

AGENDA ITEM				
7.4				

CTM BOARD

FINANCE UPDATE - MONTH 11 of 2020/21

Date of meeting	25/3/2021
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
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Report purpose	FOR DISCUSSION / REVIEW

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)						
Committee/Group/Individuals Date Outcome						
Welsh Government	11/3/2021	NOTED				
Management Board 24/3/2021 NOTED						

ACRO	ACRONYMS						
A&C	Administration & Clerical	I&E	Income & Expenditure				
AWCP	All Wales Capital Programme	LTA	Long Term Agreement				
AME	(WG) Annually Managed Expenditure	M1	Month 1 (M2 Month 2 etc)				
CHC	Continuing Healthcare	PCMH	Primary Community & Mental Health				
COO	Chief Operating Officer	PCH	Prince Charles Hospital				



CRES	Cash Releasing Efficiency Savings	POW	Princess of Wales Hospital
CRL	Capital Resource Limit	RGH	Royal Glamorgan Hospital
FNC	Funded Nursing Care	PSPP	Public Sector Payment Policy
HCHS	Healthcare & Hospital Services	WG	Welsh Government
IHI	Institute of Healthcare Improvements	WHSSC	Welsh Health Specialised Services Committee
IMTP	Integrated Medium Term Plan	YTD	Year to Date



1. SITUATION/BACKGROUND

The purpose of this report is to highlight the key messages in relation to the current month, year to date and forecast year-end financial position of Cwm Taf Morgannwg (CTM) University Health Board as at Month 11 (M11).

This report should be read in the context of the CTM Integrated Medium Term Plan for 20120/21 to 2022/223 which is available on the website. The IMTP was approved by the Board on 26 March 2020. The impact of Covid-19 has had a significant impact on the financial plan for 20/21.

The following sections are included in this report:



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2. HEADLINE MESSAGES AND KEY ACTIONS

2.1.1. Headline Messages

Budgets were reset in Month 7 to take account of the significant additional allocations for Covid from the Welsh Government. Actual expenditure to Month 10 on Delegated budgets was £2.4m under those reset budgets and this was offset by a £2.3m overspend on Non Delegated budgets to give a small M10 Year to date underspend of £0.1m. In Month 11 the delegated budgets were £2.0m under budget and this was offset by a £2.0m overspend on Non Delegated budgets.

The bottom up forecasts from Delegated budget holders were forecasting a £0.1m surplus for M11 so the actual underspend of £2.0m was £1.9m better than expected. The main movements were in the following areas:

	M11 Forecast	M11 Actual	Movement
	£m	£m	£m
ILGs	(0.2)	(1.7)	(1.5)
Delivery Executive	0.6	(0.2)	(0.8)
Corporate directorates	(0.5)	(0.3)	0.2
Contracting &			
Commissioning	0	0.2	0.2
Total	(0.1)	(2.0	(1.9)

Some of these movements were timing differences between M11 and M12 and some resulted in real changes to the year end forecast position:

	M11	M10	M9
	£m	£m	£m
Forecast underspends on Delegated budgets	(13.2)	(8.2)	(5.8)
Forecast underspends on Non delegated budgets	(13.7)	(11.8)	(14.0)
Planned return of funding to WG	26.9	21.0	19.8
Total Forecast	0	0	0

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Whilst the overall forecast has remained at break-even, the planned return of funding to WG has increased by £5.9m to £26.9m (M10:£21.0m).

Work with Audit Wales on the balance sheet issues has been moved forward in M11, and while Audit Wales is not yet able to provide a definitive view on whether a PYA is required, they have indicated that their current view is that a PYA is not required. We subsequently shared our draft Accountable Officer letter with the Welsh Government which included a request to return £24.7m of allocation. Following confirmation from the Welsh Government that our projected vaccination costs would be funded in full, the planned return of funding was increased by £2.2m to £26.9m.

There remains a significant risk that the final position will be different to the £26.9m forecast. The key areas of risk are around further slippage in against the non-recurrent expenditure schemes where we are forecasting a significant step up in costs in M12, and balance sheet risks, including the annual leave accrual. There is still a bigger risk of a larger surplus than of a lower surplus.



3. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

3.1 Financial Position and Key Targets - Month 11

The Health Board has a statutory duty to achieve a break even position over a period of three financial years. This applies to both revenue and capital expenditure. Over the last two financial years, the Health Board has achieved a surplus of £899k and £34k for revenue and capital expenditure respectively. This means that the Health Board can overspend by £899k and £34k for revenue and capital expenditure respectively in 2020/21 and still meet its three year statutory duty. The Health Board's plan for 2020/21 is to break-even on both measures. The Health Board also has an administrative duty to pay a minimum of 95% of all non-NHS invoices within 30 days.

The table below details the Health Board's 2020/21 current and forecast performance against these key financial targets:

Target	Unit	Current Month	Year to Date	Trend	Forecast Year End
Revenue To ensure that the Health Board's revenue expenditure does not exceed the aggregate of it's funding in each financial year. Measured by variance against plan to break even.	£'000 +Adverse ()Favourable	(62)	(212)	1	0
Capital To ensure net capital spend does not exceed the Welsh Government Capital Resource Limit. Measured by variance against plan to manage to the Resource Limit	£'000 +Adverse ()Favourable	25	(1,100)	↓	0
Public Sector Payment Policy To pay a minimum of 95% of all Non NHS invoices within 30 days. Measured by actual performance	%	96.7%	93.5%	Î	93.5%



3.2 Revenue Performance by Expenditure Category

	Annual	Over/(Under) Spend				
	Budget	Current Month	Year to Date	Forecast	Recurrent Forecast	Section
	£'000	£'000	£'000	£'000	£'000	
Delegated Budgets				Section 3.4	Section 3.4	
Pay	580,237	(984)	(3,632)			
Non Pay	711,849	324	(1,642)			
Income	(129,698)	(589)	(994)			
Delegated Savings Plans	(2,511)	(797)	1,844			
Total Delegated Budgets	1,159,877	(2,046)	(4,424)			
Non Delegated Budgets	56,674	1,984	4,213			3.7
WG COVID Allocations	(114,626)	0	0			
WG Allocations	(1,101,925)	0	0			
GRAND TOTAL M11	0	(62)	(212)	0	34,100	
GRAND TOTAL M10	0	(50)	(150)	0	27,900	

During M7, £74m of additional funding was allocated to Delegated budgets to meet the forecast overspends in the Q3/Q4 Plan plus additional funding for winter plans and various other Covid related costs.

