

2022-23 Finance Performance Report Month 12



Summary



Situation

A separate Finance report has been prepared which sets out the overall financial position of the Health Board as at M12.

The purpose of this report is focus on the financial performance of the individual Care Groups and directorates as at M12 (i.e. the Delegated budget position).

The overall financial position report is discussed at the Full Board, the Planning, Performance & Finance Committee (PPFC) and also the Executive Leadership Group (ELG).

This financial performance report is discussed at the PPFC and ELG meetings .

Where required, PPFC may request further information or a 'deep dive' on the financial performance of individual ILGs and directorates.

Background

The IMTP submitted to Welsh Government in April 2022 set out the financial plan for the UHB for the financial year 2022-23. In accordance with Welsh Government guidance, our financial plan was set out into 3 parts:

- Core Plan
- COVID Response
- Exceptional Cost Pressures

The Core plan includes a recurrent savings target of £17.3m. In addition, our Integrated Locality Groups (ILGs) and Directorates identified brought forward recurrent cost pressures of circa £11m. These cost pressures are not included in the financial plan for 22/23 and recovery plans are required to manage these overspends back to delegated budgets.





Summary



Assessment

The M12 Delegated overspend was £1.5m (M11: £0.6m overspend).

The M12 Delegated overspend was £3.1m worse than the forecasts submitted in the M11 finance packs. (i.e. the forecasts were showing a £1.6m underspend for M12 but the actual position was a £1.5m overspend).Further work is being undertaken to fully understand the reasons for the unexpected movements from forecast, the learning points and also any recurrent impacts on 23/24.This will be reported to the PFFC .

The M12 YTD Delegated overspend now stands at £22.0m. This includes a £4.7m shortfall against the M12 savings targets plus other overspends of £17.3m.These other overspends include adverse variances against Pay (£6.0m), Non Pay (£10.1m) and Income (£0.6m).

The most significant overspends (excluding savings shortfalls) at M12 are being reported by Unscheduled Care (£14.0m), Diagnostic, Therapies & Specialties (£11.5m) and Planned Care (£6.0m).

The Delegated savings position also remains a concern:

- The M12 YTD Delegated savings achievement was £13.3m, which is a £4.7m shortfall compared to the M12 YTD target of £18.1m
- The forecast Delegated Recurrent savings is only £5.2m, which is £12.8m below the £18m target.

Recommendation

The PFFC is asked to **DISCUSS** and **NOTE** the financial performance of individual Care Groups and directorates for the period to 31st March 2023.





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Executive Summary



Current Month Analysis

- The M12 Delegated overspend was £1.5m (M11: £0.6m overspend).
- The M12 Delegated overspend was £3.1m worse than the forecasts submitted in the M11 finance packs. (i.e. the forecasts were showing a £1.6m underspend for M12 but the actual position was a £1.5m overspend).
- Further work is being undertaken to fully understand the reasons for the unexpected movements from forecast, the learning points and also any recurrent impacts on 23/24.
- This will be reported to the PPFIC .

Year to Date Analysis

- The M12 Delegated position is reporting a YTD overspend of £22.0m. Key overspending areas include:
 - Unscheduled Care - £14.0m (Savings shortfall £2.2m and Other overspends £11.8m).
 - Planned Care - £6.0m (Savings shortfall £0.9m and Other overspends £5.1m).
 - Diagnostics, Therapies & Specialties £11.5m (Savings shortfall £1.1m and Other overspends £10.4m)
 - Children & Families - £1.6m (Savings £0.4m and Other overspends £1.2m)
 - Facilities - £0.6m (Savings £0.4m and Other overspends £0.2m)

Savings Position

- The M12 YTD Delegated savings achievement was £13.3m. This represents a shortfall of £4.7m compared to the M12 YTD target of £18m
- The forecast Delegated Recurrent savings is only £5.2m. This forecast is £12.8m below the £18m target.





M12 Summary Performance



	Annual Budget	M12	M12 YTD
	£m	£m	£m
Delegated Budgets			
Planned Care	161.1	1.1	6.0
Unscheduled Care	166.2	1.9	14.0
Primary & Community Care	197.1	(0.6)	(3.6)
Mental Health & Learning Disabilities	112.3	(0.3)	(0.8)
Children & Families	76.4	0.5	1.6
Diagnostics, Therapies & Specialities	214.6	1.2	11.5
Corporate Executives	158.6	(1.5)	(3.1)
Facilities (Non Hub)	30.4	(0.0)	0.6
Contracting & Commissioning	142.8	(0.8)	(4.2)
Total Delegated Budgets	1259.5	1.5	22.0
Non Delegated Budgets			
Other Control Accounts	(1232.3)	(9.0)	(17.2)
Reserves & Contingencies	(0.7)	7.4	(6.8)
Planning Deficit	(26.5)	2.2	26.5
Total Non Delegated Budgets	(1259.5)	0.6	2.5
Grand total	(0.0)	2.1	24.5

Key Points :

- The M12 Delegated overspend was £1.5m (M11: £0.6m overspend). The main movements are as follows:
 - £0.4m deterioration on Contracting and Commissioning.
 - £0.9m deterioration on Planned Care compared , mainly due to increased pay costs.
 - £0.7m deterioration on Unscheduled Care , mainly attributed to increased agency costs.
 - £0.8m deterioration on COO Management . This includes additional Planned Care Recovery costs associated with accounting for the full cost of activity pathways which had commenced in 22/23.
 - £2.2m improvement on Corporates (see slide 12).
- The M12 YTD Delegated position is showing a £22.0m overspend. The most significant overspends are in the following areas and further information is provided later in this report:
 - Unscheduled Care £14.0m
 - Diagnostics, Therapies & Specialities £11.5m
 - Planned Care £6.0m
- An analysis of the performance of the Corporate directorates is also provided later in this report.





