



Agenda Item:

## **Board of Directors**

Meeting Report

Subject: Board Performance Report

Date: 27 November 2014

Author: Sandra Chapman, Head of Management Accounts
Lead Director: Margaret Ashworth, Interim Chief Financial Officer

#### **Executive Summary**

The key headlines are:

- The summary I & E position is a £18.10m deficit. This is £1.78m worse than plan of £16.32m and pay pressures remain high. The Executive is identifying and delivering at pace actions to support delivery of the 2014/15 Plan.
- A review of discretionary spend has produced a one off benefit of £0.30m from the release of accruals.
- The CIP forecast for 2014/15 is £2.4m in year against the in year target of £8.7m.
   The full year effect saving is £5.7m (£4.8m risk adjusted). The actual CIP delivered at month 7 stands at £0.7m against Monitor phased plan of £4.0m.
- The CIP forecast which has been initiated through the Programme Management Office, for 2014/15 is £3.8m in year against the year target of £8.7m. Reconciliation between the Programme Management Office and the Finance & Performance Managers in reporting the risk adjusted CIP will be delivered by January 2015 and reported to the Finance Committee in January.
- The capital programme spend at the end of period 7 is £3.76m (£3.80m including donated) against a plan of £5.75m (£5.90 including donated), however, the Q3 and Q4 forecasts predict full delivery of the capital plan.
- As at M07 we have drawn down £21.8m Capital and Revenue support which is in line with the planned profile. This is 69.9% of the total support of £31.2m. (£23.7m as at 3/11/14) Delivery of the CIP programme and planned over-performance remain key to ensuring a balanced liquidity position throughout 2014/15.
- Summary monthly financial tables for M07 have yet to be been submitted to Monitor as we are currently awaiting the updated template. The accompanying narrative will be submitted by the 28<sup>th</sup> November.

#### Recommendation

The Board of Directors are asked to

- Note the current financial position in terms of trading, liquidity and capital.
- Be aware of the key financial risks and the actions being taken particularly in respect of pay spend and achievement of the cost improvement programme.
- Note that summary monthly financial tables for M07 have yet to be been submitted to Monitor as we are currently awaiting the updated template. The accompanying narrative will be submitted by the 28<sup>th</sup> November.

Relevant Strategic Objectives (please mark in bold)						
Achieve the best patient experience	Achieve financial sustainability					
Improve patient safety and provide high	Build successful relationships with					
quality care	external organisations and regulators					
Attract, develop and motivate effective teams						

Links to the BAF and Corporate	BAF - Strategic Objective 4:
Risk Register	Financial and commercial sustainability.
Trion regiotor	i mandial and commercial sustainability.
	Risk Register – Financial Risks
Details of additional sister	<u> </u>
Details of additional risks	Not applicable
associated with this paper (may	
include CQC Essential Standards,	
NHSLA, NHS Constitution)	
Links to NHS Constitution	Not applicable
Financial Implications/Impact	Not applicable
·	
Legal Implications/Impact	Not applicable
gpapp	The applicable
Partnership working & Public	Not applicable
•	Not applicable
Engagement Implications/Impact	
Committees/groups where this	None
item has been presented before	
Monitoring and Review	Report is standing item each month
Is a QIA required/been	Not applicable
completed? If yes provide brief	
details	
ucians	

# Board Financial Performance Report

Sherwood Forest Hospitals

NHS Foundation Trust

M7: October 2014

#### 1.0 Overview and Key Risks

- o **Income and Expenditure (I&E) statement (Appendix A)** The financial position for the Trust at Month 07 is an overall Income and Expenditure deficit of £18.10m which is worse than the Trust's internal plan by £1.78m. The key factors to highlight are:
  - Clinical income has improved in month by £0.45m to a position of £1.47m above plan at the end of October.

There is nothing to indicate that there has been a material impact on income due to the migration to Medway PAS, however the activity is being reviewed to provide additional assurance, as this is the first month of processing.