The over spends and underspends in M7-11 therefore represent operational variances from the forecast overspends in the Q3/Q4 Plan.

The Key variances are as follows:



The overall Income and Expenditure position improved in M11 with an under spend of £62k. This includes a delegated underspend of £2,046k, offset by an over spend on non-delegated budgets of £1,984k. The delegated current month underspend of £2,046k includes an over achievement in savings delivery of £797k plus a net under spend on pay, non-pay and income of £1,249k.

The most significant variances reported in the M11 current month position include:

- Pay underspends Within ILGs £1,056k and Primary care £272k
- Pay overspends- Workforce and OD £291k.
- Non pay overspends Facilities £304k, Med Mgt £175k, Primary Care £159k and COVID Projects £700k.
- Non pay underspends BG ILG £551k, Estates £464k.
- Income overspends Planning & Partnerships £144k.
- Income underspends MC ILG £242k and Primary Care £537k.

The most significant variances reported in the M11 year to date position include:

- Pay underspends BG ILG £816k, MC ILG £878k, RTE ILG £1,385k, Primary Care £513k, Medicines Management £192k and Commissioning £190k. These variances are due to a variety of reasons including slippage on Q3-4 plans.
- Pay Overspends Estates £210k, ICT £139k and Estates £104k.
- Non pay overspends- RTE ILG £149k, Facilities £742k, Med Mgt £124k, COVID Projects £700k and Corporate Directorates £363k.
- Non pay underspends— BG ILG £1,068k, Primary Care £661k, Corporate Directorates £649k and Contracting & Commissioning £1,429k.
- Income overspends- BG ILG £412k, RTE ILG £128k and Patient Care & Safety £211k.
- Income underspends- MC ILG £443k, Medicines Management £470k, Primary care £685k and Corporate directorates £333k.



3.3 Revenue Performance by Area

			Over/(Un	der) Spend	
	Annual Budget	Current Month	Year to Date	M11 Forecast (Day 9)	Recurrent Forecast
	£'000	£'000	£'000	£'000	£'000
Integrated locality groups:				Section 3.4	Section 3.4
Bridgend	203,287	(882)	(1,162)	(3,146)	
Merthyr & Cynon	202,148	(376)	(785)	(2,316)	
Rhondda & Taff Ely	214,559	(413)	(649)	(1,244)	
Total ILGs	619,994	(1,671)	(2,596)	(6,706)	
Delivery Executive:					
Medicines Management	135,646	(638)	(366)	(2.883)	
Primary care	127,972	(624)	(1,583)	(1,944)	
Facilities	20,218	374	921	1,292	
COVID Planned projects	22,457	700	700	515	
Other	2,898	(7)	(71)	(317)	
Total Delivery Executive	309,192	(196)	(399)	(3,337)	
Contracting & Commissioning	137,687	175	(1,356)	(1,311)	
Corporate Functions	93,004	(354)	(74)	(1,801)	
Total Delegated Budgets	1,159,877	(2,046)	(4,425)	(13,155)	
Non Delegated budgets	(1,159,877)	1,984	4,213	13,155	
GRAND TOTAL M11	0	(62)	(212)	0	34,100
GRAND TOTAL M10	0	(50)	(150)	0	27,900

Key variances

- The above table shows the current month, YTD and forecast positions by Area rather than by Expenditure categories as in Section 3.2 above.
- The main movements in the Current month include:
 - ILGs underspend £1,671k. This is mainly relating to slippage against the Q3/Q4 funding.
 - Facilities overspend £374k. This is largely driven by ongoing COVID expenditure on PPE and other items over and above the funding allocation based on the Q3/4 forecast.
 - Medicines Management underspend £639k and Primary care underspend £624k
 - Corporate directorate underspends £354k. This includes an Estates underspend of £791k.



3.4 Forecast Position

The Health Board is continuing to forecast a break-even position for 20/21 (M10: break-even):

	M11	M10	M9
	£m	£m	£m
Forecast underspends on Delegated budgets	(13.2)	(8.2)	(5.8)
Forecast underspends on Non delegated budgets	(13.7)	(11.8)	(14.0)
Planned return of funding to WG	26.9	21.0	19.8
Total Forecast	0	0	0

A summary of the latest M11 forecast position is provided below:

	M11	M10
IMTP / Annual Operating Plan	£m	£m
Savings shortfalls	10.1	10.2
Additional In Year Welsh Government Funding Due To Covid-19	(114.6)	(111.2)
Operational Expenditure Cost Increase Due To Covid-19	97.7	91.5
Planned Operational Expenditure Cost Reduction Due To Covid-19	(17.4)	(16.9)
Slippage on Planned Investments/Repurposing of Developmental Initiatives Due To Covid-19	(3.6)	(3.6)
Planned return of funding to WG	26.9	21.0
Forecast Outturn attributable to Covid-19 (+Deficit /- Surplus)	(0.9)	(8.9)
Forecast Outturn Non Covid-19 (+Deficit /- Surplus)	(5.8)	(0.4)
Net cost of Winter plans in excess of funding	2.4	4.8
Additional accountancy gains	(11.8)	(11.7)
Non recurring spend initiatives	8.2	8.2
Remove request for Bridging funding	5.0	5.0
Confirmed early repayment and deferral of I2S funding	2.8	3.0
Total	0	0



The key points to note are as follows:

- **Planned return of funding to WG**. We have recently shared our draft Accountable Officer letter with WG. This included a request to return £24.7m of allocation which cannot be used by the Health Board. The £3.7m improvement from the M10 Monitoring return submission of £21.0m includes the following:
 - Further slippage on Winter scheme costs £1.7m
 - Additional WG funding for Winter schemes £0.4m
 - Updated assessment of primary care prescribing growth £1.1m
 - Other net improvements £0.4m

The £24.7m in the draft Accountable Officer letter assumed that our request for vaccination funding would be £2.2m below the projected costs and we noted in the draft letter that, if this was not acceptable and WG funds our projected vaccination costs in full, then the overall Health Board forecast would increase by £2.2m.WG have subsequently confirmed that projected vaccination costs will be funded in full and we have therefore updated our planned return of funding from £24.7m to £26.9m.

