



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board



2025/26 Financial Performance Report
Finance and Performance Committee
Month 4 July 2025/26

Revised Annual Plan: Deficit Change



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

The revised annual plan deficit of £30.0m, improved from £31.5m, can be summarised in the following table being transacted as part of the Month 4 reporting cycle profiled into months:

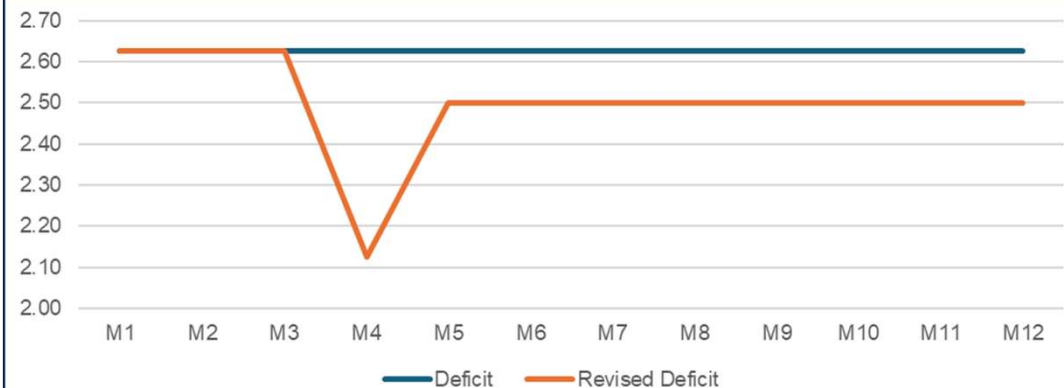
Monthly Profile £'m	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	Total
Original Deficit*	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	2.6	31.5
Revised Deficit*	2.6	2.6	2.6	2.1	2.5	2.5	2.5	2.5	2.5	2.5	2.5	2.5	30.0

Key Comments

- Prior Months 1-3 remain unchanged
- Month 4 includes a year to date catch up of £0.5m for Months 1-3. Approach
- The new monthly deficit from Month 5 onwards will be £2.5m per month
- Investment deferral £(1.5)m, Savings £(2.0)m and National Insurance Contributions £2.0m, have all been treated equally in profile in agreed with Welsh Government

*Please note above revised deficit include rounded figures

Revised Deficit Change (£'m)



Revised Annual Plan: Savings Target Change



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

The revised annual plan savings target of £46.4m, increased from £44.4m, can be summarised in the following table being transacted as part of the Month 4 reporting cycle profiled into months:

Monthly Change £'m	M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12	Total
Original Savings Target*	3.7	3.7	3.7	3.7	3.7	3.7	3.7	3.7	3.7	3.7	3.7	3.7	44.4
Revised Savings Target*	3.7	3.7	3.7	4.4	3.9	3.9	3.9	3.9	3.9	3.9	3.9	3.9	46.4

Key Comments

- Prior Months 1-3 remain unchanged
- Month 4 includes a year to date catch up of £0.6m for Months 1-3
- The new monthly savings target from Month 5 onwards will be £3.9m per month
- Savings tracker has been amended to reflect the revised target of £46.4m (£19.0m recurrent, £27.4m non recurrent)
- Savings plans are identified for the whole £2.0m

*Please note above revised deficit include rounded figures

Savings Target Change (£'m)



Executive Summary



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

The Health Board's Revised Annual Planned Deficit is £30.0m with a Revised Savings Target of £46.4m. The gross end of year forecast is £47.6m, which exceeds the Revised Annual Planned Deficit and Target Control Total. Total Savings Identified to date are £26.9m, leaving a gap of £19.5m against the Revised Annual Savings Target of £46.4m.

The in-month financial position is a deficit of £2.6m, which is a worsening against the £2.1m in-month deficit plan. The core operational variance is £0.5m with the in-month savings target of £4.4m being fully identified and delivered. The financial run rate is on track to achieve plan but increases in expenditure and a savings delivery gap are forecast in future periods. Mitigating actions of £17.6m are therefore required, with further action required to improve beyond the Revised Annual Plan to £24.0m in line with Welsh Government expectation.

Key Driver (£'m)	Prior month variance to breakeven	Current month variance to breakeven	Year to Date variance to breakeven	Prior Month End of Year forecast to breakeven	End of Year forecast to breakeven
Planned Deficit	2.6	2.1	10.0	31.5	30.0
Unidentified / (Identified) savings gap / (improvement)	0.2	0.0	2.4	22.3	19.5
Under / (Over) delivery of savings schemes	0.0	0.0	0.0	0.0	0.0
Core operational variation	(0.3)	0.5	(0.7)	(5.1)	(1.9)
Gross Forecast	2.5	2.6	11.7	48.7	47.6
Conversion of current run rate	0.0	0.0	0.0	(17.2)	(17.6)
Reported Position	2.5	2.6	11.7	31.5	30.0

Key Measures (Risk rating = Impact x Likelihood)		
Core Operational Variation		Despite a worsening in Month 4, core budget performance remains on plan, with the organisation's aspiration being to improve beyond the planned deficit in the coming months, aligned to the quarter 2 executives focus of de-risking the deficit further to £24.0m in line with Welsh Government expectation.
Cash	Risk #2086 5 x 4 = 20	Given the Health Board's planned deficit is £30.0m, there will be a strategic cash requirement in line with our forecast deficit and working capital balances. The risk for cash has changed to red this month due to the previously assuming WG would cover cash requirements up to the TCT, however, the clarity of message from WG now suggests there is a consequential risk and cash funding will not exceed £24.0m.
Savings		Of the revised annual savings target of £46.4m, £26.9m has been identified on an in-year basis resulting in an under identification of £19.5m, all of which are projected to fully deliver. Recurrent schemes identified total £11.6m against plan of £19.0m, with the balance of £15.3m being non-recurrent against the revised plan of £27.4m. Year to date non-recurrent savings indicate further savings can be achieved, with the current run rate supporting the ability to deliver savings if expenditure does not increase.
Capital		The risk of underspending against the capital resource limit is low at this stage of the financial year.
Underlying Deficit	Risk #1199 5 x 5 = 25	The underlying deficit calculated as part of the planning cycle is £58.5m, which assumes £19.0m of recurrent savings delivery. As at Month 4 £11.6m of recurrent full year effect schemes have delivered, resulting in an underlying deficit of £65.7m with a full year recurrent savings identification gap of £7.4m. This does not support the organisations required trajectory to achieve financial breakeven as part of the conditional recurrent funding criteria by 2027/28; delivery commitments are required urgently.

Movements from Prior Reported Position



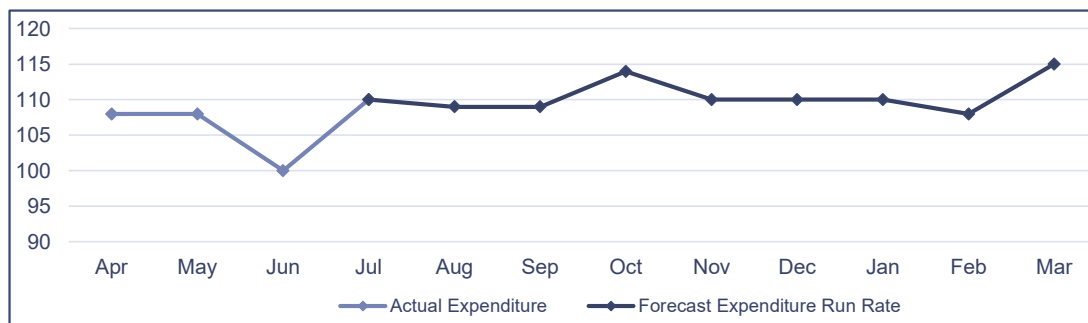
GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Key Driver (£'m)	Prior Month End of Year Forecast	End of Year Forecast	Movement in Forecast
Planned Deficit	31.5	30.0	(1.5)
Unidentified savings gap	22.3	19.5	(2.8)
Under / (Over) delivery of savings schemes	0.0	0.0	0.0
Core Operational Variation	(5.1)	(1.9)	3.2
Gross Forecast	48.7	47.6	(1.1)
Conversion of current run rate	(17.2)	(17.6)	(0.4)
Reported Net Position	31.5	30.0	(1.5)

Monthly Actual and Forecasted Expenditure Run-Rate £'m

The forecast revenue run-rate trajectory reflects the revised planned deficit position of £30.0m. Month 3 Amortisation of Capital Expenditure has reduced circa £8.0m



Unidentified Savings Gap (£'m)	Change
Revised Savings Target change	2.0
In-month underspend savings conversion	(1.5)
Newly identified schemes	(2.2)
Blue/Red converted to Amber/Green savings schemes	(1.1)
Movement in Unidentified Savings Gap	(2.8)

Under / (Over) Delivery of Savings Schemes (£'m)	Change
No change to report	0.0
Movement in Savings Delivery	0.0

Core Operational Variation (£'m)	Change
Commissioned Healthcare Services incl. high-cost CHC packages & beds	3.3
Clinical Services and Supplies due to increased Theatre activity	2.6
Continuation of vacancies across various Pay Staff groups	(2.7)
Movement in Core Operational Variation	3.2

Revenue and Cash Trajectory

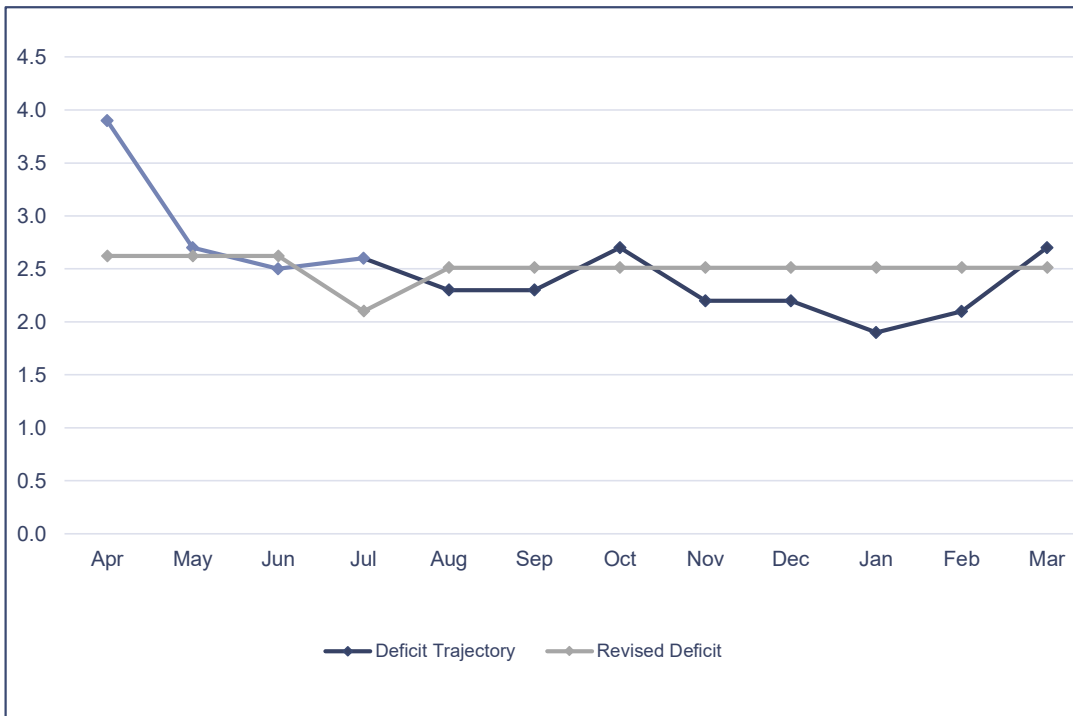


GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

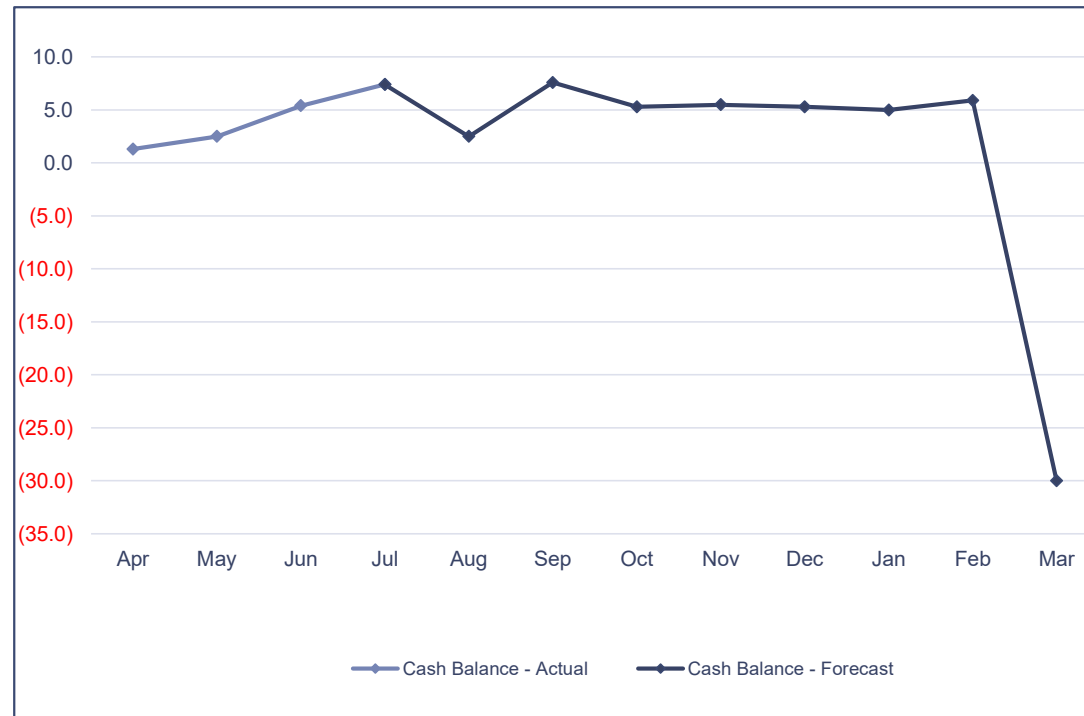
Revenue Deficit Trajectory (£'m)