Finance is continuing to review and improve the process for calculating the Trust's clinical income. An Access based system to input to SLAM has been fully implemented for M07 which reduces the requirement for manual intervention.

The review process is continuing over the next quarter to:

- Use the SLAM system rather than external spreadsheets to calculate New to Follow Up ratios and any associated penalties.
- Review the process for invoicing Maternity Pathway activity and agree apportionment of tariff between provider Trust's and CCGs.
- Review the process for the recording and coding of Best Practice Tariff activity to ensure we are receiving the correct tariff.

The above will give greater certainty, resilience and confidence in our collection and reporting of clinical income.

 The level of pay overspend continues to remain high, and is £4.51m above plan at the end of month 7 (Appendix B).

As previously reported the key drivers for this continued pressure are:

Whilst pay CIP continues to be identified and transacted a balance of £4.80m of the original operational plan remains unidentified, of this £1.86m is included in the current pay overspend. CIP delivery is subject to a detailed weekly review in order to ensure that over the year the full value of the CIP is delivered. The latest CIP forecast is attached at Appendix C.

- Planned medical locum usage to address increased demand and case complexity presenting at the front door to achieve the 4-hour wait target.
- This increased demand has impacted on the ability to close the 'winter' capacity which is staffed at premium pay levels.
- Planned premium rate pay to deliver referral to treatment (RTT) targets in surgery, which is reflected in the YTD activity and income over performance.
   This will reduce during quarter 3 with the aim to minimise by quarter 4.
- Increased premium pay costs to deliver Cancer two week wait targets, due to increased referrals and patients choosing to wait beyond 14 days.
- The levels of non-clinical variable pay have increased due to difficulty in recruiting substantive project management resource and increased resources linked to the implementation of the Medway system (replacement of PAS).
- Escalation meetings have taken place to focus on the financial risks associated with pay costs and a series of actions have been agreed and are now being taken forward at pace.
- YTD non pay expenditure is £0.28m below plan, however there remains a risk around increased drugs and consumables cost linked to increased activity to deliver RTT targets in surgery.

A review of discretionary spend has undertaken which has produced a one off benefit of £0.30m from the release of accruals.

- Cost Improvement Programme (CIP). (Appendix C) The in-year CIP target of £8.7m remains a high financial risk.
  - The CIP forecast for 2014/15 is £2.4m in year against the in year target of £8.7m. The full year effect saving is £5.7m (£4.8m risk adjusted). The actual CIP delivered at month 7 stands at £0.7m against Monitor phased plan of £4.0m.
  - The CIP forecast which has been initiated through the Programme Management Office, for 2014/15 is £3.8m in year against the year target of £8.7m. It has been agreed that the reconciliation between the Programme Management Office and the Finance & Performance Managers in reporting the risk adjusted CIP, will be achieved by January 2015.
  - The CIP target for 2015/16 is £10.9m, which will be allocated to the divisions. The
    divisions have commenced the work on next year's schemes, and to date have
    identified schemes totalling £3.8m.
- As at M07 we have drawn down £21.8m Capital and Revenue support which is in line with the planned profile. This is 69.9% of the total support of £31.2m. (£23.7m as at 3/11/14) Delivery of the CIP programme and planned over-performance remain key to ensuring a balanced liquidity position throughout 2014/15 (see separate slide for 22 week forecast).

 Capital programme - Capital spend at M07 is £3.76m (£3.80m including donated) against a plan of £5.75m (£5.90 including donated). This is outside the Monitor tolerance of +- 15% however, the Q3 and Q4 forecasts predict full delivery of the capital plan.

#### 2.0 Monitor update

**Discretionary requirements** - Monitor has informed the Trust that their Discretionary Requirements in relation to monthly reporting will change. As we are still awaiting a formal response we have included the existing table at **Appendix E.** 

Monitor requires the Trust to produce external assurance of the deliverability of the Financial Plan. Baker Tilley have been hired to undertake this work; their first report will be due in early December.

