in Orthopaedics and Endoscopy are offset by underspends within Facilities and a phased release of reserves.

4.14 Further detail on non pay trends can be seen in Appendix 4.

5. DELIVERY OF THE 2015/16 PLAN

5.1 Delivery of the £34.1m deficit is predicated on delivery of control totals for each CMG and Corporate Directorate. As reported last month, these control totals have been set and can be seen in Table 6 below compared to the current year to date.

Table 6: Control Totals for CMGs and Directorates

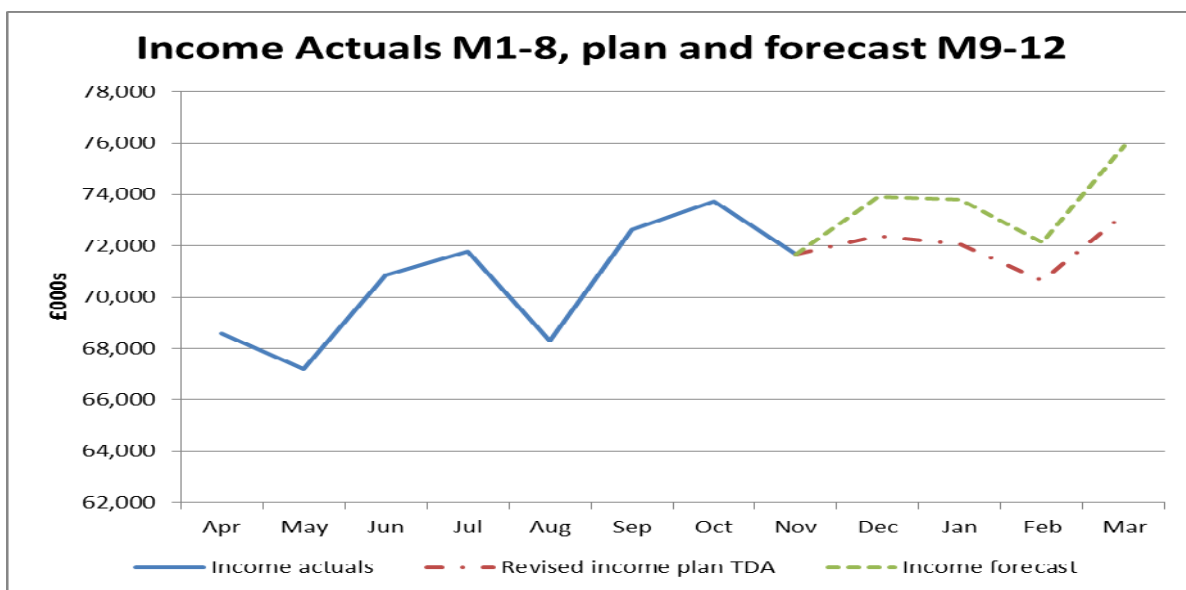
Division	CMG's	YTD Actual (Variance) £000	Year End Control Total (Variance) £000
Clinical Cmg's	CHUGGS	(1,366)	(1,885)
	Clinical Support & Imaging	(218)	250
	Emergency & Specialist Med	(3,562)	(3,534)
	T.A.P.S	(1,358)	(1,366)
	Musculoskeletal & Specialist Surgery	(3,332)	(2,948)
	Renal, Respiratory & Cardiac	(1,310)	298
	Women's & Childrens	(2,127)	398
Clinical Cmg's Total		(14,968)	(8,689)
Corporate	Communications & External Relations	(2)	0
	Corporate & Legal	33	0
	Corporate Medical	201	841
	Facilities	819	499
	Finance & Procurement	(28)	51
	Human Resources	(2)	60
	IT	89	0
	Nursing	140	5
	Operations	(571)	0
Strategic Devt	(63)	44	
Corporate Total		568	1,500
Alliance		120	597
Research & Development		44	100
Central Division		12,526	6,492
Grand Total		(1,710)	0

- 5.2 The control totals are challenging and there are 4 CMGs where there is particular concern regarding delivery. ESM, MSS, RRCV and W&C will be given additional support towards delivery.
- 5.3 The following sections detail the trend for income, pay, non pay, I&E deficit and CIP. The graphs include actuals to Month 8 and the forecast for the remainder of the year. The plan for the remainder of the year is used as a comparison.

5.4 Income

Chart 2 shows income actuals for Months 1-8 with the forecast and plan for the remainder of the year. Income is forecast to exceed plan towards year end as a result of additional activity, £3.9m, income for UCC and Lakeside, £2.4m (offset with costs), additional SIFT and other education monies from HEEM, £1.3m, and recognition of funds from the NHSLA for specific projects, £0.9m.

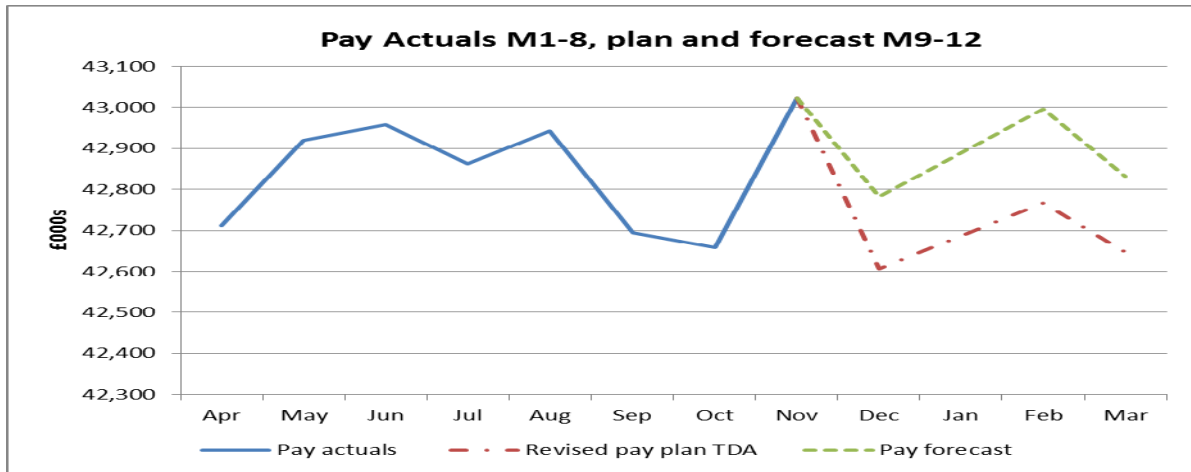
Chart 2: Income Actuals, Plan and Forecast



5.5 Pay

Chart 3 shows pay actuals for Months 1-8 with the forecast and plan for the remainder of the year. Increases in spend to the end of the year are related to medical and nursing spend, with premium spend remaining high to cover vacancies and support delivery of increased income. At year end, medical staffing is forecast to be £1.2m overspent, nursing £0.5m overspent, and non clinical £0.6m overspent.