- **Forecast out-turn Non Covid**. The forecast surplus has increased from £0.4m in M10 to £5.8m in M11. The main reason for the increase is the reclassification of costs from Non COVID to COVID for Annual Leave accruals (£2m) and Urgent Emergency care costs (£3.2m). The Covid position now includes £15.4m for the Annual leave accrual and £4.7m of costs for Urgent Emergency care.
 - It is important to note that the Covid: Non Covid distinction is becoming increasingly difficult as the response becomes broader and the Covid, winter, essential services response covers most services and cost changes. Further work is being undertaken on the Covid cost base as part of our detailed planning for 21/22.
- **Net cost of winter plans in excess of funding.** The net additional cost over and above the WG funding of £4.7m has now reduced from £4.8m in M10 to £2.4m in M11 due to further slippage.
- **Annual leave on overtime provision**. Further work is being undertaken on an All Wales basis to confirm the increased costs for 20/21 and the Welsh Government has confirmed that these costs will be fully funded by Welsh Government.



Summary of WG funding due to COVID-19

A breakdown of the total funding of £114.6m is provided below:

	Confirmed Allocations £'k	Anticipated Allocations £'k
Q1 Staff	7,875	
Field Hospital set up	2,987	
GMS Enhanced Service	178	
Mental Health (6 Months)	564	
Transformation	1,340	
CHC	3,390	
Track & Trace	4,793	
PPE	6,063	
Voluntary sector	200	
C-19 RPB Recovery	24	
Pharmacy Allocation	848	
Dental ventilation	61	
TTP	4878	
Flu	238	
COVID support	56,200	
Urgent & Emergency Care Funding	4,348	345
GMS Bank Holiday DES	49	
Annual Leave	13,400	
Pass through Covid costs- see below		6,845
Total M11	107,436	7,190
Total M10	89,639	21,558



	M10 Forecast	M11 Forecast	Confirmed Allocations	Anticipated Allocations
	£k	£k	£k	£k
Field Hospital set up	5,349	5,349	2,987	2,362
FH Decommissioning	720	720	0	720
TTP	8,926	8,226	9,671	0
CHC	3,400	3,400	3,390	0
PPE	5,230	4,700	6,063	0
Independent Hospitals	190	190	0	0
Extended Flu	235	235	238	0
Mass Vaccination	2,928	2,758	0	2,758
Annual Leave	13,400	15,400	13,400	0
LA Community Testing	0	1,005	0	1,005
Total	40,378	41,984	35,749	6,845



Forecast recurrent position

The planned recurrent deficit at the end of 20/21 was £13.4m. As at Month 11 we are reporting a forecast recurrent deficit of £34.1m, which covers the recurrent savings shortfall from 2020/21, together with initial review of underlying pressures from 20/21 but excludes COVID and Recovery:

	M11	M10
	£m	£m
Planned recurrent deficit	13.4	13.4
Forecast shortfall in recurring savings delivery	15.7	14.5
Other 20-21 recurring pressures	5.0	0
M11 Forecast	34.1	27.9

The recurrent deficit has been assessed as £34.1m at M11, a deterioration of £6.2m. This movement is due to reduction is recurrent savings of £1.2m and an increase in other recurrent overspends of £5m. Further work is needed to fully understand the impact of Covid 19 on the underlying cost base and the above forecast will continue be updated as part of our detailed planning for 21/22.



3.5 Covid Position

A high level summary of the forecast additional Covid costs for 20/21 is provided below.

As noted above, the Covid: Non Covid distinction is becoming increasingly difficult as the response becomes broader and the Covid, Winter, Essential services response covers most services and cost changes.

	Q1	Q2	Q3	Q4	Total
Area of cost impact	£m	£m	£m	£m	£m
Pay	7.3	6.0	8.1	29.4	50.8
Non Pay and Income	9.4	11.4	12.3	11.3	46.9
Impact on savings delivery	4.1	2.2	2.2	1.7	10.1
Operational expenditure reductions	(4.7)	(2.0)	(4.3)	(3.9)	(17.4)
Slippage on planned	(1.3)	(0.9)	(0.6)	(0.8)	(3.6)
investments/repurposing of					
development funding					
Sub total	14.8	16.6	17.7	37.8	86.9
WG funding	(10.3)	(21.1)	(17.7)	(65.5)	(114.6)
Planned return of funding to WG	0	0	0	26.9	26.9
Total	4.5	(4.5)	(0)	(0.9)	(0.9)

More detailed information on the specific cost drivers is provided overleaf:



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position	Mth 10 F/Cast	Change from Mth 10
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
Vale Field Hospital	1,536	183	191	458	0	(754)	2	0	335	(253)	(7)	0	1,691	1,691	1,698	(7)
Bridgend Field Hospital	951	984	350	(43)	36	667	1,561	328	565	715	651	1,010	6,765	7,775	7,957	(182)
Marsh House Nursing Home	47	140	78	138	51	(31)	19	56	22	30	18	22	568	590	594	(4)
Abergarw Nursing Home	55	138	112	197	56	(17)	43	2	0	(52)	0	0	534	534	534	0
Internal Capacity	71	79	134	114	51	111	71	451	(173)	161	51	55	1,121	1,177	1,353	(176)
Operational Expend. Reduction	(726)	(1,816)	(2,211)	(1,347)	(1,089)	393	(837)	(1,069)	(2,442)	112	(1,158)	(2,257)	(12,189)	(14,446)	(13,837)	(609)
Private Patient Income	160	244	149	213	181	190	25	189	109	104	244	119	1,808	1,927	1,790	137
PPE	96	131	188	208	243	33	233	374	2,432	428	158	160	4,524	4,684	5,192	(508)
Med Staff	380	347	717	329	(35)	207	(393)	727	(526)	606	164	(43)	2,523	2,480	2,317	163
Free Food	225	230	(207)	0	0	0	0	0	0	0	0	0	248	248	248	0
Essessential Services Backlog	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CHC	0	0	0	0	0	3,400	0	0	0	0	0	0	3,400	3,400	3,400	0
Staff Welfare	3	3	3	3	3	3	3	3	3	3	3	3	33	36	36	0
PC Prescribing	0	0	1,371	1,772	549	260	473	585	988	62	274	439	6,334	6,773	6,872	(99)
Primary Care	339	247	585	678	317	504	638	126	270	596	70	971	4,370	5,341	4,790	551
Flu Expansion	0	0	0	0	0	0	0	350	(115)	0	0	0	235	235	235	0
IT	40	60	61	(106)	171	80	62	122	135	(110)	56	55	571	626	523	103
Project Management	0	41	27	21	0	0	0	0	0	0	0	0	89	89	89	0
Antigen testing	0	61	60	209	338	205	256	434	500	(336)	214	248	1,941	2,189	2,583	(394)
AntiB testing	0	0	0	0	348	68	(40)	75	29	29	34	87	543	630	597	33
Hospital Based Testing	0	77	153	141	159	63	40	86	95	23	36	35	873	908	957	(49)
Contact Tracing	0	0	0	0	0	311	564	498	363	1,155	901	1,713	3,792	5,504	4,789	715
Mass Vaccination	0	0	0	0	0	0	0	32	317	619	631	1,159	1,599	2,758	3,143	(385)
Excess Deaths	30	0	15	15	23	11	11	0	9	9	9	9	132	141	141	0
Students	0	815	893	1,002	543	418	222	138	83	63	4	3	4,181	4,184	4,277	(93)
HCSW FT Recruitement	0	0	0	216	223	(92)	203	111	186	246	328	330	1,421	1,751	1,493	258
Private Hospitals	0	0	0	0	0	0	0	0	0	30	60	100	90	190	190	0
Other	1,535	2,195	454	1,210	667	1,206	2,244	1,306	2,486	3,057	4,579	17,946	20,941	38,887	32,857	6,030
SUBTOTAL	4,742	4,161	3,123	5,428	2,834	7,236	5,400	4,924	5,671	7,297	7,320	22,164	58,137	80,301	74,817	5,484
Undelivered Savings	1,554	1,901	600	792	563	801	523	910	764	957	471	282	9,836	10,118	10,233	(115)
Slippage/Repurposing	(273)	(269)	(752)	(318)	403	(981)	(91)	(319)	(188)	(254)	(255)	(255)	(3,297)	(3,552)	(3,553)	1
WG COVID Funding	` -/	,,	(10,289)	0	(794)	(20,462)	(5,832)	(5,515)	(6,247)	(8,000)	(7,536)	(23,050)	(64,676)	(87,726)	(111,569)	23,843
TOTAL	6,023	5,793	(7,318)	5,902	3,006	(13,406)	0	Ó	Ó	Ó	0	(859)	0	(859)	(30,072)	29,213

Further information on the key areas of additional costs and the movements from the M10 forecast are summarised below:



Field hospitals and nursing homes (£10.6m) -The M11 forecast of £10.6m has decreased by £0.2m from M10. The key movements are summarised below:

	M11	M10
	£m	£m
Field hospitals – set up costs	5.4	5.4
Field hospitals – decommissioning costs	0.7	0.7
Running costs	2.6	2.7
Additional staffing costs to open up extra beds	1.9	2.0
at Ysbwty Seren		
Total	10.6	10.8

TTP (Track, Trace & protect including Antigen and Antibody testing (£9.2m) - The M11 forecast of £9.2m has increased by £0.2m from M10 and the key movements are shown below:

	M11	M10
	£m	£m
Antigen Testing	2.2	2.6
Antibody Testing	0.6	0.6
Hospital Based Lab Testing	0.9	1.0
Track & Trace	4.5	4.8
Community Testing	1.0	0.0
Total	9.2	9.0

As agreed with WG, the additional Local Authority costs associated with Whole Community Testing in Merthyr and Lower Cynon Valley and the CTM community Testing projects will be funded via the Health Board.



Primary Care Prescribing (£6.8m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
Primary care prescribing	1.4	2.5	2.0	0.8	6.8	6.9

The latest forecast at M11 has slightly improved to £6.8m.

Additional costs in Primary Care (£5.3m) plus extended Flu programme (£0.2m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
Loss of dental patient charge income	1.5	1.4	1.0	1.1	5.0	5.0
Reduced dental contract payments	(1.1)	(0.5)	(0.4)	(0.5)	(2.5)	(2.5)
Dental sub total	0.4	0.9	0.6	0.6	2.5	2.5
Investment in Clusters	0.4	0	0.5	0.6	1.5	1.5
Other (including GP Hub, Enhanced services and Community pharmacy)	0.4	0.4	0	0.5	1.3	0.8
Estimated costs of extending Flu to 50+ age group	0	0	0.2	0.0	0.2	0.2
Total	1.2	1.3	1.4	1.6	5.5	5.0

The M11 forecast has increased by £0.5m from M10 and this is mainly due to a community pharmacy allocation for COVID support (£0.8m).



Dental practices with NHS contracts received 80% of their annual contract values for Q1 and 90% for Q2 & Q3. Our forecast assumption is that payments will remain at 90% for Q4.

An additional £1.5m investment in various aspects of primary care services as part of the Covid and resetting response is planned. However, as this is planned to be funded through re-purposing of WG primary care cluster funding there is no net cost.

