

Executive Summary

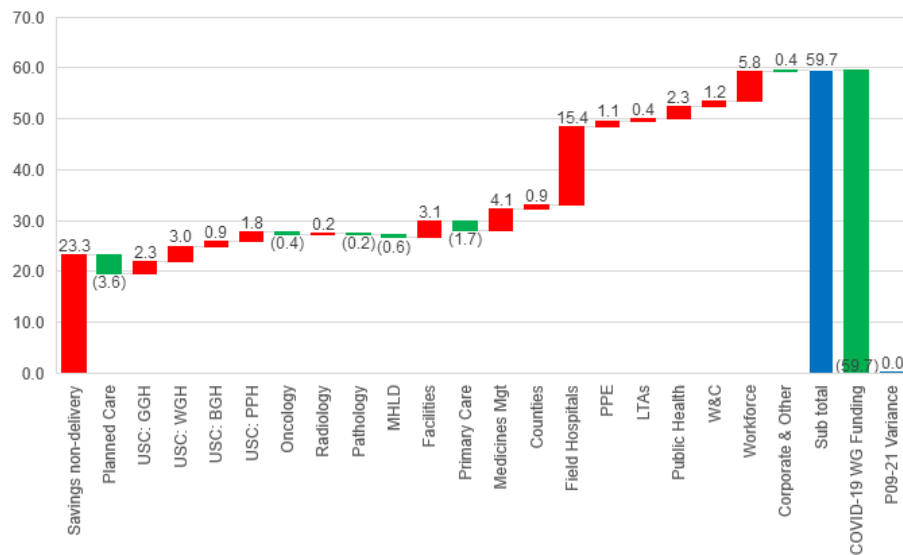
	The Health Board's agreed Financial Plan is to deliver a deficit of £25m, after savings of £34.2m
Revenue	<ul style="list-style-type: none"> The Month 9 Health Board financial position is breakeven against a deficit plan of £2.1m, after utilising the required balance of WG funding for COVID-19, having offset the cost reductions recognised due to reduced operational activity levels.
Projection	<ul style="list-style-type: none"> Following confirmation of additional funding from WG in Month 6, the Health Board is forecasting to deliver the planned deficit of £25m. The Month 9 financial position was in line with the forecast, reflecting that despite significant operational pressures arising from increased prevalence of COVID-19, there is limited risk of any significant increase in Workforce expenditure given the restricted supply. Further, the Health Board has identified potential slippage in respect of planned operational expenditure, which has been repurposed. £30.8m savings requirement included in the Financial Plan are not expected to deliver due to the operational focus being diverted to respond to COVID-19, and where identified schemes are not supportive of the response needed. Discussions are on-going on the implications of this on our underlying deficit. The Health Board has prioritised its urgent COVID-19 and non-COVID-19 schemes and has used the balance of its discretionary allocation to progress these, leaving a residual capital risk to £0.8m in Month 9. This risk for 2020/21 is based only on the funding gap against committed COVID-19 schemes and funding released to date for these. It is anticipated that Welsh Government will release the funding for these schemes as the actual expenditure is incurred. The projection includes the cost of maintaining the LTA block arrangements; as a net commissioner, the impact of this is estimated to be £15.7m compared to actual activity levels.
Savings	<ul style="list-style-type: none"> In-month delivery of £0.3m, which is slightly below plan of identified savings schemes, which is directly attributable to the COVID-19 pandemic. Green and Amber plans of £5.6m identified to Month 9, against which the forecast delivery is uncertain given the impact of the COVID-19 pandemic. At this stage, with COVID-19 demand modelling indicating that the pandemic may impact the remainder of the financial year, it is assumed that delivery will be adversely affected for the full year.
Next Steps	<ul style="list-style-type: none"> Analysis of underlying deficit to be completed. Determine revenue impact for FY22 of actions taken in response to COVID-19.

Executive Summary

	Summary of key financial targets																																									
The Health Board's key targets are as follows:																																										
<ul style="list-style-type: none">Revenue: to contain the overspend within the Health Board's planned deficitSavings: to deliver savings plans to enable the revenue budget to be achievedCapital: to contain expenditure within the agreed limitPSPP: to pay 95% of Non-NHS invoices within 30 days of receipt of a valid invoiceCash: While there is no prescribed limit for cash held at the end of the month, WG encourages this to be minimised and a rule of thumb of 5% of monthly expenditure is used. For the Health Board, this is broadly £4.0m.																																										
<table><tr><th>Key target</th><th></th><th>Annual limit</th><th>YTD limit</th><th>Actual delivery</th><th>Forecast Risk</th></tr><tr><td>Revenue</td><td>£'m</td><td>25.0</td><td>18.8</td><td>18.8</td><td>Low</td></tr><tr><td>Savings</td><td>£'m</td><td>34.2</td><td>25.7</td><td>2.3</td><td></td></tr><tr><td>Capital</td><td>£'m</td><td>28.7</td><td>19.3</td><td>19.3</td><td>Low</td></tr><tr><td>Non-NHS PSPP</td><td>%</td><td>95.0</td><td>95.0</td><td>95.0</td><td>Low</td></tr><tr><td>Period end cash</td><td>£'m</td><td>4.0</td><td>4.0</td><td>2.3</td><td>Medium</td></tr></table>							Key target		Annual limit	YTD limit	Actual delivery	Forecast Risk	Revenue	£'m	25.0	18.8	18.8	Low	Savings	£'m	34.2	25.7	2.3		Capital	£'m	28.7	19.3	19.3	Low	Non-NHS PSPP	%	95.0	95.0	95.0	Low	Period end cash	£'m	4.0	4.0	2.3	Medium
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Following confirmation of additional funding from WG in Month 6, the Health Board is forecasting to deliver the planned deficit of £25m. The risk is considered to be Low, recognising that the Health Board has limited risk of any significant increase in Workforce expenditure given the restricted supply, and has identified potential slippage on planned operational expenditure which has been repurposed.																																										
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The Non-NHS PSPP risk has been reduced to Low following the successful recovery to compliance to the end of Quarter 3.																																										

Revenue Summary

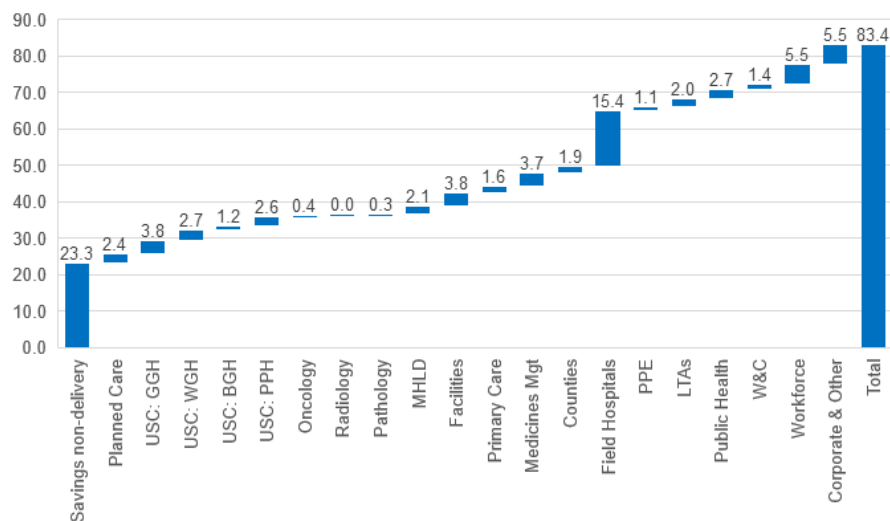
YTD variance by Directorate (against Plan)



Key drivers of YTD position:

- **Savings non-delivery (£23.3m):** As a direct consequence of COVID-19, directorates have been unable to execute or identify additional savings plans as efforts are re-purposed to respond to the pandemic.
- **Planned Care (-£3.6m):** Underspend primarily driven by a reduction in non-pay due to reduced activity in elective services.
- **Medicines Management (£4.1):** Pressures continue in Primary Care prescribing due to continued increases in the cost per item for Category M and baseline drugs. The directorate has also been impacted by changes in NCSO drugs at various points.
- **Field Hospitals (£15.4m):** The cost of setting up, de-commissioning and operating the various Field Hospitals with the Health Board's localities in response to the COVID-19 pandemic.
- **Workforce (£5.8m):** Fixed term staff recruited in response to the COVID-19 pandemic who have not yet been assigned to a directorate.
- **WG Funding (-£59.7m):** Funding has been received from WG to offset the cost of the Health Board's response to the COVID-19 pandemic.

YTD actual by Directorate (COVID-19 only)

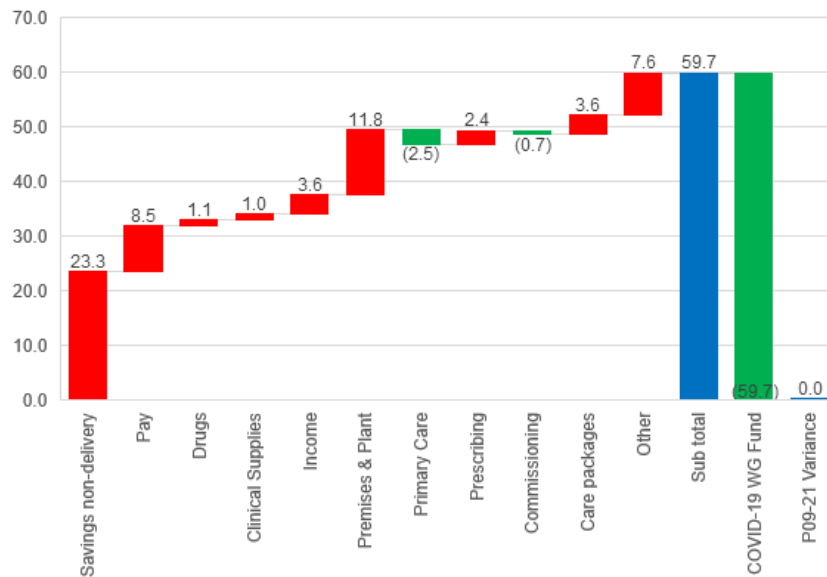


Key drivers of COVID-19 YTD position over and above what is reported above:

- **LTAs (£2.0m):** Loss in Non-Contract Activity (NCA) income as lockdown restrictions have impacted the tourism industry which in turn has reduced visitors outside of Hywel Dda accessing services.
- **Facilities (£3.8m):** Additional Porters and Domestics recruited in response to the pandemic. Work and maintenance carried out to adapt sites, additional laundry costs and lost revenue.
- **Unscheduled Care (All sites) (£10.3m):** Increase in variable pay for Medical, Nursing and HCA staff, Medical pay enhancements, PPE expenditure (up to Month 7; from Month 8, recorded centrally) and issue of home care drugs to avoid unnecessary Hospital contacts.

Revenue Summary

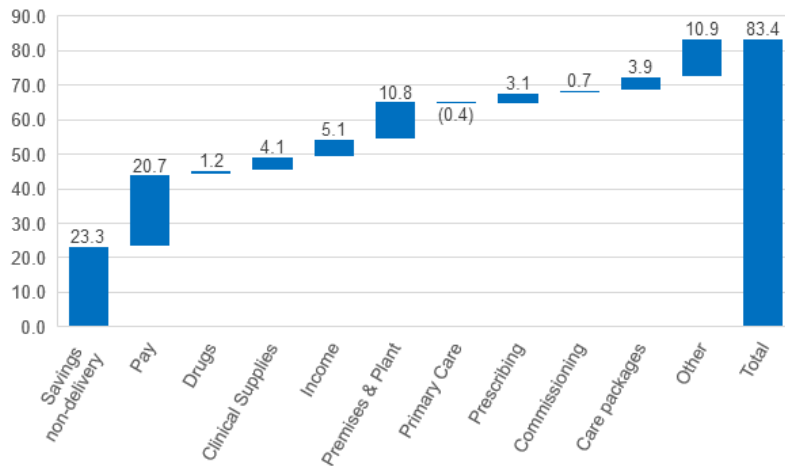
YTD variance by Subjective (against Plan)



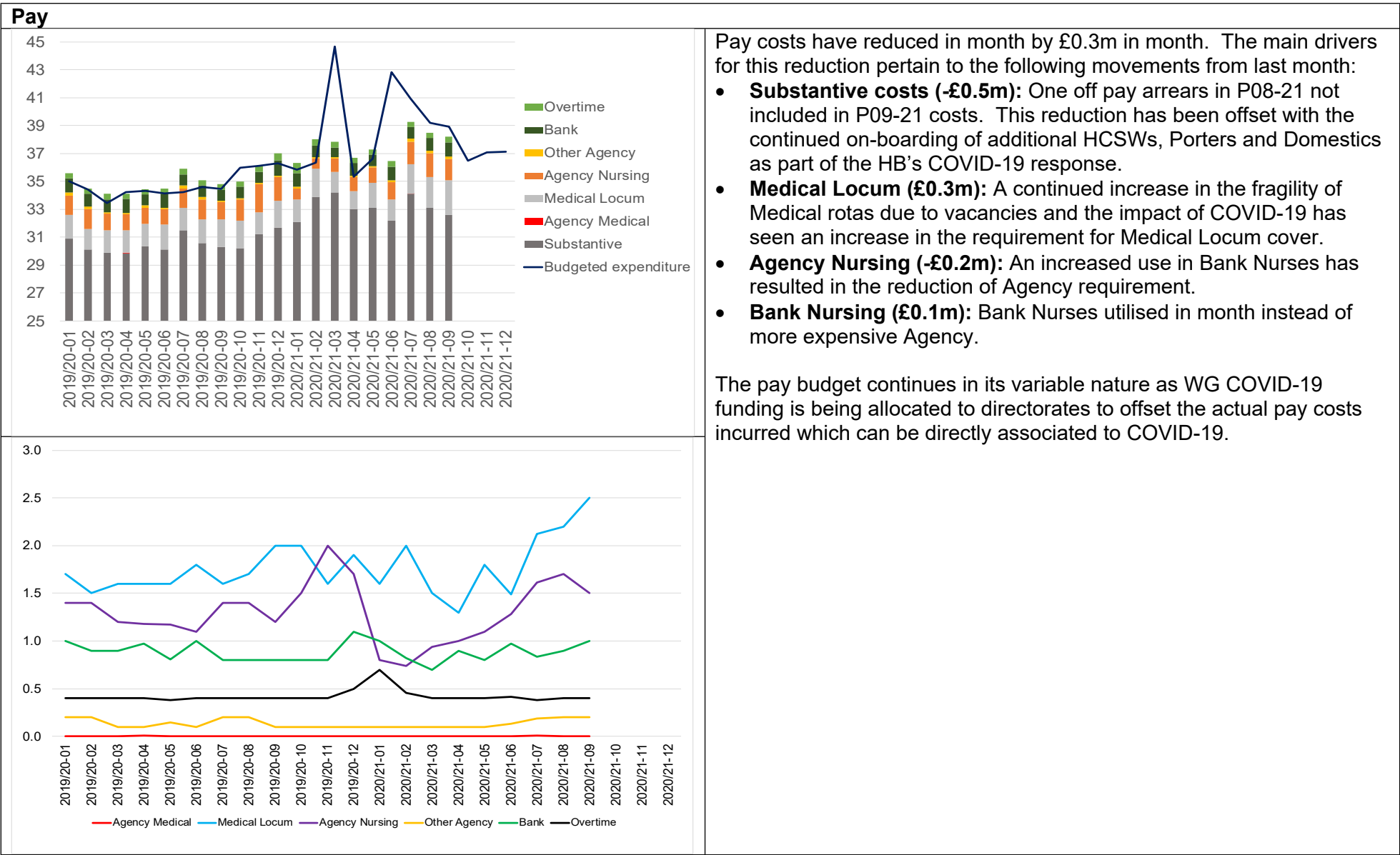
Key drivers of YTD position:

- **Savings non-delivery (£23.3m):** As a direct consequence of COVID-19, directorates have been unable to execute or identify additional savings plans as efforts are re-purposed to respond to the pandemic.
- **Pay (£8.5m):** See detailed analysis in key subjective summary slides.
- **Drugs & Clinical supplies (£2.1m):** The overspend is primarily driven by the costs of PPE expenditure, home care drugs being provided to patients (as a result of COVID-19) and Medicines Management pressures (stated above) offset by reduced activity in elective services within Planned Care and Podiatry.
- **Income (£3.6m):** As referenced in the previous slide, income generated from NCA activity has been impacted by the lockdown restrictions; there has also been a deterioration in income within Hospital sites due to lower patient numbers accessing commercial and hospitality facilities.
- **Premises costs (£11.8m):** Primarily driven by the cost of setting up, de-commissioning and operating the various Field Hospitals with the Health Board's localities.
- **Prescribing (£2.4m):** See detailed analysis in key subjective summary slides.
- **Care packages (£3.6m):** Additional costs have been incurred due to the expedited discharge of CHC Patients and patients being placed in out of area accommodation.
- **WG Funding (-£59.7m):** Funding has been received from WG to offset the cost of the Health Board's response to the COVID-19 pandemic.