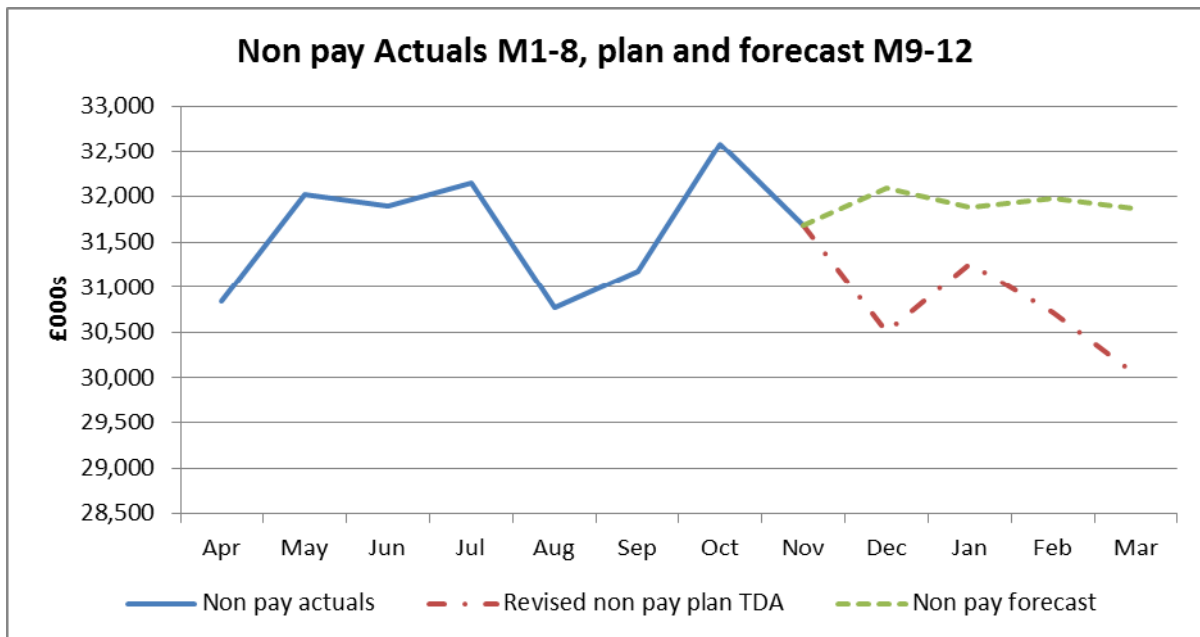
Chart 3: Pay Actuals, Plan and Forecast



5.6 Non Pay

Chart 4 shows non pay actuals for Months 1-8 with the forecast and plan for the remainder of the year. Increased non pay costs for the UCC and Lakeside £2.4m and EY, £1.1m, together with costs for delivery of activity of £4.5m are offset with underspends on depreciation.

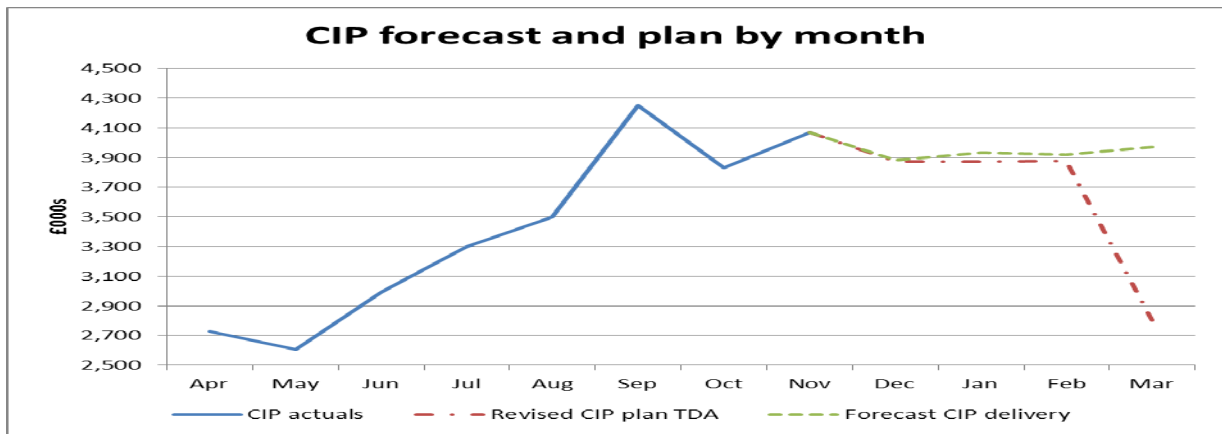
Chart 4: Non Pay Actuals, Plan and Forecast



5.7 CIP

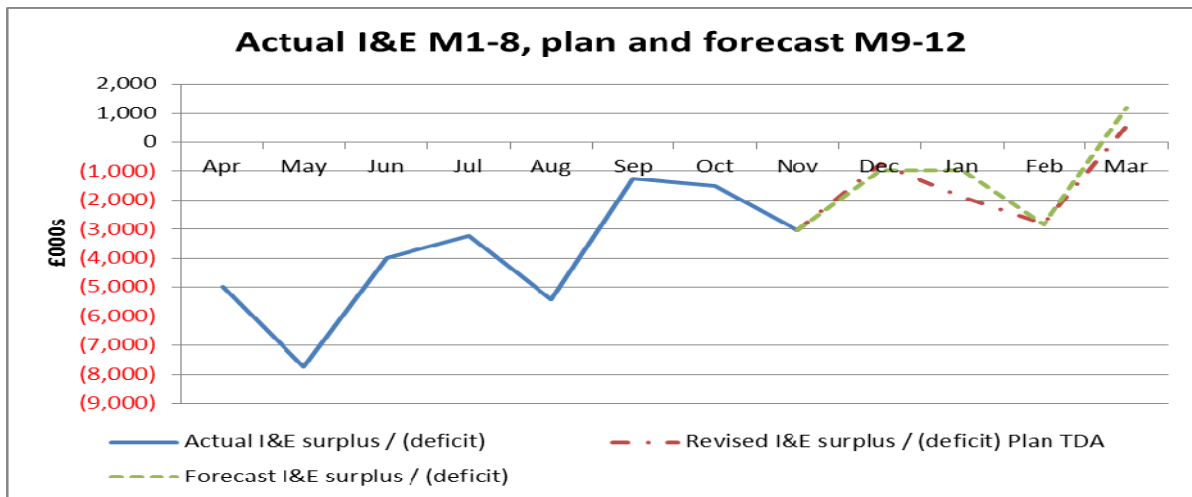
Chart 5 shows CIP actuals for Months 1-8 and forecast and plan for Months 9-12. This assumes delivery of full £43m target; current plans are for £42.5m.

Chart 5: CIP Actuals, Plan and Forecast



5.8 Chart 6 details the overall I&E position for each month to year end, based on actuals from Months 1-8 and forecast and plan from Months 9-12. This shows a forecast deficit for December, with surpluses from January to March.