M12 Savings –Actual



	Annual Target	M12 YTD Actual	YTD Variance
	£m	£m	£m
Delegated Budgets			
Planned Care	3.7	2.8	0.9
Unscheduled Care	2.9	0.6	2.2
Primary & Community Care	0.7	0.7	0.0
Mental Health & Learning Disabilities	2.0	1.6	0.4
Children & Families	1.8	1.4	0.4
Diagnostics, Therapies & Specialities	4.4	3.2	1.1
Facilities (Non Hub)	0.6	0.2	0.4
Corporate Executives	1.6	0.8	0.8
Contracting & Commissioning	0.4	1.9	(1.5)
Total Delegated Budgets	18.0	13.3	4.7
Non Delegated	(0.7)	4.0	(4.7)
Grand total	17.3	17.3	0.0

Key Points :

- The M12 YTD savings is £17.3m compared to the annual target of £17.3m.
- However, **Delegated** savings to M12 is only £13.3m, which is £4.7m below the Delegated savings target of £18.0m.
- The largest YTD shortfalls are in:
 - Unscheduled Care £2.2m
 - Diagnostics, Therapies & Specialities £1.1m
 - Planned Care £0.9m
 - Corporate directorates £0.8m.
- Contracting & Commissioning have overachieved by £1.5m against the M12 target.





M12 Savings - Forecast



Savings	Annual Savings Target	M12 YTD savings	M12 YTD Variance	Recurrent Savings	Recurrent variance
	£m	£m	£m	£m	£m
Delegated Budgets					
Planned Care	3.7	2.8	0.9	0.1	3.6
Unscheduled Care	2.9	0.6	2.2	0.1	2.8
Primary & Community Care	0.7	0.7	0.0	0.1	0.6
Mental Health & Learning Disabilities	2.1	1.6	0.4	0.1	2.0
Children & Families	1.8	1.4	0.5	0.4	1.3
Diagnostics, Therapies & Specialities	4.4	3.2	1.2	1.8	2.6
Facilities (Non Hub)	0.6	0.2	0.4	0.0	0.6
Corporates	1.6	0.9	0.6	0.7	0.8
Contracting & Commissioning	0.4	1.9	-1.5	1.9	-1.5
Total Delegated Budgets	18.0	13.3	4.7	5.2	12.8
Non Delegated	-0.7	4.0	-4.7	4.0	-4.7
Grand total	17.3	17.3	0.0	9.2	8.1

Key Points :

- The M12 YTD savings is £17.3m compared to the annual target of £17.3m.
- However, the M12 YTD **Delegated** savings is only £13.3m, which is £4.7m below the Annual target.
- The largest savings shortfalls are in:
 - Unscheduled Care £2.2m,
 - Diagnostics, Specialities & Therapies £1.2m
 - Planned Care £0.9m.
- The M12 Recurrent savings of £9.2m is £8.1m below the Annual target of £17.3m.
- The **Delegated** Recurrent savings is only £5.2m, which is £12.8m below target.
- The largest recurrent savings gaps are in
 - Planned Care £3.6m,
 - Unscheduled Care £2.8m,
 - Diagnostics, Specialities & Therapies £2.6m,
 - Mental Health & Learning Disabilities £2.0m
 - Children & Families £1.3m.





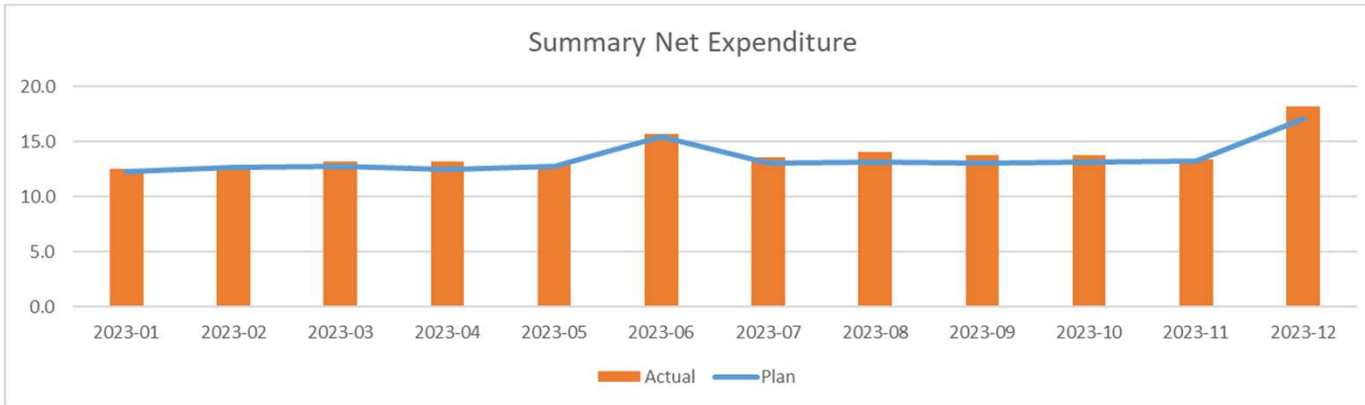
Planned Care Group M12 Finance Summary



Summary	Annual Budget (£m)	Cur Month Budget (£m)	Cur Month Actual (£m)	Cur Month Variance (£m)	YTD Budget (£m)	YTD Actual (£m)	YTD Variance (£m)
Pay	136.3	14.4	15.4	0.9	136.3	142.8	6.5
Non Pay	28.3	3.1	3.1	0.0	28.3	27.2	(1.2)
CRES	(0.9)	(0.2)	0.0	0.2	(0.9)	0.0	0.9
Income	(2.6)	(0.3)	(0.3)	(0.1)	(2.6)	(2.9)	(0.2)
Grand Total	159.3	15.2	16.4	1.1	159.3	165.3	6.0

Key Points :

- The M12 current period variance is a £1.1m overspend (M11: £0.2m).
- The M12 year to date variance is a £6.0m overspend.
- Net Expenditure in M12 was £16.4m, which was £3.0m higher than M11. This is primarily because of the consolidated/non consolidated pay awards of £3.0m (which was offset with WG funding).