At our Public Board meeting on 31 July, the Board made the decision to submit a revised, and improved, financial annual plan deficit of £30.0m. This was based on a £2.0m increase to savings delivery, a £1.5m reduction in our planned investments and a £2.0m shortfall in funding assumptions. The forecasted outturn for the year is a deficit of £30.0m, which is in line with the revised planned deficit.



Cash Flow Trajectory (£'m)

We will be working with Welsh Government to understand cash available and whether in line with our control total of £24.0m we can assume this as a pending cash allocation, albeit subject to a strategic cash request later in the year, leaving our current cash risk more accurately reflected as £6.0m.



Executive Insight, Next Steps and Actions



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Action / Decision	Description	Owner	Status	Due Date
Savings Delivery – Identification and delivery of robust recurrent and non-recurrent savings plans into future months, avoiding a disconnect between the in-month savings delivery and future projected savings	<p>There is a significant identification gap for savings schemes across Clinical Care Groups. Escalation for the Finance domain is likely due to risk associated with delivering the £30.0m revised annual plan equitably across services.</p> <p>There is a disconnect month on month with in-month delivery of savings and those forecast of future periods. This has been highlighted by Welsh Government as a credibility issue for the health board, who expect a comprehensive update. See slide ref #1.</p>	Executive Directors and Deputies	Outstanding, urgent action required as part of de-risking the annual plan	Overdue – should have concluded by the end of quarter 1
£30.0m to £24.0m further savings options	Timeline in place for Executive Directors to coordinate responses across their themes and portfolios, to generate QIA'd options to further improve the financial forecast to meet Welsh Governments expectations and revised TI de-escalation criteria. See slide ref #2.	Executive Directors	In progress	11 September (Month 5 MMR submission)
Medical Pay – Additional cover and premium	Continued use of additional medical cover, including premium locum and agency in BGH, Planned Care and Mental Health. Required: roster management, consistent rate card implementation and exit strategies for reliance on premium cover linked to sustainability service delivery plans. See slide ref #3.	Clinical Care Group Service Directors for those areas noted	Update required for timelines on Medical Stabilisation Programme	Overdue
LTAs and Commissioning – review of activity undertaken	Long Term Agreement increase in activity in Swansea Bay Health Board £0.5m. See slide ref #4.	Executive Director of Planning	Update to be given	20 August 2025
CCG Management – urgent review of super-numery management	Over-establishment of management posts within new CCG structure with significant financial impact. Annual cost = c.£0.9m across 9.2 WTE. Required: accelerate and conclude phase 2 process.	Chief Operating Officer	Update required, with original action created in Month 1	20 August 2025

1. Savings Delivery vs Prior Month Forecasts

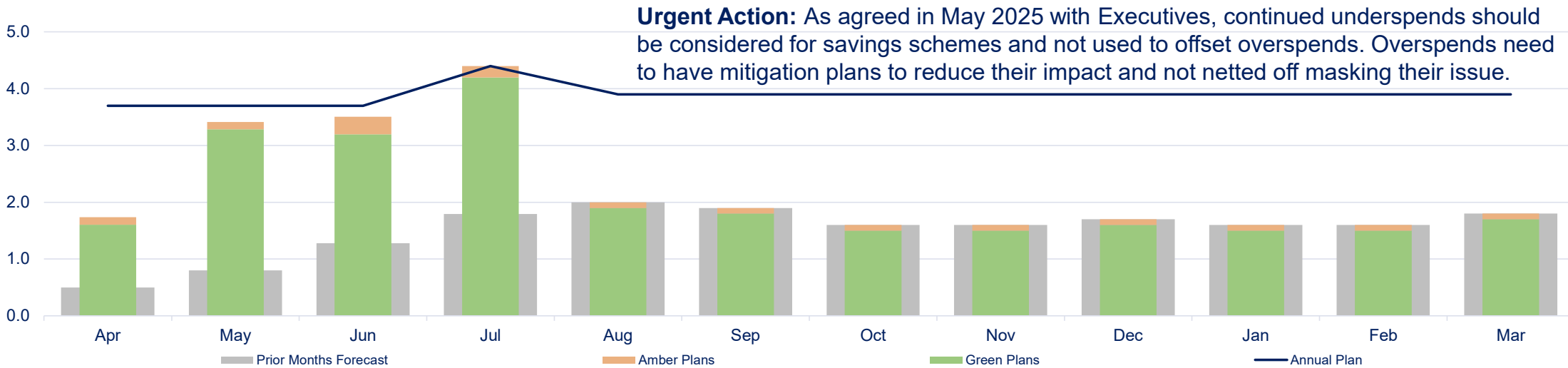


GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Savings	Savings Target	Savings Delivery	Prior Month Forecast	Deviation to Forecast
	<p>£46.4m</p> <p>Recurrent = £19m Non-Recurrent = £27.4m</p>	<p>£26.9m</p> <p>Recurrent = £11.6m Non-Recurrent = £15.3m</p>	<p>£22.1m</p> <p>Recurrent = £10.7m Non-Recurrent = £11.4m</p>	<p>£4.8m</p> <p>Recurrent = £0.9m Non-Recurrent = £3.9m</p>

Monthly Profiled Risk-Assessed In-Year Savings Delivery (£'m)



Savings schemes are not being identified proactively; are being delivered on a month-by-month basis. This does not allow for clear understanding of how the annual plan is being de-risked. Delivery is primarily achieved by the conversion of underspends into non recurrent savings plans. Each month this means that identification and delivery of savings is over-achieving against the prior month's forecast of the latest month as these are not factored into future forecasts. The identification and delivery of robust recurrent and non-recurrent savings plans into future months is required urgently.

2. £30.0m to £24.0m Further Savings Options



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

The Health Board has submitted a revised annual financial plan to Welsh Government as part of the Month 4 reporting submission, having agreed it at the Public Board meeting on 31 July 2025. Whilst this demonstrates an improvement, **Welsh Government** have provided clarity of their **expectations**; the 2024/25 outturn.

Welsh Government expect **absolute confidence** in the actions to **deliver a deficit of £30.0m**, and a **robust understanding of the actions** that could be taken to maintain the 2024/25 outturn position of a **£24.1m deficit**, all **by 11 September 2025** as part of the Month 5 reporting submission.

The **Board have tasked the Executives** with providing updated **financial options with an integrated impact assessment** for each of the further opportunity improvements listed in the £22.5m expenditure grouped options, by:

- **15 August** – deadline for Executives to submit their integrated impact assessment for their assigned themes
- **18 August** – papers issued, inclusive of these further improvement options, for Finance and Performance Committee
- **26 August** – Finance and Performance Committee to scrutinise and consider the options put forward by Executives
- **9 September** – In-Committee Board to review Executives recommendations and conclude forward actions
- **11 September** – CEO to write to Director General with an update on progress made towards the 2024/25 outturn
- **11 September** – Finance team to submit updated Savings plans, as agreed by the organisation and in-line with Welsh Government definitions, as part of the Month 5 reporting submission

3. Medical Pay Analysis



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Medical Pay Analysis Breakdown (£'m)		P01	P02	P03	P04
Substantive	Base Costs	10.4	9.9	10.2	10.0
	Enhancements	0.0	0.2	0.0	0.0
Variable	Additional Hours	2.2	1.8	2.1	2.6
	Waiting List Initiative	0.1	0.0	0.1	0.1
Agency (Premium)	Agency - Off Contract	0.1	0.1	0.1	0.0
	Agency - On Contract	0.1	0.3	0.1	0.3
Total Actual Expenditure		12.9	12.3	12.6	13.0
Total Budget		12.3	12.3	12.6	12.4
Total Variance		0.6	0.0	0.0	0.6

Substantive
£10.0m ●
Average = £10.1m
76.5% of Medical Pay

Variable
£2.7m ●
Average = £2.3m
21.1% of Medical Pay

Agency (Premium)
£0.3m ●
Average = £0.3m
2.4% of Medical Pay

Key Summary

- Total medical pay expenditure is indicating a concerning trend, driven by both increased reliance on variable and agency use.
- The medical stabilisation programme, whilst a priority for 2025/26, has yet to fully embed consistent financial improvements harnessing Allocate and Rate Cards.
- Additional hours average £2.2 million per month, with the main contributors being Cancer and Scheduled Care (£0.7m), Primary Care (£0.5m), and Carmarthenshire Integrated System (£0.3m). Month 4 costs include retrospective shift claims from prior periods, highlighting variability in the timing of claims submission.
- Agency Expenditure shows a positive trend in reducing Off-Contract usage, with a trajectory towards zero. However, On-Contract agency spend remains variable, averaging £0.2m per month.
- Community and Integrated Medicine is the primary contributor to the rise in Additional Hours this month, with expenditure increasing by £0.3m to £0.9m. This is largely driven by use of Locum Consultants and Locum Specialty Doctors.
- Locum Doctors now represent 25.8% of total Medical expenditure, highlighting the continued pressure on the workforce and the need for sustainable staffing solutions.

CCG Medical Variances to Plan (£'m)	P01	P02	P03	P04
Chief Operating Officer Management	(0.1)	0.0	0.0	0.1
Community and Integrated Medicine	0.4	(0.2)	0.0	0.2
Mental Health and Learning Disabilities	0.1	0.1	0.1	0.1
Operational Allied Health and Health Sciences	0.0	0.0	(0.2)	0.0
Planned and Specialist Care	0.2	(0.1)	0.1	0.1
Primary Care, Community Strategy and LTC	0.0	0.2	0.0	0.1
Total Variance	0.6	0.0	0.0	0.6

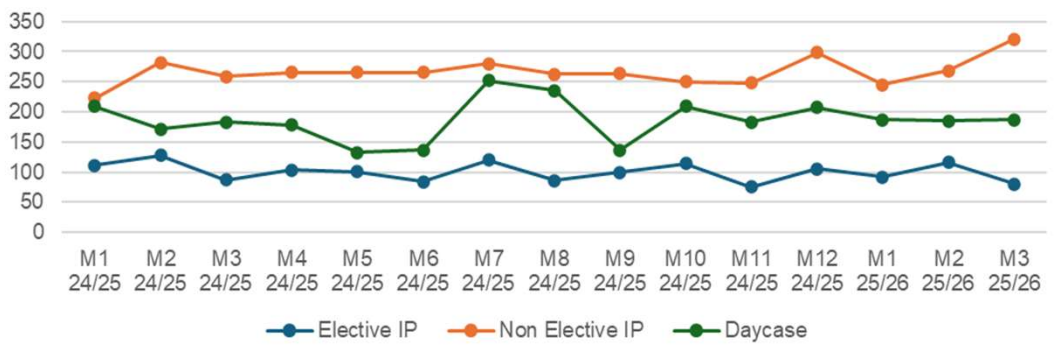
4. LTAs and Commissioning

Swansea Bay Activity:

As at Month 4 2025/26 YTD, our LTA with Swansea Bay UHB as provider is over budget by £583k, this is driven by an increase in non elective activity in 2025/26.