YTD actual by Subjective (COVID-19 only)



Key Subjective Summary



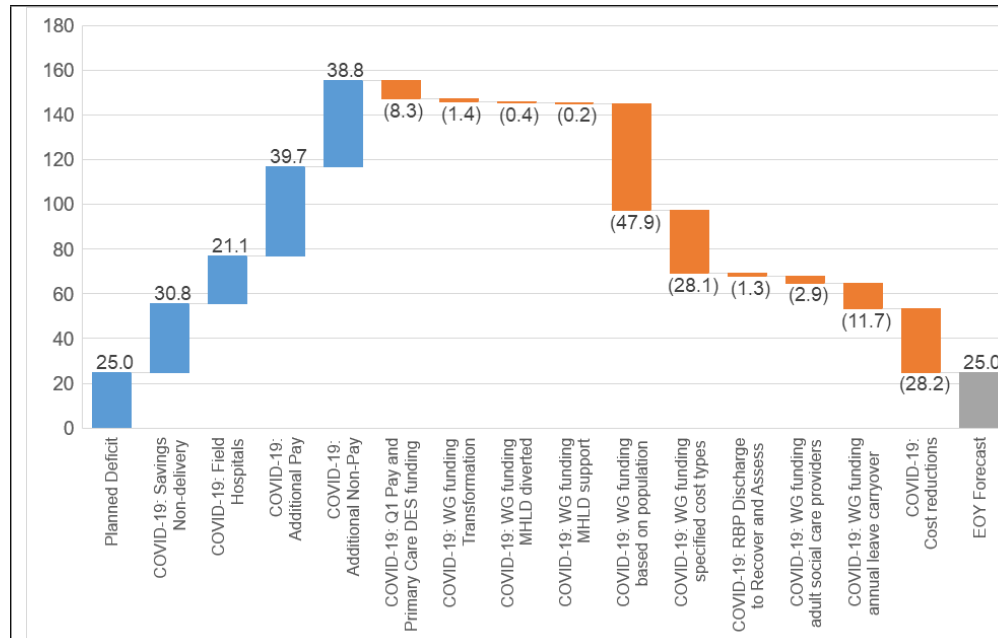
Key Subjective Summary

<p>CHC</p> <p>— Actual expenditure — Budgeted expenditure</p>	<p>Continuing Health Care expenditure has increased by £0.3m in month primarily due to the one-off benefit received in P08-21 in relation to a YTD Savings scheme in Pembrokeshire £0.4m.</p> <p>During the month, Continuing Care spend has remained relatively flat where a net decrease in Continuing Care patients within the Health Board's Counties has been offset by an increase in costs following changes to several Learning-Disabled client packages.</p>
<p>Secondary Care Drugs</p> <p>— Actual expenditure — Budgeted expenditure</p>	<p>Drug expenditure has decreased in month by £0.1m due to the cancellation of several elective services as a direct consequence of COVID-19 and a reduction in Homecare Haematology drug use in Pathology. These underspends have been offset by an increase in drug spend within Unscheduled Care due to an increase in patient activity and acuity across the Acute sites.</p>

Key Subjective Summary

<h3>Clinical Supplies and Services</h3> <table><tr><th>Month</th><th>Actual expenditure</th><th>Budgeted expenditure</th></tr><tr><td>2019/20-01</td><td>2.6</td><td>2.4</td></tr><tr><td>2019/20-02</td><td>2.5</td><td>2.4</td></tr><tr><td>2019/20-03</td><td>2.5</td><td>2.4</td></tr><tr><td>2019/20-04</td><td>2.8</td><td>2.5</td></tr><tr><td>2019/20-05</td><td>2.5</td><td>2.5</td></tr><tr><td>2019/20-06</td><td>2.8</td><td>2.5</td></tr><tr><td>2019/20-07</td><td>2.9</td><td>2.5</td></tr><tr><td>2019/20-08</td><td>2.5</td><td>2.4</td></tr><tr><td>2019/20-09</td><td>2.6</td><td>2.4</td></tr><tr><td>2019/20-10</td><td>2.6</td><td>2.5</td></tr><tr><td>2019/20-11</td><td>3.0</td><td>2.5</td></tr><tr><td>2019/20-12</td><td>3.0</td><td>3.0</td></tr><tr><td>2020/21-01</td><td>2.2</td><td>2.5</td></tr><tr><td>2020/21-02</td><td>2.1</td><td>2.5</td></tr><tr><td>2020/21-03</td><td>2.2</td><td>2.5</td></tr><tr><td>2020/21-04</td><td>2.1</td><td>2.5</td></tr><tr><td>2020/21-05</td><td>2.4</td><td>2.5</td></tr><tr><td>2020/21-06</td><td>2.8</td><td>5.0</td></tr><tr><td>2020/21-07</td><td>3.0</td><td>3.0</td></tr><tr><td>2020/21-08</td><td>3.5</td><td>3.0</td></tr><tr><td>2020/21-09</td><td>3.5</td><td>3.2</td></tr><tr><td>2020/21-10</td><td>2.5</td><td>2.5</td></tr><tr><td>2020/21-11</td><td>2.5</td><td>2.5</td></tr><tr><td>2020/21-12</td><td>2.5</td><td>2.5</td></tr></table>	Month	Actual expenditure	Budgeted expenditure	2019/20-01	2.6	2.4	2019/20-02	2.5	2.4	2019/20-03	2.5	2.4	2019/20-04	2.8	2.5	2019/20-05	2.5	2.5	2019/20-06	2.8	2.5	2019/20-07	2.9	2.5	2019/20-08	2.5	2.4	2019/20-09	2.6	2.4	2019/20-10	2.6	2.5	2019/20-11	3.0	2.5	2019/20-12	3.0	3.0	2020/21-01	2.2	2.5	2020/21-02	2.1	2.5	2020/21-03	2.2	2.5	2020/21-04	2.1	2.5	2020/21-05	2.4	2.5	2020/21-06	2.8	5.0	2020/21-07	3.0	3.0	2020/21-08	3.5	3.0	2020/21-09	3.5	3.2	2020/21-10	2.5	2.5	2020/21-11	2.5	2.5	2020/21-12	2.5	2.5	<p>While the overall spend in Clinical Supplies and Services has remained static, there have been swings in directorates where reductions in spend within elective services due to the cancellation of several services as a direct consequence of COVID-19 have been offset by increases in Unscheduled Care due to an increase in patient activity and acuity across the Acute sites.</p>
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<h3>Primary Care Prescribing</h3> <table><tr><th>Month</th><th>Actual expenditure</th><th>Budgeted expenditure</th></tr><tr><td>2019/20-01</td><td>5.8</td><td>5.8</td></tr><tr><td>2019/20-02</td><td>5.8</td><td>5.8</td></tr><tr><td>2019/20-03</td><td>5.8</td><td>5.8</td></tr><tr><td>2019/20-04</td><td>5.8</td><td>5.8</td></tr><tr><td>2019/20-05</td><td>6.0</td><td>5.8</td></tr><tr><td>2019/20-06</td><td>5.8</td><td>5.8</td></tr><tr><td>2019/20-07</td><td>7.2</td><td>5.8</td></tr><tr><td>2019/20-08</td><td>6.2</td><td>5.8</td></tr><tr><td>2019/20-09</td><td>6.2</td><td>5.8</td></tr><tr><td>2019/20-10</td><td>6.4</td><td>5.8</td></tr><tr><td>2019/20-11</td><td>5.8</td><td>5.8</td></tr><tr><td>2019/20-12</td><td>6.6</td><td>6.0</td></tr><tr><td>2020/21-01</td><td>6.4</td><td>6.0</td></tr><tr><td>2020/21-02</td><td>6.4</td><td>5.8</td></tr><tr><td>2020/21-03</td><td>6.6</td><td>6.0</td></tr><tr><td>2020/21-04</td><td>6.4</td><td>6.2</td></tr><tr><td>2020/21-05</td><td>6.0</td><td>5.8</td></tr><tr><td>2020/21-06</td><td>6.6</td><td>8.5</td></tr><tr><td>2020/21-07</td><td>7.0</td><td>7.0</td></tr><tr><td>2020/21-08</td><td>6.4</td><td>6.4</td></tr><tr><td>2020/21-09</td><td>7.2</td><td>6.8</td></tr><tr><td>2020/21-10</td><td>6.0</td><td>6.0</td></tr><tr><td>2020/21-11</td><td>5.8</td><td>6.0</td></tr><tr><td>2020/21-12</td><td>6.4</td><td>6.4</td></tr></table>	Month	Actual expenditure	Budgeted expenditure	2019/20-01	5.8	5.8	2019/20-02	5.8	5.8	2019/20-03	5.8	5.8	2019/20-04	5.8	5.8	2019/20-05	6.0	5.8	2019/20-06	5.8	5.8	2019/20-07	7.2	5.8	2019/20-08	6.2	5.8	2019/20-09	6.2	5.8	2019/20-10	6.4	5.8	2019/20-11	5.8	5.8	2019/20-12	6.6	6.0	2020/21-01	6.4	6.0	2020/21-02	6.4	5.8	2020/21-03	6.6	6.0	2020/21-04	6.4	6.2	2020/21-05	6.0	5.8	2020/21-06	6.6	8.5	2020/21-07	7.0	7.0	2020/21-08	6.4	6.4	2020/21-09	7.2	6.8	2020/21-10	6.0	6.0	2020/21-11	5.8	6.0	2020/21-12	6.4	6.4	<p>Prescribing costs have increased by £0.8m in month primarily as due to the additional two prescribing days in the month compared to November.</p> <p>In month changes are also as a result of higher than anticipated actual WP10 costs for October. Consequently, the actual for November and December has been adjusted assuming that this will remain.</p> <p>Growth on baseline drugs has also increased at a higher rate than anticipated following the reduction in last month's forecast.</p>
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Financial Projection



Key Assumptions

- Funding for the balance of the additional WG allocation of £47.9m is assumed to be fully utilised in future months to offset the impact of COVID-19; funding to match the forecast cost of specific items (as defined by WG) has also been assumed in future months;
- Field Hospital profiling is based on local modelling as a most 'realistic' assessment;
- Field Hospital staffing has been modelled on a substantive costs basis, assuming a minimum of 50% deployed staff resource – no premium for Agency workers is included given the finite supply;
- Any increased demand modelling for staffing within Field Hospitals is assumed to be fulfilled through deployment of existing staff, predominately without the ability to backfill due to supply constraints;
- Existing Services modelling is profiled to March 2021 and assumes some level of reinstated elective services.

Assurance

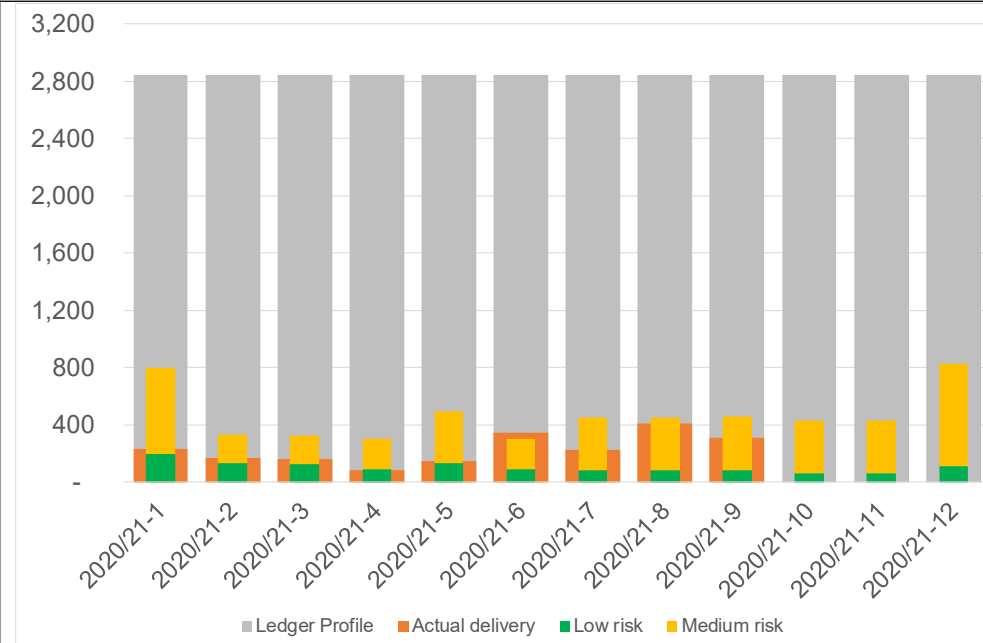
- Improved assurance methods have been established, aligning to managers across the Health Board and the Regional Partnership Board.
- Performance monitored monthly through System Engagement meetings for the highest risk Directorates.
- Following confirmation of additional funding from WG in Month 6, the Health Board is forecasting to deliver the planned deficit of £25m. The Month 9 financial position was in line with forecast, reflecting that despite significant operational pressures arising from increased prevalence of COVID-19, there is limited risk of any significant increase in Workforce expenditure given the restricted supply. Further, the Health Board has identified potential slippage in respect of planned operational expenditure, which has been repurposed.

Next Steps

- Analysis of underlying deficit to be completed.
- Determine revenue impact for FY22 of actions taken in response to COVID-19.

Savings and turnaround actions

Risk-assessed directorate savings profile, delivery and forecast



Assurance

- Green and Amber plans of £5.6m identified to Month 9, against which the forecast delivery is uncertain given the impact of the COVID-19 pandemic. At this stage, with COVID-19 demand modelling indicating that the pandemic may impact the remainder of the financial year, it is assumed that delivery will be adversely affected for the full year.
- In-month delivery of £0.3m, which is below plan, which is directly attributable to the COVID-19 pandemic.

Concerns

- The unprecedented circumstances mean that operational focus is diverted to the organisation's response to COVID-19, and therefore not on the delivery or identification of further savings schemes that are not supportive of the response to the pandemic. Both identified and as yet unidentified savings schemes included in the Financial Plan are therefore at risk of non-delivery.
- Discussions are on-going for additional funding to support the non-delivery of the Health Board's savings target on a recurrent basis.

Next Steps

- The focus is on delivering opportunities for FY22 on a recurrent basis. A report will be presented to the January Finance Committee for assessment, including the potential for conversion of FY21 cost reductions into formal service changes.

Appendix 1: Monitoring return tables

Table	Commentary																																
Board Governance Arrangements	<p>In the absence of the Director of Finance, the Deputy Director of Finance, Mr Andrew Spratt, is authorised to approve and sign this report. In the absence of the Chief Executive, the Director of Operations, Mr Andrew Carruthers, is authorised to approve and sign this report.</p> <p>This body of this report (including Appendix 1 and 2) will be presented to the next Finance Committee meeting, to be held on 26th January 2021. All Tables will be appended.</p>																																
Table A: Movement	<p>Opening section of Table A reflects the latest IMTP submission.</p> <p>Line 1 does not reflect the Month 12 reported underlying position from 2019/20 of £46.109m; the IMTP submission is a more accurate reflection of the opening underlying position, as the Month 12 submission included the FYE of a number of savings schemes that will now not deliver a 'step up' from 2019/20 due to the impact of COVID-19.</p> <p>The WG funding (Line 4) of £33.745m is taken from the IMTP submission. A breakdown is provided below:</p> <table> <tr> <th>Item</th><th>£'m</th></tr> <tr> <td>Core Uplift</td><td>12.9</td></tr> <tr> <td>Recurrent Adjustment</td><td>10.0</td></tr> <tr> <td>A4C</td><td>5.3</td></tr> <tr> <td>Strategic Support for Core Team</td><td>1.6</td></tr> <tr> <td>Additional Cluster Funding</td><td>1.3</td></tr> <tr> <td>DEL depreciation</td><td>1.0</td></tr> <tr> <td>Prevention and Early Years</td><td>0.5</td></tr> <tr> <td>Delivery Plan</td><td>0.4</td></tr> <tr> <td>Precision Medicine</td><td>0.2</td></tr> <tr> <td>Paramedic banding</td><td>0.2</td></tr> <tr> <td>Dental Innovation</td><td>0.1</td></tr> <tr> <td>Critical Care</td><td>0.1</td></tr> <tr> <td>Gender Identity</td><td>0.1</td></tr> <tr> <td>Other</td><td>0.05</td></tr> <tr> <td>Total</td><td>33.75</td></tr> </table>	Item	£'m	Core Uplift	12.9	Recurrent Adjustment	10.0	A4C	5.3	Strategic Support for Core Team	1.6	Additional Cluster Funding	1.3	DEL depreciation	1.0	Prevention and Early Years	0.5	Delivery Plan	0.4	Precision Medicine	0.2	Paramedic banding	0.2	Dental Innovation	0.1	Critical Care	0.1	Gender Identity	0.1	Other	0.05	Total	33.75
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Appendix 1: Monitoring return tables

Table	Commentary
	<p>The FYE of Savings yet to be identified has been set equal to the IMTP submission as at this stage it is not known whether the impact of COVID-19 will affect 2021/22.</p> <p>On line 14, the FYE is less than the in-year due to the impact of COVID-19 being more significant on the delivery of in-year recurring savings schemes than has been assumed on the FYE of recurring savings schemes. This is largely due to the assumption that the in-year delivery will fall into the later part of the financial year due to COVID-19; it is then assumed that next financial year would benefit from a full year's delivery.</p> <p>Directorate projections have been adjusted to ensure that there is no double-count of the projected non-delivery of savings</p> <p>The phasing of the cost pressures has been aligned with the deficit profile in Table B – please refer to Section Table B for the basis of this calculation.</p> <p>Line 22 reports the:</p> <ul style="list-style-type: none"> • Q1 COVID-19 funding received from WG in relation to Pay, Primary Care DES and Field Hospital Set Up Costs (for Ceredigion and Pembrokeshire). As requested, the Pay funding not utilised in Month 3 of £47k has been phased into Month 4. • Month 5 Field Hospital set up costs of £3.4m is recognised in Month 5 to match the costs accrued; these figures are provisional and potentially subject to minor refinement once invoices are received from the Local Authority. Following confirmation of the 'specific' funding streams available, the balance of future set up costs has been assumed to be funded based on the current forecast. • Contact Tracing of £5.4m (following confirmation of an additional £1.3m of funding in Month 9) is phased in line with the Month 9 TTP submission. Following confirmation of the 'specific' funding streams available in Month 6, the balance of antigen and antibody testing (£1.2m) has been assumed to be funded based on the current forecast. • Mental Health Improvement Fund for Q1 and Q2 of £0.4m is phased into Month 6. • Transformation Optimise Flow and Outcomes of £1.4m: the Health Board is working with the Regional Partnership Board to finalise plans; it is currently assumed that the phasing of expenditure will fall in the final 3 months of the year, with the YTD costs being recognised in Month 10.