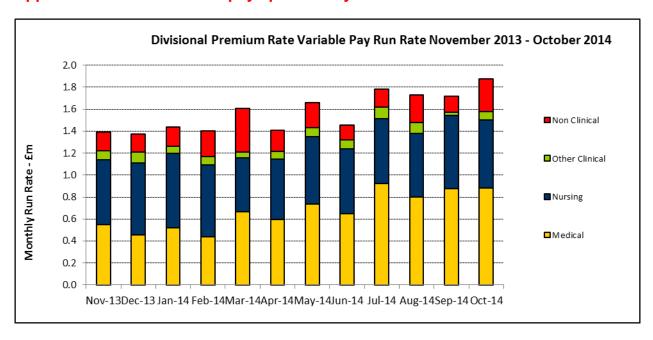
# Appendix A – Month 7 Income and Expenditure statement (Trust Internal Plan)

		October In-Month				Year to Date			
	Annual Plan	Plan	Actual	Variance	Plan	Actual	Variance		
	£m	£m	£m	£m	£m	£m	£m		
Clinical Income	217.20	18.99	19.44	0.45	127.92	129.39	1.47		
Other Operating Income	40.87	3.66	3.80	0.15	23.93	24.37	0.44		
Total Operating Income	258.07	22.64	23.24	0.60	151.85	153.76	1.90		
Pay	(163.47)	(13.41)	(14.74)	(1.33)	(95.86)	(100.36)	(4.51)		
Non Pay	(95.01)	(8.14)	(8.07)	0.06	(57.13)	(56.85)	0.28		
Operating Costs Excl. from EBITDA	(8.10)	(0.68)	(0.60)	0.08	(4.72)	(4.08)	0.64		
Total Operating Expenditure	(266.58)	(22.22)	(23.41)	(1.19)	(157.70)	(161.29)	(3.59)		
Profit/(Loss) from Operations	(8.51)	0.42	(0.18)	(0.59)	(5.85)	(7.53)	(1.68)		
Non Operating Income	0.49	0.00	0.00	0.00	0.01	(0.07)	(0.08)		
Non Operating Expenditure	(18.35)	(1.52)	(1.51)	0.01	(10.48)	(10.49)	(0.02)		
Surplus/(Deficit)	(26.37)	(1.10)	(1.68)	(0.58)	(16.32)	(18.10)	(1.78)		

# **M7** Detailed Pay statement

	Internal		In Month		Year to Date				
Pay Category	Annual Plan	Plan	Actual	Variance	Plan	Actual	Variance		
	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
Medical Fixed Pay	(37,105)	(3,064)	(3,040)	(24)	(21,774)	(21,011)	(763)		
Medical Variable Pay	(6,165)	(472)	(1,081)	609	(3,703)	(6,928)	3,225		
Medical Pay	(43,270)	(3,536)	(4,121)	585	(25,477)	(27,939)	2,462		
Nursing Fixed Pay	(64,613)	(5,295)	(5,014)	(281)	(37,399)	(34,794)	(2,605)		
Nursing Variable Pay	(1,576)	(91)	(809)	718	(1,122)	(5,328)	4,206		
Nursing Pay	(66,189)	(5,386)	(5,823)	437	(38,521)	(40,122)	1,601		
Other Clinical Fixed	(20,442)	(1,723)	(1,665)	(58)	(12,023)	(11,478)	(545)		
Other Clinical Variable	(661)	(40)	(175)	135	(463)	(1,262)	799		
Other Clinical Pay	(21,103)	(1,763)	(1,840)	77	(12,486)	(12,740)	254		
Non Clinical Fixed	(31,917)	(2,654)	(2,535)	(119)	(18,659)	(17,340)	(1,319)		
Non Clinical Variable	(993)	(73)	(422)	349	(715)	(2,223)	1,508		
Non Clinical Pay	(32,910)	(2,727)	(2,957)	230	(19,374)	(19,563)	189		
Total Pay	(163,472)	(13,412)	(14,741)	1,329	(95,858)	(100,364)	4,506		