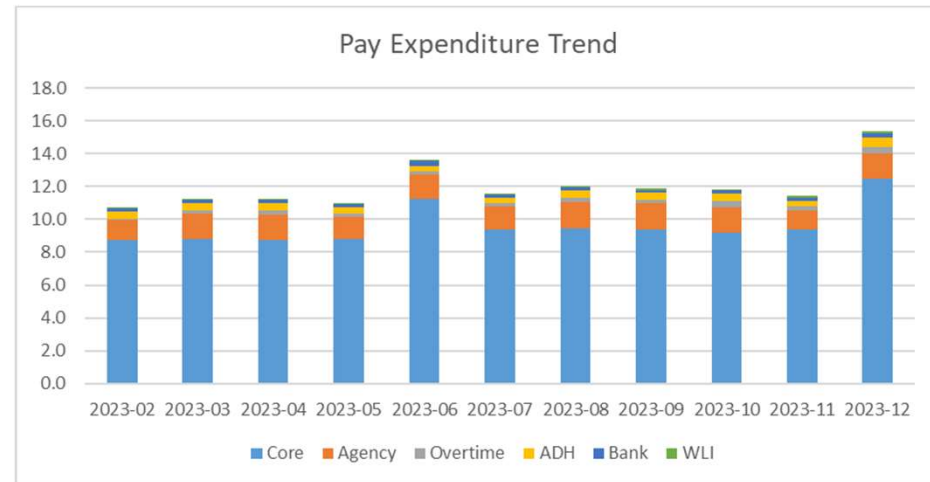




Planned Care Group M12 Performance- Pay



Pay Expenditure	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
Add Prof Scientific And Technical	0.6	(0.0)	(0.1)
Additional Clinical Services	14.7	0.2	2.0
Administrative & Clerical	11.3	(0.1)	(0.8)
Allied Health Professionals	4.5	(0.0)	0.1
Estates And Ancillary	0.7	(0.0)	(0.0)
Healthcare Scientists	1.6	(0.0)	(0.1)
Medical And Dental	59.2	0.6	4.4
Nursing And Midwifery Registered	43.6	0.3	0.4
Pay Budget Adjustments	0.1	(0.0)	(0.1)
Students	0.0	0.0	0.7
Grand Total	136.3	0.9	6.5



Key Points for Year to Date Pay Performance:

- The M12 YTD position is reporting a £6.5m adverse position.
- The most concerning areas are Medical & Dental which is overspending by £4.4m and Additional Clinical Services which is overspending by £2.0m.
- Both these overspends reflect agency costs without any mitigating underspends in core substantive pay costs.

Key Points for Pay Trends:

- The M12 position is reporting expenditure of £15.4m.
- This represents an increase of £3.9m from M11. This is primarily the result of an increase in core spend of £1.8m due to the consolidated pay award and another £1.2 due to the non consolidated pay award. Both increases in pay award have been offset with equal funding. A further £0.4m increase in agency costs also contributed to the overspend.





Planned Care Group M12 Performance- Non pay



Non Pay Expenditure	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
FNC & CHC	0.0	0.0	0.0
DRUGS	7.2	0.3	1.0
M&SE	10.7	0.1	(0.6)
SERVICES FROM OTHER NHS BODIES	0.6	(0.0)	(0.0)
ESTABLISHMENT EXPENSES	1.4	0.0	0.0
APPLIANCES	5.6	(0.1)	(1.5)
PURCHASE OF HEALTH CARE SERVICES	0.9	(0.1)	(0.2)
MISCELLANEOUS SERVICES	0.4	(0.1)	(0.2)
PREMISES & FIXED PLANT	0.6	0.0	0.4
PRIMARY & SECONDARY CARE	0.0	0.0	0.0
PROVISIONS	0.0	0.0	0.0
GENERAL SUPPLIES & SERVICES	0.8	0.0	(0.2)
OTHER CLINICAL SERVICES & SUPPLIES	0.1	0.0	0.1
Grand Total	28.3	0.0	(1.2)



Key Points for Year to Date Non Pay Performance:

- The most significant adverse non pay variance relates to Drugs which is reporting an overspend of £1.0m at M12.
- Appliances are reporting an underspend of £1.5m which reflects the reduced activity being undertaken compared to pre COVID levels.

Key Points for Non Pay Expenditure Trend:

- Non pay expenditure in M12 has increased by £0.9m to £3.1m.
- £0.7m of this increase is related to additional theatre insourcing costs plus the corresponding extra non pay costs as a result of increased activity.





Planned Care Group M12 Performance - Income & Savings



Income	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
HEALTH ORGANISATIONS	(1.5)	(0.1)	(0.2)
PRIVATE PATIENTS	(0.0)	(0.0)	(0.2)
LOCAL AUTHORITIES	0.0	0.0	0.0
CATERING	0.0	0.0	0.0
OTHER INCOME	(1.1)	0.0	0.1
Grand Total	(2.6)	(0.1)	(0.2)

Key Points for Year to Date Income Performance:

- There are no significant income variances to report.