Chart 6: I&E Surplus/(Deficit)



5.9 These are challenging control totals and, as described in previous papers, a number of financial recovery actions and control processes have been developed and put in place. Appendix 5 gives an update on progress against these actions that will assist the CMGs in delivering their recovery plans as well as supporting the delivery of the required improvement.

5.10 There are a number of risks within this forecast, these include the following:

5.10.1 Run Rate

To deliver the deficit plan of £34.1m, there is a need for a significant improvement in run rate, particularly within the CMGs. Control totals have been agreed with CMGs based on their forecast and actions that can be taken to support delivery. Income settlements are assumed within the forecast, as is the release of all reserves. There are no available funds for any new costs in year.

5.10.2 Proposed Pay Caps

The implementation of pay caps for bank and agency workers for all groups of staff should assist in reduction of run rate. There is a risk that these rates cannot be implemented in some areas because of patient safety concerns and consideration needs to be given to the best payment mechanisms in these areas.

5.10.3 Managing Winter Activity and Pressures

Continued increased emergency pressures could lead to additional premium costs not currently forecast to manage flow over winter. This could risk delivery of the planned deficit if additional funding is not found or further costs reduced elsewhere.

5.10.4 Managing Industrial Action

The planned December strike action involving Junior Doctors has been called off. Whilst negotiations continue, there is a risk that this action may happen within the last quarter of 2015/16.

5.10.5 Commissioning Settlements

To deliver the planned deficit, commissioning settlements need to be as per the forecast. There is a risk of successful commissioner challenges to activity levels or price which may mean a reduction to income. There is also a risk that levels of activity are unaffordable to commissioners.

Discussions are beginning with commissioners with regards to year end outturn to enable early sight to areas of pressures.

5.10.6 Additional Costs

There is no reserves funding remaining to offset any additional costs. These would need to be managed within the overall position.

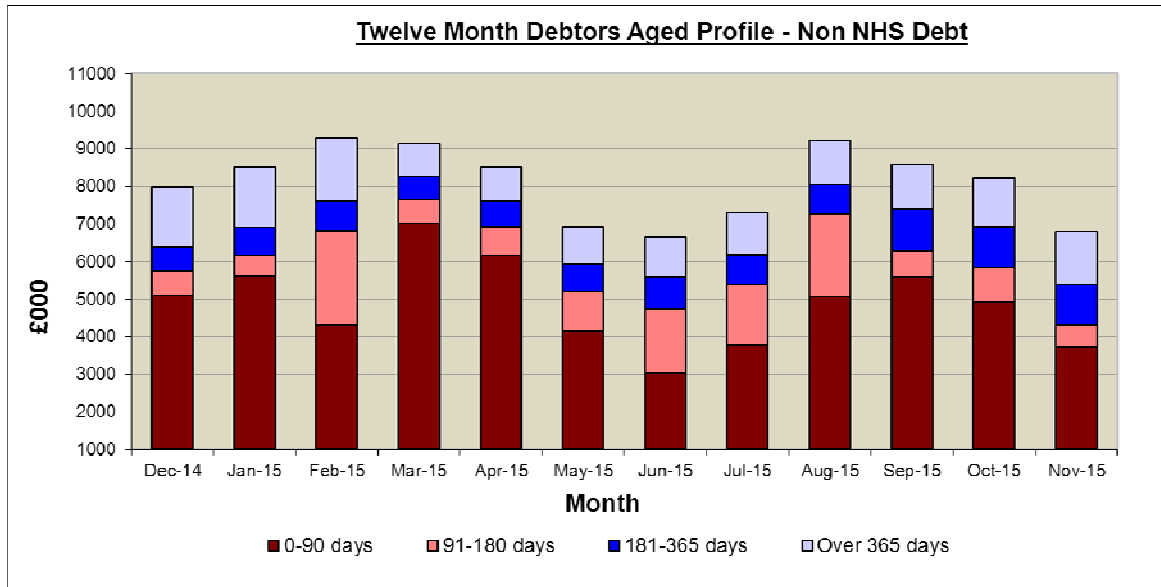
5.10.7 CIP Delivery

The forecast is predicated on the full delivery of the £43m CIP programme. Currently, there is a forecast shortfall of £0.5m, which must be recovered.

6. BALANCE SHEET AND CASHFLOW

- 6.1 The effect of the Trust's financial position on its balance sheet is provided in Appendix 6. The retained earnings reserve has reduced by our deficit for the year to date. The level of non-NHS debt has fluctuated across the last year as shown Chart 7.

Chart 7: Debtors Aged Profile

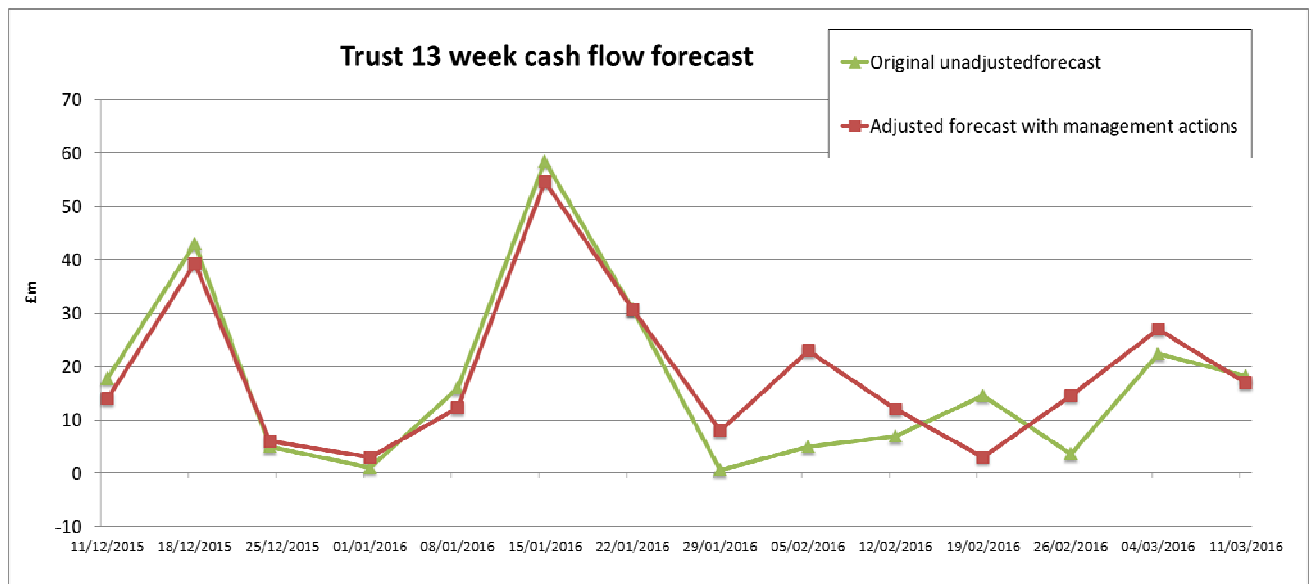


- 6.2 The overall level of non-NHS debt at the end of November reduced to £6.8m from £8.2m in October. Total debt over 90 days is £3.1m which is a decrease of £0.2m from October. The proportion of total debt over 90 days has increased from 40% to 45%.
- 6.3 We have maintained our Better Payments Practice Code (BPPC) performance in November, as shown in the table below:

	By Volume Number	By Value £000s
Current Month YTD		
Total bills paid in the year	89,208	428,018
Total bills paid within target	66,542	360,531
Percentage of bills paid within target	75%	84%
Prior month YTD		
Total bills paid in the year	79,845	381,673
Total bills paid within target	60,071	320,387
Percentage of bills paid within target	75%	84%

- 6.4 Our cashflow forecast is consistent with the income and expenditure position and our cash balance at the end of November was £5.2m which is £2.2m above plan of £3.0m. This difference is due to timing differences on our income.
- 6.5 Our cash forecast for the next 13 weeks is shown in Chart 8. This indicates that, with external financing, we will maintain our £3m minimum permissible cash balance.

Chart 8: 13 Week Forecast



- 6.6 At the end of November, we had drawn down £32.3m of external financing in the form of our Revolving Working Capital facility. We have been informed by the NTDA that this facility is limited to the value of our I&E stretch target of £34.1m as it is only permitted to be used for deficit support. We expect to draw down the full £34.1m by the year end.
- 6.7 A separate paper on our working capital is included on the agenda.

7. CAPITAL

- 7.1 The total capital expenditure at the end of November 2015 was £24.2m. This is an underspend of £6.8m against the year to date plan of £30.1m and we have achieved 80% of planned spend. The capital plan and expenditure can be seen in Appendix 7.
- 7.2 Outstanding orders totalled £16.4m at the end of November. The combined position is that we have spent or committed £40.6m or 93% of the annual plan. Appendix 7 shows the total forecast outturn of £49.5m. £5.7m of this relates to the MES finance lease, which is funded through revenue cash and for which we also automatically receive CRL cover. The remaining capital expenditure therefore totals £43.8m.
- 7.3 A separate paper covering capital financing is included on the agenda.

8. CONCLUSION AND RECOMMENDATIONS

- 8.1 The Trust has reported to the NTDA an I&E deficit of £31.0m at the end of November. This is a position that is £1.7m adverse to plan YTD.
- 8.2 This paper has been considered by the Integrated Finance, Performance & Investment Committee (17th December 2015).

Recommendations:

- **Note** the financial performance at Month 8
- **Note** the mechanism for the delivery of the forecast
- **Note and agree** control totals for CMGs and Directorates
- **Note** the risks to the delivery of the forecast

APPENDIX 1 – FINANCIAL POSITION IN MONTH AND YEAR TO DATE

	November 2015			April - November 2015		
	Plan	Actual	Variance (Adv) / Fav	Plan	Actual	Variance (Adv) / Fav
	£ 000	£ 000	£ 000	£ 000	£ 000	£ 000
Elective	6,260	5,496	(764)	48,538	47,891	(647)
Day Case	4,826	4,782	(44)	37,723	37,628	(95)
Emergency (incl MRET and local adj)	15,340	15,009	(331)	120,415	119,281	(1,134)
Outpatient	9,526	9,464	(62)	74,113	74,245	131
Non NHS Patient Care	657	471	(185)	4,854	4,597	(256)
Other	25,491	26,202	710	201,548	202,773	1,225
Patient Care Income	62,100	61,425	(675)	487,190	486,414	(776)
Teaching, R&D income	7,222	7,209	(13)	54,358	54,690	332
Other operating Income	2,474	3,044	570	22,524	23,642	1,118
Total Income	71,795	71,677	(119)	564,072	564,746	674
Pay Expenditure	(42,739)	(43,022)	(283)	(341,827)	(342,767)	(940)
Non Pay Expenditure	(27,491)	(27,806)	(315)	(221,122)	(223,142)	(2,020)
Total Operating Expenditure	(70,230)	(70,828)	(598)	(562,949)	(565,909)	(2,960)
EBITDA	1,566	849	(717)	1,123	(1,163)	(2,287)
Interest Receivable	7	(1)	(8)	57	56	(1)
Interest Payable	(124)	(71)	52	(1,000)	(754)	245
Depreciation & Amortisation	(2,821)	(2,848)	(26)	(22,182)	(21,621)	562
Surplus / (Deficit) Before Dividend and Disposal of Fixed Assets	(1,372)	(2,071)	(699)	(22,001)	(23,482)	(1,481)
Profit / (Loss) on Disposal of Fixed Assets	0	0	0	(17)	(10)	7
Dividend Payable on PDC	(959)	(959)	0	(7,672)	(7,675)	(3)
Net Surplus / (Deficit)	(2,331)	(3,029)	(699)	(29,690)	(31,167)	(1,477)
Adjustments in respect of donated assets	75	51	(24)	438	205	(233)
RETAINED SURPLUS / (DEFICIT)	(2,256)	(2,979)	(723)	(29,252)	(30,962)	(1,710)