Swansea Bay UHB activity by month and POD (M1 2024/25 to M3 2025/26) is as per the below graph:

Swansea Bay UHB Activity POD

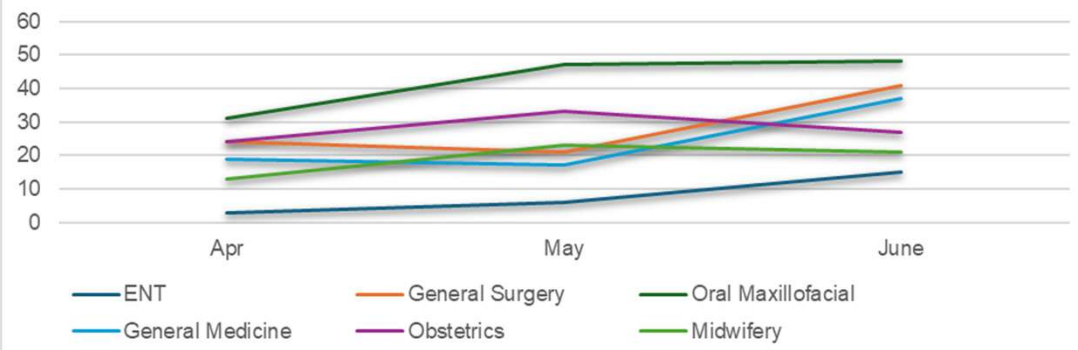


Swansea Bay Emergency Activity:

The Swansea Bay UHB non elective activity increase is in General Surgery, ENT, Oral Maxillofacial, General Medicine and Obstetrics. This increase in activity is currently uncoded, therefore it is not yet possible to further understand the demand growth.

Within the Swansea Bay UHB M3 LTA report, all 189 non elective patients in these specialties were uncoded, as were 122 of the 147 patients treated in May and 80 of the 114 patients treated in April.

Swansea Bay UHB LTA Emergency Activity



Other Providers:

- The WJCC as provider is under budget by £(299)k, the under performance on activity is partially offset by the WJCC all Wales risk share, which is £200k M4 2025/26 YTD (£600k FOT 2025/26, based upon latest available information to M3 2025/26)
- The LTA with Cardiff & Vale UHB as provider is over budget by £137k, this is driven by High Cost Drugs for tumours, leukaemia and transplant drugs.

End of Year: Financial Position Summary



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Headline	Reported Position	Savings Identification Gap	Capital Position	Underlying Deficit
	<p>£30.0m ●</p> <p>Revised Annual Plan = £30.0m Prior Annual Forecast = £31.5m</p>	<p>£19.5m ●</p> <p>Savings Target = £46.4m Total Identified = £26.9m</p>	<p>£34.5m ●</p> <p>Annual Plan = £34.5m Prior Annual Forecast = £28.9m</p>	<p>£65.7m ●</p> <p>Annual Plan = £58.5m</p>
Pay	<p>Total Pay</p> <p>£663.9m ●</p> <p>Plan = £666.5m Prior Annual Forecast = £667.2m</p>	<p>Substantive</p> <p>£605.3m ●</p> <p>Plan = £643.8m Prior Annual Forecast = £610.2m</p>	<p>Variable</p> <p>£50.8m ●</p> <p>Plan = £18.6m Prior Annual Forecast = £49.5m</p>	<p>Agency (Premium)</p> <p>£7.8m ●</p> <p>Plan = £4.1m Prior Annual Forecast = £7.5m</p>
Non-Pay	<p>Primary Care Drugs</p> <p>£85.7m ●</p> <p>Plan = £85.6m Prior Annual Forecast = £85.5m</p>	<p>Secondary Care Drugs</p> <p>£73.4m ●</p> <p>Plan = £75.9m Prior Annual Forecast = £75.2m</p>	<p>Continuing Healthcare</p> <p>£68.3m ●</p> <p>Plan = £63.0m Prior Annual Forecast = £67.5m</p>	<p>Clinical Services & Supplies</p> <p>£50.1m ●</p> <p>Plan = £48.1m Prior Annual Forecast = £46.4m</p>

Key Drivers

The **Month 4** end of year forecast financial position, is a **deficit of £30.0m**, which is in line with the revised Annual Deficit Plan of £30.0m. The **core operational variance to plan is £(1.9)m**, with the annual **savings** target of £46.4m being **under-identified by £19.5m**, and all current identified savings schemes of £26.9m being fully delivered. Future **mitigating actions** identification requirement to deliver a deficit position of £30.0m is **£(17.6)m**. Improvements to deliver the mitigating actions and go beyond the £30.0m deficit plan is now the focus of the organisation in the coming months.

End of Year: Key Drivers vs Plan



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Spend Category	£'m	Supporting Information
Planned Deficit	30.0	As per Annual Plan submission to Welsh Government
Savings Identification Gap / (Surplus)	19.5	Savings identification of £26.9m against £46.4m target
Income	(1.6)	Income overachievement for Bowel and Breast Screening, Wet age-related macular degeneration, Flying Start, Health Education and Improvement Wales within Children and Women, Radiology and Therapies.
Clinical Services and Supplies	2.0	Purchase of incontinence products within Community and Integrated Medicine and additional consumables for Theatres and Orthopaedics within Planned and Specialist Care due to increased activity.
Commissioned Healthcare Services	(1.9)	Dental contracts underspend, offset by insourcing within Planned and Specialist Care, Psychiatric Intensive Care beds from the Independent Sector and high-cost Continuing Health Care packages within Mental Health.
Drugs and Prescribing	(2.4)	Oncology and Ophthalmology drugs underspend due to delayed presentation of new NICE funded drugs. Activity growth of 12.5% year to date, but cost per patient decreased by 14.8% from prior year.
Other Non-Pay	4.5	Maintenance price increase on external suppliers' contracts, software licences fees, energy price increase and laundry service cost pressure. Premises, legal, travel and transport costs and license fees across areas.
Administration and Estates	(2.7)	Continued Administration & Clerical vacancies, particularly across Operational Directorates where savings have yet to be fully identified, thus recruitment is re-prioritised through Financial Control Subgroup.
Allied Health, Scientists and Other	(1.6)	Vacancies within Mental Health, Primary Care and other Operational areas, offset by agency and variable pay pressures within Operational Allied Health.
Medical and Dental	4.0	Premium costs to cover vacancies within Mental Health, Community and Integrated Medicine, Planned and Specialist Care and Primary Care.
Nursing, Midwifery and Clinical Support	(2.2)	Continued Nursing vacancies within Mental Health and Community and Integrated Medicine offset by increased variable pay in Glangwili & Prince Philip General Hospitals.
Gross Position	47.6	
Conversion of Current Run Rate	(17.6)	Intervention required across CCGs to deliver savings targets, with Executive Functions already over delivering.
Reported Position	30.0	

End of Year: Key Performance Breakdown



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Clinical Care Group (£'m)	Savings Gap to Target	Savings Delivery vs Plan Benefits	Core Operational Variation	Total Savings and Core Performance
Chief Operating Officer Management	0.4	0.0	(0.4)	0.0
Community and Integrated Medicine	6.8	0.0	0.0	6.8
Mental Health and Learning Disabilities	2.7	0.0	0.1	2.8
Operational Allied Health and Health Sciences	3.3	0.0	0.0	3.3
Planned and Specialist Care	5.3	0.0	0.4	5.7
Primary Care, Community Strategy and Long Term Care	3.5	0.0	(4.1)	(0.6)
Executive Functions	(2.5)	0.0	2.1	(0.4)
Sub Total	19.5	0.0	(1.9)	17.6
Planned Deficit				30.0
Gross Position				47.6
Conversion of Current Run Rate				(17.6)
Reported Position				30.0

End of Year: Saving Delivery Performance



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Savings

Savings Target

£46.4m

Recurrent = £19.0m
Non-Recurrent = £27.4m

In-Year Recurrent Gap

£7.4m

Target = £19.0m
Delivery = £11.6m

In-Year Non-Recurrent Gap

£12.1m

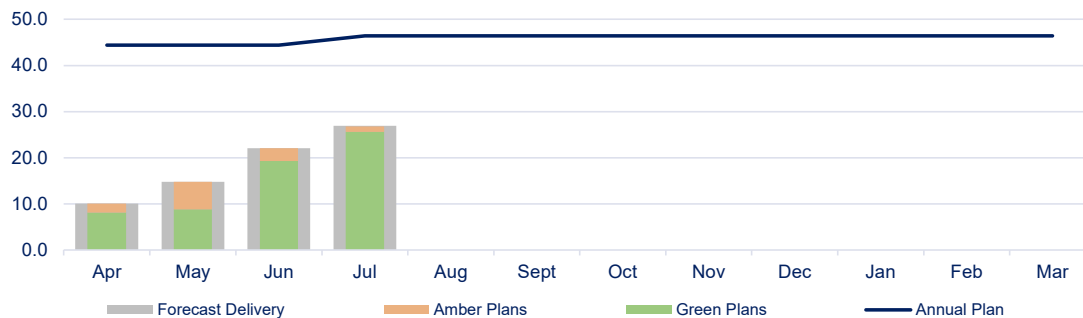
Target = £27.4m
Delivery = £15.3m

Full Year Recurrent Gap

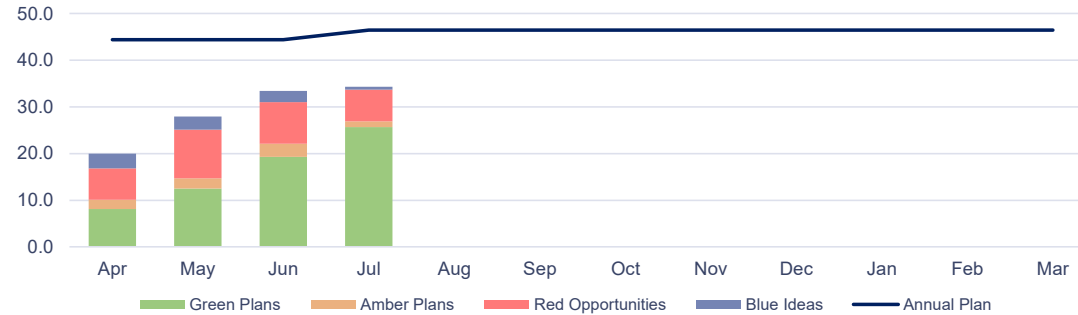
£7.1m

Target = £19.0m
Delivery = £11.9m

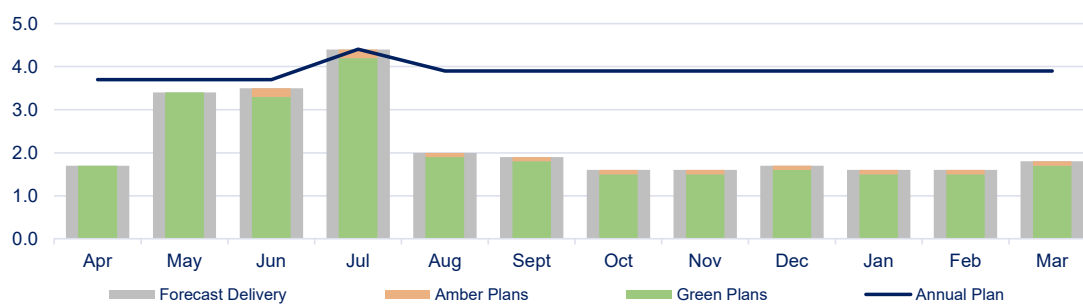
Monthly Trend of Annual In-Year Risk-Assessed Savings Delivery (£'m)