Savings	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
CRES Target	(3.7)	0.3	3.7
Achievement	2.8	(0.1)	(2.8)
Grand Total	(0.9)	0.2	0.9

Key Points for Year to Date Savings Performance:

- The M12 YTD savings performance is reporting an adverse variance of £0.9m.
- The Care Group are reporting £2.8m of savings for 22/23 which is £0.9m below target and recurrent savings of only £0.1m which is £3.6m below target. Nearly all of the £2.8m savings in 22/23 are therefore non recurring.





Planned Care M12 Performance



Additional Comments and Key Actions – Planned Care:

- Key drivers of M12 year to date position:
- Medical Pay overspend £4.4m. This includes £2.7m in POW Surgery, mainly driven by issues in Anaesthetics/Critical Care (£1.2m) and T & O (£1.0m) plus £1.5m in PCH Surgery mainly driven by ADH and agency cover in Anaesthetics (£0.6m), Gen Surg (£0.4m), T&O (£0.2m) and Max Facs (£0.2m).
- HCSW overspend of £1.9m relating primarily to agency and bank spend within POW surgery with 1:1 enhanced care as the main driver. Control around agency bookings and clarity on processes is expected to generate improvements through the POW Nurse leadership team, supported by the Nurse Productivity Group and Bank office. There has been focused reviews and a number of issues are being tackled. Process and controls around agency bookings and on boarding of new recruits are specific areas being actively targeted.
- Overseas nursing project spend of £0.7m whilst nurses complete OSCE qualifications.
- Non pay underspend of £1.2m, driven by a reduction in elective activity.
- CRES plans and further opportunities to reduce spend all reviewed on a regular basis.
- Covid escalation measures all reviewed and de-escalated where possible. Funding continues for PPE, NSA impact and nosocomial COVID investigations.
- CRES target £3.7m with £2.8m delivery in year but only £0.1m recurrently.
- Year end outturn was £0.7m above forecast as a result of; strike overpayments (£0.1m), additional ADH accrual (£0.15m), increased medical agency (£0.135m), increase in nursing overtime (£0.153m) stock take adjustment (£0.1m) and increase in theatres non-pay (£0.1m)
- The latest forecast recurrent position for planned care is an overspend of £11.6m





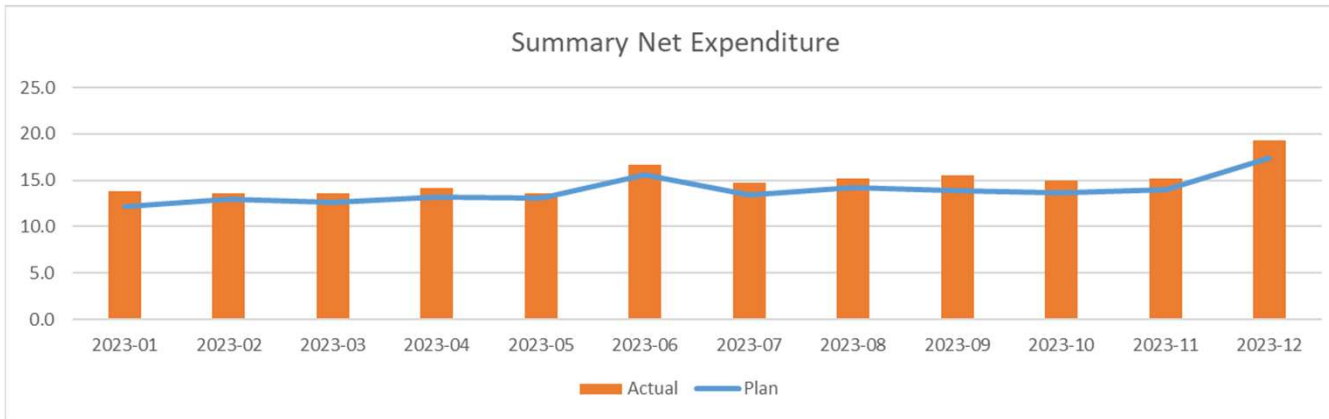
Unscheduled Care M12 Finance Summary



Summary	Annual Budget (£m)	Cur Month Budget (£m)	Cur Month Actual (£m)	Cur Month Variance (£m)	YTD Budget (£m)	YTD Actual (£m)	YTD Variance (£m)
Pay	136.5	14.5	15.5	1.1	136.5	145.5	9.1
Non Pay	33.4	3.4	4.0	0.7	33.4	36.2	2.9
CRES	(2.2)	(0.2)	0.0	0.2	(2.2)	0.0	2.2
Income	(1.4)	(0.2)	(0.2)	(0.1)	(1.4)	(1.6)	(0.2)
Grand Total	166.2	17.4	19.3	1.9	166.2	180.2	14.0

Key Points :

- The M12 current period variance is an overspend of £1.9m (M11: £1.2m).
- The M12 year to date variance is a £14.0m overspend.
- Net Expenditure in M12 was £19.3m an increase of £4.1m from M11. This is primarily because of the consolidated/non consolidated pay awards of £2.4m (which was offset with WG funding) plus increased variable pay costs of £0.7m. Non pay also increased by £0.6m as a result of increased drug spend within M12.