APPENDIX 2 – YTD FINANCIAL PERFORMANCE BY CMG AND DIRECTORATE COMPARED TO PLAN

Division	CMG's	Income			Pay			Non Pay			TOTAL		
		Plan £000s	Actual £000s	Better / (worse) than plan £000s	Plan £000s	Actual £000s	Better / (worse) than plan £000s	Plan £000s	Actual £000s	Better / (worse) than plan £000s	Plan £000s	Actual £000s	Better / (worse) than plan £000s
Clinical Cmg'S	C.H.U.G.S	94,269	95,429	1,160	(33,241)	(34,220)	(980)	(30,785)	(33,031)	(2,246)	30,244	28,178	(2,066)
	Clinical Support & Imaging	29,218	29,318	100	(49,166)	(49,483)	(317)	(3,513)	(3,509)	4	(23,461)	(23,674)	(213)
	Emergency & Specialist Med	97,318	97,015	(303)	(49,997)	(53,231)	(3,235)	(29,773)	(29,896)	(124)	17,549	13,887	(3,662)
	I.T.A.P.S	24,906	24,648	(258)	(38,613)	(39,304)	(691)	(14,073)	(14,483)	(410)	(27,780)	(29,138)	(1,358)
	Musculo & Specialist Surgery	68,968	68,384	(584)	(31,142)	(32,144)	(1,002)	(12,870)	(15,216)	(2,347)	24,956	21,024	(3,932)
	Renal, Respiratory & Cardiac	101,989	100,558	(1,432)	(44,413)	(44,120)	293	(32,926)	(33,397)	(471)	24,650	23,041	(1,610)
	Womens & Childrens	96,529	94,890	(1,639)	(51,013)	(51,239)	(227)	(17,335)	(17,596)	(261)	28,181	26,055	(2,127)
Clinical Cmg'S Total		513,198	510,242	(2,956)	(297,584)	(303,743)	(6,158)	(141,274)	(147,128)	(5,854)	74,339	59,372	(14,968)
Corporate	Communications & Ext Relations	33	27	(5)	(424)	(423)	1	(52)	(51)	2	(444)	(446)	(2)
	Corporate & Legal	0	0	0	(1,549)	(1,524)	25	(788)	(781)	7	(2,337)	(2,305)	33
	Corporate Medical	2,168	2,219	51	(3,773)	(3,669)	103	(8,134)	(8,086)	48	(9,738)	(9,536)	202
	Facilities	9,202	9,146	(56)	(977)	(971)	7	(34,260)	(33,391)	868	(26,036)	(25,216)	819
	Finance & Procurement	33	142	109	(3,266)	(3,250)	16	(1,493)	(1,646)	(153)	(4,726)	(4,754)	(28)
	Human Resources	1,037	1,050	13	(3,623)	(3,644)	(21)	(912)	(906)	6	(3,498)	(3,500)	(2)
	Im&T	81	133	52	(665)	(515)	150	(6,865)	(7,028)	(163)	(7,450)	(7,410)	39
	Nursing	1,346	1,353	7	(4,210)	(4,095)	114	(576)	(557)	19	(3,439)	(3,299)	140
	Operations	1	84	83	(4,439)	(4,622)	(182)	(2,568)	(3,040)	(472)	(7,006)	(7,577)	(571)
	Strategic Devt	0	4	4	(610)	(461)	149	(128)	(344)	(216)	(738)	(801)	(63)
Corporate Total		13,901	14,160	259	(23,536)	(23,173)	363	(55,776)	(55,830)	(54)	(65,411)	(64,844)	568
Alliance Total		15,351	15,302	(49)	(6,888)	(6,967)	(79)	(8,349)	(8,101)	248	114	234	120
Research & Development Total		23,960	24,360	400	(8,824)	(9,157)	(333)	(14,964)	(14,986)	(22)	173	217	44
Central Division Total		(2,337)	682	3,020	(4,995)	273	5,268	(31,572)	(27,101)	4,472	(38,905)	(26,145)	12,759
Grand Total		564,072	564,746	674	(341,827)	(342,767)	(940)	(251,935)	(253,145)	(1,210)	(29,690)	(31,167)	(1,476)

APPENDIX 3 – PAY TRENDS

Division	CMG's	Actuals Dec	Actuals Jan	Actuals Feb	Actuals Mar	Actuals Apr	Actuals May	Actuals Jun	Actuals Jul	Actuals Aug	Actuals Sept	Actuals Oct	Actuals Nov	YTD 2014/15	YTD 2015/16	Decrease / (increase)
		2014 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's	2015 £'000's			
Clinical Cmg'S	C.H.U.G.S	4,071	4,030	4,107	3,985	4,197	4,187	4,345	4,284	4,315	4,322	4,319	4,271	32,546	34,240	(1,695)
	Clinical Support & Imaging	6,063	6,137	6,138	6,418	6,129	6,216	6,174	6,416	6,092	6,044	6,202	6,210	48,471	49,483	(1,012)
	Emergency & Specialist Med	6,270	6,636	6,511	6,449	6,594	6,763	6,678	6,555	6,703	6,521	6,501	6,917	49,612	53,231	(3,620)
	I.T.A.P.S	4,946	4,939	4,911	4,994	5,023	5,041	4,575	4,782	4,916	5,084	5,138	4,745	37,451	39,304	(1,853)
	Musculo & Specialist Surgery	4,172	4,284	4,158	4,175	4,082	3,949	4,211	4,111	4,010	3,909	3,890	4,040	32,150	32,202	(52)
	Renal, Respiratory & Cardiac	5,283	5,369	5,366	5,202	5,612	5,605	5,556	5,449	5,482	5,415	5,608	5,376	40,079	44,102	(4,023)
	Womens & Childrens	6,338	6,377	6,532	6,915	6,386	6,382	6,561	6,485	6,408	6,334	6,260	6,424	49,270	51,239	(1,970)
Clinical Cmg'S Total		37,144	37,771	37,723	38,137	38,023	38,142	38,100	38,082	37,926	37,629	37,917	37,983	289,579	303,803	(14,224)
Corporate	Communications & Ext Relations	53	51	53	52	53	53	52	52	49	54	56	52	374	423	(49)
	Corporate & Legal	185	190	186	185	184	187	191	189	191	201	191	191	1,556	1,524	32
	Corporate Medical	378	355	350	369	457	448	461	491	446	448	461	483	2,561	3,696	(1,135)
	Facilities	106	107	101	119	100	130	105	128	155	123	98	132	780	971	(191)
	Finance & Procurement	375	349	386	422	390	395	405	399	400	410	425	427	2,937	3,250	(313)
	Human Resources	452	440	446	450	454	462	453	450	459	457	444	464	3,525	3,644	(120)
	Im&T	57	60	64	102	52	63	47	63	59	69	76	59	516	488	27
	Nursing	635	669	671	650	506	489	508	502	501	535	521	534	4,978	4,095	882
	Operations	339	519	514	637	526	563	593	598	586	524	644	587	2,954	4,622	(1,667)
	Strategic Devt	168	45	63	38	45	75	38	67	77	(36)	136	60	1,182	461	721
Corporate Total		2,750	2,785	2,833	3,024	2,766	2,866	2,854	2,939	2,924	2,785	3,051	2,988	21,362	23,173	(1,812)
Alliance Total		819	826	813	809	824	849	843	878	796	844	941	991	6,408	6,967	(559)
Research & Development Total		1,088	1,243	983	1,038	1,089	1,063	1,167	1,068	1,104	1,238	1,214	1,213	8,608	9,157	(548)
Central Division Total		12	(2)	67	603	9	(1)	(6)	(105)	191	197	(465)	(153)	941	(333)	1,273
Grand Total		41,812	42,622	42,420	43,611	42,711	42,919	42,958	42,862	42,942	42,694	42,659	43,022	326,897	342,767	(15,870)