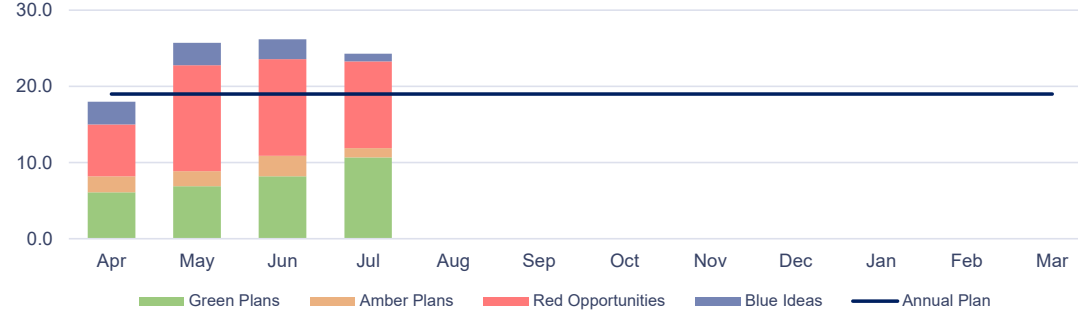
Monthly Trend of Annual In-Year Opportunity, Pipeline & Savings Plans (£'m)



Monthly Profiled Risk-Assessed Savings Delivery (£'m)



Monthly Trend of Annual Recurrent Opportunity, Pipeline & Savings Plans (£'m)



End of Year: Savings Performance Breakdown



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Savings

Savings Target

£46.4m

Revised Annual Plan = £46.4m

Savings Identification

£26.9m

58% of Savings Target

Savings Delivery

£26.9m

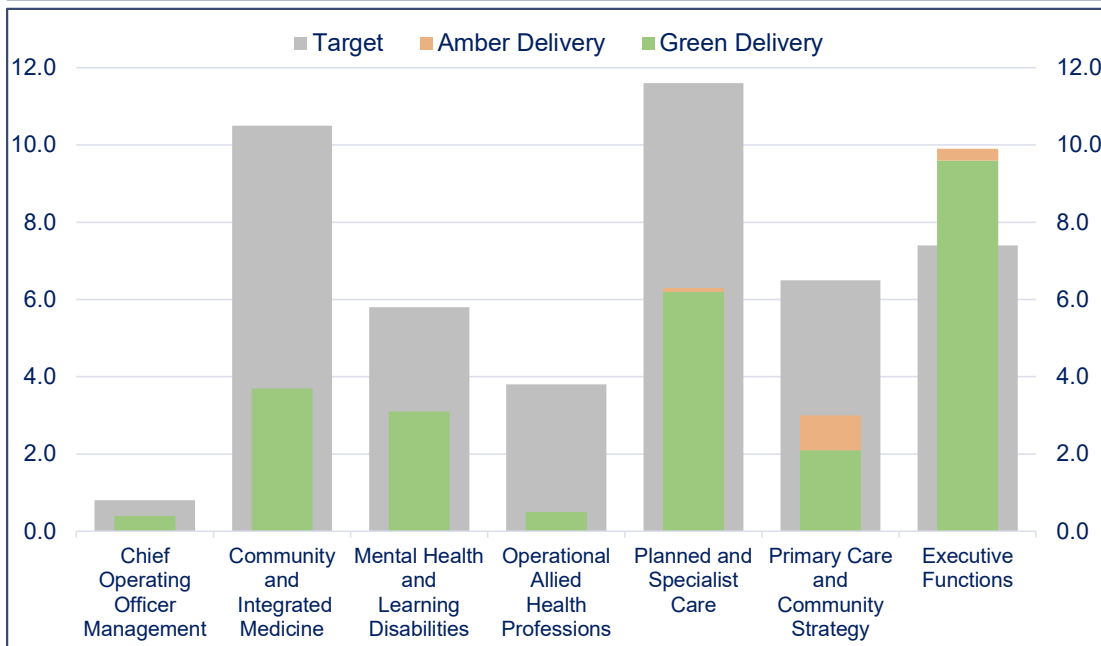
Recurrent = £11.6m
Non-Recurrent = £15.3m

Savings Gap to Target

£19.5m

42% of Savings Target

Savings Delivery vs Target (£'m)



Savings Performance Breakdown (£'m)

Clinical Care Group	Target	Plan	Delivery	Gap
Chief Operating Officer Management	0.8	0.4	0.4	0.4
Community and Integrated Medicine	10.5	3.7	3.7	6.8
Mental Health and Learning Disabilities	5.8	3.1	3.1	2.7
Operational Allied Health and Health Sciences	3.8	0.5	0.5	3.3
Planned and Specialist Care	11.6	6.3	6.3	5.3
Primary Care, Community Strategy and LTC	6.5	3.0	3.0	3.5
Executive Functions	7.4	9.9	9.9	(2.5)
Grand Total	46.4	26.9	26.9	19.5

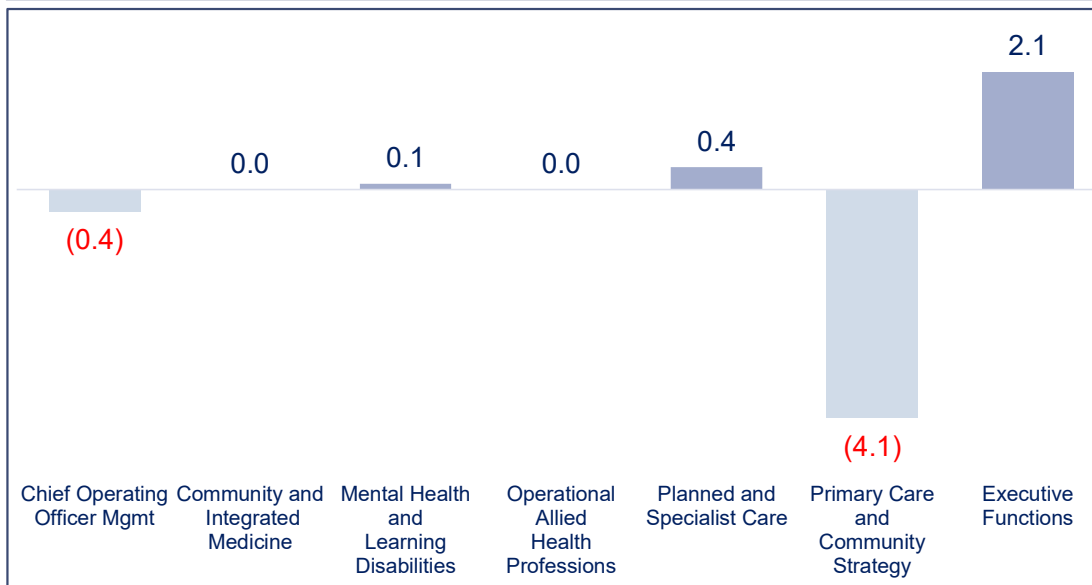
End of Year: Core Operational Variation



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Core Operational Variation (£'m)



Core Operational Variation (£'m)

Clinical Care Group	Pay	Non-Pay	Income	Total
Chief Operating Officer Management	(0.3)	(0.1)	0.0	(0.4)
Community and Integrated Medicine	(0.4)	0.5	(0.1)	0.0
Mental Health and Learning Disabilities	(1.1)	1.2	0.0	0.1
Operational Allied Health and Health Sciences	0.2	0.6	(0.8)	0.0
Planned and Specialist Care	0.4	0.9	(0.9)	0.4
Primary Care, Community Strategy and LTC	(0.3)	(4.2)	0.4	(4.1)
Executive Functions	(1.1)	3.4	(0.2)	2.1
Total	(2.6)	2.3	(1.6)	(1.9)

The core operational variance to plan is a surplus of £(1.9)m, with the main drivers being:

- Chief Operating Officer Management vacancies within Pay.
- Community and Integrated Medicine additional spend on Incontinence Products, offset by continued vacancies within Pay.
- Mental Health and Learning Disabilities high-cost Continuing Healthcare packages and purchase of Psychiatric Intensive Care Unit beds from the Independent Sector. Medical and Dental ongoing usage of Locums offset by continued vacancies within Nursing and Allied Health.
- Operational Allied Health lab equipment and Podiatry consumables expenditure, offset by Bowel and Breast Screening and Renal Testing income overachievement.
- Planned and Specialist Care Pay and Theatre consumables expenditure due to increased activity. Bowel Screening and Wet age-related macular degeneration income.
- Primary Care Dental Contracts underspend handed back to the Health Board offset by under-delivery of patient income.
- Executive Functions maintenance price increase on external suppliers' contracts, software licences fees, energy price increase and laundry service cost pressure within Estates and Facilities. Premises, legal, license, travel and transport costs, offset by continuation of vacancies across various areas.

In-Month: Financial Position Summary



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Headline	<p>Reported Position</p> <p>£2.6m ●</p> <p>Annual Plan = £2.1m Prior Month Forecast = £2.6m</p>	<p>Savings Identification Gap</p> <p>£0.0m ●</p> <p>Savings Target = £4.4m Total Identified = £4.4m</p>	<p>Savings Delivery Gap</p> <p>£0.0m ●</p> <p>Savings Delivery = £4.4m Prior Month Delivery = £3.5m</p>	<p>Core Operational Variation</p> <p>£0.5m ●</p> <p>Prior Month Variation = £(0.3)m</p>
Pay	<p>Total Pay</p> <p>£54.6m ●</p> <p>Plan = £55.4m Prior Month Actual = £54.7m</p>	<p>Substantive</p> <p>£49.2m ●</p> <p>Plan = £53.3m Prior Month Actual = 49.9m</p>	<p>Variable</p> <p>£4.7m ●</p> <p>Plan = £1.8m Prior Month Actual = £4.2m</p>	<p>Agency (Premium)</p> <p>£0.7m ●</p> <p>Plan = £0.3m Prior Month Actual = £0.6m</p>
Non-Pay	<p>Primary Care Drugs</p> <p>£7.5m ●</p> <p>Plan = £7.5m Prior Month Actual = £6.5m</p>	<p>Secondary Care Drugs</p> <p>£5.8m ●</p> <p>Plan = £6.3m Prior Month Actual = £5.6m</p>	<p>Continuing Healthcare</p> <p>£5.5m ●</p> <p>Plan = £5.3m Prior Month Actual = £5.5m</p>	<p>Clinical Services & Supplies</p> <p>£5.4m ●</p> <p>Plan = £4.0m Prior Month Actual = £4.8m</p>

Key Drivers

The Month 4 financial position is a **deficit of £2.6m**, which is a £0.5m worsening against the in-month **Deficit Plan of £2.1m**. The **core operational variance to plan is £0.5m**, with the in-month **savings** target of £4.4m being fully identified and all savings schemes identified of £4.4m being fully delivered.

In-Month: Key Drivers vs Plan



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Spend Category	£'m	Supporting Information
Planned Deficit	2.1	Revised in-month deficit plan for Month 4, in line with year-to-date deficit of £10.0m
Savings Identification Gap / (Surplus)	0.0	In-month identification of £4.4m against revised in-month target of £4.4m
Income	(0.2)	Over-achievement of income relating to Bronglais Sexual Assault Referral Centre, Substance Misuse income, Health Education Improvement Wales income and Occupational Therapy income.
Clinical Services and Supplies	1.4	Increases to theatre consumables including implants, surgical instruments and theatre drapes due to increased Orthopaedic and operating theatres activity. Increased expenditure of incontinence products in Carmarthenshire.
Commissioned Healthcare Services	0.2	Increased activity relating to Swansea Bay Long Term Agreement, and high-cost Continuing Healthcare packages and independent sector Psychiatric Intensive Care Unit beds within Mental Health.
Drugs and Prescribing	(0.5)	Oncology drugs underspend due to reduced activity and price increases patient being lower than planned, but with increases still expected later in the year.
Other Non-Pay	0.4	Backdated Clinical Negligence and Personal Injury Claims received from NWSSP and increased premises and rental costs.
Administration and Estates	(0.8)	Continued Administration & Clerical vacancies, particularly across operational areas where savings schemes have yet to be fully identified, thus recruitment is re-prioritised through the Financial Control Sub-Group.
Allied Health, Scientists and Other	(0.3)	Allied Health underspend within Primary Care due to year-to-date Cluster funding received to offset prior month costs.
Medical and Dental	0.6	Ongoing Medical and Dental pressures across Unscheduled Care, Mental Health and Primary due to premium costs in addition to cover for ongoing vacancies, in addition to retrospective claims for June.
Nursing, Midwifery and Clinical Support	(0.3)	Nursing underspend within Primary Care due to year-to-date Cluster funding received to offset prior month costs. Community and Integrated Medicine and Mental Health underspend due to vacancies.
Reported Position	2.6	