PPE (£4.7m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
PPE	0.4	0.5	3.0	0.8	4.7	5.2

The M11 forecast of £4.7m has decreased by £0.5m from M10. The actual expenditure in M11 was £0.16m compared to a forecast of £0.41m. The latest forecast assumes that this reduced level of spend will continue in M12.

Medical Staff (£2.5m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
Medical staffing	1.4	0.5	(0.2)	0.8	2.5	2.3

The M11 forecast of £2.5m has increased by £0.2m from M10.

These costs include the impact of new Welsh Government guidance (relating to consultants, SAS, doctors and junior medical staff) on claims for additional medical staff hours. A breakdown of the actual costs to M11 is provided below:



	Q1	Q2	Q3	M10	M11	M11 YTD
	£k	£k	£k	£′k	£'k	£k
Bridgend ILG	713	468	253	699	177	2,514
Merthyr & Cynon ILG	534	137	(26)	(4)	0	641
Rhondda & Taf ILG	198	38	10	50	(114)	226
Other	0	(142)	(429)	(143)	143	(857)
Total	1,445	500	(193)	606	206	2,523

Internal capacity (£1.2m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
Internal capacity	0.3	0.3	0.3	0.3	1.2	1.4

The forecast of £1.2m has reduced by £0.2m since M10. The actual spend in M11 was lower than forecast by £0.1m and the forecast assumes M12 will be similar to M11.

Continuing Healthcare (£3.4m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
CHC	0	3.4	0	0	3.4	3.4

The M11 forecast of £3.4m remains unchanged. The latest forecast assumes that the CHC allocation received to date of £3.4m is sufficient for the full year impact of supporting providers in 2020/21. Further work is being undertaken with our providers to ensure all payments are processed as soon as possible.



Students (£4.2m) and HCSWs (£1.8m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
Students	1.7	2.0	0.4	0.1	4.2	4.3
HCSW's Fixed Term recruitment	0	0.3	0.5	0.9	1.8	1.5
Total	1.7	2.3	0.9	1.0	5.9	5.8

The M11 forecast for Students and HCSW's has increased by £0.1m to £0.3m and a similar level of spend is expected in M12. Student expenditure has now almost ceased with only £4k of costs reported in M11. Conversely expenditure on fixed term HCSW posts is increasing as more posts are being extended as they approach the end of their contracts.

Other reactive costs including ward nursing (£38.9m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost impact	£m	£m	£m	£m	£m	£m
Estimated impact of increased annual leave being carried forward at the end of 20/21	0	0	0	15.4	15.4	13.4
Other reactive costs	4.2	3.1	6.0	10.2	23.5	19.5
Total	4.2	3.1	6.0	25.6	38.9	32.9

The forecast for other reactive costs increased by £6m in M11. This increase is primarily due to an increase of £2m in the Annual Leave estimate and the inclusion of Winter and Urgent Emergency Care schemes in line with WG allocations of £3m.



A breakdown of the M11 YTD Other reactive costs is provided below:

	BG	МС	RT	Other	Total
	M11 YTD				
	£k	£k	£k	£k	£k
Registered nursing	4,853	1,029	1,050	1,726	8,658
Add Clinical services	(474)	861	1,351	2,214	3,952
A&C	355	8	42	417	822
Other pay	549	339	304	763	1,955
Non pay & income	494	918	547	3,595	5,554
Total	5,777	3,155	3,294	8,715	20,941

The Non pay & income expenditure within 'Other' of £3,595k includes:

- Laundry Services £815k
- M&S Consumables £1,029k
- Infection Control Works and Ty Trevithick £501k
- Transport £374k
- Loss of SLA Income £170k

Operational expenditure decreases (£14.8m)

	Q1	Q2	Q3	Q4	Total M11	Total M10
Area of cost benefit	£m	£m	£m	£m	£m	£m
Operational expenditure reductions due to reduced elective activity	(4.8)	(2.0)	(4.3)	(3.3)	(14.4)	(13.8)

Month 11 Finance Report

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The M10 forecast underspend of £13.8m has increased by £0.6m in M11 to £14.4m. Actual operational expenditure reductions were £1.1m in M11 and further reductions of £2.2m are expected in M12. A breakdown of the M11 YTD costs is provided below:

	Q1	Q2	Q3	M10	M11	M11 YTD
	£k	£k	£k	£k	£k	£k
Bridgend ILG	(1,142)	(967)	(2,071)	(191)	(777)	(5,148)
Merthyr & Cynon ILG	(948)	(574)	(310)	(97)	(110)	(2,039)
Rhondda & Taf ILG	(931)	(950)	(1,194)	(577)	(192)	(3,844)
Medicines Mgt	(1,531)	412	(329)	237	(316)	(1,527)
Contracting &	(200)	36	(444)	740	237	369
Commissioning						
Total	(4,752)	(2,043)	(4,348)	112	(1,158)	(12,189)

The Medicine Mgt under spend of £1.5m includes reductions in NICE expenditure and other drugs/vaccines expenditure.

The Contracting & Commissioning overspend in M10 reflected a correction of an error in M9.



Impact on delivery of efficiency savings

The original split of the annual savings target of £20.6m was £19.0m Delegated and £1.6m Non Delegated. For 2020/21 this split has now been changed to £16.3m Delegated and £4.3m Non delegated so that the Pre Covid savings gap of £4.3m is now all shown as Non Delegated and is this is being shown as non-Covid variance. The M11 YTD and forecast savings are summarised below.