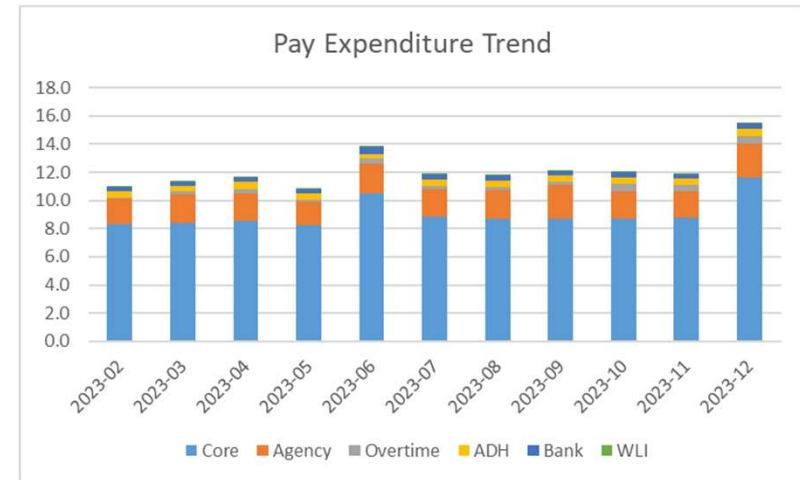




Unscheduled Care M12 Performance- Pay



Pay Expenditure	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
Add Prof Scientific And Technical	0.3	0.0	0.1
Additional Clinical Services	20.7	0.3	4.3
Administrative & Clerical	9.2	0.0	(0.1)
Allied Health Professionals	0.1	0.0	0.1
Estates And Ancillary	0.2	0.0	0.1
Healthcare Scientists	2.6	0.0	0.1
Medical And Dental	41.6	0.7	4.3
Nursing And Midwifery Registered	61.5	0.1	(0.5)
Pay Budget Adjustments	0.0	(0.0)	(0.0)
Students	0.0	0.0	0.6
Grand Total	136.5	1.1	9.1



Key Points for Year to Date Pay Performance:

- The M12 YTD position is reporting a £9.1m adverse variance.
- The most concerning area is Additional Clinical Services, which is overspending by £4.3m. This is primarily HCSW agency and bank, which is also being partially offset by Band 2 vacancies
- Medical & Dental is also overspending by £4.3m due primarily to agency costs being partially offset by vacancies.

Key Points for Pay Trends:

- The M12 position is reporting expenditure of £15.5m which is £3.4m higher than M11 (£12.1m).
- This increase is primarily the result of an increase in core spend of £1.8m due to the consolidated pay award and another £1.0 due to the non consolidated pay award. Both increases in pay award have been offset with equal funding. A further £0.4m increase in agency costs also contributed to the overspend.





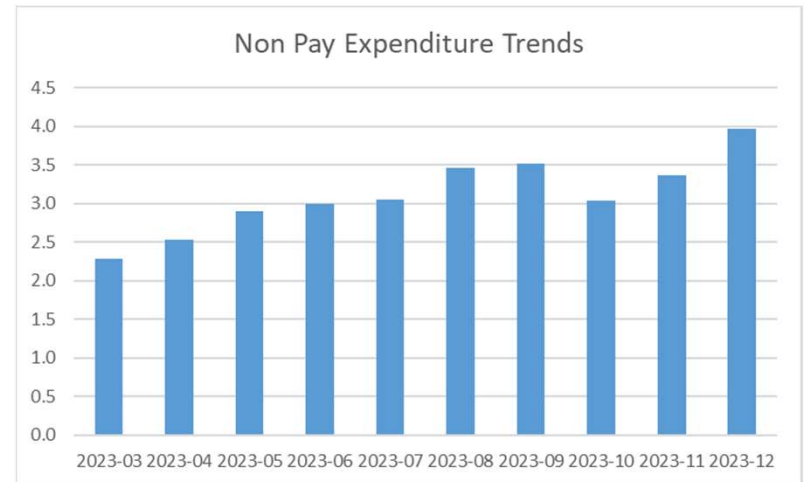
Unscheduled Care M12 Performance - Non pay



Non Pay Expenditure	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
FNC & CHC	0.0	0.0	0.0
DRUGS	20.8	0.3	0.7
M&SE	7.2	0.0	1.1
SERVICES FROM OTHER NHS BODIES	0.6	(0.0)	(0.0)
ESTABLISHMENT EXPENSES	1.3	0.1	0.2
APPLIANCES	2.1	0.3	0.4
PURCHASE OF HEALTH CARE SERVICES	0.1	(0.0)	(0.0)
MISCELLANEOUS SERVICES	0.3	(0.1)	0.1
PREMISES & FIXED PLANT	0.7	0.0	0.3
PRIMARY & SECONDARY CARE	0.0	0.0	0.0
PROVISIONS	0.0	(0.0)	0.0
GENERAL SUPPLIES & SERVICES	0.3	0.0	0.1
OTHER CLINICAL SERVICES & SUPPLIES	0.1	0.0	0.1
Grand Total	33.4	0.7	2.9

Key Points for Year to Date Non Pay Performance:

- The most significant adverse non pay variance relates to M&SE which is reporting an overspend of £1.1m at M12 (circa 15% of budget).



Key Points for Non Pay Expenditure Trend:

- M12 non pay expenditure has increased by £0.6m when compared to M11.
- £0.6m of this increase is related to increases in drug spend.





Unscheduled Care M12 Performance – Income & Savings



Income	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
HEALTH ORGANISATIONS	(0.7)	(0.1)	(0.1)
PRIVATE PATIENTS	0.0	0.0	0.0
LOCAL AUTHORITIES	0.0	0.0	0.0
CATERING	0.0	0.0	0.0
OTHER INCOME	(0.7)	(0.0)	(0.1)
Grand Total	(1.4)	(0.1)	(0.2)

Key Points for Year to Date Income Performance:

- There re no significant variances at M12.