Appendix 1: Monitoring return tables

Table	Commentary
	<ul style="list-style-type: none"> • We reviewed the split of consequential losses and rent for the Month 6 return using the following methodology, this will remain the methodology for the remainder of the financial year: <ul style="list-style-type: none"> ○ Cost Per Square Foot = Annual Rental Income (what a property of that size would be worth as a commercial income); ○ Actual Cost Per Month minus Annual Rental Income ; ○ Consequential Losses = residual difference between Actual Cost Per Month - Annual Rental Income • Following confirmation of the 'specific' funding streams available, the consequential losses (£6.5m) are assumed to be funded based on the current forecast. • Following confirmation of the 'specific' funding streams available, the all Field Hospital decommissioning costs (£3.5m) are assumed to be funded based on the current forecast. • Following confirmation of the 'specific' funding streams available, the PPE costs of £3.3m are assumed to be funded based on the current forecast. This has increased since Month 8 due to the price increases experienced for specific PPE items in Month 6, 7, 8 and 9; this is anticipated to continue for some months. • Following confirmation of the 'specific' funding streams available, Flu immunisations costs of £1.0m are assumed to be funded based on the current forecast. The associated costs are disclosed on Line 108 of Table B3 in total, but represent drugs, primary care DES and pay costs in Section A as shown in Appendix 1, section B3. • Mental Health Support for Voluntary Sector Service Provision (£0.2m) has been recognised. • RPB Discharge to Recover and Assess (£1.3m) has now been classified as COVID-19 funding and is included in line 22 and the associated costs are disclosed in Table B3 within Pay, private sector costs and equipment costs. • Additional WG funding of £47.9m to mitigate the impact of COVID-19 has been recognised. • Annual Leave carryover provision (£11.7m): this is included in Line 22, and associated costs disclosed in Line 52 of Table B3, within Line 10 of Table B and broken down by staff group within Table B2 (see Table B2 section for breakdown). The costs have been assumed to be accrued in Month 12 and are based on an assessment of ESR and e-rostering data split by staff group. The Q1-3 'leave taken' data has been extrapolated forward into Q4 (as forward planned leave data is very poor). An adjustment has been made to reduce balances based on an assumption that, at the point that the data was extracted, it would be incomplete in respect of annual leave taken over the Christmas period. The calculation was then adjusted to limit certain staff groups to a maximum number of days, in-line with Health Board discussions, e.g. most Admin & Clerical groups limited to 5 days. There is limited suitable data available for Medics; the assumption is that this group is expected to carryover 10

Appendix 1: Monitoring return tables

Table	Commentary
	<p>days given the capacity pressures in this cohort. The brought forward 2019-20 Annual Leave Carryover provision of £0.4m has then been netted off to ensure no duplication. It is understood that funding will be issued by WG based on the forecasts included within the Month 9 submissions, and that the Health Board will then be expected to manage any future movements within existing funding.</p> <ul style="list-style-type: none"> • COVID-19 mass vaccination programme (£0.7m): this is included in Line 22, and the associated costs are included in the relevant lines of Section A (see Table B3 Section below) and in totality on Line 107. • Support for Adult Social Care Providers (£2.9m): this is included in Line 22, and associated costs also included in Table B3 within the CHC line. The YTD costs (£1.6m) have been phased into Month 7 as this is when the I&E impact and funding has been recognised. The balance is phased into Month 10 and 12, however this is subject to refinement as it will depend on the timing of providers seeking support. <p>As operational planning is refined, we expect greater clarity on trends and our expected cost base as services resume in their revised structure.</p> <p>In Month 6, the operational variation YTD in Line 26 was reclassified to Table B3, Section D, as the cost reductions are the result of lower levels of activity directly or indirectly attributable to the COVID-19 pandemic.</p> <p>The Welsh Risk Pool risk share is understood to be assessed as a potential £1.3m. There was £1.5m held in Reserves in line with the guidance provided during the Financial Planning process, of which the uncommitted £175k has been included in the forecast. No costs or corresponding release of Reserves has been recognised in the YTD Month 8 position given that this is an initial assessment and it has not been confirmed that these costs will be charged to the Health Board. See Appendix 1, Table B commentary for details of phasing assumptions as at Month 9.</p> <p>The forecasting framework for the Health Board is a key objective for the Finance function in 2020/21 and this will aim to deliver forecasting by Directorate with a split between recurrent and non-recurrent items. For Month 9, it has been assumed that all cost pressures are non-recurrent given the unprecedented situation.</p>
Table A1: Underlying Position	Table A1 has been completed based on the IMTP submission Tables for 2020/21.

Appendix 1: Monitoring return tables

Table	Commentary
Table A2: Risks	<p><u>Risks</u></p> <p>The forecast does not include a significant increase in 'RTT' expenditure, however this has not been included as a risk as it is highly unlikely that there will be capacity to achieve this in the current financial year, based on current levels of capacity.</p> <p>Opportunities</p> <p>The focus continues to be on the development of the Opportunities Framework, which is currently undergoing a review and refresh exercise to identify and progress alternative ways of working in response to COVID-19 which may result in a reduction to costs without impacting on the quality of the service.</p>
Table B: Monthly position	<p>The Health Board's in-month result, in terms of deficit, was in line with the Month 9 forecast, however, was lower than the forecast in Actual terms. Key drivers in month include:</p> <ul style="list-style-type: none"> • RRL (-£2.9m): Re-phasing of the RRL. • Other income (£0.4m): Unanticipated reduction in the NCA income during December. • Primary Care Contractor (-£1.1m): The main drivers behind this variance were in GMS where actual payments to GMS Contractors in relation to Enhanced Services were lower than anticipated following the WG decision to change the payment methodology as a result of COVID-19. A provision no longer required was released in the Dental position and Optometry assessment claims reduced. • Provider services - Pay (-£0.7): Please see the COVID-19 section for an explanation. • Provider services - Non-Pay (-£0.7m): As a direct consequence of increased COVID-19 activity within the Acute sites, elective activity was cancelled resulting in a lower than anticipated spend on M&SE. Isolation tents purchased in response to COVID-19 were capitalised in the month and lower than anticipated claims for ICF were made by LA colleagues due to the Christmas break. • Healthcare: Other NHS (£0.4m): A YTD adjustment for Vertex funding to be passed on to WHSSC was recognised in the month which was profiled differently in the Month 8 forecast. • Continuing Care and Funded Nursing Care (-£0.7m): Anticipated spend associated with Adult Social Care was not realised and has been re-profiled into future months.

Appendix 1: Monitoring return tables

Table	Commentary
	<p><u>Committed Reserves & Contingencies</u></p> <p>Outstanding reserves were again assessed by the Senior Finance team as part of the month end review process with the outcome documented in Table B (Sub section E). Please note for some of the material reserves, the following assumptions have been made:</p> <ul style="list-style-type: none"> • CHC: Additional funding will be required from January 2021 to support further inflationary uplifts. Negotiations are still taking place with LA colleagues and these are due to be finalised in early Q4. • COVID-19 reserves: Both ring-fenced and general reserves for COVID-19 will be used to offset expenditure throughout the rest of the year directly attributable to the pandemic. • IMTP Plans: Due to delays in implementing IMTP plans as Service Managers' attention was focused on Directorate's response plans to COVID-19, allocations have been re-phased to enable Service Managers to prepare and re-set directorate services as the impact of COVID-19 reduces. • ICF: Due to COVID-19, finalisation and tracking of progress against committed plans with the Regional Partnership Board have been delayed. We have been given assurance that the Local Authority expenditure plans are committed, and also understand that there have been significant delays in the receipt of invoices from Local Authority partners. An anticipated YTD 'catch up' of invoicing delays was expected to be achieved ahead of Month 9, with an improvement already noted however due to the Christmas break, this did not fully materialise and LA colleagues have provided assurance that this will take place in Month 10. Slippage against existing plans of up to £1.0m has been identified by the RPB, primarily in relation to Dementia, however replacement schemes of £0.5m have been implemented and plans identified for the remaining £0.5m to repurpose the funds to an appropriate scheme in-year. • Variable pay: Forecasts have been assumed on a straight-line basis, however the phasing of this will be matched to costs incurred by Acute sites. • Welsh Risk Pool: It has been assumed that this will be phased from Month 10 (YTD) then over Q4. <p>The forecast has been calculated using Directorate projections of both the "non-COVID-19" and COVID-19 profiled positions as a basis.</p> <p><u>"Non-COVID-19" projections</u></p> <p>Directorates do not forecast at a level of detail to allow the split of income and expenditure into the Table B headings. However, as the best proxy, we have taken the appropriate 'run rate' from Months 1 - 9 and assumed that this</p>

Appendix 1: Monitoring return tables

Table	Commentary
	<p>continues in the same proportions and applied this to the future month forecasted Actuals; we have then overlaid one-off adjustments included in the projections and classified these into the relevant Table B heading.</p> <p>As the level of COVID-19 additional expenditure going forward each month is expected to exceed cost reductions resulting from COVID-19, the expectation is that the additional WG COVID-19 funding will continue to be utilised to report a position in line with the YTD planned deficit going forward.</p> <p><u>Expenditure Profile for future months</u></p> <p>The forecast recognises that significant increases in Workforce expenditure will not be possible given supply restrictions, and the Ministerial Brief confirms the existing operational plans to prioritise and deploy existing staff to the best patient outcomes possible. Therefore, the financial forecast for Pay expenditure does not include a significant increase in respect of recruitment plans or additional Agency resource. The 'step up' of c.£0.7m per month, primarily relates to the impact of WG circulars in respect of enhanced rates of pay and the additionality of the COVID-19 mass vaccination programme, for which additional staff are already within the recruitment pipeline.</p> <p>There is also a 'step up' of expenditure within Non-Pay, which relates to the delayed Local Authority invoicing for both TTP and ICF, the Health Board's required contribution to the Welsh Risk Pool, Field Hospital decommissioning costs, required HMRC provisions in respect of an historic Home Technology scheme and the COS Heading 14 ruling. There is also an increased requirement to fund bed and mattress replacements, in addition to obsolete medical equipment replacements and IT software. Due to consultant shortages in Radiology, there is an increased level of expenditure in respect of RROL externally provided activity.</p> <p>Primary Care Prescribing is forecast to increase due to the national announcement of an increase in Category M reimbursement prices in January 2021, which is a net increase of 22p in the cost per item in January to March 2021. There has been no change in the forecast in terms of the number of items – the increase is all price driven.</p> <p>CHC future expenditure includes the balance of the inflationary reserve and the balance of the Support for Adult Social Care Provider COVID-19 allocation.</p> <p>This is after accounting for the potential flexibilities discussed during the WG Month 6 review, which have been repurposed as described above.</p>

Appendix 1: Monitoring return tables

Table	Commentary																																												
Table B2: Pay and agency	For in-month commentary, please see the key subjective summary section.																																												
	Excluding the Annual Leave Carryover provision, the Month 9 pay forecast has decreased compared to Month 8 by - £0.7m. Key drivers to this are documented below:																																												
	<ul style="list-style-type: none">Medical & Dental (£1.0m): The increase in forecast this month includes the recognition of Benefit in Kind (£0.3m) and SAS enhancement payments (£0.4m). There has also been an increase in Agency Medical requirement to backfill vacancies and sickness/ shielding as a direct consequence of COVID-19 (£0.3m).Nursing & Midwifery (-£0.4): The majority of this reduction is attributable to the in-month underspend in Month nine as Nurses in Planned Care were deployed to Red areas thus reducing the agency requirement.Estates & Ancillary (-£0.8m): Forecasted spend has again reduced in line with a reduction in planned activity at Field Hospital sites resulting in a lower requirement for fixed term Porters and Domestics. A revision has also been made to reduce the anticipated level of recruitment of bank staff following advice from workforce colleagues.																																												
	The Month 9 assessment of the Annual Leave Carryover provision resulting from COVID-19 has been included in Month 12 of Table B2 in the following staff groups:																																												
	<table><tr><th>Staff Group</th><th>Gross provision £'000</th><th>2019-20 b/f provision £'000</th><th>2020-21 c/f provision £'000</th></tr><tr><td>Administrative, Clerical & Board Members</td><td>1,095</td><td>87</td><td>1,008</td></tr><tr><td>Medical & Dental</td><td>3,499</td><td>125</td><td>3,374</td></tr><tr><td>Nursing & Midwifery Registered</td><td>3,730</td><td>55</td><td>3,675</td></tr><tr><td>Prof Scientific & Technical</td><td>538</td><td>3</td><td>535</td></tr><tr><td>Additional Clinical Services</td><td>1,767</td><td>63</td><td>1,704</td></tr><tr><td>Allied Health Professionals</td><td>780</td><td>44</td><td>736</td></tr><tr><td>Healthcare Scientists</td><td>201</td><td>17</td><td>184</td></tr><tr><td>Estates & Ancillary</td><td>517</td><td>0</td><td>517</td></tr><tr><td>Students</td><td>0</td><td>0</td><td>0</td></tr><tr><td>Total</td><td>12,127</td><td>394</td><td>11,733</td></tr></table>	Staff Group	Gross provision £'000	2019-20 b/f provision £'000	2020-21 c/f provision £'000	Administrative, Clerical & Board Members	1,095	87	1,008	Medical & Dental	3,499	125	3,374	Nursing & Midwifery Registered	3,730	55	3,675	Prof Scientific & Technical	538	3	535	Additional Clinical Services	1,767	63	1,704	Allied Health Professionals	780	44	736	Healthcare Scientists	201	17	184	Estates & Ancillary	517	0	517	Students	0	0	0	Total	12,127	394	11,733
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Appendix 1: Monitoring return tables

Table	Commentary																						
	<p>The change in the calculation since Month 8 is as follows:</p> <table> <tr> <th>Staff Group</th><th>Movement £'000</th></tr> <tr> <td>Administrative, Clerical & Board Members</td><td>571</td></tr> <tr> <td>Medical & Dental</td><td>3,302</td></tr> <tr> <td>Nursing & Midwifery Registered</td><td>3,675</td></tr> <tr> <td>Prof Scientific & Technical</td><td>(149)</td></tr> <tr> <td>Additional Clinical Services</td><td>1,260</td></tr> <tr> <td>Allied Health Professionals</td><td>539</td></tr> <tr> <td>Healthcare Scientists</td><td>(823)</td></tr> <tr> <td>Estates & Ancillary</td><td>307</td></tr> <tr> <td>Students</td><td>(114)</td></tr> <tr> <td>Total</td><td>8,568</td></tr> </table>	Staff Group	Movement £'000	Administrative, Clerical & Board Members	571	Medical & Dental	3,302	Nursing & Midwifery Registered	3,675	Prof Scientific & Technical	(149)	Additional Clinical Services	1,260	Allied Health Professionals	539	Healthcare Scientists	(823)	Estates & Ancillary	307	Students	(114)	Total	8,568
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Table B3: COVID-19	<p>The forecast figures have been refined in Month 9 to reflect our best estimate of a realistic scenario given YTD activity and costs incurred. The key drivers of the change in forecast are detailed below.</p> <p><u>Section A</u></p> <p>The Reporting and Forecasting Principles Paper developed internally, based on the WG guidance, has been applied consistently to identify and quantify the additionality of costs incurred in response to the COVID-19 pandemic. A draft of this document has been shared with FDU for feedback and has been shared in the Deputy Directors of Finance Forum. This Paper outlines the process henceforth in terms of the decision-making framework for Gold Strategic Group and the flow of decisions/information from that forum to inform financial forecasting. This will include a regular review of the use of Reserves funds and the use of funds where there is no committed obligation.</p> <p>The actual Month 9 costs saw a decrease against forecast of £2.0m. Key drivers to this are documented below:</p> <ul style="list-style-type: none"> • Nursing & Midwifery (Establishment) (-£0.1m): Planned Care used to support Red areas reducing the requirement for overtime and Bank support. • Nursing & Midwifery (Agency) (-£0.1m): Reduced Agency requirement as Planned Care staff deployed to Red areas. In addition to this some shifts were also not filled due to a lack of available Agency Nurses. 																						

Appendix 1: Monitoring return tables

Table	Commentary
	<ul style="list-style-type: none"> • Additional costs in Private Sector (-£0.2m): Anticipated spend associated with the RPB Discharge to recover and assess re-phased into future periods. • CHC (-£0.6m): Anticipated spend associated with Adult Social Care re-phased into future periods. • De-Commissioning costs (£0.4m): De-commissioning costs connected with Penweddig School incurred in the month (previously profiled in Month 12). • Drugs (-£0.2m): Drug costs in relation to the Flu DES have been re-classified in month to Primary Care Prescribing. • Equipment costs – Beds (£0.1m): Higher than expected costs for Bariatric bed hire within the Field Hospitals. • M&SE – Consumables (-£0.3m): Isolation tents purchased as part of the COVID-19 response capitalised in month and lower than planned usage of M&SE within Acute sites during the month. • Primary Care Prescribing (£0.1m): Drug costs in relation to the Flu DES have been re-classified in month to Primary Care Prescribing. • Transformation (-£0.7m): Anticipated spend in month re-phased into future periods. • Local Authority spend (-£0.1m): Anticipated spend in month re-phased into future periods. <p>In respect of the GDS contract, the YTD loss of income to the end of Month 9 is £2.0m; the projected loss for the full year is £2.737m.</p> <p>Costs as a result of lost income relate to reduced sales at Acute sites' Canteen's, shops and revenue received from commercial providers operating within Hospital sites. The projected full year loss on income is forecast to be £0.35m.</p> <p>The forecast for COVID-19 (Section A) has increased by £0.3m in Month 9 compared to what was reported in Month 8. Below are the key drivers of the movement between Month 9 and Month 8 forecasts:</p> <ul style="list-style-type: none"> • Medical & Dental (Establishment) (£0.8m): Recognition of Benefit in Kind payment £0.3m and SAS enhancement payments (£0.4m). • Nursing & Midwifery (Agency) (-£0.4m): Expenditure has been reduced due to Planned Care substantive staff being deployed into red areas while elective services have been postponed. • Estates & Ancillary (Temp staff) (-£0.2m): Step down in profile based on a reduction in the planned on-boarding of fixed term staff. • Additional costs in Private Sector (£0.2m): A step up in profile has been included following the additional funding received to support the voluntary sector.