In-Month: Key Performance Breakdown



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Clinical Care Group (£'m)	Savings Gap to Target	Savings Delivery vs Plan Benefits	Core Operational Variation	Total Savings and Core Performance
Chief Operating Officer Management	(0.2)	0.0	(0.1)	(0.3)
Community and Integrated Medicine	0.6	0.0	0.2	0.8
Mental Health and Learning Disabilities	0.0	0.0	0.2	0.2
Operational Allied Health and Health Sciences	0.3	0.0	(0.1)	0.2
Planned and Specialist Care	0.2	0.0	0.3	0.5
Primary Care, Community Strategy and Long Term Care	0.0	0.0	(0.3)	(0.3)
Executive Functions	(0.9)	0.0	0.3	(0.6)
Sub Total	0.0	0.0	0.5	0.5
Planned Deficit				2.1
Reported Position				2.6

In-Month: Savings



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Savings

Savings Target

£4.4m

Recurrent = £1.6m
Non-Recurrent = £2.8m

Savings Identification

£4.4m

100% of Savings Target

Savings Delivery

£4.4m

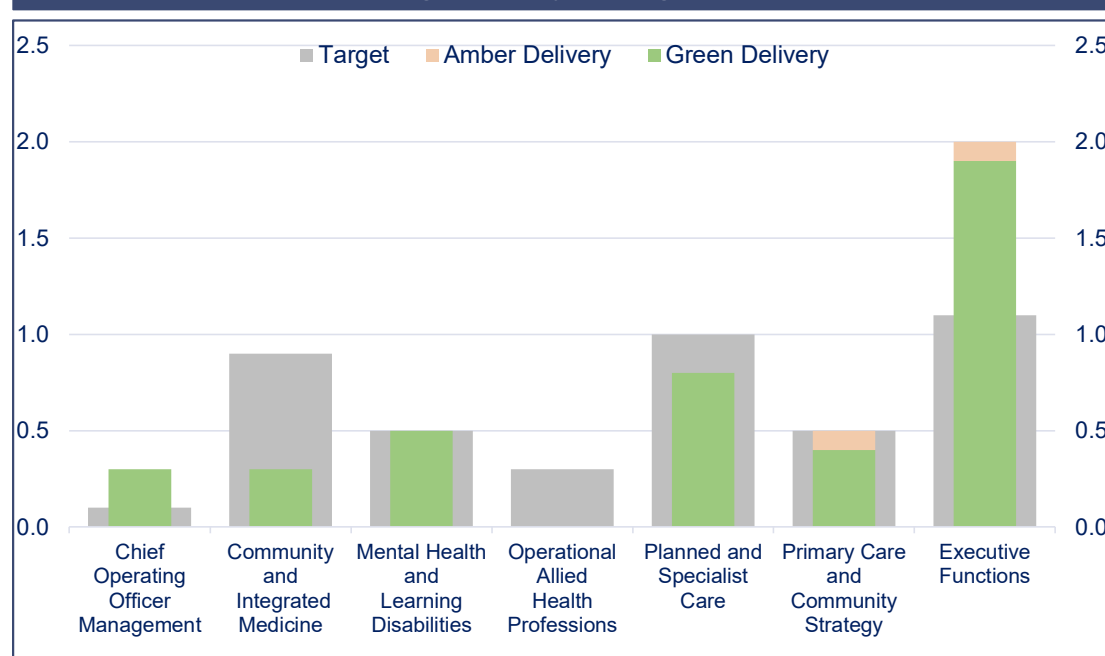
Recurrent = £1.3m
Non-Recurrent = £3.1m

Savings Gap to Target

£0.0m

0% Under Identified against Target

Savings Delivery vs Target (£'m)



Savings Performance Breakdown (£'m)

Clinical Care Group	Target	Plan	Delivery	Gap
Chief Operating Officer Management	0.1	0.3	0.3	(0.2)
Community and Integrated Medicine	0.9	0.3	0.3	0.6
Mental Health and Learning Disabilities	0.5	0.5	0.5	0.0
Operational Allied Health and Health Sciences	0.3	0.0	0.0	0.3
Planned and Specialist Care	1.0	0.8	0.8	0.2
Primary Care and Community Strategy	0.5	0.5	0.5	0.0
Executive Functions	1.1	2.0	2.0	(0.9)
Grand Total	4.4	4.4	4.4	0.0

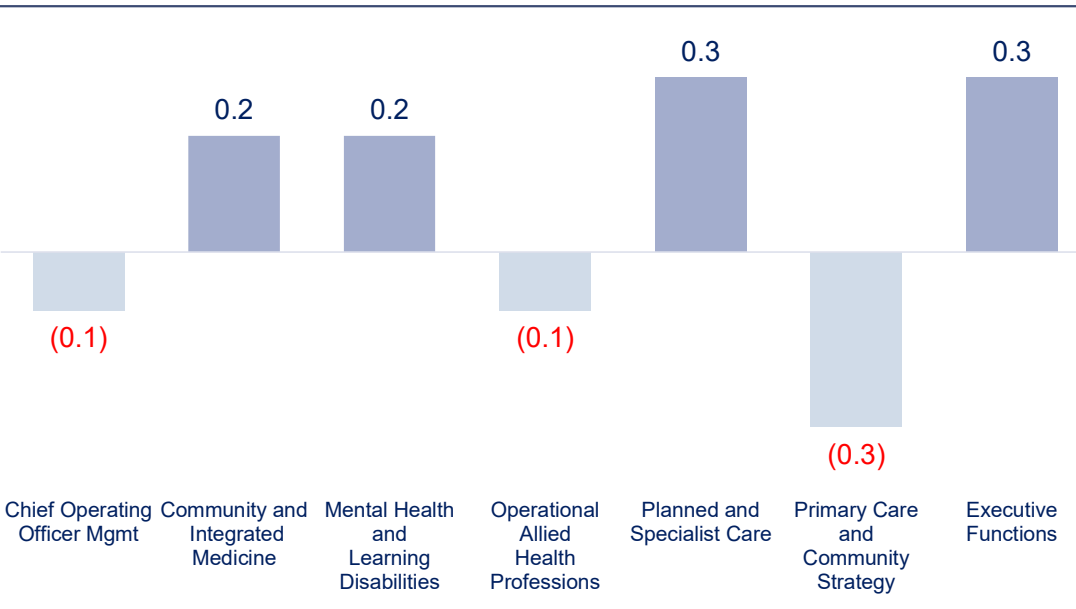
In-Month: Core Operational Variation



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Core Operational Variation (£'m)



Core Operational Variation (£'m)

Clinical Care Group	Pay	Non-Pay	Income	Total
Chief Operating Officer Management	0.0	(0.1)	0.0	(0.1)
Community and Integrated Medicine	0.0	0.3	(0.1)	0.2
Mental Health and Learning Disabilities	0.0	0.2	0.0	0.2
Operational Allied Health and Health Sciences	0.0	(0.1)	0.0	(0.1)
Planned and Specialist Care	0.0	0.3	0.0	0.3
Primary Care, Community Strategy and LTC	(0.3)	0.0	0.0	(0.3)
Executive Functions	(0.5)	0.9	(0.1)	0.3
Total	(0.8)	1.5	(0.2)	0.5

The core operational variance to plan is £0.5m, main drivers being:

- Purchase of incontinence Clinical Service & Supplies products, additional Continuing Healthcare packages, Interim Care Bed costs and premises and rental costs within Community and Integrated Medicine.
- High cost CHC packages and independent sector Psychiatric Intensive Care Unit beds within in Mental Health and Learning Disabilities.
- Additional activity, partly relating to Waiting Lists resulting in increased Theatre consumable costs, particularly relating to Orthopaedic inpatient activity within Planned and Specialist Care.
- Clusters Pay underspend in-month due to year to date funding received to cover prior months costs in Primary Care and Community Strategy.
- Long Term Agreements and Bad Debt, Losses & Negligence provision claims within Executive functions, offset by continued vacancies within Pay.

Year to Date: Financial Position Summary



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Headline	<p>Reported Position</p> <p>£11.7m ●</p> <p>Annual Plan = £10.0m</p>	<p>Savings Identification Gap</p> <p>£2.4m ●</p> <p>Savings Target = £15.4m Total Identified = £13.0m</p>	<p>Savings Delivery Gap</p> <p>£0.0m ●</p> <p>Savings Delivery = £13.0m Prior Month Delivery = £8.7m</p>	<p>Core Operational Variation</p> <p>£(0.7)m ●</p> <p>Prior Month Variation = £(1.2)m</p>
Pay	<p>Total Pay</p> <p>£219.3m ●</p> <p>Plan = £219.6m</p>	<p>Substantive</p> <p>£199.5m ●</p> <p>Plan = £211.8m</p>	<p>Variable</p> <p>£17.1m ●</p> <p>Plan = £6.4m</p>	<p>Agency (Premium)</p> <p>£2.7m ●</p> <p>Plan = £1.4m</p>
Non-Pay	<p>Primary Care Drugs</p> <p>£28.3m ●</p> <p>Plan = £28.4m</p>	<p>Secondary Care Drugs</p> <p>£23.4m ●</p> <p>Plan = £24.8m</p>	<p>Continuing Healthcare</p> <p>£21.5m ●</p> <p>Plan = £20.9m</p>	<p>Clinical Services & Supplies</p> <p>£17.7m ●</p> <p>Plan = £15.9m</p>

Key Drivers

The Month 4 year to date financial position is a **deficit of £11.7m**, which is a worsening against the year to date **Deficit Plan of £10.0m**. The **core operational variance to plan is £(0.7)m**, with the year to date **savings target** of £15.4m being **under-identified by £2.4m**, and all savings schemes identified of £13.0m being fully delivered.

Year to Date: Key Drivers vs Plan



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Spend Category	£'m	Supporting Information
Planned Deficit	10.0	Revised in-month Deficit Plan for Month 4, in line with YTD Deficit of £10.0m
Savings Identification Gap / (Surplus)	2.4	In-month identification of £4.4m against revised in-month target of £4.4m
Income	(0.5)	Income overachievement relating to Secondment income, Health Education Improvement Wales, Flying Start, Velindre Drug Rebates, Bowel and Breast Screening, Renal Testing and Wet age-related macular degeneration.
Clinical Services and Supplies	1.8	Increases to theatre consumables including implants, surgical instruments and theatre drapes due to increased Orthopaedic and operating theatres activity. Increased expenditure of incontinence products in Carmarthenshire.
Commissioned Healthcare Services	(1.6)	Primary Care Dental contracts handed back to the Health Board, offset by Swansea Bay Long Term Agreement increased activity, high-cost Continuing Healthcare packages and independent sector beds within Mental Health.
Drugs and Prescribing	(1.5)	Oncology drugs underspend due to price increases being lower than planned, and NICE treatments increases expected later in the year.
Other Non-Pay	1.3	Legal services within Nursing, Planned and Specialist Theatre Services and Critical Care Costs, backdated Clinical Negligence and Personal Injury Claims received from NWSSP and increased premises and rental costs.
Administration and Estates	(1.1)	Continuation of Administration and Clerical vacancies, particularly across Estates and Facilities and operational directorates.
Allied Health, Scientists and Other	(0.1)	Allied Health vacancies within Mental Health and Learning Disabilities and Community and Integrated Medicine, offset by over-establishment within Operational Allied Health Professions and Health Scientists.
Medical and Dental	1.5	Premium costs to cover vacancies within Mental Health, Primary Care, Community and Integrated Medicine and Women and Children, and double cover of Medical Rotas due to sickness, absences and retrospective claims.
Nursing, Midwifery and Clinical Support	(0.4)	Vacancies within Theatre Services in Planned and Specialist Care, and Pembrokeshire and Ceredigion within Community and Integrated Medicine
Reported Position	11.7	

Year to Date: Key Performance Breakdown



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Clinical Care Group (£'m)	Savings Gap to Target	Savings Delivery vs Plan Benefits	Core Operational Variation	Total Savings and Core Performance
Chief Operating Officer Management	(0.2)	0.0	(0.4)	(0.6)
Community and Integrated Medicine	2.0	0.0	0.0	2.0
Mental Health and Learning Disabilities	0.0	0.0	0.6	0.6
Operational Allied Health and Health Sciences	1.1	0.0	0.3	1.4
Planned and Specialist Care	1.7	0.0	(0.8)	0.9
Primary Care, Community Strategy and Long Term Care	0.5	0.0	(1.0)	(0.5)
Executive Functions	(2.7)	0.0	0.6	(2.1)
Sub Total	2.4	0.0	(0.7)	1.7
Planned Deficit				10.0
Reported Position				11.7