Savings	Annual Budget (£m)	M12 Month Variance (£m)	M12 YTD Variance (£m)
CRES Target	(2.9)	0.2	2.9
Achievement	0.6	(0.0)	(0.6)
Grand Total	(2.2)	0.2	2.2

Key Points for Year to Date Savings Performance:

- The M12 YTD savings performance is reporting a £2.2m adverse variance.
- The Care Group are reporting In year savings of £0.6m for 22/23 which is £2.2m below target and recurrent savings of £0.1m which is £2.8m below target.





Unscheduled Care M12 Performance



Additional Comments and Key Actions –Unscheduled Care:

- Medical pay overspend £4.3m. POW £2m, PCH £1.6m and RGH £0.8m. These overspends are mainly linked to the premium cost of agency and ADHs covering sickness, vacancies and rota gaps. The pressure is spread between ED & Medicine for each site, across a mixture of consultant and junior grades. There is a medical staffing review underway by the Care Group Medical Directors to consider more sustainable staffing options.
- Nursing overspend £3.9m, RN £0.5m underspend, HCAs £4.3m overspend. Bridgend £4m and M&C £0.2m, with an underspend for RTE. HCA spend, particularly HCA agency spend in POW, is driven by enhanced care on NSA wards and an establishment differential compared to other sites. The premium cost of RN agency spend is a factor across all sites. There is an active Nurse Productivity agenda targeting agency controls and Heads of Nursing are investigating HCA demand.
- Students are incurring a pressure of £0.6m linked to the latest cohort of overseas nursing. This is a higher cost than planned linked to OSCE delays and filling RN posts. This recruitment project is now complete with all OSCE exams sat.
- Key non pay overspends are drugs £0.7m, M&SE £1.1m, appliances £0.4m and premises and fixed plant £0.3m. A key driver within RTE M&SE is £1m linked to diabetic pumps & consumables.
- Covid escalation measures continue to be reviewed with an expectation of de-escalation when possible. Covid spend forecast for the year currently is £6.8m, offset by Covid funding.
- CRES target of £2.9m with £0.6m forecast delivery in year (only £0.1m recurrently).The biggest gap is for Bridgend CSG with only 10% achievement forecast against the target in year. Further opportunities to develop CRES and Recovery plans to reduce spend continue to be reviewed and developments sought, though the focus of this is now in relation to saving opportunities to feed into the IMTP and 2023/24.
- The Care Group is actively tracking CSG financial recovery action plans to support IMTP savings.





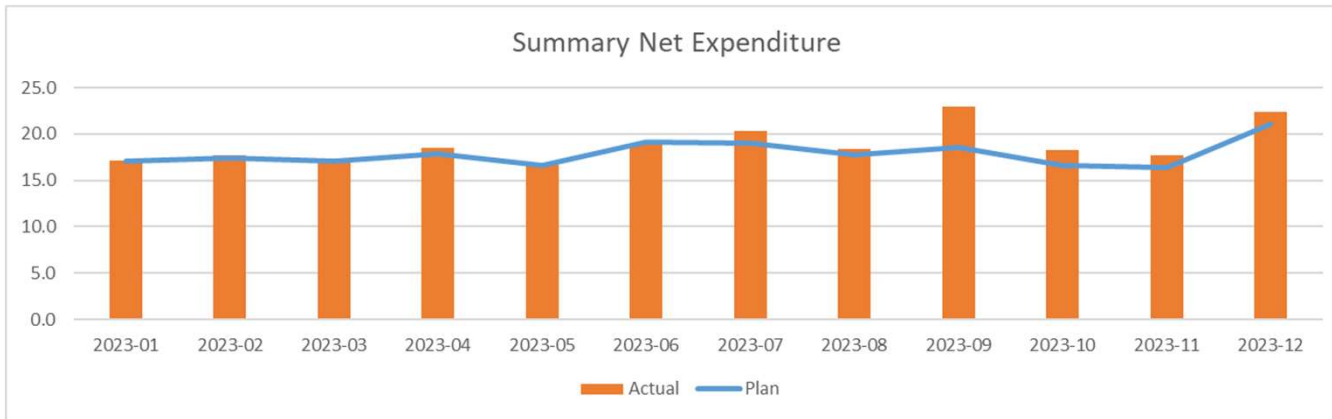
Diagnostics, therapies & Specialties M12 Finance Summary



Summary	Annual Budget (£m)	Cur Month Budget (£m)	Cur Month Actual (£m)	Cur Month Variance (£m)	YTD Budget (£m)	YTD Actual (£m)	YTD Variance (£m)
Pay	73.1	8.2	8.0	(0.2)	73.1	72.3	(0.9)
Non Pay	152.7	13.8	15.7	1.9	152.7	165.0	12.3
CRES	(1.1)	(0.1)	0.0	0.1	(1.1)	0.0	1.1
Income	(10.1)	(0.9)	(1.4)	(0.5)	(10.1)	(11.1)	(1.0)
Grand Total	214.6	21.1	22.3	1.2	214.6	226.1	11.5

Key Points :

- The M12 current period variance is a £1.2m overspend (M11: £1.3m).
- The M12 year to date variance is a £11.5m overspend.
- Net Expenditure in M12 was £22.3m, an increase of £4.7m from M11. This includes a pay increase of £1.9m due to the consolidated/non consolidated pay awards (which was offset with WG funding), plus Non pay increases of £3.0m as a result of increased PADm and prescribing spend in M12.