Appendix 1: Monitoring return tables

Table	Commentary
	<ul style="list-style-type: none"> • De-Commissioning costs (-£0.8m): Confirmation from LA colleagues that the costs associated with Penweddig School have reduced compared to last month and a reduction in the costs for reinstating Bluestone has been included. • Drugs (-£0.8m): Drug costs in relation to the Flu DES have been re-classified in month to Primary Care Prescribing. • Equipment costs – Beds (£0.2m): A step up in profile for Bariatric bed hire within the Field Hospitals following Month 9 actual costs. • M&SE – Consumables (-£0.4m): The reduction is primarily due to the Month 9 reduction explained above. • PPE (£0.2m): A step up in profile has been included based on an extrapolation of Month 9 actual costs. • Primary Care Prescribing (£0.6m): Drug costs in relation to the Flu DES have been re-classified in month to Primary Care Prescribing. • Local Authority spend (£1.1m): A step up in profile has been included following a new allocation received in Month 9 totalling £1.3m. <p>The step up in profile in future months within Table B3 relates to:</p> <ul style="list-style-type: none"> • the majority of decommissioning costs expected to be incurred in Month 12; • step up in TTP Local Authority expenditure; • step up in Transformation expenditure; • increased staffing costs relating to COVID-19 (largely establishment and bank) due to increased prevalence; • annual leave carryover provision profiled into Month 12. <p><u>Section A1</u></p> <p>Field Hospitals represent the only significant change in capacity in response to the pandemic. Bed numbers have been reviewed based on current local demand modelling.</p> <p>The Table shows Field Hospital forecasts from a County perspective, with the corresponding bed capacity as per the revised demand model assumed for Month 9.</p> <p>A schedule of expenditure has also been included for the GMS Extended Hours DES, Flu immunisation spend and Test, Trace and Protect.</p>

Appendix 1: Monitoring return tables

Table	Commentary		
	The Flu Immunisations expenditure is included in the following lines of Section A:		
	Expenditure	Table B3 Line	YTD Month 9
	Primary Care DES	Additional costs in Primary Care (line 59)	£220k
	Vaccinations	Drugs (line 70)	£91k
	Vaccinations	Primary Care Prescribing (line 93)	£144k
	Staff costs to deliver	Establishment Nursing (line 5)	£1k
	Total		£456k
	The costs associated with the COVID-19 Mass Vaccination programme has now been factored into the forecast (both costs and income):		
	Expenditure	Table B3 Line	YTD Month 8
	Staff costs to deliver	Pay Establishment (lines 3, 4, 5, 7, 8)	£18k
	Equipment purchases	Equipment (other) (line 73)	£26k
	Estates/Security costs	Estates/Security costs (line 74)	£nil
	IT costs	IT costs (line	£nil
	Consumables	M&SE consumables (line 80)	£nil
	Rent of 4 sites	Rent (line 84)	£nil
	Transport	Transportation (line 89)	£nil
	Total		£44k
	Section B		
	The unprecedented circumstances mean that operational focus is diverted to the organisation's response to COVID-19, and therefore not on the delivery or identification of further savings schemes that are not supportive of the response to the pandemic. A review is currently in progress to identify schemes for prioritisation should the demands of COVID-19 allow.		
	Section C		
	Cost reductions have been identified for the full year, however have been phased down as the year progresses given the expectation that a number of services will be gradually reinstated. These assumptions will continue to be refined.		

Appendix 1: Monitoring return tables

Table	Commentary
	<p><u>Section D</u> Part of a number of Reserve items has been included in the forecast to offset the impact of COVID-19 following additional scrutiny in Month 7; this will continue to be regularly reviewed and refined in line with the scrutiny of assurances provided by others as described in the main body of this report.</p> <p>Further decisions will be taken by the Executive Team and Gold Strategic Group as the year progresses and plans can be made with more certainty.</p> <p><u>Field Hospital figures included in Section A and separate templates</u> The Field Hospital demand model has been revised from the local model based on Rt of 1.1, being the most 'reasonable worst case scenario' to a local model which has been adjusted to reflect a more 'realistic' scenario.</p> <p>All decommissioning costs are assumed to fall into the current financial year. VAT on set-up costs has been recognised for Bluestone and Parc Y Scarlets Barn, following the latest guidance.</p> <p>The bed capacity profile has been provided by Field Hospital sites and can be observed in table B3 (Section A1) of the presentation.</p>
Table C3: Savings Tracker	<p>The Table has been completed based on current green and amber schemes.</p> <p>Any negative values reported in the in-month Actuals column relates to a correction of previous month actuals, meaning that the YTD figure is correct.</p> <p>The date to 'go Green' for all Amber schemes has been set as 1 January 2021. All schemes with delivery forecast in-year are now assessed as Green; those schemes with £nil forecast delivery remain as Amber status. This results in 19 validation errors.</p> <p>The Risk to delivery on Amber Schemes has been set at £nil where the in-year delivery is forecast to be £nil.</p> <p><u>Areas of immediate focus:</u></p>

Appendix 1: Monitoring return tables

Table	Commentary
	<ul style="list-style-type: none"> • Accelerating the delivery of Healthier Mid and West Wales; significant areas of community shift already in place and Transforming Mental Health has been largely delivered. Realising benefits of this on a BAU basis. • Completing work on unpacking deficit at a locality level to address variability in activity and cost base, guiding future efforts to shift resources into community. Locality based reporting delivered in draft for overall system perspective to support better integration with planning and transformation. • Embedding and rolling out work and learning from COVID-19 response, in particular: • Performance excellence framework and approach • Digital benefits realisation • Prevention and population health • Improved procurement support • Better configuration of services as part of the recovery plan • Alignment and focus across corporate teams with operational teams • Value Based Healthcare: DrDoctor implemented and collecting PROMs in first conditions, executive education programme launched. <p>Whilst the focus of the Health Board is on identifying and implementing recurrent schemes, the current combination of Winter capacity and COVID-19 pressures being experienced operationally has diverted significant managerial resource.</p>
Table D: Welsh NHS Assumptions	We agreed and signed all income and expenditure contracts with Welsh Health Board colleagues within the national deadline (end of March). All agreements are within expected limits and indicative finance and activity plans were detailed within each contract.
Table E: Resource limits	<p>The Health Board's planning assumptions are that it will receive resource allocation income of £1,002.6m from Welsh Government in the 2020/21 financial year. This comprises of notified allocation of £950.5m and allocations pending of £52.1m.</p> <p>Pending allocations in relation to specific COVID-19 costs (PPE, Field Hospital set-up, decommissioning and consequential losses, TTP Tracing, TTP testing, COVID-19 mass vaccination programme and Flu Immunisations) are based on the Month 9 Directorate forecast. The pending allocation for the COVID-19 Annual Leave Carryover</p>

Appendix 1: Monitoring return tables

Table	Commentary			
	provision of £11.7m is based on the Month 9 assessment; it is understood that the Health Board will be expected to manage any future movements within the assessment of the provision within existing funding.			
Table F: Statement of Financial Position				
		2020-21 Opening balance £m	31 DEC 2020 £'m	Movement £'m
	Non Current assets			
	Fixed Assets	280	274	-6
	Other non current assets	58	44	-14
		338	318	-20
	Current Assets			
	Inventories	9	10	1
	Trade and other Receivables	69	54	-15
	Cash	2	2	0
	Total Assets	418	384	-34
	Liabilities			
	Trade and other Payables	-120	-106	14
	Provisions	-98	-79	19
	Total Liabilities	-218	-185	33
	Net Assets less Liabilities	201	199	-2
	Financed by:			
	General Fund	173	168	-5
	Revaluation Reserve	28	31	3
	Total Funding	201	199	-2
	The movement since the end of 2019/20 in non-current assets is £20m. This is mainly due to a decrease of £14m in other assets, attributable to a decrease in the Welsh Risk Pool debtor as a result of medical negligence claims. There was also a decrease of £6m in fixed assets. This is due to in year additions and indexation offset by depreciation and impairments of first time valuations of capital schemes.			

Appendix 1: Monitoring return tables

Table	Commentary																																																																																				
	<p>The movement since the end of 2019/20 in current assets is £14m. This is mainly due to a decrease in trade and other receivables, attributable to a decrease in the Welsh Risk Pool debtor as a result of medical negligence claims.</p> <p>The movement since the end of 2019/20 in liabilities is £33m. This is due to a decrease of £14m in trade payables and a decrease of £19m in provisions. The decrease in trade payables is mainly due to NHS payables £16.3m offset by an increase in Other payables of £2.8m. The provisions decrease is attributable to a decrease in provision for medical negligence cases based on information provided by the Welsh Risk Pool.</p>																																																																																				
Table G: Cashflow	<p>The chart displays monthly cash flow data from December 2019 to December 2020. The Y-axis represents the amount in pounds, with positive values for Receivables and Cash (up to 10,000) and negative values for Payables (down to 20,000). The data is categorized by age groups: Over 90 days (red), 60-90 days (orange), 30-60 days (yellow), and Under 30 days (green). A blue line represents the total Cash flow. The chart shows a significant increase in payables in April 2020, reaching approximately 18,000, followed by a sharp decline in May 2020, reaching approximately 15,000. The total cash flow remains relatively stable, fluctuating between 2,000 and 4,000.</p> <table><tr><th>Month</th><th>Over 90 days</th><th>60-90 days</th><th>30-60 days</th><th>Under 30 days</th><th>Cash</th></tr><tr><td>Dec-19</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Jan-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Feb-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Mar-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Apr-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>May-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Jun-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Jul-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Aug-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Sep-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Oct-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Nov-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr><tr><td>Dec-20</td><td>1,000</td><td>1,000</td><td>1,000</td><td>2,000</td><td>3,000</td></tr></table>	Month	Over 90 days	60-90 days	30-60 days	Under 30 days	Cash	Dec-19	1,000	1,000	1,000	2,000	3,000	Jan-20	1,000	1,000	1,000	2,000	3,000	Feb-20	1,000	1,000	1,000	2,000	3,000	Mar-20	1,000	1,000	1,000	2,000	3,000	Apr-20	1,000	1,000	1,000	2,000	3,000	May-20	1,000	1,000	1,000	2,000	3,000	Jun-20	1,000	1,000	1,000	2,000	3,000	Jul-20	1,000	1,000	1,000	2,000	3,000	Aug-20	1,000	1,000	1,000	2,000	3,000	Sep-20	1,000	1,000	1,000	2,000	3,000	Oct-20	1,000	1,000	1,000	2,000	3,000	Nov-20	1,000	1,000	1,000	2,000	3,000	Dec-20	1,000	1,000	1,000	2,000	3,000
Month	Over 90 days	60-90 days	30-60 days	Under 30 days	Cash																																																																																
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Appendix 1: Monitoring return tables

Table	Commentary																																																								
	<ul style="list-style-type: none">Income collected from sources other than Welsh Government is collected through the invoicing process. It is imperative that this is collected promptly to reduce reliance on cash support from WG. Balances owed to the Health Board are £3.6m in Month 9.It is also important that the Health Board pays its suppliers promptly. At the end of Month 9, £6.2m was owed to suppliers, of which £4.3m are less than 30 days old. <p>Cash</p> <table><caption>Estimated data from the Cash chart</caption><thead><tr><th>Month</th><th>Monthly Draw Down (£'m)</th><th>WG maximum cash balance (5% of draw down) (£'m)</th><th>Cash balance (£'m)</th></tr></thead><tbody><tr><td>Dec-19</td><td>73</td><td>3.65</td><td>3.0</td></tr><tr><td>Jan-20</td><td>78</td><td>3.9</td><td>2.5</td></tr><tr><td>Feb-20</td><td>82</td><td>4.1</td><td>3.0</td></tr><tr><td>Mar-20</td><td>78</td><td>4.0</td><td>2.2</td></tr><tr><td>Apr-20</td><td>85</td><td>4.25</td><td>2.8</td></tr><tr><td>May-20</td><td>83</td><td>4.15</td><td>4.5</td></tr><tr><td>Jun-20</td><td>85</td><td>4.25</td><td>1.5</td></tr><tr><td>Jul-20</td><td>83</td><td>4.15</td><td>2.8</td></tr><tr><td>Aug-20</td><td>68</td><td>3.4</td><td>3.0</td></tr><tr><td>Sep-20</td><td>83</td><td>4.15</td><td>2.0</td></tr><tr><td>Oct-20</td><td>85</td><td>4.25</td><td>2.8</td></tr><tr><td>Nov-20</td><td>70</td><td>3.5</td><td>2.2</td></tr><tr><td>Dec-20</td><td>90</td><td>4.5</td><td>2.3</td></tr></tbody></table> <ul style="list-style-type: none">The closing balance of £2.3m did not exceed 5% of the total monthly draw down from Welsh Government.	Month	Monthly Draw Down (£'m)	WG maximum cash balance (5% of draw down) (£'m)	Cash balance (£'m)	Dec-19	73	3.65	3.0	Jan-20	78	3.9	2.5	Feb-20	82	4.1	3.0	Mar-20	78	4.0	2.2	Apr-20	85	4.25	2.8	May-20	83	4.15	4.5	Jun-20	85	4.25	1.5	Jul-20	83	4.15	2.8	Aug-20	68	3.4	3.0	Sep-20	83	4.15	2.0	Oct-20	85	4.25	2.8	Nov-20	70	3.5	2.2	Dec-20	90	4.5	2.3
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Appendix 1: Monitoring return tables

Table	Commentary
	<ul style="list-style-type: none"> • The Health Board has an approved cash limit of £963.9m split between revenue £935.2m and capital £28.7m. • Cumulative cash draw down to month 9 is £737.46m. • The cashflow reflects our request for strategic cash and working balances cash support. The total request is £18.9m which is split between working balances support of £2.9m (revenue £1.5m and capital £1.4m) and strategic cash support of £16m. This will leave us with a balance of £1m split equally between capital and revenue cash.
Table H: PSPP	The Health Board achieved its PSPP target of paying 95% of its non-NHS invoices within 30 days in Quarter 3 with a cumulative position of 95.0%.
Table I: Capital RLM	<p>An estimate of the future forecast of COVID-19 spend for 2020/21 has been reflected within the Month 9 return. If all the expenditure plans are delivered in year and no additional funding is available this will lead to a shortfall of £0.220m against the 2020/21 Capital Resource Limit.</p> <p>This is due to a review of the COVID-19 feasibility schemes, which has been undertaken by the Capital Planning and Operational Teams to understand what schemes remains deliverable by the 31st March 2021. These schemes were then prioritised along with non-COVID capital schemes. In a paper presented to the Gold Command Group the balance of the Health Board's discretionary capital programme has been allocated to fund the highest priorities. The remaining shortfall now relates to the original COVID - 19 capital schemes where WG are releasing funding based on actual costs.</p> <p>The reported capital expenditure on COVID-19 for M9 includes the equipping and oxygen costs for the Field Hospitals, but excludes the design, build and restoration costs and estimates.</p> <p>Variances between AWCP / DCP schemes plan and forecast is attributable to scheme paybacks between 2019/20 and 2020/21. Schemes where this can be seen are Women & Children's Scheme, Imaging Equipment, Bronglais MRI scheme and the Cardigan Scheme.</p> <p>Further to the above the Health Board is anticipating further funding from the sale of Cardigan Health Centre of £0.300m and pending allocation of £0.350m for Withybush Fire PBC, bringing the total capital spend to £29.335m for 2020/21 that is excluded from the Month 9 position.</p>

Appendix 1: Monitoring return tables

Table	Commentary
Table J: Capital In Year Schemes	The sale of the old Cardigan Hospital site was completed in May 2020 for £0.450m, part of the Full Business Case approval conditions was that the proceeds of the sale were to be returned to Welsh Government. The Health Board has received confirmation that these proceeds can be retained and reinvested in our Discretionary plan
Table K: Capital disposals	The Health Board has disposed of Cardigan Hospital in May 2020.
Table M: Aged debtors	There are no aged debts in Month 9.
Table N: GMS	<p>The Table has been completed for Quarter 3.</p> <p>The following principles have been followed in preparing the Table:</p> <ul style="list-style-type: none"> • All expenditure has been included in the YTD and forecast columns in the tables irrespective of whether it has been classified as COVID-19 or “non-COVID-19”; • Expenditure in the GMS Table that has been categorised as COVID-19 relates to the Easter Bank Holiday Enhanced Service and amounts to £0.2m.
Table O: Dental	<p>The Table has been completed for Quarter 3.</p> <p>The following principles have been followed in preparing the Table:</p> <ul style="list-style-type: none"> • All expenditure has been included in the YTD and forecast columns in the tables irrespective of whether it has been classified as COVID-19 or “non-COVID-19”; • The Table contains expenditure relating to the net loss of PCR income due to COVID-19 in the current year. This amounts to £0.5m in the YTD with a full year projected outturn of £1.1m