		Month 1	11	Month 10		
	YTD 20/21 Recurring		YTD	20/21	Recurring	
	£m	£m	£m	£m	£m	£m
Delegated Savings targets	14.9	16.3	19.0	13.6	16.3	19.0
Forecast Savings	(5.0)	(6.2)	(4.8)	(4.4)	(6.1)	(6.0)
Forecast shortfall	9.9	10.1	14.1	9.2	10.2	13.0
Non Delegated Savings target	3.6	4.3	1.6	3.6	4.3	1.6
Total	13.5	14.5	15.8	12.8	14.5	14.6

- Actual savings in M11 was £0.6m (M10: £0.5m) and the M11 YTD savings is now £5.0m (M10: £4.4m)
- Forecast In year savings has increased by £0.1m in M11 and forecast recurrent savings has reduced by £1.2m.
- The forecast recurrent savings gap of £15.8m has been reflected in the forecast recurrent position (See Section 3.4 above).

The Health Board needs to increase the focus and traction on savings plans and delivery in order to help minimise the financial impact of Covid-19 in 2020/21, but very importantly, also to limit the recurrent impact going into 2021/22.



Slippage on planned investments/repurposing of development funding

An assessment of what existing development funding can be slipped or re-purposed to help meet costs resulting from Covid-19 is provided below:

	M11	M10
	£m	£m
Transformation allocation for Covid -19	1.3	1.3
Cluster funding for 20-21 (the inclusion of this funding	1.5	1.5
has also seen a corresponding increase in Covid related		
costs)		
Mental Health funding for 20/21	1.0	1.0
Other	0.1	0.1
WHSSC Investment Slippage	1.5	1.5
Sub total	5.1	5.1
Reclassified as WG income in M5:		
Transformation allocation for Covid -19	(1.3)	(1.3)
Mental Health funding for 20/21	(0.5)	(0.5)
Total	3.6	3.6



3.6 Savings Performance by Area

An analysis of the forecast savings (In year £6.2m and recurring £4.8m) by area is provided below.

Area	In year Savings Target £000	Green	Amber	Red	Current In Year Forecast	% of Current Year Forecast to Target
Bridgend ILG	3,319	250			250	7.5%
Merthyr & Cynon ILG	3,962	912			912	23.0%
Rhondda & Taf ILG	3,622	1,051			1,051	29.0%
Medicines Management	2,903	1,892			1,892	65.2%
Primary Care	306	4			4	1.3%
Contracting & Commissioning	784	718			718	91.7%
Corporate Directorates	1,405	1,339			1,339	95.3%
Sub Total	16,299	6,166	-	-	6,166	37.83%
Covid Non Recurrent		8,449			8,449	
Grand Total	16,299	14,615	-	-	14,615	89.67%

Area	Recurrent Savings Target £000	Green	Amber	Red	Forecast recurrent savings	% of Forecast recurrent savings to Target
Bridgend ILG	4,529	488			488	10.8%
Merthyr & Cynon ILG	4,566	616			616	13.5%
Rhondda & Taf ILG	4,154	1,127			1,127	27.1%
Medicines Management	2,903	1,818			1,818	62.6%
Primary Care	306				0	0.0%
Contracting & Commissioning	899				0	0.0%
Corporate Directorates	1,615	776			776	48.0%
Grand Total	18,970	4,825	-	-	4,825	25.44%



3.7 Non Delegated budgets

The key reasons for the Month 11 and Month 11 YTD overspends are as follows:

	M11	M11 YTD	M10	M10 YTD
	£k	£k	£k	£k
Shortfall v CRES target of £4.2m	360	3,958	360	3,598
Shortfall v non recurrent slippage/Non pay expenditure reduction targets of £4m	333	3,666	333	3,333
Other variances	1,291	(3,411)	(306)	(4,702)
Total	1,984	4,213	387	2,229



3.8 Key Risks and Opportunities

The key financial risks and opportunities for 20/21 are summarised below (excluding the PYA risk which is covered in Section 3.4 above):

	Month 11		M	Ionth 10
	Opps	Risk	Opps	Risk
	£m	£m	£m	£m
Prior Year Adjustment (PYA) – see Note 1	0	0	0	0
Slippage in delivery of Q3/Q4 plan- see Note 2	(2.0)		(1.0)	
Changes to the Balance sheet assumptions in the Q3/Q4 Plan	TBC		TBC	
Potential variation in the estimated 'pass through' costs for TTP, Mass vaccinations, Field hospitals, CHC.	0		(1.0)	
Potential movement in estimated Annual leave provision at 31 March 21	(2.0)	2.0	(2.0)	2.0
Total	(4.0)	2.0	(4.0)	2.0

Note 1: Work with Audit Wales on the balance sheet issues has been moved forward, and while Audit Wales is not yet able to provide a definitive view on whether a PYA is required, they have indicated that their current view is that a PYA is not required.

Note 2: We are forecasting a significant step up in costs in M12 which includes significant non pay expenditure in relation to the non-recurring spend plans included in the Q3/Q4 Plan. Although there are detailed plans in place we recognise that there is a potential risk that all of this spend may not be fully incurred in March.



4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outined in this report.		
Related Health and Care standard(s)	Governance, Leadership and Accountability		
Equality impact assessment completed	Not required		
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.		
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below)		
Impact	The paper is directly relevant to the allocation and utilisation of resources.		
Link to Main Strategic Objective	To provide strong governance and assurance		
Link to Main WBFG Act Objective	Service delivery will be innovative, reflect the principles of prudent health care and promote better value for users		

5. RECOMMENDATION

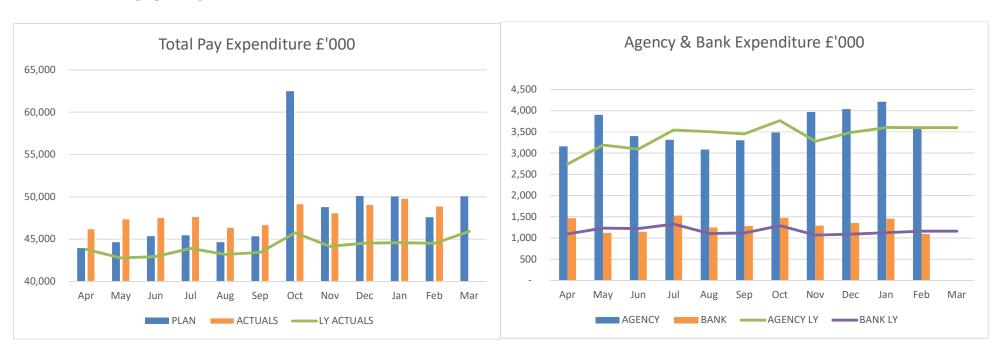
The Board is asked to:

• **DISCUSS** the contents of the Month 11 Finance report for 2020/21.