APPENDIX 4 – NON PAY TRENDS

Division	CMG's	Actuals Dec	Actuals Jan	Actuals Feb	Actuals Mar	Actuals Apr	Actuals	Actuals Jun	Actuals Jul	Actuals Aug	Actuals	Actuals Oct	Actuals Nov	YTD	YTD	Decrease /
		2014	2015	2015	2015	2015	May 2015	2015	2015	2015	Sept 2015	2015	2015			
		£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's	£'000's			
Clinical Cmg'S	C.H.U.G.S	3,666.3	3,854.4	3,888.4	3,990.9	3,750.2	3,686.6	4,173.4	4,069.0	4,191.4	4,246.8	4,296.3	4,597.0	28,388.0	33,010.7	(4,622.6)
	Clinical Support & Imaging	241.2	288.2	566.6	477.6	430.4	452.1	514.1	211.2	335.4	573.6	458.6	533.4	3,465.6	3,508.8	(43.2)
	Emergency & Specialist Med	3,323.4	3,211.2	3,309.7	3,455.2	3,557.0	3,317.4	3,672.2	3,992.3	3,842.9	3,540.9	4,033.7	3,939.9	25,596.8	29,896.4	(4,299.6)
	I.T.A.P.S	2,055.4	1,935.8	1,811.9	1,533.3	1,882.6	1,845.4	1,442.3	1,899.1	1,699.7	1,794.4	2,144.7	1,774.6	14,844.9	14,482.8	362.1
	Musculo & Specialist Surgery	1,775.3	1,771.8	1,763.8	2,443.1	1,575.5	1,789.8	2,137.2	2,054.0	1,920.1	1,898.9	1,818.3	2,039.4	14,673.7	15,233.2	(559.4)
	Renal, Respiratory & Cardiac	4,148.3	3,977.8	4,254.5	4,541.2	4,393.5	4,140.4	4,352.2	4,163.6	4,340.4	4,281.1	3,767.5	4,174.7	32,523.5	33,613.4	(1,089.9)
	Womens & Childrens	2,234.2	1,904.7	2,232.1	2,331.0	2,134.6	1,919.6	2,292.2	2,447.3	2,190.4	2,222.8	2,083.4	2,305.7	16,433.0	17,596.1	(1,163.1)
Clinical Cmg'S Total		17,444.1	16,944.0	17,827.0	18,772.2	17,723.7	17,151.2	18,583.6	18,836.5	18,520.4	18,558.6	18,602.6	19,364.7	135,925.6	147,341.3	(11,415.6)
Corporate	Communications & Ext Relations	14.2	8.8	2.5	4.2	4.4	6.7	6.1	9.4	9.4	2.8	13.8	- 2.0	87.6	50.6	36.9
	Corporate & Legal	108.3	84.7	102.0	216.1	99.7	97.9	96.2	98.2	104.7	99.8	91.1	93.6	770.3	781.1	(10.8)
	Corporate Medical	60.7	33.8	75.9	72.6	98.7	1,041.8	1,013.1	1,019.5	1,012.7	998.7	1,007.9	1,005.4	542.3	8,086.9	(7,544.6)
	Facilities	4,322.6	4,579.8	5,034.8	4,990.8	4,265.3	4,792.9	3,891.7	4,082.1	4,213.5	4,092.4	4,203.5	3,849.8	33,217.7	33,391.1	(173.4)
	Finance & Procurement	253.8	227.6	235.4	286.9	203.4	173.2	271.2	199.1	341.9	146.9	167.7	222.0	1,203.0	1,725.3	(522.2)
	Human Resources	103.9	146.4	143.9	284.5	111.5	74.6	156.2	97.3	93.4	103.8	140.3	128.9	1,620.2	906.0	714.2
	Im&T	629.5	686.4	717.9	868.7	932.3	995.1	850.7	876.5	1,026.4	740.9	786.4	939.5	6,228.8	7,147.9	(919.1)
	Nursing	1,124.5	1,117.6	1,141.4	1,452.1	30.4	72.2	62.1	75.9	62.2	85.5	59.3	109.1	9,050.3	556.7	8,493.6
	Operations	128.3	935.4	840.0	1,438.2	384.0	347.0	374.3	523.1	393.3	394.8	384.8	238.8	2,448.7	3,040.0	(591.3)
	Strategic Devt	61.0	61.2	10.2	246.0	47.8	35.9	115.2	62.9	143.4	6.4	188.8	- 66.3	248.3	534.0	(285.7)
Corporate Total		6,806.9	7,881.6	8,304.1	9,860.0	7,066.4	7,637.4	6,836.8	7,044.0	7,400.9	6,672.1	7,043.5	6,518.5	55,425.5	56,219.7	(794.2)
Alliance Total		1,035.4	911.5	1,000.7	896.8	1,090.6	973.4	1,142.1	1,056.6	753.6	1,064.5	908.1	1,112.2	7,482.6	8,101.0	(618.5)
Research & Development Total		1,825.9	1,921.5	2,067.1	2,109.4	1,891.4	1,830.0	1,672.0	1,958.0	1,828.0	2,000.3	1,917.5	1,875.1	16,671.3	14,972.2	1,699.0
Central Division	Central Income	-	-	-	-	-	0.0	-	-	-	0.0	310.8	46.9	789.6	357.8	431.8
	Central Other	3,741.2	3,794.4	3,665.0	7,468.1	3,846.8	3,679.9	3,753.2	3,753.2	4,166.0	2,834.9	3,705.8	4,745.6	27,028.3	30,485.3	(3,456.9)
	Reserves	46.3	-	61.5	122.0	- 776.0	747.6	- 59.5	- 59.5	- 1.2	149.6	153.7	- 2,029.5	- 1,529.8	- 1,874.7	344.9
Central Division Total		3,787.5	3,794.4	3,726.4	7,590.1	3,058.8	4,346.0	3,692.6	3,218.9	2,120.0	2,984.6	4,170.3	2,763.1	30,051.5	26,354.1	3,697.4
Grand Total		30,899.9	31,453.1	32,925.3	39,228.6	30,830.8	31,938.0	31,927.0	32,114.0	30,623.0	31,280.0	32,642.0	31,633.6	245,556.5	252,988.4	(7,431.9)

APPENDIX 5 – CENTRAL ACTIONS UPDATE

ACTION	EXEC LEAD	NEXT ACTIONS	BY WHEN	PROGRESS	RAG
EXPENDITURE					
Recruitment control process	LT	Finalise criteria for process Finalise control mechanism Paper to go to ESB for approval under urgent items Implement process	4/9/15 4/9/15 8/9/15 9/9/15	Complete. A weekly Recruitment Control Board in place to agree or reject CMG sponsored recruitment requests. Small process revisions have been made with KPIs and performance metrics circulated on a weekly basis.	5
Control of temporary nurse staffing costs, esp. agency and intro of back incentives	JS	Assess impact of new national guidance Document new criteria, control process and new back processes Report to go to ESB under urgent items	4/9/15 4/9/15 8/9/15	Controls and monitoring in place, supported by an action plan which focuses on recruitment, retention and effective rostering. This is included, in detail, within the monthly Nursing and Midwifery safe staffing report.	5
Assess scope for short term reduction in medical locum and agency spend (within Workforce CIP workstream)	PT	Report to go to EWB	15/9/15	The review has focused on the rates of payment (high earners) and ensuring that all locums are engaged through the 'Staff-flow' mechanism where appropriate. The reduction in usage of locum/agency hours in the short-term is more problematic due to the inability to recruit to all medical staffing gaps. Impact of potential nationally driven price caps is being managed and being monitored through the workforce workstream	5
Review all agency/interim non-clinical posts	LT	Identify posts and undertake review with Exec leads Report outcome to EPB	22/9/15	This is in progress with the HR Business Partners co-ordinating across CMG and Corporate teams. Details of where payments are being made are being checked with the finance teams. Material area is clinical coding and is deemed a business critical investment.	5
Review pay forecasts esp. corporate areas with a view to minimising	PT	Undertake review Include update in M5 finance report and EPB action plan report	18/9/15 22/9/15	As part of the reforecast plan and the normal month end forecasting process all corporate areas have been reviewed with all corporate areas due to deliver their planned financial positions. All new vacancies will be covered by the new vacancy control process as described above.	5
Identify feasible reductions in spend on emergency care pathway	RM	Review and agree with relevant CMGs Report to EWB under urgent items	15/9/15	A process has been undertaken reviewing all the investments within the emergency care pathway. Over the past two years this in the value of c£10m. The review has been completed with all relevant CMGs and has identified c£1m (full year effect) of	5