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 8 2020/21	Health Board Response
<p>Following our meeting on the 2nd November, it is acknowledged that you are no longer reporting any risks within Table A2. Your narrative however reports, in relation to delivery of the £25m outturn, that “this risk is considered to be medium”. At that meeting, Alan reinforced the expectation for all organisations following the Month 6 review process of having a very clear forecast out-turn position to enable clarity on the financial forecast for the Health & Social Services position. We discussed the concern that assurance had been provided that the Health Board would deliver a deficit position of £25m and that the risks (particularly those in relation to workforce) would be subsequently managed. At our meeting you confirmed that the various material risks, reported at Month 7, would either be removed or would be incorporated within your position and be managed and indeed this is reflected in your Tables. The Accountable Officer letter of the 26th November, confirmed the position as a £25m forecast deficit and you re-affirmed this is the Health Boards confirmed forecast out-turn. I therefore trust that the inclusion of this assessed ‘Medium Risk’ in your narrative was an error and will be removed.</p> <p>(Action Point 8.1)</p>	<p>This was an error in the Month 8 submission and the risk has been amended to “Low” in the Month 9 submission.</p>
<p><u>Monthly Positions (Table B)</u></p> <p>It is pleasing to note that the total value of reserves reported via Section E has materially reduced (c. £21.000m) since Month 7. A significant value, c £51m, remains, with one of the material items relating to ICF. Your narrative describes delays in the receipt of invoices from the Local Authority and slippage against existing plans of up to £1m, identified by the RPB, primarily in relation to Dementia; however, replacement schemes are in the process of being identified to repurpose the funds to an appropriate scheme in-year. I trust that your narrative will provide a progress update on incurring the corresponding spend for this and all other items reported in Section E. (Action Point 8.2)</p>	<p>See Appendix 1, Section B.</p>

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 8 2020/21	Health Board Response
<p>Please provide a supporting explanation for the increase in CHC spend within future months (the item for inflation reported in Section E only explains a minor element of the increase), particularly in December which is projected to incur the highest monthly spend in this financial year. (Action Point 8.3)</p>	<p>This relates to the balance of the Support to Adult Social Care Providers fund, of which the anticipated charge in Month 9 has been deferred to Month 10.</p>
<p><u>Covid-19 Analysis (Table B3)</u> As per Action Point 7.8, I requested clarification on the change of circumstances at Month 7 which lead to the inclusion of 'Deployment of establishment staff to Field Hospitals' as an operational cost reduction (via Section C) totalling £3.566m. A response has not been provided for this specific AP and the item has now been removed from Section C, even though your narrative confirms the assumption that the revised Month 8 model assumes a minimum of 50% deployment of existing staff. Please provide an explanation of its inclusion at Month 7 and subsequent exclusion at Month 8. (Action Point 7.8)</p>	<p>In Month 7 the Field Hospital staff costs included in Section A, Pay, of Table B3 was based on the modelled requirement for the bed requirement. However, at that time it had not been agreed which Directorates would provide staff to deploy to Field Hospitals (predominately across the Acute sites). This led to an overstatement of the 'additionality' of staff costs that should have been reported in Section A of Table B3 (and also on the Field Hospital template submitted separately) as any deployed staff should not have been considered as additionality. To mitigate this known issue with the Month 7 submission, a line was entered into Section C of Table B3 so that the net reported position was as accurate as possible.</p> <p>This issue was rectified in Month 8, with Field Hospitals only reporting the additionality of staffing requirement, after assuming a minimum of 50% deployment. The deduction in Section C was therefore not required.</p>
<p><u>Savings (Table C, C1, C2 & C3)</u> I look forward to the remaining Amber schemes, as reported in Table C3a and which are forecast to deliver £0.259m of savings, being reassessed as Green on the 1st January 2021. (Action Point 8.4)</p>	<p>Those schemes with a forecast delivery value have been reassessed as Green in Month 9. The only remaining Amber schemes have a forecast delivery of £nil.</p>
<p><u>Resource Limits (Table E)</u> The 'next steps' section of the narrative includes the statement 'Continue to work with Welsh Government to understand the level of</p>	<p>This comment has been removed.</p>

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 8 2020/21	Health Board Response
future funding arrangements, as these remain uncertain'; please elaborate which funding items are unclear otherwise this comment should be removed from your narrative. (Action Point 8.5)	
<u>Movement of Opening Financial Plan to Forecast (Table A)</u> The Covid-19 funding phased in your year to date position, is quoted as £50.900m on page 4 of your narrative; however, as per Line 22 of Table A the actual value is higher at £54.128m. Please ensure the supplementary narrative supports the financial amounts reported in the Tables. (Action Point 8.6)	This has been corrected in the Month 9 submission.
<u>Pay Analysis (Table B2)</u> As per Action Point 7.13, please provide a quantified analysis in the narrative confirming the categories (lines) and profile of where the additional Annual Leave Accrual costs are being recorded in Table B2 (Pay Analysis Section A). (Action Point 7.13)	A breakdown by staff group (all profiled into Month 12) has been included in Appendix 1, Section B2.
<u>Resource Limits (Table E)</u> For ease of reference, please separately report anticipated 'Testing' and 'Tracing' funding within Table E. (Action Point 8.7)	This has been split into two separate lines on Table E.
<u>Other</u> I note your response to Action Point 7.15, I look forward to receiving the 'simplified Executive Summary' at Month 9. (Action Point 7.15)	A draft proposal has been shared by separate cover for discussion with WG colleagues.

Table A - Movement of Opening Financial Plan to Forecast Outturn

		In Year Effect	Non Recurring	Recurring	FYE of Recurring
		£'000	£'000	£'000	£'000
1	Underlying Position b/fwd from Previous Year - as per 3 year plan (Surplus - Positive Value / Deficit - Negative Value)	-47 498	0	-47 498	-47 498
2	New Cost Pressures - as per 3 year plan (Negative Value)	-45 865	0	-45 865	-45 865
3	Opening Cost Pressures	-93 363	0	-93 363	-93 363
4	Welsh Government Funding (Positive Value)	33 745	0	33 745	33 745
5	Identified Savings Plan (Positive Value)	5 592	2 320	3 272	3 350
6	Planned Net Income Generated (Positive Value)	450	0	450	450
7	Planned Accountancy Gains (Positive Value)	0	0	0	0
8	Planned Profit / (Loss) on Disposal of Assets	0	0	0	0
9	Planned Release of Uncommitted Contingencies & Reserves (Positive Value)	0	0		
10		0	0		
11	Planning Assumptions still to be finalised at Month 1	28 576	0	28 576	30 818
12	IMTP / Annual Operating Plan	-25 000	2 320	-27 320	-25 000
13	Reversal of Planning Assumptions still to be finalised at Month 1	-28 576	0	-28 576	-30 818
14	Month 1 Planned Savings - Forecast Underachievement Due to Covid-19	-2 199	-483	-1 716	-1 204
15	Month 1 Planned Savings - Other Forecast (Underachievement) / Overachievement	2	302	-301	-366
16	Additional In Year Identified Savings - Forecast (Positive Value)	0	0	0	0
17	Additional In Year & Variance from Planned Net Income Generated (Positive Value)	0	0	0	0
18	Additional In Year & Variance from Planned Accountancy Gains (Positive Value)	0	0	0	0
19	Additional In Year & Variance from Planned Profit / (Loss) on Disposal of Assets	0	0		
20	Release of Previously Committed Contingencies & Reserves (Positive Value)	0	0		
21	Additional In Year Welsh Government Funding (Positive Value)	0	0		
22	Additional In Year Welsh Government Funding Due To Covid-19 (Positive Value)	102 222	102 222		
23	Operational Expenditure Cost Increase Due To Covid-19 (Negative Value)	-99 607	-99 607		
24	Planned Operational Expenditure Cost Reduction Due To Covid-19 (Positive Value)	18 677	18 677		
25	Slippage on Planned Investments/Repurposing of Developmental Initiatives Due To Covid-19 (Positive Value)	9 483	9 483		
26	Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	-1	-1		
27	Category M, NCSO, NOACs in Primary Care Prescribing	0	0		
28		0	0		
29		0	0		
30		0	0		
31		0	0		
32		0	0		
33		0	0		
34		0	0		
35		0	0		
36		0	0		
37		0	0		
38		0	0		
39		0	0		
40	Forecast Outturn (- Deficit / + Surplus)	-25 000	32 912	-57 912	-57 388

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	In Year Effect
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	-3 958	-3 958	-3 958	-3 958	-3 958	-3 958	-3 958	-3 958	-3 958	-3 958	-3 958	-3 958	-35 624	-47 498
2	-3 822	-3 822	-3 822	-3 822	-3 822	-3 822	-3 822	-3 822	-3 822	-3 822	-3 822	-3 822	-34 399	-45 865
3	-7 780	-7 780	-7 780	-7 780	-7 780	-7 780	-7 780	-7 780	-7 780	-7 780	-7 780	-7 780	-70 022	-93 363
4	2 812	2 812	2 812	2 812	2 812	2 812	2 812	2 812	2 812	2 812	2 812	2 812	25 309	33 745
5	798	330	320	304	493	304	449	450	460	428	428	828	3 908	5 592
6	38	38	38	38	38	38	38	38	38	38	38	38	338	450
7	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8													0	0
9													0	0
10													0	0
11	2 049	2 517	2 527	2 543	2 354	2 543	2 399	2 398	2 388	2 420	2 419	2 019	21 718	28 576
12	-2 084	-2 084	-2 083	-2 084	-2 083	-2 083	-2 083	-2 083	-2 083	-2 083	-2 084	-2 083	-18 750	-25 000
13	-2 049	-2 517	-2 527	-2 543	-2 354	-2 543	-2 399	-2 398	-2 388	-2 420	-2 419	-2 019	-21 718	-28 576
14	-566	-124	-133	-22	-99	-129	-133	-194	-199	-103	-103	-394	-1 599	-2 199
15	0	0	0	-196	-249	170	-109	383	0	0	0	0	1	2
16	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19													0	0
20													0	0
21													0	0
22	0	0	10 737	47	3 686	25 538	7 994	6 126	5 528	9 818	8 210	24 538	59 656	102 222
23	-4 190	-7 486	-9 374	-6 541	-8 974	-4 548	-7 784	-5 648	-5 573	-8 971	-7 357	-23 161	-60 118	-99 607
24	2 136	3 313	1 971	1 441	2 753	1 757	1 445	703	1 434	641	634	449	16 953	18 677
25	61	53	441	75	146	2 796	1 034	1 021	1 198	1 035	1 035	586	6 826	9 483
26	569	701	-42	405	669	-2 302	-5	6	-1			-1	0	-1
27	-166	-302	-484	402	-21	571							0	0
28													0	0
29													0	0
30													0	0
31													0	0
32													0	0
33													0	0
34													0	0
35													0	0
36													0	0
37													0	0
38													0	0
39													0	0
40	-6 289	-8 445	-1 494	-9 015	-6 526	19 227	-2 041	-2 084	-2 083	-2 083	-2 083	-2 084	-18 750	-25 000

Table A1 - Underlying Position

Section A - By Spend Area		IMTP	Full Year Effect of Actions		
		Underlying Position b/f	Recurring Savings (+ve)	Recurring Allocations / Income (+ve)	Subtotal
		£'000	£'000	£'000	£'000
1	Pay - Administrative, Clerical & Board Members	(964)			(964)
2	Pay - Medical & Dental	(10 496)			(10 496)
3	Pay - Nursing & Midwifery Registered	(5 302)			(5 302)
4	Pay - Prof Scientific & Technical	(1 414)			(1 414)
5	Pay - Additional Clinical Services	(3 918)			(3 918)
6	Pay - Allied Health Professionals	1 874			1 874
7	Pay - Healthcare Scientists	99			99
8	Pay - Estates & Ancillary	25			25
9	Pay - Students	0			0
10	Non Pay - Supplies and services - clinical	(1 939)			(1 939)
11	Non Pay - Supplies and services - general	(711)			(711)
12	Non Pay - Consultancy Services	(632)			(632)
13	Non Pay - Establishment	(2 065)			(2 065)
14	Non Pay - Transport	(129)			(129)
15	Non Pay - Premises	(2 515)			(2 515)
16	Non Pay - External Contractors	(1 424)			(1 424)
17	Health Care Provided by other Orgs – Welsh LHBs	(2 139)			(2 139)
18	Health Care Provided by other Orgs – Welsh Trusts	(1 644)			(1 644)
19	Health Care Provided by other Orgs – WHSSC	(5 386)			(5 386)
20	Health Care Provided by other Orgs – English	0			0
21	Health Care Provided by other Orgs – Private / Other	(8 820)			(8 820)
22	Total	(47 498)	0	0	(47 498)

New, Recurring, Full Year Effect of Unmitigated £'000	IMTP Underlying Position c/f £'000
	(964)
	(10 496)
	(5 302)
	(1 414)
	(3 918)
	1 874
	99
	25
	0
(2 731)	(4 670)
(712)	(1 423)
	(632)
	(2 065)
	(129)
	(2 515)
(1 558)	(2 982)
	(2 139)
	(1 644)
(4 890)	(10 276)
	0
	(8 820)
(9 891)	(57 389)

Section B - By Directorate		IMTP	Full Year Effect of Actions		
		Underlying Position b/f	Recurring Savings (+ve)	Recurring Allocations / Income (+ve)	Subtotal
		£'000	£'000	£'000	£'000
1	Primary Care	(1 839)			(1 839)
2	Mental Health	1 694			1 694
3	Continuing HealthCare	(2 763)			(2 763)
4	Commissioned Services	(2 811)			(2 811)
5	Scheduled Care	(9 737)			(9 737)
6	Unscheduled Care	(24 597)			(24 597)
7	Children & Women's	(5 408)			(5 408)
8	Community Services	766			766
9	Specialised Services	(437)			(437)
10	Executive / Corporate Areas	(1 842)			(1 842)
11	Support Services (inc. Estates & Facilities)	(524)			(524)
12	Total	(47 498)	0	0	(47 498)

New, Recurring, Full Year Effect of Unmitigated Pressures (- £'000	IMTP Underlying Position c/f £'000
(779)	(2 618)
	1 694
(711)	(3 474)
(4 890)	(7 701)
	(9 737)
	(24 597)
	(5 408)
	766
(1 952)	(2 389)
(1 559)	(3 401)
	(524)
(9 891)	(57 389)

Table A2 - Overview Of Key Risks & Opportunities		FORECAST YEAR END	
		£'000	Likelihood
	Opportunities to achieve IMTP/AOP (positive values)		
1	Red Pipeline schemes (inc AG & IG)		
2	Potential Cost Reduction		
3	Total Opportunities to achieve IMTP/AOP	0	
	Risks (negative values)		
4	Under delivery of Amber Schemes included in Outturn via Tracker		
5	Continuing Healthcare		
6	Prescribing		
7	Pharmacy Contract		
8	WHSSC Performance		
9	Other Contract Performance		
10	GMS Ring Fenced Allocation Underspend Potential Claw back		
11	Dental Ring Fenced Allocation Underspend Potential Claw back		
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26	Total Risks		
	Further Opportunities (positive values)		
27			
28			
29			
30			
31			
32			
33			
34	Total Further Opportunities		
35	Current Reported Forecast Outturn	(25 000)	
36	IMTP / AOP Outturn Scenario	(25 000)	
37	Worst Case Outturn Scenario	(25 000)	
38	Best Case Outturn Scenario	(25 000)	

Table B - Monthly Positions

A. Monthly Summarised Statement of Comprehensive Net Expenditure / Statement of Comprehensive Net Income			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
1	Revenue Resource Limit	Actual/F'cast	70 825	70 074	77 037	76 682	77 478	97 213	87 080	79 983	84 284	87 821	87 111	107 031	720 656	1 002 618
2	Capital Donation / Government Grant Income	Actual/F'cast	0	0	0	20	0	0	7	0	0	120	0	206	27	353
3	Welsh NHS Local Health Boards & Trusts Income	Actual/F'cast	1 859	2 379	1 297	1 997	2 533	2 451	2 404	2 173	2 046	2 027	2 027	2 027	19 139	25 219
4	WHSSC Income	Actual/F'cast	190	174	204	213	219	201	195	243	192	203	203	203	1 831	2 441
5	Welsh Government Income (Non RRL)	Actual/F'cast	122	158	112	141	147	181	168	110	113	139	139	139	1 252	1 669
6	Other Income	Actual/F'cast	1 985	1 449	1 744	1 588	1 764	1 810	1 429	2 077	2 073	1 569	1 569	1 569	15 919	20 625
7	Income Total		74 981	74 234	80 394	80 641	82 141	101 856	91 283	84 586	88 708	91 879	91 048	111 175	758 824	1 052 926
8	Primary Care Contractor (excluding drugs, including non resource limited expenditure)	Actual/F'cast	10 051	9 679	10 102	10 268	9 908	9 606	9 585	10 148	9 878	11 255	11 119	11 085	89 225	122 684
9	Primary Care - Drugs & Appliances	Actual/F'cast	6 368	6 418	6 668	6 535	5 917	6 585	6 992	6 423	7 176	6 465	6 318	7 130	59 082	78 996
10	Provided Services - Pay	Actual/F'cast	36 319	38 066	37 790	36 664	37 343	36 446	39 264	38 451	38 158	38 825	38 980	50 724	338 501	467 030
11	Provider Services - Non Pay (excluding drugs & depreciation)	Actual/F'cast	6 400	6 445	9 645	6 994	9 824	7 540	8 840	8 821	11 702	12 666	12 481	15 653	76 211	117 010
12	Secondary Care - Drugs	Actual/F'cast	3 199	2 883	3 387	3 803	3 312	3 853	3 665	3 911	3 831	3 700	3 701	3 701	31 844	42 946
13	Healthcare Services Provided by Other NHS Bodies	Actual/F'cast	12 433	12 867	12 329	12 995	12 788	12 575	14 952	12 705	13 546	13 580	13 378	13 359	117 190	157 507
14	Non Healthcare Services Provided by Other NHS Bodies	Actual/F'cast	8	8	8	8	8	1	8	7	8	7	7	7	64	85
15	Continuing Care and Funded Nursing Care	Actual/F'cast	4 729	4 432	4 255	4 330	4 120	4 110	6 377	4 173	4 498	5 426	4 861	5 477	41 024	56 787
16	Other Private & Voluntary Sector	Actual/F'cast	43	113	116	84	90	105	95	99	100	102	102	102	845	1 151
17	Joint Financing and Other	Actual/F'cast	48	131	104	37	102	57	125	97	37	94	94	94	738	1 019
18	Losses, Special Payments and Irrecoverable Debts	Actual/F'cast	158	135	135	148	175	156	126	149	135	143	243	243	1 317	1 946
19	Exceptional (Income) / Costs - (Trust Only)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
20	Total Interest Receivable - (Trust Only)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21	Total Interest Payable - (Trust Only)	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22	DEL Depreciation\Accelerated Depreciation\Impairments	Actual/F'cast	1 458	1 458	1 458	1 605	1 539	1 539	1 720	1 630	1 630	1 640	1 791	1 794	14 037	19 262
23	AME Donated Depreciation\Impairments	Actual/F'cast	55	45	(4 109)	6 185	3 541	56	1 575	57	92	59	59	3 889	7 497	11 504
24	Uncommitted Reserves & Contingencies	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
25	Profit\Loss Disposal of Assets	Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Cost - Total	Actual/F'cast	81 269	82 680	81 888	89 656	88 667	82 629	93 324	86 670	90 791	93 961	93 132	113 258	777 574	1 077 926
27	Net surplus/ (deficit)	Actual/F'cast	(6 288)	(8 446)	(1 494)	(9 015)	(6 526)	19 227	(2 041)	(2 084)	(2 083)	(2 083)	(2 084)	(2 084)	(18 750)	(25 000)