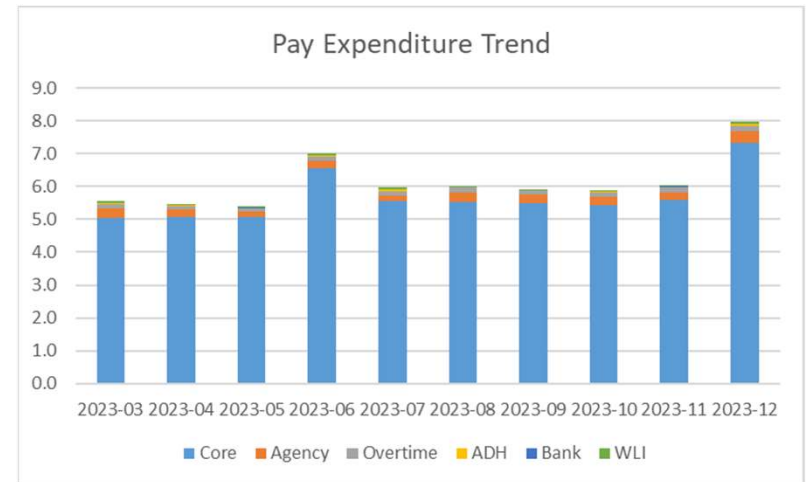




Diagnostics, therapies & Specialties M12 Performance - Pay



Pay Expenditure	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
Add Prof Scientific And Technical	11.2	(0.1)	(0.4)
Additional Clinical Services	9.3	(0.1)	(1.0)
Administrative & Clerical	4.7	(0.0)	0.0
Allied Health Professionals	30.4	(0.1)	(0.5)
Estates And Ancillary	0.0	0.0	0.0
Healthcare Scientists	7.1	0.0	0.3
Medical And Dental	9.5	0.1	0.2
Nursing And Midwifery Registered	1.5	(0.0)	(0.1)
Pay Budget Adjustments	(0.6)	0.0	0.6
Students	0.0	0.0	0.0
Grand Total	73.1	(0.2)	(0.9)



Key Points for Year to Date Pay Performance:

- The M12 YTD position is reporting a £0.9m favourable variance.

Key Points for Pay Trends:

- The M12 position is reporting expenditure of £8.0m which is £2.0m higher than M11.
- This increase is primarily the result of an increase in core spend of £1.1m due to the consolidated pay award and another £0.8m due to the non consolidated pay award. Both increases in pay award have been offset with equal funding.



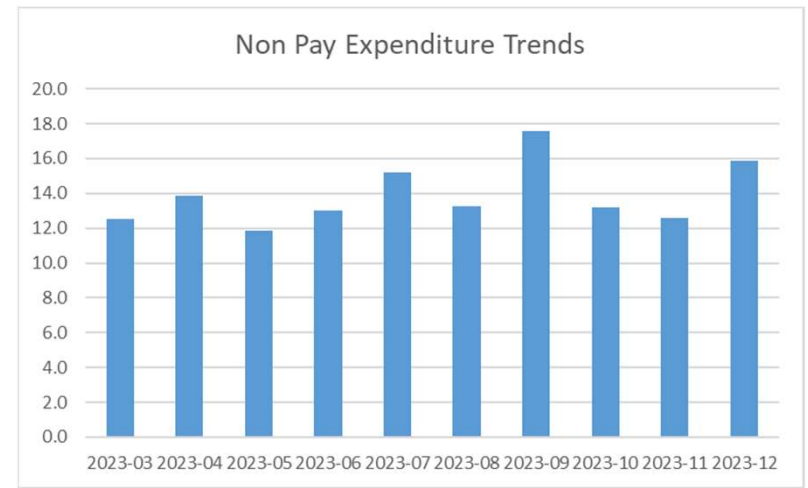


Diagnostics, therapies & Specialties

M12 Performance - Non pay



Non Pay Expenditure	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
FNC & CHC	0.6	(0.0)	0.0
DRUGS	14.0	(0.5)	(0.6)
M&SE	2.4	0.1	(0.0)
SERVICES FROM OTHER NHS BODIES	8.2	0.3	0.8
ESTABLISHMENT EXPENSES	1.5	0.0	0.1
APPLIANCES	0.8	(0.1)	(0.1)
PURCHASE OF HEALTH CARE SERVICES	3.8	0.1	0.2
MISCELLANEOUS SERVICES	(3.0)	0.1	2.9
PREMISES & FIXED PLANT	0.6	0.1	0.4
PRIMARY & SECONDARY CARE	117.3	1.7	8.2
PROVISIONS	0.0	0.0	0.0
GENERAL SUPPLIES & SERVICES	0.1	(0.0)	0.0
OTHER CLINICAL SERVICES & SUPPLIES	6.4	0.0	0.1
Grand Total	152.7	1.9	12.3



Key Points for Year to Date Non Pay Performance:

- The most significant non pay variance relates to a £8.2m adverse variance for Primary & Secondary Care which is mainly primary care prescribing.
- Miscellaneous services also has a £2.9m adverse variance due to increased NICE expenditure.

Key Points for Non Pay Expenditure Trend:

- Non pay expenditure in M12 has increased by £3.3m when compared to M11. This is mainly due to an increase in primary care prescribing costs of £2.8m.





Diagnostics, therapies & Specialties

M12 – Income & Savings



Income	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
HEALTH ORGANISATIONS	(4.6)	(0.3)	(0.9)
PRIVATE PATIENTS	(0.2)	0.0	0.1
LOCAL AUTHORITIES	(1.4)	(0.0)	0.1
CATERING	0.0	0.0	0.0
OTHER INCOME	(4.0)	(0.2)	(0.3)
Grand Total	(10.1)	(0.5)	(1.0)

Key Points for Year to Date Income Performance:

- As at M12 income is reporting a 1.0m favourable variance.