				cost being identified that equates to £250k of CIP within the year. A further meeting is being held with the ED team w/c 23 November to review levels and mix of ED staffing investments that total c£3m. However, given the significant level of operational pressures it is unlikely that this will lead to any reductions or further improvements in the level of financial investment. All changes to date have been agreed with Heads of Operations.	
Implement MARS/redundancy scheme	LT	Seek approval from Remuneration Committee Seek approval from NTDA Launch scheme	3/9/15 30/9/15 1/10/15	Remuneration committee has approved however NTDA has rejected, insisting that vacant positions must be filled after VSS release.	5
Identify opportunities to reduce spend on CQUIN/QS action plan	JS/AF	Undertake review Report outcome to EPB	18/9/15 22/9/15	Review completed and savings identified.	5
Negotiate reductions in cost of external contracts	PT	Undertake scoping exercise Include update in EPB action plan	18/9/15 22/9/15	This action is being driven through the non-pay cross-cutting workstream, with all opportunities being progressed with successful outcomes being recorded as in-year CIP.	3
INCOME					
Increase the amount of work that takes place during pre-existing sessions including OPD	RM	Implement system Include update in EPB action plan report	18/9/15 22/9/15	Outpatient productivity focused on improving DNA rates and booking slot utilisation with c10% improvements seen within some sub-specialties. Theatre project board continues to monitor utilisation and effectiveness of the theatre trading model. c70% reduction in short term notice cancellations that are being decommissioned with notice. Specific walkthroughs have resulted in bespoke action plans to address improvements within productivity driven by focus on start times, notes availability and locking down of lists.	4
Improve depth of coding where appropriate	RM	Review options with CMGs Implement identified changes	30/9/15 1/10/15	Coding group established with representation from all CMGs. 11 key actions are being implemented with specific focus on 2 themes of complex elective patients and emergency admissions. Each CMG has identified a specific ward to trial improvements within the 'ward to notes' process that has started in November.	5
Review emergency activity performance mechanism with CCGs	PT	Negotiate with CCGs	31/12/15	Initial discussions at CFO level have taken place across the local health economy. Work continues with the most recent year end forecasts from commissioners and providers being compared for consistency and affordability. NHS England (Specialist Commissioning) has requested a year end settlement with work continuing to model this proposal and the local positions within the year end income forecast.	4

Review use of CCG reserves and contingency	PT	Negotiate with CCGs	31/12/15	As above.	4
Seek reinvestment of UHL share of Alliance surplus	PT	Negotiate with Alliance	31/10/15	Proposal of reinvestment of UHL share of Alliance to be taken to next Alliance leadership board meeting that is 8 December 2015	4
Undertake payroll overpayment analysis	LT	Undertake review Include update in EPB action plan	20/10/15 27/10/15	Internal report completed and delivered at 6 November Audit Committee. External company do not wish to take on the assignment as previous review did not offer an attractive economic return for them. Internal Audit will be asked to do a specific piece of work on this area that is over and above their normal annual audit plan. Scoping meeting arranged within December 2015.	3
Undertake invoice overpayment analysis	PT	Undertake review Include update in EPB action plan	20/10/15 27/10/15	Internal analysis of the aged creditor and aged goods receipt not yet invoiced positions have been completed. An external company has been engaged and is currently working through the relevant datasets. Outputs should be completed by end November with any specific actions being completed in December. In addition, an external agency has been engaged to complete reconciliation audits on key areas of expenditure. An additional 'duplicate' payments check will be completed on a 'no win, no fee basis'.	3

APPENDIX 6 – BALANCE SHEET

	Mar-15 £000's Actual	Apr-15 £000's Actual	May-15 £000's Actual	Jun-15 £000's Actual	Jul-15 £000's Actual	Aug-15 £000's Actual	Sep-15 £000's Actual	Oct-15 £000's Actual	Nov-15 £000's Actual	Mar-16 £000's Forecast
Non Current Assets										
Property, plant and equipment	414,193	413,269	412,059	409,918	411,144	412,991	414,684	417,429	417,581	472,556
Intangible assets	10,134	9,854	9,573	10,761	9,389	9,102	9,946	9,640	9,335	10,134
Trade and other receivables	2,702	2,754	2,829	2,853	2,852	2,875	2,896	2,984	2,991	2,150
TOTAL NON CURRENT ASSETS	427,029	425,877	424,461	423,532	423,385	424,968	427,526	430,053	429,907	484,840
Current Assets										
Inventories	14,141	14,462	14,413	13,811	14,169	13,711	14,262	13,273	10,174	13,180
Trade and other receivables	35,292	25,650	34,813	31,009	36,491	26,326	27,929	28,871	28,855	30,638
Cash and cash equivalents	8,498	19,762	22,565	16,303	5,966	18,963	5,161	7,750	5,224	3,000
TOTAL CURRENT ASSETS	57,931	59,874	71,791	61,123	56,626	59,000	47,352	49,894	44,253	46,818
Current Liabilities										
Trade and other payables	(103,194)	(96,854)	(105,833)	(99,569)	(92,327)	(96,211)	(93,588)	(87,435)	(91,140)	(88,132)
Dividend payable	0	(959)	(1,918)	(2,877)	(3,836)	(4,795)	0	(1,921)	(2,883)	0
Borrowings / Finance Leases	(4,919)	(4,919)	(4,919)	(4,919)	(4,190)	(4,190)	(3,280)	(3,280)	(3,280)	(4,919)
Other Liabilities / Loan	(545)	(545)	(545)	(545)	(545)	(545)	(545)	(545)	(545)	(545)
Provisions for liabilities and charges	(820)	(820)	(820)	(820)	(820)	(820)	(820)	(820)	(820)	(820)
TOTAL CURRENT LIABILITIES	(108,933)	(104,097)	(114,035)	(108,730)	(101,718)	(106,561)	(98,233)	(94,001)	(98,668)	(94,416)
NET CURRENT ASSETS (LIABILITIES)	(51,002)	(44,223)	(42,244)	(47,607)	(45,092)	(47,561)	(50,881)	(44,107)	(54,415)	(47,598)
TOTAL ASSETS LESS CURRENT LIABILITIES	376,027	381,654	382,217	375,925	378,293	377,407	376,645	385,946	375,492	437,242
Non Current Liabilities										
Borrowings / Finance Leases	(6,869)	(6,945)	(6,887)	(6,958)	(7,635)	(7,644)	(7,917)	(8,080)	(8,305)	(6,869)
Other Liabilities / Loan	(11,455)	(22,540)	(28,571)	(28,625)	(33,578)	(39,355)	(39,083)	(43,502)	(43,502)	(69,273)
Provisions for liabilities and charges	(1,982)	(2,015)	(1,936)	(1,902)	(1,878)	(2,220)	(2,313)	(1,927)	(1,860)	(924)
TOTAL NON CURRENT LIABILITIES	(20,306)	(31,500)	(37,394)	(37,485)	(43,091)	(49,219)	(49,313)	(53,509)	(53,667)	(77,066)
TOTAL ASSETS EMPLOYED	355,721	350,154	344,823	338,440	335,202	328,188	327,332	332,437	321,825	360,176
Public dividend capital	329,837	329,787	329,837	329,837	329,837	329,837	329,837	329,837	329,837	368,937
Revaluation reserve	107,356	107,355	107,356	107,354	107,355	107,356	107,355	107,355	107,355	107,356
Retained earnings	(82,017)	(86,988)	(92,370)	(98,751)	(101,990)	(109,005)	(109,860)	(101,155)	(115,367)	(116,117)
TOTAL TAXPAYERS EQUITY	355,176	350,154	344,823	338,440	335,202	328,188	327,332	336,037	321,825	360,176