B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	
28 . Actual YTD surplus/ (defi	(18 750)	
29. Actual YTD surplus/ (defi	(16 667)	
30. Current month actual surp	(2 083)	
31. Average monthly surplus/	(2 083)	▲ Trend
32. YTD /remaining months	(6 250)	

Full-year surplus/ (deficit) scenarios	£'000
33. Extrapolated Scenario	(24 999)
34. Year to Date Trend Scenario	(25 000)

E. Committed Reserves & Contingencies

			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Forecast year-end position
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000		
	List of all Committed Reserves & Contingencies inc above in Section A. Please specify Row number in description.															
46	CHC: CHC & FNC (Line 15)	Forecast Only										98	98	98	0	294
47	COVID-19: Non-Pay (Line 11)	Forecast Only										2 551	2 430	3 182	0	8 163
48	COVID-19: Pay (Line 10)	Forecast Only										2 514	2 059	2 316	0	6 889
49	COVID-19: Ring fenced Non Pay (Line 11)	Forecast Only										1 893	2 026	5 113	0	9 032
50	COVID-19: Ring fenced Primary Care Prescribing (Line 9)	Forecast Only										144	144	17	0	305
51	COVID-19: Ring fenced Primary Care Contractor (Line 8)	Forecast Only										200	50	30	0	280
52	COVID-19: Ring fenced Pay (Line 10)	Forecast Only										532	532	536	0	1 600
53	COVID-19: Annual Leave Carryover provision, Pay (Line 10)	Forecast Only												11 733	0	11 733
54	Elective IMTP Funding: Pay (Line 10)	Forecast Only										71	71	71	0	212
55	Estates: IMTP Funding: Non Pay (Line 11)	Forecast Only										40	40	40	0	120
56	ICF: Non pay (Line 11)	Forecast Only										734	734	734	0	2 202
57	ICF: Pay (Line 10)	Forecast Only										489	489	489	0	1 468
58	IMTP Non pay: Non Pay (Line 11)	Forecast Only										59	59	59	0	177
59	IMTP Pay: Other: Pay (Line 10)	Forecast Only										20	20	20	0	60
60	Major Trauma: Pay (Line 10)	Forecast Only										21	21	21	0	63
61	Passthrough to Commissioners: Healthcare Services (Line 13)	Forecast Only										132	132	132	0	395
62		Forecast Only													0	0
63		Forecast Only													0	0
64		Forecast Only													0	0
65		Forecast Only													0	0
66		Forecast Only													0	0
67		Forecast Only													0	0
68	Variable pay: Pay (Line 10)	Forecast Only										423	423	423	0	1 268
69		Forecast Only													0	0
70	Welsh Risk Pool: Non Pay (Line 11)	Forecast Only										1 104	110	110	0	1 325
71		Forecast Only													0	0
72		Forecast Only													0	0
73	Nurse Staffing: Pay (Line 10)	Forecast Only										24	24	24	0	72
74	Total		0	0	0	0	0	0	0	0	0	11 049	9 462	25 148	0	45 659
	Phasing		0%	0%	0%	0%	0%	0%	0%	0%	0%	24%	21%	55%	0%	

Table B2 - Pay Expenditure Analysis

A - Pay Expenditure		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Administrative, Clerical & Board Members	5 217	5 329	5 268	5 255	5 289	5 302	5 409	5 369	5 456	5 463	5 547	6 517	47 895	65 422
2	Medical & Dental	8 315	9 202	8 523	7 651	8 208	7 372	9 482	9 130	8 895	8 907	8 645	12 213	76 778	106 542
3	Nursing & Midwifery Registered	11 665	11 766	11 737	11 814	11 993	12 091	12 808	12 732	12 539	12 789	12 887	16 492	109 145	151 313
4	Prof Scientific & Technical	1 367	1 412	1 398	1 387	1 419	1 408	1 415	1 368	1 381	1 393	1 417	1 942	12 554	17 306
5	Additional Clinical Services	5 188	5 247	5 294	5 289	5 328	5 260	5 215	5 157	5 177	5 425	5 475	7 153	47 155	65 208
6	Allied Health Professionals	2 329	2 337	2 347	2 365	2 399	2 422	2 458	2 412	2 440	2 368	2 403	3 118	21 510	29 400
7	Healthcare Scientists	841	884	842	893	908	874	871	866	864	916	931	1 109	7 843	10 799
8	Estates & Ancillary	2 239	2 396	2 722	2 444	2 435	2 403	2 346	2 319	2 316	2 468	2 583	3 087	21 619	29 756
9	Students	0	377	482	489	256	143	142	7	1	5	5	5	1 897	1 912
10	TOTAL PAY EXPENDITURE	37 161	38 950	38 613	37 587	38 235	37 275	40 147	39 359	39 070	39 734	39 892	51 637	346 397	477 659
Analysis of Pay Expenditure															
11	LHB Provided Services - Pay	36 319	38 066	37 790	36 664	37 343	36 446	39 264	38 451	38 158	38 825	38 980	50 724	338 501	467 030
12	Other Services (incl. Primary Care) - Pay	842	884	823	923	892	829	883	908	912	909	912	913	7 896	10 629
13	Total - Pay	37 161	38 950	38 613	37 587	38 235	37 275	40 147	39 359	39 070	39 734	39 892	51 637	346 397	477 659

B - Agency / Locum (premium) Expenditure - Analysed by Type of Staff		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
REF	TYPE	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Administrative, Clerical & Board Members	10	11	11	13	10	5	2	(4)	8	8	8	8	66	91
2	Medical & Dental	313	369	319	313	475	424	474	492	583	587	595	592	3 762	5 537
3	Nursing & Midwifery Registered	843	748	948	1 028	1 112	1 288	1 617	1 636	1 526	1 674	1 597	1 590	10 746	15 607
4	Prof Scientific & Technical	0	11	0	0	0	0	0	0	0	0	0	0	11	11
5	Additional Clinical Services	3	11	5	0	1	1	12	8	12	0	0	0	54	54
6	Allied Health Professionals	68	60	58	76	78	73	115	76	68	68	69	68	671	876
7	Healthcare Scientists	8	31	0	37	22	24	26	39	38	53	53	53	225	385
8	Estates & Ancillary	3	0	6	27	(6)	30	36	43	23	23	24	24	163	234
9	Students	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10	TOTAL AGENCY/LOCUM (PREMIUM) EXPENDITURE	1 248	1 241	1 347	1 494	1 693	1 845	2 282	2 290	2 258	2 414	2 347	2 335	15 699	22 795
11	Agency/Locum (premium) % of pay	3,4%	3,2%	3,5%	4,0%	4,4%	4,9%	5,7%	5,8%	5,8%	6,1%	5,9%	4,5%	4,5%	4,8%

C - Agency / Locum (premium) Expenditure - Analysed by Reason for Using Agency/Locum (premium)		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
REF	REASON	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Vacancy	834	711	1 031	1 075	1 305	1 473	1 552	1 641	1 703	1 724	1 753	1 742	11 326	16 545
2	Maternity/Paternity/Adoption Leave	3	2	3	3	4	4	5	5	5	5	5	5	33	49
3	Special Leave (Paid) – inc. compassionate leave, interview	1	1	1	1	1	1	2	2	2	2	2	2	11	17
4	Special Leave (Unpaid)	0		1	1	1	1	2	2	2	2	2	2	9	15
5	Study Leave/Examinations	0				0	0	0	0	0	0	0	0	0	0
6	Additional Activity (Winter Pressures/Site Pressures)	0				0	0	0	0	0	0	0	0	0	0
7	Annual Leave	0				0	0	0	0	0	0	0	0	0	0
8	Sickness	40	35	55	57	70	78	83	88	91	92	94	93	597	875
9	Restricted Duties	0				0	0	0	0	0	0	0	0	0	0
10	Jury Service	0				0	0	0	0	0	0	0	0	0	0
11	WLI	0				0	0	0	0	0	0	0	0	0	0
12	Exclusion (Suspension)	0				0	0	0	0	0	0	0	0	0	0
13	COVID-19	370	492	256	356	313	286	640	554	455	590	491	491	3 722	5 295
14	TOTAL AGENCY/LOCUM (PREMIUM) EXPENDITURE	1 248	1 241	1 347	1 494	1 693	1 845	2 282	2 290	2 258	2 414	2 347	2 335	15 699	22 795

Table B3 - COVID-19 Analysis

A - Additional Expenditure		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
REF	Enter as positive values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
1	Pay (Additional costs due to C19)														
2	Establishment & Bank Additional Hours:														
3	Administrative, Clerical & Board Members	0	76	48	54	10	57	59	52	56	156	156	159	413	885
4	Medical & Dental	181	1 034	703	85	104	(521)	194	128	43	521	121	371	1 952	2 966
5	Nursing & Midwifery Registered	108	259	217	355	208	210	288	192	242	464	455	456	2 078	3 454
6	Prof Scientific & Technical	12	2	8	1	27	28	1	1	2	1	1	1	81	85
7	Additional Clinical Services	176	108	175	132	135	129	206	278	249	455	425	432	1 588	2 901
8	Allied Health Professionals	35	28	58	61	42	39	22	12	7	15	15	15	304	350
9	Healthcare Scientists	0	2	4	6	15	12	12	0	6	6	6	6	58	75
10	Estates & Ancillary	0	81	78	78	122	94	84	93	138	151	151	151	767	1 222
11	Sub total Establishment & Bank Additional Hours	512	1 590	1 291	770	665	48	866	755	744	1 771	1 332	1 593	7 241	11 937
12	Agency:														
13	Administrative, Clerical & Board Members	0	0	0	0	0	8	0	0	0	0	0	0	8	8
14	Medical & Dental	107	19	174	110	189	94	182	87	128	129	129	129	1 090	1 476
15	Nursing & Midwifery Registered	263	458	48	227	134	155	348	425	290	422	323	323	2 348	3 415
16	Prof Scientific & Technical	0	0	0	0	0	2	0	0	0	0	0	0	2	2
17	Additional Clinical Services	0	0	1	0	0	0	3	14	0	0	0	0	17	17
18	Allied Health Professionals	0	15	17	4	9	0	76	2	4	5	5	5	128	143
19	Healthcare Scientists	0	0	0	0	0	27	33	37	20	35	35	35	117	222
20	Estates & Ancillary	0	0	16	15	(20)	0	0	0	0	0	0	0	11	11
21	Sub total Agency	370	492	256	356	313	286	640	554	455	590	491	491	3 721	5 294
22	Returners (Provide WTE to the right):														
23	Administrative, Clerical & Board Members													0	0
24	Medical & Dental													0	0
25	Nursing & Midwifery Registered													0	0
26	Prof Scientific & Technical													0	0
27	Additional Clinical Services													0	0
28	Allied Health Professionals													0	0
29	Healthcare Scientists													0	0
30	Estates & Ancillary													0	0
31	Sub total Returners	0	0	0	0	0	0	0	0	0	0	0	0	0	0
32	Students (Provide WTE to the right):														
33	Medical & Dental	41	34	0	1	0	0	0	0	0	0	0	0	77	77
34	Nursing & Midwifery Registered	0	374	469	455	103	95	137	8	(3)	0	0	0	1 639	1 639
35	Prof Scientific & Technical	0	0	0	0	31	0	0	0	0	0	0	0	31	31
36	Additional Clinical Services	0	0	3	36	119	37	4	2	1	1	1	1	203	206
37	Allied Health Professionals	0	2	0	0	0	0	0	0	0	0	0	0	2	2
38	Healthcare Scientists	0	0	0	0	0	0	0	0	0	0	0	0	0	0
39	Estates & Ancillary	0	0	0	0	0	0	0	0	0	0	0	0	0	0
40	Sub total Students	41	410	472	493	253	132	141	11	(2)	1	1	1	1 951	1 954
41	Other Temp Staff (Provide WTE to the right):														
42	Administrative, Clerical & Board Members	0	33	25	69	100	67	55	63	56	56	56	56	468	638
43	Medical & Dental	0	35	96	91	80	32	32	45	61	30	30	30	472	562
44	Nursing & Midwifery Registered	13	39	36	51	36	29	26	35	34	34	34	34	299	400
45	Prof Scientific & Technical	0	0	0	0	0	0	0	0	0	0	0	0	0	0
46	Additional Clinical Services	231	323	449	372	317	197	186	181	171	172	172	172	2 426	2 943
47	Allied Health Professionals	3	3	3	0	47	87	18	0	0	0	0	0	162	162
48	Healthcare Scientists	0	0	0	0	0	0	0	0	0	0	0	0	0	0
49	Estates & Ancillary	292	257	794	490	447	440	375	330	300	391	474	474	3 725	5 064
50	Sub total Other Temp Staff	539	690	1 403	1 073	1 027	851	693	654	623	684	767	767	7 553	9 769
51	Other (specify below and in narrative)														
52	Annual leave carryover provision												11 733	0	11 733
53														0	0
54														0	0
55														0	0
56	TOTAL ADDITIONAL PAY EXPENDITURE	1 462	3 182	3 422	2 692	2 258	1 318	2 340	1 973	1 820	3 046	2 591	14 585	20 466	40 688

Table B3 - COVID-19 Analysis
A - Additional Expenditure (continued)

		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
57	Non Pay (Additional costs due to C19)														
58	Accommodation Costs	0	0	0	0	0	13	0	0	0	0	0	0	13	13
59	Additional costs in Primary Care	0	34	511	276	290	180	263	312	438	470	320	300	2 304	3 394
60	Additional costs in Private Sector including via WHSSC	0	64	88	66	57	42	43	187	22	559	357	338	568	1 821
61	Additional costs in Temporary Hospital Capacity - Set Up Costs e.g. Field Hospitals	14	8	2 436	25	3 474	90	408	14	(120)	0	0	0	6 349	6 349
62	Catering Costs	19	27	2	99	(1)	35	(13)	0	12	(4)	(4)	(4)	182	168
63	CHC	122	147	245	249	155	242	1 653	1	2	608	2	618	2 816	4 046
64	Cleaning Costs	42	46	43	10	12	9	7	58	27	27	27	27	253	335
65	Costs as a result of lost income (inc SLA, services & private patients)	32	315	130	47	49	0	0	0	0	1	1	1	573	575
66	Covid-19 Testing Units	0	0	0	0	0	0	0	0	0	0	0	0	0	0
67	Decommissioning costs	0	0	0	0	0	0	191	0	438	(142)	0	3 028	629	3 515
68	Discharge to assess	0	158	88	18	0	(88)	0	0	0	100	100	100	176	476
69	Discharge to recover	0	8	4	15	8	0	12	5	23	74	74	74	75	296
70	Drugs inc Medical Gases	104	15	39	128	51	257	160	195	169	163	163	163	1 118	1 606
71	Equipment Costs - beds	49	86	187	44	31	88	8	0	151	77	110	105	644	937
72	Equipment costs - ventilators	331	76	0	9	0	0	0	0	0	0	0	0	416	416
73	Equipment costs - other (specific in narrative)	59	116	0	132	180	299	125	175	115	96	96	172	1 201	1 564
74	Estates\Security costs	490	293	280	208	166	147	106	101	139	145	133	133	1 930	2 341
75	External Project Management Costs	0	0	0	0	0	0	4	50	16	10	6	6	70	93
76	Insurance	0	0	0	0	0	1	1	1	1	1	1	1	4	6
77	IT Costs	42	22	11	44	11	61	28	(10)	(1)	23	8	9	209	249
78	Laundry Costs	6	79	35	44	3	24	2	44	64	29	34	44	301	409
79	Legal Fees	0	0	0	5	5	2	17	4	0	0	0	0	33	33
80	M&SE - consumables	182	336	270	246	418	510	285	285	143	288	269	268	2 676	3 501
81	Mortuary/Funeral Expenses	0	0	0	0	0	0	0	0	0	0	0	0	0	0
82	PPE	136	84	114	101	69	48	360	737	407	407	407	407	2 056	3 276
83	Rates	0	0	22	(15)	2	2	2	1	2	2	2	2	17	22
84	Rent	645	1 112	865	871	610	(3 237)	125	(1)	84	53	58	58	1 074	1 244
85	Reprovision of existing services to external facilities e.g. Haemophilia services	0	0	0	0	0	0	0	(0)	0	0	0	0	0	0
86	Telephony	0	0	0	0	0	10	6	0	1	0	0	0	17	18
87	Temporary LTA Arrangements	332	799	516	309	215	0	9	0	0	0	0	0	2 181	2 181
88	Training	0	4	19	3	0	0	2	2	0	2	2	2	30	36
89	Transportation	3	4	5	17	9	17	(0)	123	0	28	28	28	177	261
90	Utility Costs	120	15	42	39	26	104	21	28	20	34	34	34	414	516
91	Other costs (specify below and in narrative)	0	0	0	0	0	69	168	135	77	91	165	165	449	871
92	Consequential losses (Field Hospitals)				0	28	3 812	432	480	435	446	446	446	5 188	6 526
93	Primary Care Prescribing	0	456	0	859	388	492	403	408	525	523	507	547	3 532	5 109
94	Transformation Optimise Flow and Outcomes and MHLd support (Months 9-12)	0	0	0	0	0	0	0	0	0	730	330	356	0	1 416
95	Local Authority spend	0	0	0	0	460	0	616	340	562	1 084	1 090	1 147	1 978	5 300
96	TOTAL ADDITIONAL NON PAY EXPENDITURE	2 728	4 304	5 952	3 849	6 716	3 230	5 445	3 675	3 753	5 925	4 766	8 575	39 652	58 919
97	TOTAL ADDITIONAL OPERATIONAL EXPENDITURE (Agrees to Table A)	4 190	7 486	9 374	6 541	8 974	4 548	7 784	5 648	5 573	8 971	7 357	23 161	60 118	99 607