#### Appendix B - Premium rate pay spend analysis



#### Appendix C – Cost improvement Programme position statement from PMO 2014/15 2015/16 Scheme Status Total NR 5,000 £000 £000 £000 4,000 Initiated 1,855 251 2,106 4,632 3642 **Trust Total** Developed 145 3.000 Implemented 950 725 1,676 1,246 2,000 Total (Developed & Implemented) 950 725 1,676 1,246 145 1,000 Total (All Schemes) 2.805 976 3,782 5.878 3.787 8.692 8.692 Savings Target Implemented To be identified To be Identified 4.910 2.814 (3.787)6,000 2014/15 In-Year Savings 2014/15 2015/16 Scheme Status FYE Total Care & Surgery (000<del>3</del>) 4,000 £000 £00 £000 £000 Initiated 423 455 1,587 111 534 Developed 3,000 97 138 112 Implemented 41 2.000 Planned 97 112 Total (Developed & Implemented) 41 138 1.000 520 152 672 566 1,587 Total (All Schemes) 2,816 2,816 Savings Target Developed Implemented To be Identified (1,587 To be Identified 2014/15 In-Year Savings 6,000 2015/16 2014/15 Care & Medicine Scheme Status FYE Total £000 £000 £000 £000 £000 4,000 Initiated 910 13 923 3,067 233 3,000 Developed 191 25 215 250 Implemented 2,000 Emergency 25 191 215 250 Total (Developed & Implemented) 1,000 1,100 1,138 3,317 233 Total (All Schemes) 2,708 Savings Target 2,708 Implemented To be Identified To be Identified 2014/15 In-Year Savings 6,000 2014/15 2015/16 Scheme Status FYE Total £000 £000 £000 £000 £000 nitiated 465 27 492 941 1,572 0 3,000 Developed Diagnostics & 313 378 691 447 0 Implemented 2,000 313 691 447 Total (Developed & Implemented) 378 1,000 778 405 1,183 1,388 1,572 Total (All Schemes) 1,709 1,709 Savings Target Developed Implemented To be identified (1,572) To be Identified 2014/15 In-Year Savings 2015/16 2014/15 Scheme Status FYE FYE 2.000 £000 £000 £000 Initiated 134 Planned Savin (£000) Developed Implemented 162 162 250 Total (Developed & Implemented) 162 Total (All Schemes) 296 333 333 Savings Target Initiated Developed Implemented To be identified To be Identified 2014/15 In-Year Savings 6.000 2014/15 2015/16 Scheme Status 5,000 5,000 4,000 Corporate Services £000 £00 £000 £000 £000 Initiated 23 107 251 Savings 3,000 145 187 282 469 187 2,000 187 282 469 187 145 Total (Developed & Implemented) 1,000 Total (All Schemes) 492 396 300 1,126 1,126 Savings Target Initiated Developed Implemented To be identified To be Identified

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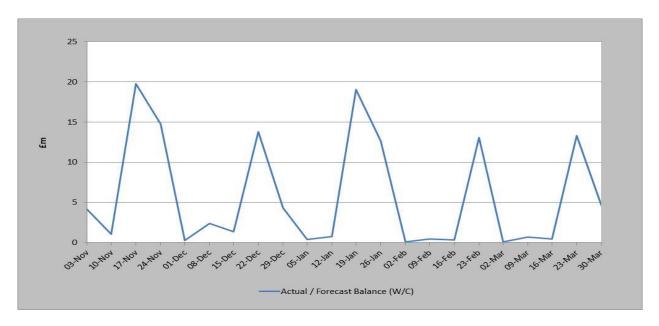
# Appendix C (continued) - Risk Adjusted CIP Delivery