APPENDIX A

TREND ANALYSIS - TOTAL PAY

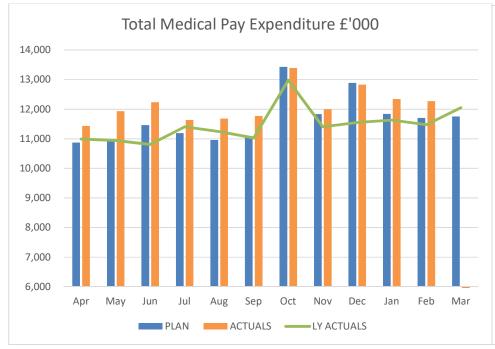


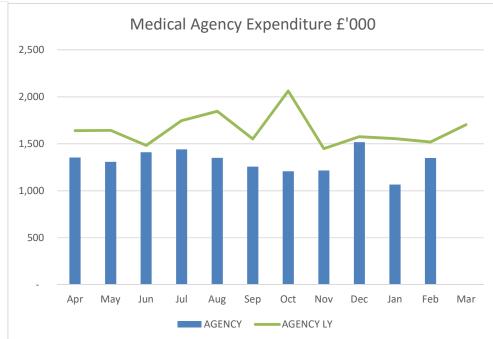
During M7, additional funding was allocated to Delegated budgets to meet the forecast overspends in the Q3/Q4 Plan plus additional funding for winter plans and various other Covid related costs. This resulted in a £13.3m pay surplus in M7.



TREND ANALYSIS - MEDICAL PAY

APPENDIX B







APPENDIX C

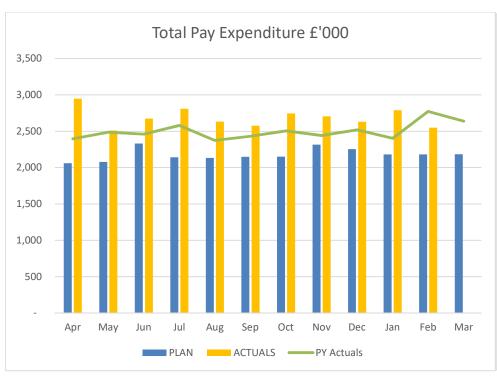
TREND ANALYSIS - REGISTERED NURSING (WARDS and A&E)

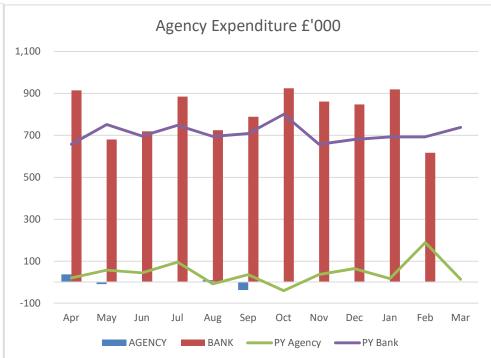




APPENDIX D

TREND ANALYSIS - ADDITIONAL CLINICAL SERVICES (WARDS and A&E)

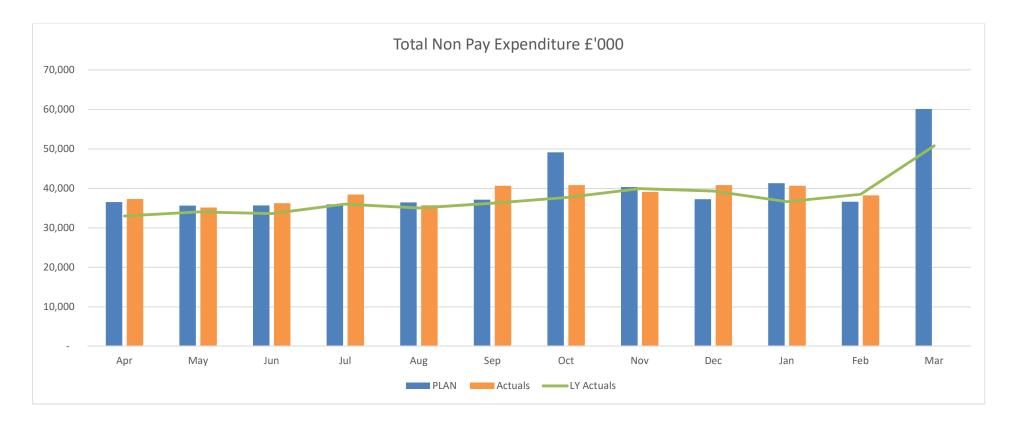






TREND ANALYSIS - NON PAY

APPENDIX E



During M7, additional funding was allocated to Delegated budgets to meet the forecast overspends in the Q3/Q4 Plan plus additional funding for winter plans and various other Covid related costs. This resulted in a £7.7m non pay surplus in M7.