A1 - Major Projects : Change in Capacity Expenditure Due To C19 (subset of Table A)

		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
REF	Enter as positive values														
98	Major Projects: Capacity Change Expenditure (due to C19)														
99	Carmarthenshire Field Hospitals	8	175	317	282	3 296	712	569	419	948	437	433	1 607	6 727	9 204
100	Pembrokeshire Field Hospital	663	880	2 685	687	913	358	476	431	393	472	472	2 168	7 485	10 597
101	Ceredigion Field Hospitals	5	38	526	54	90	67	240	33	24	(115)	27	261	1 076	1 248
102														0	0
103	GMS Extended Hours DES Cost			203										203	203
104														0	0
105														0	0
106														0	0
107	COVID-19 mass vaccination programme									44	244	229	232	44	749
108	Flu immunisations							40	102	313	344	194	47	455	1 040
109	Test, Trace, Protect Costs	126	95	5	0	527	13	186	499	691	1 470	1 476	1 535	2 142	6 623
110	TOTAL MAJOR PROJECTS: ADDITIONAL CAPACITY EXPENDITURE	802	1 187	3 736	1 023	4 826	1 150	1 511	1 484	2 412	2 852	2 831	5 850	18 132	29 665

B - Non Delivery of Planned Savings Due To C19

		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
	Enter as Positive values														
111	Non Delivery of Planned Savings (due to C19)														
112	Non Delivery of Finalised (M1) Savings	566	124	133	22	99	129	133	194	199	103	103	394	1 400	2 199
113	Non delivery of Savings Assumed but not finalised at M1	2 049	2 422	2 622	2 543	2 354	2 543	2 399	2 398	2 388	2 420	2 419	2 019	19 330	28 576
114	TOTAL NON DELIVERY OF PLANNED SAVINGS	2 615	2 546	2 755	2 565	2 453	2 672	2 532	2 592	2 587	2 523	2 522	2 413	20 730	30 775

Table B3 - COVID-19 Analysis

C - Planned Operational Expenditure Cost Reduction Due To C19

		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
	Enter as Negative values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
115	Expenditure Reductions (due to C19)														
116	Reduction of non pay costs due to reduced elective activity	(1 078)	(1 302)	(570)	(493)	(624)	(428)	(306)	0	(271)	(60)	(16)	0	(5 072)	(5 148)
117	Reduction of outsourcing costs due to reduced planned activity	0	0	0										0	0
118	Reduction of travel and expenses	0	0	(420)	(169)	(150)	(150)	(160)	(224)	(212)	(160)	(139)	(137)	(1 485)	(1 921)
119	Catering	(58)	(61)	(31)	(29)	(29)	(29)	(29)	(29)	(29)	(29)	(29)	(29)	(324)	(411)
120														0	0
121	Nursing Agency	(500)	(600)	(400)	(300)	(250)	(250)	(50)						(2 350)	(2 350)
122	Dental GDS reduced contractual payments	0	(150)	(150)	(150)	(150)	(150)	(150)	(150)	(150)	(150)	(150)	(150)	(1 200)	(1 650)
123	Other Acute Services, CHC treatment, admission regimes/deaths and Secondary Care drugs	0	(500)	0	0	(1 100)	(300)	(300)	(300)	(572)	(242)	(300)	(133)	(3 072)	(3 747)
124	Unscheduled Care Various	(500)	(700)	(400)	(300)	(450)	(450)	(450)	0	(200)	0	0	0	(3 450)	(3 450)
125	TOTAL EXPENDITURE REDUCTION (Agrees to Table A)	(2 136)	(3 313)	(1 971)	(1 441)	(2 753)	(1 757)	(1 445)	(703)	(1 434)	(641)	(634)	(449)	(16 953)	(18 677)

D - Slippage on Planned Investments/Repurposing of Developmental Initiatives due to C19

		1	2	3	4	5	6	7	8	9	10	11	12		
		Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total YTD	Forecast year-end position
	Enter as Negative values	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
126	Slippage on Planned Investments/Repurposing of Developmental Initiatives (due to C19)													0	0
127	NICE/HCD Reserve					(140)	140								
128	Pay Reserves						(400)	(200)	(215)	(568)	(520)	(520)	(320)	(1 383)	(2 743)
129	Non-Pay Reserves							(463)	(463)	(712)	(463)	(463)	(214)	(1 638)	(2 777)
130	Commisioning Reserves							(21)	(21)	(21)	(21)	(21)	(21)	(62)	(123)
131	Other slippage on planned investments/repurposed funding						(2 456)	(200)	(200)					(2 856)	(2 856)
132	WHSSC slippage	(61)	(53)	(441)	(75)	(6)	(80)	69	(123)	102	(32)	(32)	(32)	(668)	(764)
133	Primary Care Reserves							(220)						(220)	(220)
134														0	0
135														0	0
136	TOTAL RELEASE/REPURPOSING OF PLANNED INVESTMENTS/DEVELOPMENT INITIATIVES (Agrees to Table A)	(61)	(53)	(441)	(75)	(146)	(2 796)	(1 034)	(1 021)	(1 198)	(1 035)	(1 035)	(586)	(6 826)	(9 483)
137	NET EXPENDITURE DUE TO Covid-19	4 608	6 666	9 717	7 590	8 528	2 667	7 837	6 516	5 528	9 818	8 210	24 538	59 656	102 222

Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)

															Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000
			1	2	3	4	5	6	7	8	9	10	11	12			YTD variance as %age of YTD Budget/Plan	Green £'000	Amber £'000	on recurring £'000	recurring £'000	
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar								
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000								
1	CHC and Funded Nursing Care	Budget/Plan	425	25	25	25	25	25	58	58	58	58	58	58	721	895		895	0			
2		Actual/F'cast	0	43	24	(36)	0	20	18	421	38	43	43	43	527	654	80,52%	654	0	414	240	250
3		Variance	(425)	18	(1)	(61)	(25)	(4)	(40)	363	(20)	(15)	(15)	(15)	(194)	(241)	(26,95%)	(241)	0			
4	Commissioned Services	Budget/Plan	1	1	1	1	1	1	34	34	34	34	34	34	109	212		210	2			
5		Actual/F'cast	0	0	0	0	0	1	(1)	33	33	33	33	33	67	167	40,00%	167	0	0	167	200
6		Variance	(1)	(1)	(1)	(1)	(1)	(0)	(35)	(1)	(1)	(1)	(1)	(1)	(42)	(45)	(38,84%)	(43)	(2)			
7	Medicines Management (Primary & Secondary Care)	Budget/Plan	17	17	17	17	17	17	17	17	17	17	17	17	150	200		200	0			
8		Actual/F'cast	17	17	17	3	13	13	13	13	13	17	17	17	120	170	70,59%	170	0	0	170	200
9		Variance	(0)	0	0	(13)	(3)	(3)	(3)	(3)	(3)	0	0	0	(30)	(30)	(20,00%)	(30)	0			
10	Non Pay	Budget/Plan	200	131	127	131	321	132	208	209	219	213	213	343	1 679	2 448		2 047	401			
11		Actual/F'cast	107	38	36	14	31	203	97	101	106	179	179	289	734	1 381	53,15%	1 381	0	912	469	860
12		Variance	(92)	(93)	(91)	(118)	(290)	71	(111)	(108)	(113)	(34)	(34)	(54)	(945)	(1 067)	(56,28%)	(665)	(401)			
13	Pay	Budget/Plan	156	156	151	130	130	130	132	132	132	106	106	377	1 249	1 837		1 176	661			
14		Actual/F'cast	108	108	110	106	101	108	79	71	71	54	54	54	862	1 022	84,29%	1 022	0	813	209	269
15		Variance	(48)	(48)	(40)	(25)	(28)	(22)	(53)	(61)	(61)	(52)	(52)	(323)	(387)	(815)	(30,99%)	(154)	(661)			
16	Primary Care	Budget/Plan	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
17		Actual/F'cast	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0
18		Variance	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
19	Total	Budget/Plan	798	330	320	304	493	304	449	450	460	428	428	828	3 908	5 592		4 528	1 064			
20		Actual/F'cast	232	206	187	86	146	345	206	639	261	325	325	435	2 309	3 395	68,03%	3 395	0	2 139	1 256	1 780
21		Variance	(566)	(124)	(133)	(218)	(348)	41	(242)	189	(199)	(103)	(103)	(393)	(1 599)	(2 197)	(40,91%)	(1 133)	(1 064)			
22	Variance in month	(70,94%)	(37,44%)	(41,54%)	(71,57%)	(70,48%)	13,40%	(53,99%)	42,09%	(43,22%)	(24,01%)	(24,01%)	(47,47%)	(40,91%)								
23	In month achievement against FY forecast	6,83%	6,08%	5,52%	2,54%	4,29%	10,17%	6,08%	18,82%	7,69%	9,58%	9,58%	12,82%									

Table D - Income/Expenditure Assumptions
Annual Forecast

	LHB/Trust	Contracted Income £'000	Non Contracted Income £'000	Total Income £'000	Contracted Expenditur e £'000	Non Contracted Expenditur e £'000	Total Expenditure £'000
1	Swansea Bay University	4 474	(382)	4 092	35 861	706	36 567
2	Aneurin Bevan University	351	192	543	264	202	466
3	Betsi Cadwaladr University	4 518		4 518	276		276
4	Cardiff & Vale University	324	220	544	5 740	640	6 380
5	Cwm Taf Morgannwg University	456	75	531	453	235	688
6	Hywel Dda University	0		0	0		0
7	Powys	7 883	703	8 586	188	223	411
8	Public Health Wales	2 168		2 168	2 454		2 454
9	Velindre	3 264		3 264	15 059		15 059
10	NWSSP			0			0
11	NWIS			0			0
12	Wales Ambulance Services	117		117	4 589		4 589
13	WHSSC	1 629		1 629	78 390	(935)	77 455
14	EASC			0	24 308		24 308
15	HEIW	7 004		7 004	3		3
16	NHS Wales Executive			0			0
17	Total	32 188	808	32 996	167 585	1 071	168 656

Table E - Resource Limits		STATUS OF ISSUED RESOURCE LIMIT ITEMS				Revenue Resource Limit £'000	Recurring (R) or Non Recurring (NR)	Revenue Drawing Limit £'000	Capital Resource Limit £'000	Total Capital Drawing Limit £'000
		HCHS £'000	Pharmacy £'000	Dental £'000	GMS £'000					
1. BASE ALLOCATION										
1	LATEST ALLOCATION LETTER/SCHEDULE REF:	56	3	5	6					
2	Total Confirmed Funding	837 936	21 133	17 956	73 499	950 524		935 207	28 685	28 685
2. ANTICIPATED ALLOCATIONS										
3	DEL Non Cash Depreciation - Baseline Surplus / Shortfall	146				146	NR			
4	DEL Non Cash Depreciation - Strategic	3 783				3 783	NR			
5	DEL Non Cash Depreciation - Accelerated					0				
6	DEL Non Cash Depreciation - Impairment					0	NR			
7	AME Non Cash Depreciation - Donated Assets	679				679	NR			
8	AME Non Cash Depreciation - Impairment	10 825				10 825	NR			
9	AME Non Cash Depreciation - Impairment Reversals					0				
10	Removal of Donated Assets / Government Grant Receipts	(353)				(353)	NR			
11						0				
12	Substance Misuse	2 039				2 039	R	2 039		
13						0				
14	Prevention and Early Years	742				742	R	742		
15						0				
16						0				
17	A Healthier Wales - Blades for Children	417				417	R	417		
18	A Healthier Wales - Rehab, Reablement and Recovery	200				200	R	200		
19	A Healthier Wales - AHP AAC	95				95	R	95		
20						0				
21						0				
22						0				
23						0				
24						0				
25	Clinical Excellence Awards	47				47	NR	47		
26						0				
27	Calman Registrars (SpR)	12				12	NR	12		
28						0				
29						0	NR	0		
30	COVID-19: TTP Tracing	3 101				3 101	NR	1 300		
31	COVID-19: TTP Testing	1 193				1 193	NR	1 193		
32	COVID-19: Annual leave carryover provision	11 733				11 733	NR			
33	COVID-19: Field Hospitals set up costs	432				432	NR	432		
34	COVID-19: Field Hospitals decommissioning costs	3 515				3 515	NR	3 515		
35	COVID-19: Field Hospitals consequential losses	6 526				6 526	NR	6 526		
36	COVID-19: PPE	2 722				2 722	NR	2 722		
37	COVID-19: Flu Immunisations	1 040				1 040	NR	1 040		
38	COVID-19: COVID-19 mass vaccination programme	749				749	NR	749		
39	COVID-19: RPB: Discharge to Recover and Assess (D2RA) pathways	1 290				1 290	NR	1 290		
40	Local 111 Contact First	750				750	NR	750		
41						0				
42	Penally camp	13				13	NR	13		
43	Ambulance/SDEC	398				398	NR	398		
44						0				
45						0				
46						0				
47						0				
48						0				
49						0				
50						0				
51						0				
52						0				
53						0				
54						0				
55						0				
56	Total Anticipated Funding	52 094	0	0	0	52 094		23 480	0	0
3. TOTAL RESOURCES & BUDGET RECONCILIATION										
57	Confirmed Resources Per 1. above	837 936	21 133	17 956	73 499	950 524		935 207	28 685	28 685
58	Anticipated Resources Per 2. above	52 094	0	0	0	52 094		23 480	0	0
59	Total Resources	890 030	21 133	17 956	73 499	1 002 618		958 687	28 685	28 685

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Table G - Monthly Cashflow Forecast

		April £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £,000	Total £,000
	RECEIPTS													
1	WG Revenue Funding - Cash Limit (excluding NCL) - LHB & SHA only	80 782	75 127	83 127	78 138	69 138	83 438	86 000	70 600	89 000	76 000	86 000	81 337	958 687
2	WG Revenue Funding - Non Cash Limited (NCL) - LHB & SHA only	(127)	(127)	(127)	(138)	(138)	(138)	0	(100)	0	0	0	0	(895)
3	WG Revenue Funding - Other (e.g. invoices)	108	2 665	419	122	122	168	370	143	385	650	650	650	6 452
4	WG Capital Funding - Cash Limit - LHB & SHA only	5 000	8 000	3 000	5 000	0	0	0	0	2 000	2 100	2 050	1 535	28 685
5	Income from other Welsh NHS Organisations	7 087	8 453	8 082	16 158	4 685	7 145	7 972	13 883	8 215	2 500	2 500	2 500	89 180
6	Short Term Loans - Trust only													0
7	PDC - Trust only													0
8	Interest Receivable - Trust only													0
9	Sale of Assets		450											450
10	Other - (Specify in narrative)	5 601	1 321	1 963	1 982	1 647	910	3 365	5 768	2 031	11 340	9 440	8 695	54 063
11	TOTAL RECEIPTS	98 451	95 889	96 464	101 262	75 454	91 523	97 707	90 294	101 631	92 590	100 640	94 717	1 136 622
	PAYMENTS													
12	Primary Care Services : General Medical Services	5 216	4 774	6 437	4 546	4 518	5 204	5 161	5 161	7 164	4 425	4 425	4 725	61 756
13	Primary Care Services : Pharmacy Services	1 535	1 403	1 486	2 065	0	877	1 952	0	2 183	1 202	500	500	13 703
14	Primary Care Services : Prescribed Drugs & Appliances	11 450	6 297	5 791	11 267	0	5 977	11 054	0	11 371	0	7 000	7 000	77 207
15	Primary Care Services : General Dental Services	1 078	1 056	1 103	1 110	1 387	1 331	1 427	1 184	1 256	1 039	1 183	1 183	14 337
16	Non Cash Limited Payments	84	34	74	(68)	19	3	(181)	28	(213)	(225)	(225)	(225)	(895)
17	Salaries and Wages	31 255	37 375	37 756	37 906	37 669	37 175	37 575	37 754	37 081	37 968	38 296	38 396	446 206
18	Non Pay Expenditure	34 176	34 925	41 584	35 603	28 379	35 542	32 633	41 855	35 894	44 858	41 205	54 575	461 229
19	Short Term Loan Repayment - Trust only													0
20	PDC Repayment - Trust only													0
21	Capital Payment	6 835	4 219	862	1 506	1 204	2 661	1 635	2 181	2 280	2 100	2 050	1 602	29 135
22	Other items (Specify in narrative)	5 531	4 255	4 394	5 871	2 090	3 968	5 655	2 542	4 592	1 750	6 350	6 582	53 580
23	TOTAL PAYMENTS	97 160	94 338	99 487	99 806	75 266	92 738	96 911	90 705	101 608	93 117	100 784	114 338	1 156 258
24	Net cash inflow/outflow	1 291	1 551	(3 023)	1 456	188	(1 215)	796	(411)	23	(527)	(144)	(19 621)	
25	Balance b/f	1 654	2 945	4 496	1 473	2 929	3 117	1 902	2 698	2 287	2 310	1 783	1 639	
26	Balance c/f	2 945	4 496	1 473	2 929	3 117	1 902	2 698	2 287	2 310	1 783	1 639	(17 982)	