		2014/15 In-Year Savings			2014/15	2015/16					
		R	NR	Total	FYE	FYE		Initiated	Developed	Implemented	Total
		£000	£000	£000	£000	£000		£000	£000	£000	£000
•	High Confidence (CIP will deliver in full on time)	1691	822	2513	3219	205		922	0	1591	2513
0	Medium Confidence (CIP will deliver at 70% of total)	289	7	296	1335	825	0	275	0	21	296
•	Low Confidence (Significant risk to delivery CIP will deliver at 30% of total CIP)	209	43	252	226	0		236	0	17	252
		2189	872	3061	4779	1030		1433	0	1628	3061
•	High Confidence (CIP will deliver in full on time)	77.26%	94.25%	82.10%	67.34%	19.90%		64.38%		97.70%	
0	Medium Confidence (CIP will deliver at 70% of total)	13.18%	0.80%	9.65%	27.94%	80.10%	•	19.16%		1.29%	
	Low Confidence (Significant risk to delivery CIP will deliver at 30% of total CIP)	9.56%	4.95%	8.24%	4.72%	0.00%	•	16.46%		1.01%	

DIVISIONAL RISK ADJUSTED CIP DELI	VERY				
	Recurrent	Non Recurrent	Total	2014/15 FYE	2015/16 FYE
	£000	£000	£000	£000	
Emergency Care and Medicine					
Risk Adjusted Total CIP Delivery	667	38	705	2463	35
Target			2708		
Revised to be Identified			2003		
Planned Care & Surgery					
Risk Adjusted Total CIP Delivery	482	108	590	528	271
Target			2816		
Revised to be Identified			2226		
Diagnostics and Rehabilitation					
Risk Adjusted Total CIP Delivery	675	402	1077	1226	724
Target			1709		
Revised to be Identified			633		
Newark					
Risk Adjusted Total CIP Delivery	178	24	203	269	
Target			333		
Revised to be Identified			130		
Corporate				·	
Risk Adjusted Total CIP Delivery	187	300	487	294	0
Target			1126		
Revised identified over target			639		

Total 2189 872 Total 2189 872 Total 2189 872 Total 4779 1030

## Appendix D – 22 week cash flow forecast



The above forecast was agreed by the Board of Directors October 2014 and assumes delivery of agreed cost reductions, delivery of planned over-performance and additional non recurrent income in quarter 4.

#### **Appendix E – Monitor discretionary requirements**

Metric		Annual Plan	YTD Plan	YTD Actual	YTD Variance
Revenue	£m	254.89	148.65	153.76	5.10
EBITDA	£m	(0.76)	(1.31)	(3.46)	(2.15)
Net Surplus/(Deficit)	£m	(26.37)	(16.42)	(18.10)	(1.68)
Underlying Surplus/(Deficit)	£m	(28.72)	(17.91)	(18.75)	(0.84)
Underlying Surplus/(Deficit) excluding £18.85m PFI premium impact	£m	(9.87)	(6.91)	(7.75)	(0.84)
Total CIP/Revenue Generation	£m	8.69	3.92	0.71	(3.21)
Recurrent CIP/Revenue Generation	£m	7.13	3.23	0.43	(2.80)
Cash	£m	0.64	0.65	0.11	(0.54)
Impact of PFI on EBITDA	£m	21.66	12.64	12.64	0.00
EBITDA adjusted for £18.85m PFI Premium Income	£m	20.90	11.32	9.17	(2.15)
Revenue plus £18.85m PFI Premium	£m	273.74	159.65	164.70	5.05
Revised EBITDA Return	%	7.6%	7.1%	5.6%	-1.5%

The PFI premium is the Trust's assessment of the additional cost burden of the PFI.

It should be noted that the calculation of these metrics reflect the detailed Monitor reporting templates and as such they cannot be calculated from the summary financial monitoring information shown in Appendix A of this report.