Year to Date: Savings



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Savings

Savings Target

£15.4m

Annual Plan = £46.4m

Savings Identification

£13.0m

84% of Savings Target

Savings Delivery

£13.0m

Recurrent = £3.7m
Non-Recurrent = £9.3m

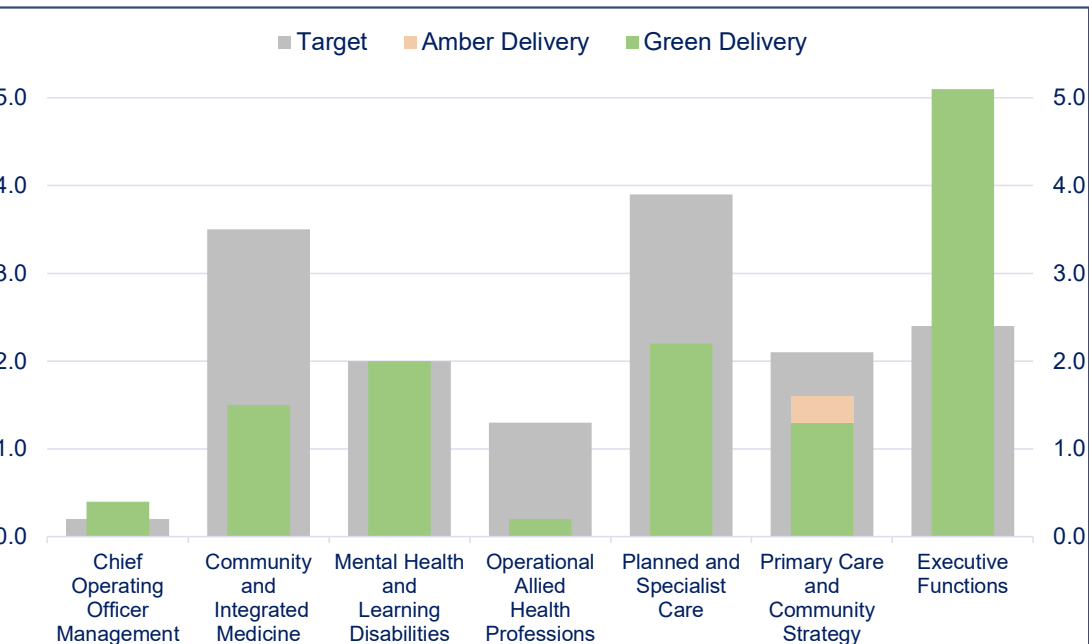
Savings Gap to Target

£2.4m

16% of Savings Target

Savings Delivery vs Target (£'m)

■ Target ■ Amber Delivery ■ Green Delivery



Savings Performance Breakdown (£'m)

Clinical Care Group	Target	Plan	Delivery	Gap
Chief Operating Officer Management	0.2	0.4	0.4	(0.2)
Community and Integrated Medicine	3.5	1.5	1.5	2.0
Mental Health and Learning Disabilities	2.0	2.0	2.0	0.0
Operational Allied Health and Health Sciences	1.3	0.2	0.2	1.1
Planned and Specialist Care	3.9	2.2	2.2	1.7
Primary Care, Community Strategy and LTC	2.1	1.6	1.6	0.5
Executive Functions	2.4	5.1	5.1	(2.7)
Grand Total	15.4	13.0	13.0	2.4

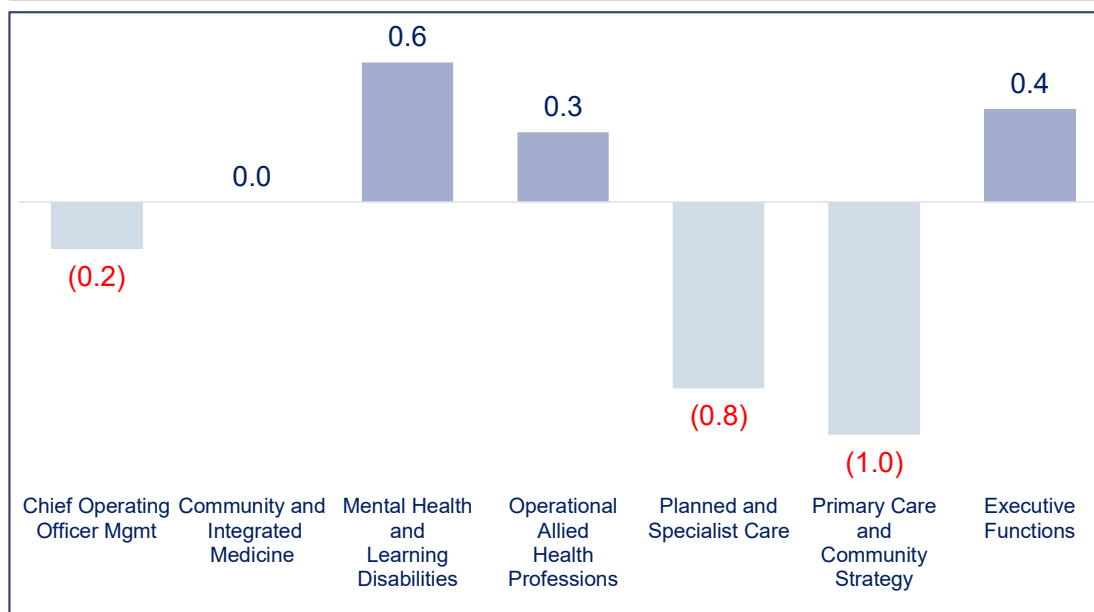
Year to Date: Core Operational Variation



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Core Operational Variation (£'m)



Core Operational Variation (£'m)

Clinical Care Group	Pay	Non-Pay	Income	Total
Chief Operating Officer Management	(0.1)	(0.1)	0.0	(0.2)
Community and Integrated Medicine	(0.1)	0.2	(0.1)	0.0
Mental Health and Learning Disabilities	0.0	0.6	0.0	0.6
Operational Allied Health and Health Sciences	0.2	0.3	(0.2)	0.3
Planned and Specialist Care	(0.1)	(0.4)	(0.3)	(0.8)
Primary Care, Community Strategy and LTC	0.3	(1.5)	0.2	(1.0)
Executive Functions	(0.4)	0.9	(0.1)	0.4
Total	(0.2)	0.0	(0.5)	(0.7)

The core operational variance to plan is £(0.7)m, main drivers being:

- High cost Continuing Healthcare packages and independent sector Psychiatric Intensive Care Unit beds within Mental Health.
- Use of Radiology external contractor to meet demand in Operational Allied Health and Health Sciences.
- Oncology & Ophthalmology drugs underspend due growth increases lower than planned, with increases due later in the year. within Planned and Specialist Care.
- Continued Dental Contracts underspend within Primary Care, Community Strategy and Long Term Care.
- Increase in activity relating to Swansea Bay Long Term Agreements within Executive Functions.

Capital Performance



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Capital

Total Capital Performance

£34.5m ●

Annual Plan = £34.4m

All Wales Capital

£27.3m ●

Annual Plan = £27.3m

Discretionary Capital

£6.9m ●

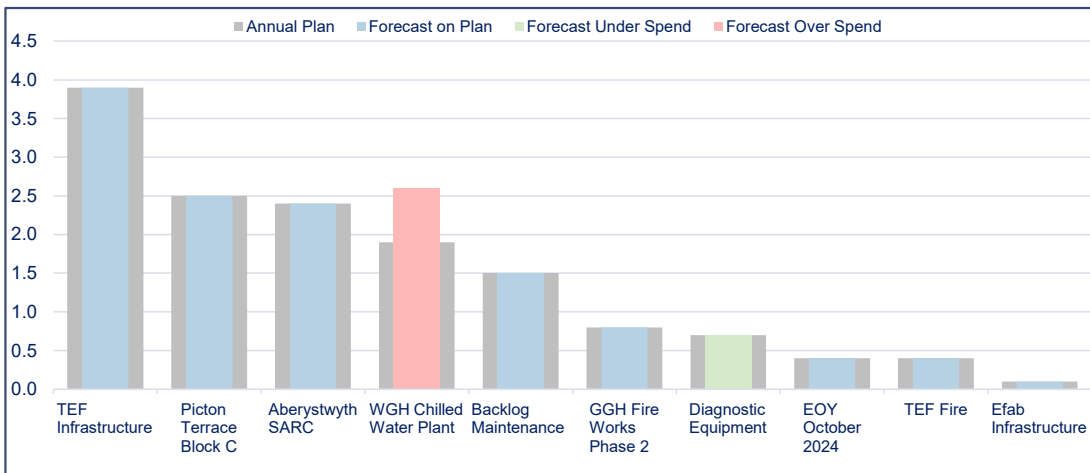
Annual Plan = £6.9m

IFRS 16

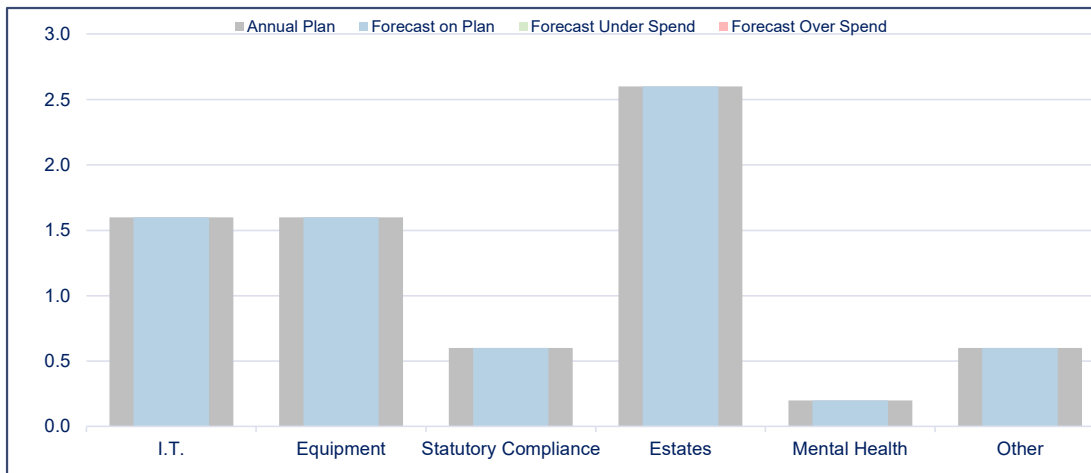
£0.3m ●

Capital Resource Limit = £0.3m

All Wales Capital Programme Top 10 Schemes (£'m)



Discretionary Capital Programme Category Summary (£'m)



Delivery against the capital programme is currently low risk.

Spend on the WGH Chilled water plant and diagnostic equipment have been combined under one scheme which explains the adverse and favourable variances against those schemes.

Trend Analysis: Non-Pay

Continuing Healthcare Expenditure (£'m)



Net increase in Continuing Healthcare packages, and cost pressures in-month particularly within Mental Health and Learning Disabilities.

Secondary Care Drugs Expenditure (£'m)



Increase in Oncology drugs due to 19.5% increase to drugs costs per patient.

Primary Care Prescribing Expenditure (£'m)



Despite decreasing levels in the volume of prescriptions in Q4 of 24/25, prescribing has returned to increased volume in Q2 of 25/26, with an increase from prior month in Month 4.

Clinical Services and Supplies (£'m)



Expenditure in Month 4 has increased by £1.0m compared to expenditure in Month 3 mainly due to increased Theatre activity and purchase of incontinence products within Community.