Table H - PSPP

30 DAY COMPLIANCE		ACTUAL Q1			ACTUAL Q2		ACTUAL Q3		ACTUAL Q4		YEAR TO DATE		FORECAST YEAR END	
	PROMPT PAYMENT OF INVOICE PERFORMANCE	Target %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Actual %	Variance %	Forecast %	Variance %
1	% of NHS Invoices Paid Within 30 Days - By Value	95,0%	98,7%	3,7%	99,6%	4,6%	99,9%	4,9%		-95,0%	99,4%	4,4%	100,0%	5,0%
2	% of NHS Invoices Paid Within 30 Days - By Number	95,0%	87,2%	-7,8%	92,7%	-2,3%	92,8%	-2,2%		-95,0%	90,5%	-4,5%	93,0%	-2,0%
3	% of Non NHS Invoices Paid Within 30 Days - By Value	95,0%	97,1%	2,1%	95,5%	0,5%	98,3%	3,3%		-95,0%	97,0%	2,0%	98,5%	3,5%
4	% of Non NHS Invoices Paid Within 30 Days - By Number	95,0%	95,1%	0,1%	94,3%	-0,7%	95,4%	0,4%		-95,0%	95,0%	0,0%	95,0%	0,0%
10 DAY COMPLIANCE			ACTUAL Q1		ACTUAL Q2		ACTUAL Q3		ACTUAL Q4		YEAR TO DATE		FORECAST YEAR END	
	PROMPT PAYMENT OF INVOICE PERFORMANCE		Actual %		Actual %		Actual %		Actual %		Actual %		Actual %	
5	% of NHS Invoices Paid Within 10 Days - By Value		46,5%		74,8%		6,0%				69,9%		70,0%	
6	% of NHS Invoices Paid Within 10 Days - By Number		65,3%		47,4%		34,3%				46,9%		50,0%	
7	% of Non NHS Invoices Paid Within 10 Days - By Value		36,9%		31,7%		31,1%				34,6%		35,0%	
8	% of Non NHS Invoices Paid Within 10 Days - By Number		33,9%		36,4%		32,8%				35,1%		35,0%	

Table I - 2020-21 Capital Resource / Expenditure Limit Management

		£'000	28 685				
		Approved CRL / CEL issued at :		6.1.21			
Ref:	Performance against CRL / CEL	Year To Date			Forecast		
		Plan £'000	Actual £'000	Variance £'000	Plan £'000	F'cast £'000	Variance £'000
	Gross expenditure (accrued, to include capitalised finance leases) All Wales Capital Programme: Schemes:						
1	Womens and Childrens - Phase II - Glangwili Hospital - Main works	4 196	4 196	0	6 488	6 541	53
2	Imaging Equipment	393	393	0	0	407	407
3	WGH MRI Scheme	55	55	0	1 440	832	(608)
4	Slippage from 19/20 (Statutory Fire and Estate Allocation)	182	182	0	315	315	0
5	Covid 19 - Digital	743	743	0	743	743	0
6	Covid 19 - IT Other	445	445	0	514	827	313
7	Covid 19 - Estates	231	231	0	0	231	231
8	Covid 19 - Equipment - Field Hospitals	3 642	3 642	0	3 757	3 642	(115)
9	Covid 19 - Equipment - Acute Sites	5 564	5 564	0	5 872	6 256	384
10	COVID 19 - Other	241	241	0	241	241	0
11	Cross Hands	34	34	0	0	34	34
12	Bronglais MRI	0	0	0	0	44	44
13	Cardigan	0	0	0	0	223	223
14	Advanced Fire Compliance works - Withybush	118	118	0	350	350	0
15	COVID 19 - Digital Spend IT	0	0	0	192	192	0
16	ICF - MCP - South Pembs Hospital Health and Social Care Resource Centre, Sunderland Ward	202	202	0	202	202	0
17	Covid 19 - PHW Molecular Hot lab PPH	33	33	0	0	40	40
18	COVID19- ED Streaming WGH/PPH/BGH/GGH	268	268	0	720	720	0
42	Sub Total	16 346	16 346	0	20 833	21 839	1 006
	Discretionary:						
43	I.T.	1 306	1 306	0	1 345	1 708	363
44	Equipment	615	615	0	1 262	1 765	503
45	Statutory Compliance	294	294	0	846	1 302	456
46	Estates	610	610	0	2 673	2 145	(528)
47	Other	173	173	0	1 726	780	(946)
48	Sub Total	2 998	2 998	0	7 852	7 699	(153)
	Other Schemes:						
49	Donated Assets	27	27	0	353	353	0
50	Disposal Cardigan Hospital			0	450	450	0
51				0			0
52				0			0
69	Sub Total	27	27	0	803	803	0
70	Total Expenditure	19 371	19 371	0	29 488	30 341	853
	Less:						
	Capital grants:						
71				0			0
72				0			0
73				0			0
74				0			0
75				0			0
76	Sub Total	0	0	0	0	0	0
	Donations:						
77	Donated Assets	27	27	0	353	353	0
78	Sub Total	27	27	0	353	353	0
	Asset Disposals:						
79	Disposal - Cardigan Hospital	450	450	0	450	450	0
80				0			0
81				0			0
82				0			0
83				0			0
84				0			0
90	Sub Total	450	450	0	450	450	0
91	Technical Adjustments			0			0
92	CHARGE AGAINST CRL / CEL	18 894	18 894	0	28 685	29 538	853
93	PERFORMANCE AGAINST CRL / CEL (Under)/Over		(9 791)			853	

[illegible]

Table K - Capital Disposals								
A: In Year Disposal of Assets								
	Description	Date of Ministerial Approval to Dispose (Land & Buildings only)	Date of Ministerial Approval to Retain Proceeds > £0.5m	Date of Disposal	NBV	Sales Receipts	Cost of Disposals	Gain/ (Loss)
		MM/YY (text format, e.g. Apr 20)	MM/YY (text format, e.g. Apr 20)	MM/YY (text format, e.g. Feb 21)	£'000	£'000	£'000	£'000
1	Cardigan Hospital	December 2017	N/A	May 20	450	450		0
2	Cardigan Health Centre	December 2017	N/A	TBC				0
3	Neyland	TBC		TBC				0
4								0
5								0
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0
16								0
17								0
18								0
19								0
	Total for in-year				450	450	0	0

Table M - Debtors Schedule										
17 weeks before end of Nov 20 = 03.09.2020 :										
Debtor	Inv #	Inv Date	Orig Inv £	Outstand. Inv £	Valid Entry	>11 weeks but <17 weeks	Over 17 weeks	Arbitration Due Date	Comments	

Table N - General Medical Services
Operating Expenditure - ring fenced GMS budget

SUMMARY OF GENERAL MEDICAL SERVICES FINANCIAL POSITION		WG Allocation £000's	Current Plan £000's	Forecast Outturn £000's	Variance £000's	Year to Date £000's
	LINE NO.					
Global Sum	1					27 680
MPIG Correction Factor	2					304
Total Global Sum and MPIG	3	40 191	37 615	37 313	(302)	27 984
Quality Aspiration Payments	4					420
Quality Achievement Payments	5					3 569
Quality Assurance Improvement Framework (QAIF)	6					
QAIF (In hours Access)	7					711
Total Quality	8	5 938	6 113	5 764	(349)	4 700
Direct Enhanced Services (To equal data in Section A (i) Line 32)	9		3 014	2 109	(905)	1 577
National Enhanced Services (To equal data in Section A (ii) Line 42)	10		1 759	269	(1 490)	205
Local Enhanced Services (To equal data in Section A (iii) Line 95)	11		2 249	3 837	1 588	3 330
Total Enhanced Services (To equal data in section A Line 96)	12	9 844	7 022	6 215	(807)	5 112
LHB Administered (To equal data in Section B Line 109)	13	2 040	6 611	8 021	1 410	5 950
Premises (To equal data in section C Line 138)	14	4 821	4 907	3 973	(934)	2 952
IM & T	15	231	30	4	(26)	6
Out of Hours (including OOHDF)	16	4 826	5 827	5 727	(100)	4 112
Dispensing (To equal data in Line 154)	17	5 608	5 661	5 260	(401)	3 955
Total	18	73 499	73 786	72 277	(1 509)	54 771
SUPPLEMENTARY INFORMATION						
Directed Enhanced Services Section A (i)	LINE NO.	£000's	£000's	£000's	£000's	£000's
Learning Disabilities	19		77	4	(73)	3
Childhood Immunisation Scheme	20		605	493	(112)	366
Mental Health	21				0	
Influenza & Pneumococcal Immunisations Scheme	22		1 132	1 476	344	1 102
Services for Violent Patients	23		16		(16)	5
Minor Surgery Fees	24		348	18	(330)	13
MENU of Agreed DES						
Asylum Seekers & Refugees	25		20		(20)	0
Care of Diabetes	26				0	
Care Homes	27		680	28	(652)	21
Extended Surgery Opening	28		73	27	(46)	20
Gender Identity	29		63	63	0	47
Homeless	30				0	
Oral Anticoagulation with Warfarin	31				0	
TOTAL Directed Enhanced Services (must equal line 9)	32		3 014	2 109	(905)	1 577
National Enhanced Services A (ii)	LINE NO.	£000's	£000's	£000's	£000's	£000's
INR Monitoring	33		721	217	(504)	183
Shared care drug monitoring (Near Patient Testing)	34			22	22	
Drug Misuse	35		128	5	(123)	2
IUCD	36		257	14	(243)	11
Alcohol misuse	37				0	
Depression	38				0	
Minor injury services	39				0	
Diabetes	40		653	11	(642)	9
Services to the homeless	41				0	
TOTAL National Enhanced Services (must equal line 10)	42		1 759	269	(1 490)	205
Table N - General Medical Services SUPPLEMENTARY INFORMATION (continued)						
Local Enhanced Services A (iii)	LINE NO.	£000's	£000's	£000's	£000's	£000's
ADHD	43				0	
Asylum Seekers & Refugees	44				0	
Cardiology	45				0	
Care Homes	46				0	
Care of Diabetes	47				0	
Chiropody	48				0	
Counselling	49				0	
Depo - Provera (including Implanon & Nexplanon)	50				0	
Dermatology	51				0	
Dietetics	52				0	
DOAC/NOAC	53				0	
Drugs Misuse	54				0	
Extended Minor Surgery	55				0	
Gonaderlins	56				0	
Homeless	57				0	
HPV Vaccinations	58		0		0	
Immunisations (inc Pertussis excluding DES - Childhood Imm & Influenza & Pneumococcal Imm)	59		313	141	(172)	148
Learning Disabilities	60				0	
Lithium / INR Monitoring	61				0	
Local Development Schemes	62				0	
Mental Health	63				0	
Minor Injuries	64				0	
MMR	65		4		(4)	
Multiple Sclerosis	66				0	
Muscular Skeletal	67				0	
Nursing Homes	68				0	
Orthopaedic (Upper Limb GPwSi/Clinical Assessments)	69				0	
Osteopathy	70		12	1	(11)	1

Phlebotomy	71		137	104	(33)		78
Physiotherapy (inc MT3)	72				0		
Referral Management	73				0		
Respiratory (inc COPD)	74				0		
Ring Pessaries	75				0		
Sexual Health Services	76		9		(9)		
Shared Care	77		291		(291)		16
Smoking Cessation	78				0		
Substance Misuse	79		0		0		
Suturing	80				0		
Swine Flu	81				0		
Transport/Ambulance costs	82				0		
Vasectomy	83				0		
Weight Loss Clinic (inc Exercise Referral)	84				0		
Wound Care	85				0		
Zoladex	86		112	9	(103)		7
COVID-19 ES	87			3 224	3 224		2 761
Shingles	88		33	20	(13)		9
Treatment Room	89		1 017	47	(970)		35
GMS Local Enhanced Services	90		35		(35)		
Specimen Transport	91		48	61	13		45
Students	92		8		(8)		
Bank Holiday opening	93		230	230	0		230
	94				0		
TOTAL Local Enhanced Services (must equal line 11)	95		2 249	3 837	1 588		3 330
TOTAL Enhanced Services (must equal line 12)	96		7 022	6 215	(807)		5 112
GENERAL MEDICAL SERVICES							
Operating Expenditure							
		WG	Current	Forecast	Variance		Year to
LHB Administered	Section B	Allocation	Plan	Outturn			Date
	LINE NO.	£000's	£000's	£000's	£000's		£000's
Seniority	97						567
Doctors Retainer Scheme Payments	98						24
Locum Allowances consists of adoptive, paternity & maternity	99						316
Locum Allowances : Cover for Sick Leave	100						
Locum Allowances : Cover For Suspended Doctors	101						
Prolonged Study Leave	102						
Recruitment and Retention (including Golden Hello)	103						
Appraisal - Appraiser Costs	104						
Primary Care Development Scheme	105						
Partnership Premium	106						390
Supply of syringes & needles	107						4
Other (please provide detail below, this should reconcile to line 128)	108						4 649
TOTAL LHB Administered (must equal line 13)	109	2 040	6 611	8 021	(1 410)		5 950

Table N - General Medical Services Operating Expenditure (continued)							
Analysis of Other Payments (line 108)	LINE NO.	£000's	£000's	£000's	£000's	£000's	
						4 439	
Additional Managed Practice costs (costs in excess of Global Sum/MPiG)	110						
CRB checks	111					3	
GP Locum payments	112						
LHB Locality group costs	113						
Managing Practice costs (LHB employed staff working in GP practices to improve GP services)	114						
Primary Care Initiatives	115						
Salaried GP costs	116					28	
Stationery & Distribution	117					11	
Training	118					10	
Translation fees	119						
	120						
Management salary costs apportioned	121					158	
	122						
	123						
	124						
	125						
	126						
	127						
TOTAL of Other Payments (must equal line 108)	128					4 649	
Premises	Section C	LINE NO.	£000's	£000's	£000's	£000's	£000's
Notional Rents		129					1 126
Actual Rents: Health Centres		130					
Actual Rents: Others		131					1 321
Cost Rent		132					1
Clinical Waste/ Trade Refuse		133					116
Rates, Water, sewerage etc		134					212
Health Centre Charges		135					
Improvement Grants		136					176
All other Premises (please detail below which should reconcile to line 146)		137					0
TOTAL Premises (must equal line 14)		138	4 821	4 907	3 973	934	2 952
Analysis of Other Premises (Line 137)	LINE NO.	£000's	£000's	£000's	£000's	£000's	
	139						
	140						
	141						
	142						
	143						
	144						
	145						
TOTAL of Other Premises (must equal line 137)	146					0	
Memorandum item							
Enhanced Services included above but in dispute with LMC (TOTAL)	147						
Enhanced Services included above but not yet formally agreed LMC	148						
GENERAL MEDICAL SERVICES							
Dispensing							
		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date	
Dispensing Data	LINE NO.	£000's	£000's	£000's	£000's	£000's	
Cost of Drugs and Appliances, after discounts and plus container allowance (and plus VAT where applicable)							
Dispensing Doctors	149					1 666	
Prescribing Medical Practitioners - Personal Administration	150					1 020	
Dispensing Service Quality Payment	151					39	
Professional Fees and on-cost							
Dispensing Doctors	152					750	
Prescribing Medical Practitioners - Personal Administration	153					480	
TOTAL DISPENSING DATA (must equal line 17)	154	5 608	5 661	5 260	401	3 955	

Table O - General Dental Services						
Operating Expenditure from the revenue allocation for the dental contract						
SUMMARY OF DENTAL SERVICES FINANCIAL POSITION						
Expenditure / activities included in a GDS contract and / or PDS agreement	LINE NO.	WG Allocation £000's	Current Plan £000's	Forecast Outturn £000's	Variance £000's	Year to Date £000's
Gross Contract Value - Personal Dental Services	1		17 563	13 627	(3 936)	13 975
Gross Contract Value - General Dental Services	2				0	
Emergency Dental Services (inc Out of Hours)	3				0	
Additional Access	4				0	
Business Rates	5		84	100	16	78
Domiciliary Services	6				0	
Maternity/Sickness etc.	7		89	20	(69)	33
Sedation services including GA	8				0	
Seniority payments	9		11	8	(3)	6
Employer's Superannuation	10		656	667	11	588
Oral surgery	11				0	
OTHER (PLEASE DETAIL BELOW)	12		4 077	4 339	262	2 649
TOTAL DENTAL SERVICES EXPENDITURE	13	17 956	22 480	18 761	(3 719)	17 329
OTHER (PLEASE DETAIL BELOW) - Activities / expenditure not included in a GDS contract and / or	LINE NO.		£000's	£000's	£000's	£000's
Emergency Dental Services (inc Out of Hours)	14			390		
Additional Access	15			20		
Sedation services including GA	16			386		
Continuing professional development	17					293
Occupational Health / Hepatitis B	18					
Gwen Am Byth - Oral Health in care homes	19					
Refund of patient charges	20					
Design to Smile	21			375		283
Other Community Dental Services inc WHC/2015/001	22			1 694		1 271
Dental Foundation Training/Vocational Training	23			0		
DBS/CRB checks	24			393		152
Health Board staff costs associated with the delivery / monitoring of the dental contract	25			175		
Oral Surgery	26			814		145
Orthodontics	27					508
Special care dentistry e.g. WHC/2015/002	28					
Oral Health Promotion/Education	29			50		
Other	30			42		
	31					(3)
	32					
	33					
	34					
	35					
	36					
	37					
	38					
	39					
	40					
	41					
	42					
TOTAL OTHER (must equal line 12)	43			4 339		2 649
RECEIPTS						
TOTAL DENTAL SERVICES INCOME (Enter as a negative value)	44		(3 545)	(504)	3 041	(2 488)