APPENDIX F

WELSH GOVERNMENT ALLOCATIONS

		Annual Budget
		£k
Confirmed funding		1,208,964
Unconfirmed funding		(15,933)
	TOTAL	1,193,031

Key Issues

The most significant anticipated allocations include:

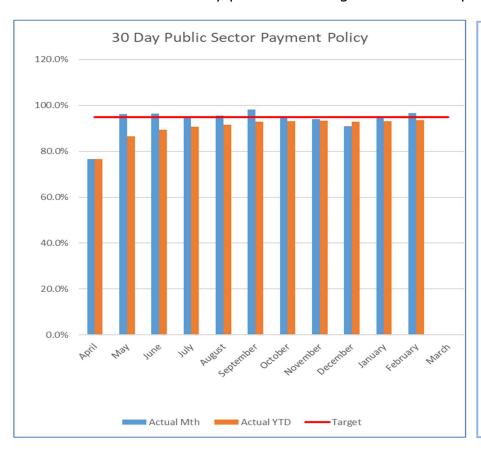
- Transformation Fund £3.9m
- Ring fenced COVID items- £5.8m
- Anticipated return of allocation to WG (£26.9m)
- Community testing £1m



APPENDIX G

Public Sector Prompt Payment (PSPP) Performance

The Health Board's monthly performance against the 95% public sector payment target is detailed in the graph below:



Key Issues:

- The percentage for the number of non-NHS invoices paid within the 30 day target for February was 96.7%, with a cumulative percentage of 93.5%.
- For the month of April the percentage was only 76.6%. This was in part due to COVID supplier relief arrangements which allowed 1029 queried invoices to be released which accounted for 5.5%.
- As a consequence of the low percentage performance in April, there is a high risk that the Health Board may not achieve the 95% target for 20/21. The forecast percentage for Month 12 is 93.5%.



Balance Sheet

Balance Sheet	Opening Balance	Closing Balance	Forecast Closing Balance M12 £'000	
	(01/04/2020)	as at M11		
	£′000	£′000		
Non Current Assets				
Property, Plant & Equipment	532,624	547,151	532,624	
Intangible Assets	3,631	3,631	3,631	
Trade and Other Receivables	50,069	50,069	50,069	
Total Non-Current Assets	586,324	600,851	586,324	
Current Assets				
Inventories	6,071	5,947	6,071	
Trade and Other Receivables	101,242	124,802	101,242	
Cash and Cash Equivalents	376	3,620	376	
Total Current Assets	107,689	134,369	107,689	
Current Liabilities				
Trade and Other Payables	133,114	144,840	133,114	
Provisions	38,844	55,521	53,844	
Total Current Liabilities	171,958	200,361	186,958	
Non-Current Liabilities				
Trade and Other Payables	1,307	1,307	1,307	
Provisions	56,259	56,259	56,259	
Total Non-Current Liabilities	57,566	57,566	57,566	
TOTAL ASSETS EMPLOYED	464,489	477,293	449,489	
Financed By:				
General Fund	416,325	429,129	401,325	
Revaluation Reserve	48,164	48,164	48,164	
TOTAL	464,489	477,293	449,489	

APPENDIX H

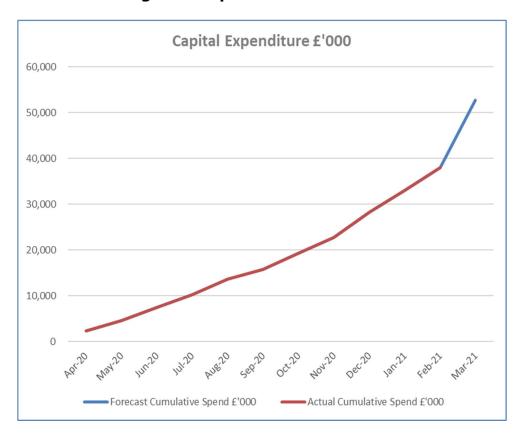
Key Issues:

- The closing cash balance for M11 was £3.6m.
- Receivables have increased by £23.5m to M11. The most significant movement relates to movement in WRP debtors of £15m.
- The increase in Payables of £12m to M11 represents the increase in the Pension/HMRC creditor which had been part paid in the M12 2019-20.
- The increase in Provisions to M11 of £17m relate to Clinical Negligence.



APPENDIX I

Performance against Capital Resource Limit



Key Issues:

- The current Capital Resource Limit of £48.4m was issued on the 3rd March 2021.
- In addition, the Health Board is anticipating a further £3.9m of additional funding relating to the impact of COVID 19.
- This is supplemented by £0.3m of donated funds and £0.07m of asset disposals, giving an overall programme of £52.6m.
- Expenditure to date is £37.9m.
- The current forecast capital position is breakeven assuming all anticipated funding is received.



APPENDIX J

Cash position

Cashflow	Actual/Forecast					
	Nov	Dec	Jan	Feb	Mar	Total
	£′000	£′000	£′000	£′000	£′000	£′000
Receipts						
WG Revenue Funding	82,276	105,543	99,027	85,894	115,492	1,146,882
WG Capital Funding	4,500	4,400	4,700	5,200	12,628	53,278
Sale of Assets	0	17	11	13	0	73
Welsh NHS Org'ns	9,170	9,160	8,080	19,967	11,600	125,092
Other	1,827	3,175	1,433	2,020	2,300	33,371
Total Receipts	97,773	122,295	113,251	113,094	142,020	1,358,696
Payments						
Primary Care Services	6,714	27,912	8,700	17,659	17,821	202,779
Salaries and Wages	46,458	45,976	46,422	46,969	61,997	550,885
Non Pay Expenditure	40,621	42,579	58,060	41,521	50,285	551,681
Capital Payments	3,815	5,413	2,900	3,389	15,161	53,351
Other (Donated asset funding)	0	0	0	0	0	0
Total Payments	97,608	121,880	116,082	109,538	145,264	1,358,696
Net Cash In/Out	165	415	(2,831)	3,556	(3,244)	
Balance B/F	2,315	2,480	2,895	64	3,620	
Balance C/F	2,480	2,895	64	3,620	376	

Key Issues

- The M11 cash flow forecast is currently showing a forecast surplus of £0.376m in Month 12 which includes anticipated cash support to cover the movement in Capital Creditors.
- The latest forecast assumes a planned return of funding to WG of £26.9m (resource and cash).
- The latest forecast assumes that the £1m anticipated allocation for the Merthyr & Cynon population testing pilot together with the CTM community testing project will be Resource only.
- The latest forecast assumes that the other anticipated allocations for Covid of £6.2m (Field Hospitals and Mass Vaccinations etc.) will be Resource and Cash.
- The cash for the remaining outstanding WRP debtors of approximately £22m will be received in 2021-22. The profile of these receipts are under regular review.