APPENDIX 7 – CAPITAL PLAN AND EXPENDITURE YEAR TO DATE

Scheme Name	CMG	UHL Approval	Funding Status	YTD Spend:			Annual	Annual	
				YTD Budget	Nov	YTD Variance	Budget	Forecast	Variance
				£'000	£'000	£'000	£'000	£'000	£'000
INTERNALLY FUNDED CAPITAL									
Estates & Facilities									
Facilities Sub-Group	UHL	N/A	Internal	2,565	2,027	538	4,855	3,855	1,000
MES Installation Costs	UHL	N/A	Internal	568	277	291	1,500	1,100	400
Aseptic Suite	CSI	Approved	Internal	0	4	(4)	440	4	436
Lloyds Pharmacy Extension	CSI	Approved	Internal	106	21	85	126	45	81
Theatre Recovery LRI	ITAPS	Approved	Internal	1,300	1,076	224	2,750	2,750	0
YDU Refurbishment	ESM	Approved	Internal	0	57	(57)	500	76	424
Paediatric Dentistry	UHL	Approved	Internal	100	22	78	790	445	345
Life Studies Centre	W&C	Approved	Internal	850	906	(56)	850	906	(56)
Sub-total: Estates & Facilities				5,489	4,391	1,098	11,811	9,181	2,630
IM&T Schemes									
IM&T Sub-Group	UHL	N/A	Internal	2,836	1,726	1,110	4,000	2,534	1,466
LRI Managed Print	UHL	Approved	Internal	1,323	1,776	(453)	1,323	1,776	(453)
EDRM	UHL	Under rev	Internal	625	(48)	673	3,000	670	2,330
Safecare Software System	UHL	Approved	Internal	0	0	0	58	0	58
Electronic Blood Tracking System	CSI	Approved	Internal	50	34	16	996	300	696
Heartsuite System	W&C	Approved	Internal	0	0	0	175	0	175
Renal Tissue Typing System	RRCV	Approved	Internal	0	0	0	100	0	100
Learning Mgt System	UHL	Approved	Internal	0	0	0	150	0	150
Sub-total: IM&T Schemes				4,834	3,488	1,346	9,802	5,280	4,522
Medical Equipment Schemes									
Medical Equipment Executive Budget	UHL	N/A	Internal	4,179	3,260	920	5,500	4,000	1,500
Linear Accelerators		Not Appro	Internal	50	1	49	300	31	269
Sub-total: Medical Equipment				4,229	3,261	969	5,800	4,031	1,769
Corporate / Other Schemes									
Donations	UHL	N/A	Internal	200	214	(14)	300	300	0
LiA Schemes	UHL	Approved	Internal	0	39	(39)	250	175	75
Contingency / Other	UHL	Not Appro	Internal	19	227	(208)	1,943	669	1,274
Sub-total: Corporate / Other Schemes				219	481	(262)	2,493	1,144	1,349
Reconfiguration Business Cases									
Treatment Centre		Not Appro	Internal	150	147	3	884	230	654
Women's Service		Not Appro	Internal	100	138	(38)	563	308	255
Children's Hospital		Not Appro	Internal	150	173	(23)	773	374	399
ICU Business Case		Not Appro	Internal	0	287	(287)	1,253	448	805
Sub-total: Reconfiguration Business Cases				400	745	(345)	3,473	1,360	2,113
Reconfiguration Design & Construction									
EMCH Interim Solution		Not Appro	Internal	0	84	(84)	400	317	83
Vascular Hybrid Theatre	RRC	Approved	Not Approved	2,009	115	1,894	2,983	420	2,563
Vascular Ward	RRC	Approved	Not Approved	1,447	735	712	3,803	1,500	2,303
Vascular Angio & VSU	RRC	Approved	Not Approved	1,966	480	1,486	3,679	1,500	2,179
ICU - Interim Solution	ITAPS	Approved	Not Approved	0	0	0	717	717	0
ICU - GH ICU Medium Term	ITAPS	Approved	Not Approved	0	0	0	0	168	(168)
ICU Interim Solution - Imaging	ITAPS	Approved	Not Approved	0	0	0	0	318	(318)
ICU Interim Solution - GH Beds	ITAPS	Not Appro	Not Approved	0	230	(230)	1,780	218	1,562
ICU Interim Solution - LRI Ward Beds	ITAPS	Not Appro	Not Approved	0	7	(7)	2,283	9	2,274
EPR Programme	UHL	Approved	Not Approved	(436)	1,716	(2,152)	4,825	3,387	1,438
Multi-storey Car Park Development	UHL	Approved	Not Approved	3,150	2,440	710	4,229	4,229	0
Linear Accelerators		Not Appro	Not Approved	0	0	0	350	0	350
Sub-total: Reconfiguration Design & Construction				8,136	5,808	2,328	25,049	12,783	12,266
Sub total: Internally funded capital expenditure				23,308	18,174	5,134	58,428	33,779	24,649
EXTERNALLY FUNDED CAPITAL									
Emergency Floor	ESM	Approved	Approved	4,300	2,608	1,692	17,698	10,000	7,698
FINANCE LEASE ADDITIONS									
MES Finance Lease Additions		N/A		3,389	3,389	0	5,031	5,698	(667)
GRAND TOTAL CAPITAL EXPENDITURE				30,997	24,171	6,826	81,157	49,477	31,681