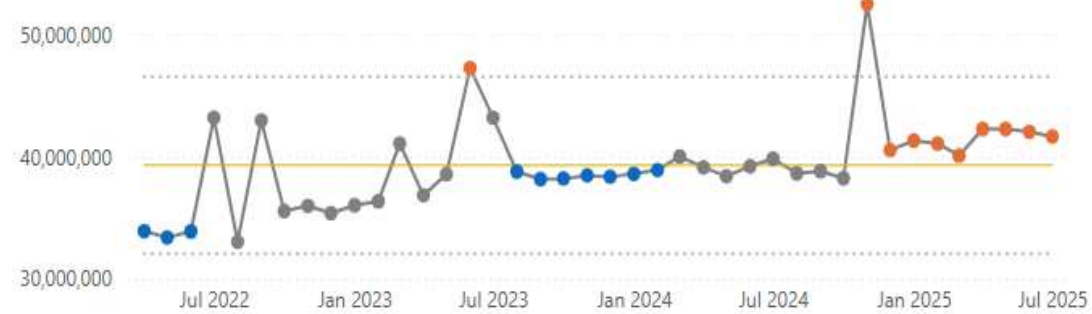
Trend Analysis: Pay – Agenda for Change

Total (WTE)



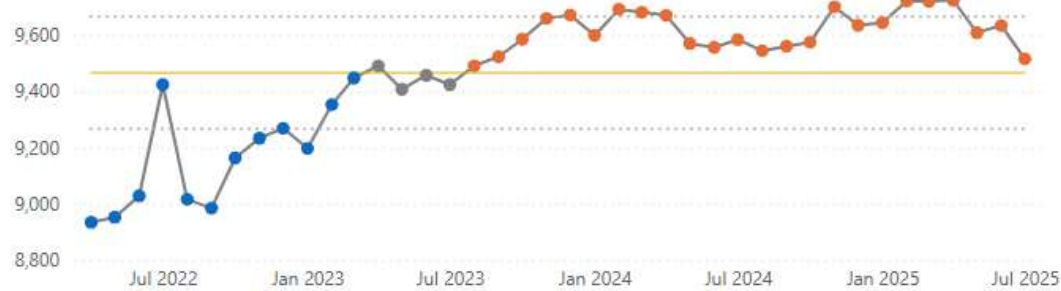
There has been an increase of 551 Total WTE since April 2022.

Total (£'m)



Total Pay spend has increased by circa £8.0m, from £34.0m in April 2022 to £42.0m in July 2025.

Substantive (WTE)



There has been an increase of 579 Substantive WTE since April 2022.

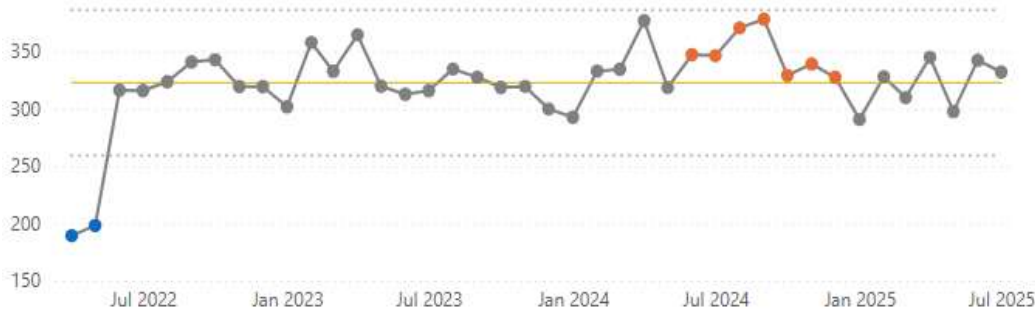
Substantive (£'m)



Substantive Pay spend has increased by circa £7.0m, from £32.0m in April 2022 to £39.0m in July 2025.

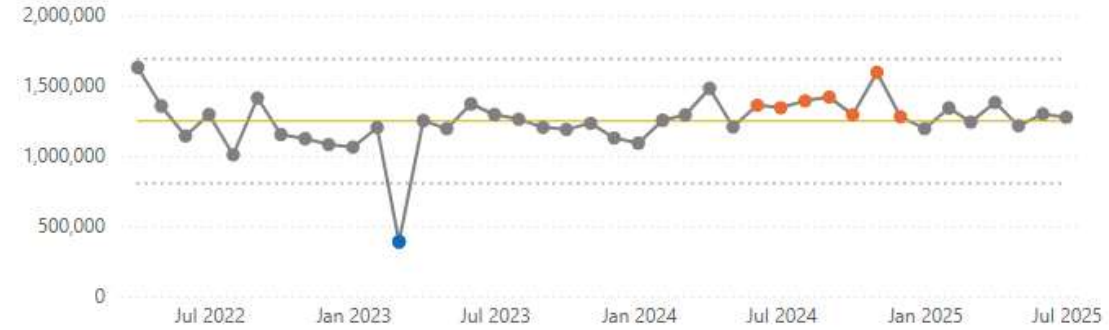
Trend Analysis: Pay – Agenda for Change

Bank (WTE)



There has been an overall increase of 143 Bank WTE since April 2022. There has been a reduction in Bank usage in Month 4, with a reduction of 10 WTE from prior month.

Bank (£'m)



Bank spend in Month 4 is £1.3m, which is in line with Month 3. This is an overall reduction compared to the £1.6m Bank expenditure in April 2022.

Overtime (WTE)



The Overtime WTE reported in Month 4 is 77. This is a reduction of 11 WTE compared to prior month.

Overtime (£'m)



Overtime spend in Month 4 is £485k, which is a slight reduction in spend from Month 3. This is however is an overall increase to the £352k Overtime expenditure in April 2022.

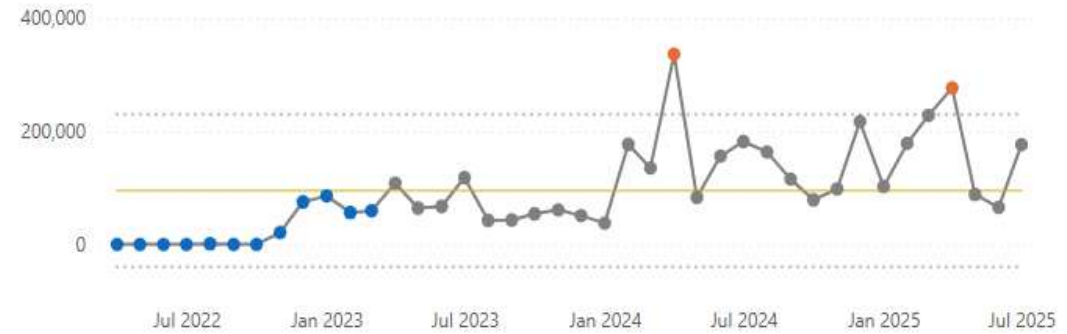
Trend Analysis: Pay – Agenda for Change

Waiting List Initiative (WTE)



Month 4 Waiting List Initiative WTE is 22 which is an increase of 10 WTE from the prior month due to increased Theatre activity within Planned and Specialist Care.

Waiting List Initiative (£'m)



Waiting List Initiative spend in Month 4 is £176k, which is an increase of £110k compared to the spend in Month 3 due to increased Theatre activity within Planned and Specialist Care.

Agency Premium (WTE)



The Agency Premium WTE in Month 4 is 56 WTE, which is a reduction of 176 Agency WTE since April 2022.

Agency Premium (£'m)



Agency spend in Month 4 is £407k, which is a reduction of £43k from prior month. This is an overall reduction of £1,263k compared to the £1,670k Agency spend in April 2022.

Trend Analysis: Pay – Medical and Dental

Total (£'m)



Total Medical and Dental Pay Spend has increased by circa £3.0m from April 2022 expenditure levels.

Substantive (£'m)



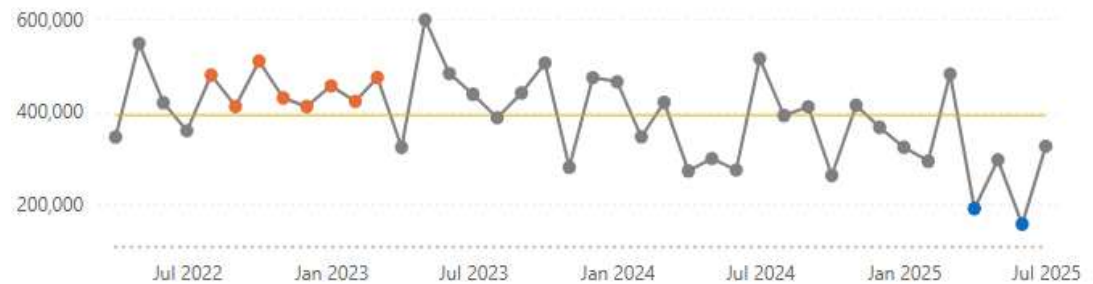
Substantive Spend has increased from £6.9m in April 2022 to £10.0m in Month 4.

Variable (£'m)



Medical Variable Pay has increased from £1.8m in April 2022, to £2.7m in July 2025. Month 4 has seen an increase of £0.5m Medical Variable spend from Month 3.

Agency Premium (£'m)



Month 4 Agency Premium Medical expenditure is £325k which is an increase of £169k compared to the prior month.

Trend Analysis: Pay – Medical and Dental

Additional Hours (£'m)



There has been an overall increase in Medical Additional Hours spend from £1.7m in May 2022 to £2.5m in July 2025. Month 4 saw a £0.4m increase in expenditure from Month 3.

Waiting List Initiative (£'m)



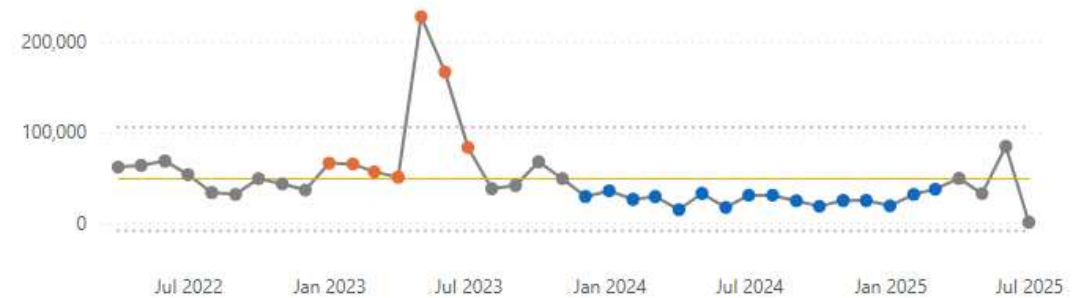
The expenditure for Waiting List Initiative in Month 4 is £241k, which is an increase from Month 3 due to additional Theatre activity in Planned and Specialist Care.

On Contract Agency Premium (£'m)



On Contract Agency Premium expenditure in Month 4 is £324k, which is an increase of £252k from the prior month.

Off Contract Agency Premium (£'m)



Off Contract Agency Premium saw a reduction of £83k spend compared to the prior month.

Establishment Reports: Nursing and Healthcare Support Worker Ward Staffing

	Ward Staffing Level (WTE) for Nursing and Health Care Support Workers (HCSW)						
	Total Fill Rate	Total WTE	Substantive WTE	Substantive WTE Vacancy	Variable WTE	Agency (Premium) WTE	Total Over/(Under) Staffed
Chief Operating Officer	100.3%	2,611	2,302	(302)	264	45	7
Community and Integrated Medicine	101.5%	1,895	1,661	(207)	192	42	28
Carmarthenshire Integrated System	102.7%	1,147	998	(119)	134	15	30
Ceredigion Integrated System	103.0%	312	268	(35)	25	19	9
Pembrokeshire Integrated System	97.4%	436	394	(53)	33	8	(11)
Mental Health and Learning Disabilities	105.8%	274	222	(37)	52	1	15
Mental Health and Learning Disabilities	105.8%	274	222	(37)	52	1	15
Planned and Specialist Care	92.5%	441	420	(57)	19	2	(36)
Cancer and Scheduled Care	86.7%	149	141	(32)	7	2	(23)
Children, Women and Family Health	95.7%	292	279	(26)	13	0	(13)
Grand Total	100.3%	2,611	2,302	(302)	264	45	7

Establishment Reports: Non-Ward Staffing, excluding Medical

	All Other Staffing Levels (WTE) Excluding Medical and Ward Nursing & HCSWs						
	Total Fill Rate	Total WTE	Substantive WTE	Substantive WTE Vacancy	Variable WTE	Agency (Premium) WTE	Total Over/(Under) Staffed
Chief Executive	95.4%	90	90	(4)	-	-	(4)
Chief Operating Officer	93.3%	5,447	5,333	(507)	103	11	(393)
Chief Operating Officer Management	84.9%	217	216	(39)	1	-	(38)
Community and Integrated Medicine	95.7%	1,304	1,274	(89)	28	2	(58)
Mental Health and Learning Disabilities	91.4%	911	901	(96)	10	-	(86)
Operational Allied Health and Health Sciences	95.5%	1,087	1,069	(69)	18	-	(51)
Planned and Specialist Care	93.9%	1,414	1,364	(141)	40	9	(91)
Primary Care, Community Strategy and Long Term Care	88.3%	514	508	(74)	6	-	(68)
Executive Director of Allied Health Professions and Health Sciences	96.1%	886	828	(94)	59	-	(36)
Estates and Facilities	96.2%	883	825	(94)	59	-	(35)
Executive Allied Health Professions and Health Sciences	81.5%	3	3	(1)	-	-	(1)
Executive Director of Finance	89.8%	299	294	(38)	4	-	(34)
Digital	89.8%	207	203	(28)	4	-	(24)
Finance	89.8%	92	92	(10)	-	-	(10)
Executive Director of Nursing, Quality and Patient Experience	85.8%	166	165	(29)	1	-	(28)
Executive Director of Public Health	88.2%	130	130	(18)	0	-	(17)
Executive Director of Strategy and Planning	92.6%	34	34	(3)	-	-	(3)
Executive Director of Workforce and Organisational Development	80.0%	232	232	(58)	-	-	(58)
Executive Medical Director	90.6%	106	106	(11)	-	-	(11)
Grand Total	92.7%	7,391	7,212	(763)	167	11	(584)