Savings	Annual Budget (£m)	M12 Variance (£m)	M12 YTD Variance (£m)
CRES Target	(4.4)	0.4	4.4
Achievement	3.2	(0.3)	(3.2)
Grand Total	(1.1)	0.1	1.1

Key Points for Year to Date Savings Performance:

- The M12 YTD savings performance is reporting a deficit of £1.1m.
- The Care Group are reporting In year savings of £3.2m for 22/23 which is £1.1m below target and recurrent savings of £1.8m which is £2.6m below target. Significant Non recurring savings of £1.4m are therefore being reported in 22/23





Diagnostics, therapies & Specialties M12 Performance



Additional comments and Key Actions – Diagnostics, Therapies & Specialties:

- Key drivers of the M12 year end position:
- Pay underspend of £0.9m. Mainly due to vacancies within Therapies and Medicines Management.
- Non pay overspend of £12.3m. Mainly driven by overspends on Primary Care prescribing £8.0m, NICE drugs £2.9m, Med Mgt FP10s £0.8m and £0.4m for Pathology driven by SLA over performance
- CRES under achievement of £1.1m in Medicines Management & £0.2m Radiology.
- CRES plans, Recovery Plans and further opportunities to reduce spend all reviewed on a regular basis.
- COVID escalation measures all reviewed and de-escalated where possible. Funding continues for Adferiad, Extended Flu and PPE.
- CRES target £4.4m with £3.2m delivery in year (£2.2m recurrently).
- The latest recurrent forecast position for DT&S is a £14.2m overspend





Corporate directorates M12 Summary Performance



Corporate Directorates	Annual Budget	M12	M12 YTD
	£k	£k	£k
Patient Care & Safety	15,945	(429)	(803)
Corporate Development	615	(5)	(0)
Chief Executive	3,588	(22)	57
Finance	4,719	34	(302)
Public Health	14,525	(385)	(577)
Digital	22,427	(177)	(536)
Medical Director	1,174	(70)	(110)
National Imaging Academy	1,562	(62)	(62)
Value Based Healthcare	2,330	26	26
Planning & Partnership	19,448	(536)	(799)
Research & Development	1,140	(45)	(10)
Estates	32,222	(731)	(1,084)
Therapies & Healthcare Sciences	199	13	(5)
Workforce & Organisational Development	10,351	(77)	(411)
COO Management	14,203	827	1065
Facilities Hub	14,163	95	437
Grand total	158,612	(1,544)	(3,115)

Key Points for Year to Date Performance:

- The M12 YTD position is reporting a £3,115k surplus.
- Significant M12 movements include:
 - COO Mgt - £827k overspend – this movement reflects the accounting for activity pathways which had commenced by the 31st March. The accrual at year end was much higher than previously anticipated.
 - Estates - £731k underspend – Swansea Bay SLA income linked to utilities costs greater than anticipated £250k; budgets for COVID ,rates and maintenance costs profiled into M12 and not required £440k
 - Planning & Partnerships - £536k underspend – Catch up on secondment income £81k; budgets profiled into M12 and not required £165k; unexpected slippage against partnership funding £111k; anticipated costs not received £49k
 - Patient Care & Safety - £429k underspend – forecast slippage on the Value Based Health Care allocation
 - Public Health - £385k underspend – Driven by underspends against COVID programme funding (largely testing)
 - Significant M12 YTD overspends:





Corporate directorates M12 Savings –Actual



Corporate Directorates	Annual Target	M12 YTD Act	M12 YTD Var
	£k	£k	£k
Patient Care & Safety	292	45	247
Corporate Development	61	32	29
Chief Executive	45	46	(0)
Finance	33	33	0
Public Health	35	35	(1)
Digital	229	106	123
Medical Director	0	0	0
National Imaging Academy	0	0	0
Value Based Healthcare	0	0	0
Planning & Partnership	27	27	0
Research & Development	7	0	7
Estates	361	361	0
Therapies & Healthcare Sciences	0	0	0
Workforce & Organisational Development	97	102	(5)
COO Management	12	33	(21)
Facilities Hub	367	43	323
Grand total	1,565	823	701

Key Points for Savings:

- Total savings to M12 is £823k which is £701k below target.
- The largest M12YTD shortfalls are being reported in:
 - Facilities Hub - £323K
 - PC&S- £247K
 - Digital - £123K.





Corporate directorates M10 Savings - Forecast



Corporate Directorates	Annual Savings Target	M12 YTD Savings	M12 YTD Variance	M12 Recurrent Savings	M12 Recurrent Variance
	£k	£k	£k	£k	£k
Patient Care & Safety	292	45	247	33	258
Corporate Development	61	32	29	30	31
Chief Executive	45	46	0	45	0
Finance	33	33	0	33	0
Public Health	35	35	(1)	0	35
Digital	229	106	123	88	141
National Imaging Academy	0	0	0	0	0
Value Based Healthcare	0	0	0	0	0
Planning & Partnership	27	27	0	27	0
Research & Development	7	0	7	0	7
Estates	361	361	0	309	52
Therapies & Healthcare Sciences	0	0	0	0	0
Workforce & Organisational Development	97	102	(5)	97	0
COO Management	12	33	(21)	41	(29)
Facilities Hub	367	43	323	35	332
Grand total	1,565	823	701	738	828

Key Points for Savings:

- Total savings to M12 is £823k which is £701k below target.
- The largest forecast shortfalls are in:
 - Facilities Hub – £323k
 - PC&S – £201k
 - Digital - £141k
- The Forecast Recurrent savings is £738k. This forecast is £828k below target.
- The largest forecast recurrent shortfalls are also in the three areas noted above .