In-Month: Revenue Position Variance to Budget (£'k)

	Pay				Non Pay				Income	Grand Total
	Administration and Estates	Allied Health, Scientists and Other	Medical and Dental	Nursing, Midwifery and Clinical Support	Clinical Services and Supplies	Commissioned Healthcare Services	Drugs and Prescribing	Other Non-Pay	Income	
Chief Executive	(2)				0	(1)		(27)	0	(30)
Chief Operating Officer	(288)	(221)	551	(382)	1,363	(407)	(479)	119	(50)	205
Chief Operating Officer Management	(133)	58	54	5	(8)	(3)		(104)	78	(52)
Community and Integrated Medicine	(68)	(32)	213	(99)	126	69	(18)	133	(87)	239
Mental Health and Learning Disabilities	(11)	(11)	80	(84)	(1)	241	(58)	18	5	178
Operational Allied Health and Health Sciences	4	36	4	(32)	16	(31)	(43)	(35)	(53)	(134)
Planned and Specialist Care	(40)	(33)	75	(2)	1,227	(633)	(335)	51	(52)	258
Primary Care, Community Strategy and Long Term Care	(41)	(239)	124	(171)	3	(51)	(24)	55	60	(284)
Executive Director of Allied Health Professions and Health Sciences	(170)	(15)		(4)	2	(0)	0	133	(59)	(112)
Estates and Facilities	(181)			(4)	2		0	133	(59)	(109)
Executive Allied Health Professions and Health Sciences	11	(15)				(0)				(3)
Executive Director of Finance	(18)	0	22	(3)		(39)	0	(142)	(42)	(222)
Digital	(18)	0	22	(3)		(28)		(145)	(40)	(213)
Finance	0					(11)	0	3	(1)	(9)
Executive Director of Nursing, Quality and Patient Experience	(65)	(22)	(0)	58	(0)	20		10	(5)	(5)
Executive Director of Public Health	(11)	13	(14)	(8)	(2)	(1)	14	56	(35)	12
Executive Director of Strategy and Planning	(7)	(0)	3			673	0	(17)	(9)	643
LTAs with other NHS Providers	4					674	0	(0)		677
Strategy and Planning	(11)	(0)	3			(1)		(17)	(9)	(34)
Executive Director of Workforce and Organisational Development	(87)	(7)	(0)	95	1	(39)	(3)	(58)	(11)	(111)
Executive Medical Director	(9)	1	(8)	(6)	(8)		0	(31)	5	(55)
Health Board Wide	(166)			(30)	3	29	(18)	366	12	196
Planned Deficit								2,125		2,125
Savings Identification								3		3
Grand Total	(824)	(251)	553	(281)	1,359	234	(486)	2,537	(192)	2,648

Year to Date: Revenue Position Variance to Budget (£'k)

	Pay				Non Pay				Income	Grand Total
	Administration and Estates	Allied Health, Scientists and Other	Medical and Dental	Nursing, Midwifery and Clinical Support	Clinical Services and Supplies	Commissioned Healthcare Services	Drugs and Prescribing	Other Non-Pay	Income	
Chief Executive	(1)				0	(5)		2	1	(3)
Chief Operating Officer	(571)	(152)	1,451	(513)	1,601	(1,634)	(1,848)	1,011	(482)	(1,136)
Chief Operating Officer Management	(94)	(12)		24	36	(1)		(216)	37	(227)
Community and Integrated Medicine	(347)	(101)	470	(147)	48	(69)	(193)	459	(83)	37
Mental Health and Learning Disabilities	(61)	(230)	303	(39)	(6)	779	(114)	15	(8)	638
Operational Allied Health and Health Sciences	26	299	(130)	64	291	22	(26)	19	(234)	332
Planned and Specialist Care	(18)	(87)	281	(266)	1,224	(331)	(1,526)	224	(352)	(850)
Primary Care, Community Strategy and Long Term Care	(77)	(21)	527	(149)	8	(2,034)	11	510	159	(1,066)
Executive Director of Allied Health Professions and Health Sciences	(181)	(58)	9	(8)	7	(0)	2	127	69	(34)
Estates and Facilities	(226)		9	(8)	7		2	126	69	(21)
Executive Allied Health Professions and Health Sciences	46	(58)				(0)		1		(12)
Executive Director of Finance	(57)	0	24	(3)	0	(235)	0	(108)	(14)	(394)
Digital	(29)	0	24	(3)	0	(190)		(139)	(14)	(352)
Finance	(28)					(45)	0	32	(1)	(42)
Executive Director of Nursing, Quality and Patient Experience	(163)	(29)	0	131	(1)	49		74	37	97
Executive Director of Public Health	(36)	61	(56)	(60)	(15)	(19)	(146)	274	(78)	(76)
Executive Director of Strategy and Planning	(42)	41	0			347	2	(53)	(34)	260
LTAs with other NHS Providers	9					350	2	(1)		360
Strategy and Planning	(52)	41	0			(3)		(52)	(34)	(100)
Executive Director of Workforce and Organisational Development	(89)	(7)	0	95	1	(171)	(5)	(10)	(23)	(209)
Executive Medical Director	9	6	29	(13)	5		(0)	(144)	3	(105)
Health Board Wide	(9)			(30)	221	51	490	162	(23)	861
Planned Deficit								10,000		10,000
Savings Identification								2,444		2,444
Grand Total	(1,140)	(139)	1,459	(402)	1,819	(1,619)	(1,506)	13,778	(544)	11,706

End of Year: Revenue Position Variance to Budget (£'k)

	Pay				Non Pay				Income	Grand Total
	Administration and Estates	Allied Health, Scientists and Other	Medical and Dental	Nursing, Midwifery and Clinical Support	Clinical Services and Supplies	Commissioned Healthcare Services	Drugs and Prescribing	Other Non-Pay	Income	
Chief Executive	16				0	(8)		15	2	25
Chief Operating Officer	(1,935)	(1,248)	3,924	(2,149)	1,805	(2,192)	(3,028)	2,263	(1,363)	(3,922)
Chief Operating Officer Management	(411)	38	(5)	36	71	(24)		(110)	28	(378)
Community and Integrated Medicine	(879)	2	1,033	(514)	526	(85)	(860)	955	(130)	49
Mental Health and Learning Disabilities	(246)	(619)	920	(1,150)	(6)	1,298	(144)	15	43	111
Operational Allied Health and Health Sciences	63	286	(408)	226	333	175	(67)	146	(802)	(48)
Planned and Specialist Care	(80)	(215)	944	(197)	1,096	1,375	(2,214)	610	(874)	445
Primary Care, Community Strategy and Long Term Care	(382)	(741)	1,442	(550)	(215)	(4,930)	257	647	371	(4,101)
Executive Director of Allied Health Professions and Health Sciences	172	(175)	31	(26)	21	0	7	1,557	(0)	1,587
Estates and Facilities	35		31	(26)	21		7	1,556	(0)	1,622
Executive Allied Health Professions and Health Sciences	138	(175)				0		2		(35)
Executive Director of Finance	(156)	(63)	50	(74)	0	(427)	0	426	(1)	(244)
Digital	86	(63)	50	(74)	0	(292)		293	(1)	(1)
Finance	(242)					(134)	0	133	(0)	(243)
Executive Director of Nursing, Quality and Patient Experience	(424)	(89)	0	112	(4)	146		296	80	118
Executive Director of Public Health	(127)	166	(167)	(127)	(46)	(58)	201	(14)	(204)	(377)
Executive Director of Strategy and Planning	(197)	41	4		4	583	2	(47)	(102)	287
LTAs with other NHS Providers	38				4	593	2	(5)		632
Strategy and Planning	(235)	41	4			(10)		(42)	(102)	(345)
Executive Director of Workforce and Organisational Development	44	(280)	(29)	134	4	(79)	(14)	89	(1)	(131)
Executive Medical Director	(24)	11	147	(81)	14		(0)	(340)	90	(184)
Health Board Wide	(29)		0	(30)	243	111	470	(17,358)	(62)	(16,654)
Planned Deficit								30,000		30,000
Savings Identification								19,496		19,496
Grand Total	(2,661)	(1,636)	3,960	(2,241)	2,040	(1,924)	(2,362)	36,384	(1,561)	30,000

End of Year: Savings Detail (£'k)

Delegated Officer (£'000)	Annual Savings Target	In-Year Identified Plans	In-Year Recurrent Delivery	In-Year Non Recurrent Delivery	In-Year Total Forecast Delivery	In-Year Forecast Shortfall	In-Year % Saving vs Budget	Recurrent Forecast Delivery	Recurrent Forecast Shortfall	Recurrent % Saving vs Budget
Chief Executive	38	255	38	217	255	(217)	7.5%	38	(0)	1.1%
Chief Executive	38	255	38	217	255	(217)	7.5%	38	(0)	1.1%
Chief Operating Officer	39,046	17,001	8,914	8,087	17,001	22,045	2.2%	9,010	30,037	1.2%
Chief Operating Officer Management	762	371	0	371	371	391	2.9%	0	762	0.0%
Community and Integrated Medicine	10,483	3,693	2,771	922	3,693	6,790	1.5%	2,815	7,668	1.2%
Mental Health and Learning Disabilities	5,851	3,180	1,257	1,924	3,180	2,671	3.1%	1,257	4,594	1.2%
Operational Allied Health and Health Sciences	3,785	459	459	0	459	3,326	0.6%	459	3,326	0.6%
Planned and Specialist Care	11,638	6,304	2,361	3,943	6,304	5,334	3.0%	2,396	9,242	1.1%
Primary Care, Community Strategy and Long Term Care	6,529	2,995	2,068	928	2,995	3,533	2.8%	2,084	4,445	1.9%
Executive Director Of Allied Health Professions and Health Sciences	2,063	342	342	0	342	1,722	0.7%	342	1,722	0.7%
Estates and Facilities	2,053	342	342	0	342	1,712	0.7%	342	1,712	0.7%
Executive Allied Health Professions and Health Sciences	10	0	0	0	0	10	0.0%	0	10	0.0%
Executive Director Of Finance	377	1,079	468	611	1,079	(702)	4.6%	501	(124)	2.2%
Digital	271	818	384	434	818	(548)	4.7%	417	(147)	2.4%
Finance	106	261	84	177	261	(155)	4.4%	84	22	1.4%
Executive Director Of Nursing, Quality and Patient Experience	243	426	201	225	426	(183)	4.6%	243	0	2.6%
Nursing, Quality and Patient Experience	243	426	201	225	426	(183)	4.6%	243	0	2.6%
Executive Director Of Public Health	107	730	107	623	730	(623)	11.1%	107	(0)	1.6%
Public Health	107	730	107	623	730	(623)	11.1%	107	(0)	1.6%
Executive Director Of Strategy and Planning	1,902	871	61	810	871	1,031	1.4%	61	1,841	0.1%
LTA'S With Other NHS Providers	1,841	483	0	483	483	1,358	0.8%	0	1,841	0.0%
Strategy and Planning	61	388	61	327	388	(328)	10.4%	61	(0)	1.6%
Executive Director Of Workforce and Organisational Development	247	1,176	247	929	1,176	(929)	7.8%	247	(1)	1.6%
Workforce and Organisational Development	247	1,176	247	929	1,176	(929)	7.8%	247	(1)	1.6%
Executive Medical Director	74	74	74	0	74	(0)	1.7%	74	(0)	1.7%
Medical	74	74	74	0	74	(0)	1.7%	74	(0)	1.7%
Health Board Wide	2,303	4,949	1,197	3,752	4,949	(2,646)	13.6%	1,264	1,039	3.5%
Grand Total	46,400	26,904	11,648	15,255	26,904	19,497	2.8%	11,886	34,514	1.2%