

5.2 Monthly Monitoring Returns and HDdUHB Commentary

Presenter: Huw Thomas

5.2 P07-21 MMR HDUHB Commentary.docx

5.2 P07-21 WG MMR Tables 2020-21.xlsx

Executive Summary

	<p>Health Board's agreed Financial Plan is to deliver a deficit of £25m, after savings of £34.2m</p> <p>The impact of the COVID-19 pandemic presents an unprecedented significant risk to the financial position.</p>
Revenue	<ul style="list-style-type: none"> The Month Seven 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 currently forecasting to deliver the planned deficit of £25m. However, the Health Board is managing a number of varying elements in respect of Winter Planning, reinstating elective services and any unprecedented further impact of the pandemic that pose both opportunity and risk to the planned deficit. The Health Board is planning to utilise funding streams already available to mitigate these risks, however those funding streams shared with Local Authority partners represent a level of variability. The financial forecast is dependent on assurances provided by a range of teams across the Health Board and across the RPB on the drivers of spend. There is a risk that these assurances do not reflect future expenditure profiles and that the financial outturn differs from our current forecast. £30.8m identified and as yet unidentified savings schemes included in the Financial Plan are also 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 for additional funding to support the non-delivery of the Health Board's savings target on a recurrent basis. Should the Health Board progress with all the schemes identified to deal with implementing social distancing measures and other COVID-19 needs, and no further funding is available from Welsh Government, the potential over commitment against the CRL would be £14.3m. The risk of this against the CRL is being actively managed, however there is a more significant operational risk if these schemes do not progress. 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 £0.2m, which is slightly below plan, which is directly attributable to the COVID-19 pandemic. Green and Amber plans of £5.6m identified to Month Seven, 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"> Continue to work with Planning, Workforce and Operational colleagues to ensure alignment of the financial forecast and any changes to operational plans in response to the pandemic. Deep dive into savings and cost reduction opportunities and further review of reserves to understand potential in year slippage. Scrutiny of assurances provided by a range of teams across the Health Board and across the RPB on the drivers of spend. A formal schedule of these assurances will be shared with WG colleagues by separate cover as a matter of urgency. Clarity as to what current escalation measures can be safely and appropriately de-escalated/decommissioned and which ceased/deferred services/activities can be recommenced. Continue to work with Welsh Government to understand the level of future funding arrangements, as these remain uncertain.

Executive Summary

Summary of key financial targets					
<p>The Health Board's key targets are as follows:</p> <ul style="list-style-type: none"> Revenue: to contain the overspend within the Health Board's planned deficit Savings: to deliver savings plans to enable the revenue budget to be achieved Capital: to contain expenditure within the agreed limit PSPP: to pay 95% of Non-NHS invoices within 30 days of receipt of a valid invoice Cash: 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. 					
Key target		Annual limit	YTD limit	Actual delivery	Forecast Risk
Revenue	£'m	25.0	14.6	14.6	High
Savings	£'m	34.2	20.0	1.4	
Capital	£'m	25.2	14.0	14.0	Medium
Non-NHS PSPP	%	95.0	95.0	94.3	Medium
Period end cash	£'m	4.0	4.0	2.7	Medium

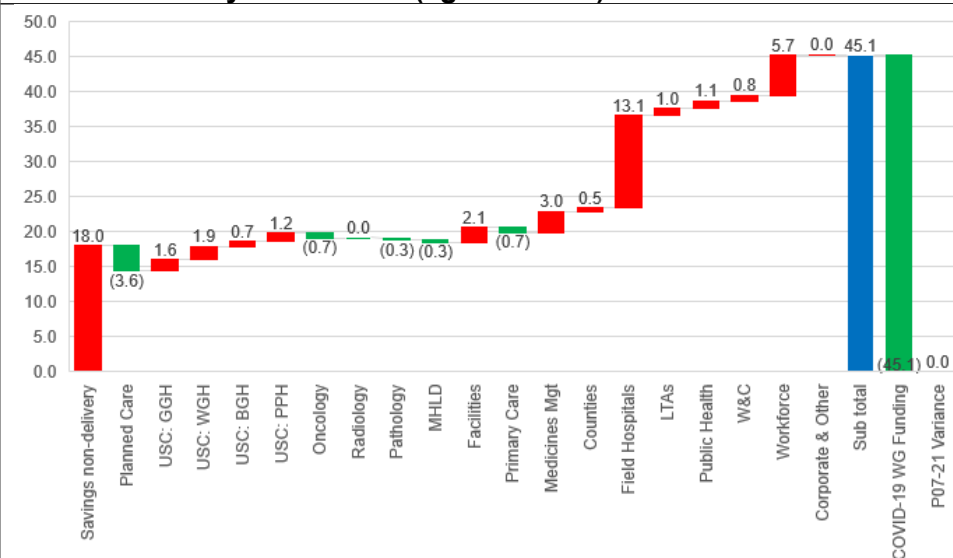
Following confirmation of additional funding from WG in Month 6, the Health Board is currently forecasting to deliver the planned deficit of £25m. The risk is considered to be High, recognising that the Health Board is managing a number of varying elements in respect of Winter Planning, reinstating elective services and any unprecedented further impact of the pandemic that pose both opportunity and risk to the planned deficit. The Health Board is planning to utilise funding streams already available to mitigate these risks, however those funding streams shared with Local Authority partners represent a level of variability. The financial forecast is dependent on assurances provided by a range of teams across the Health Board and across the RPB on the drivers of spend. There is a risk that these assurances do not reflect future expenditure profiles and that the financial outturn differs from our current forecast.

Should the Health Board progress with all the schemes identified to deal with implementing social distancing measures and other COVID-19 needs, and no further funding is available from Welsh Government, the potential over commitment against the CRL would be £14.3m. The risk of this against the CRL is being actively managed, however there is a more significant operational risk if these schemes do not progress.

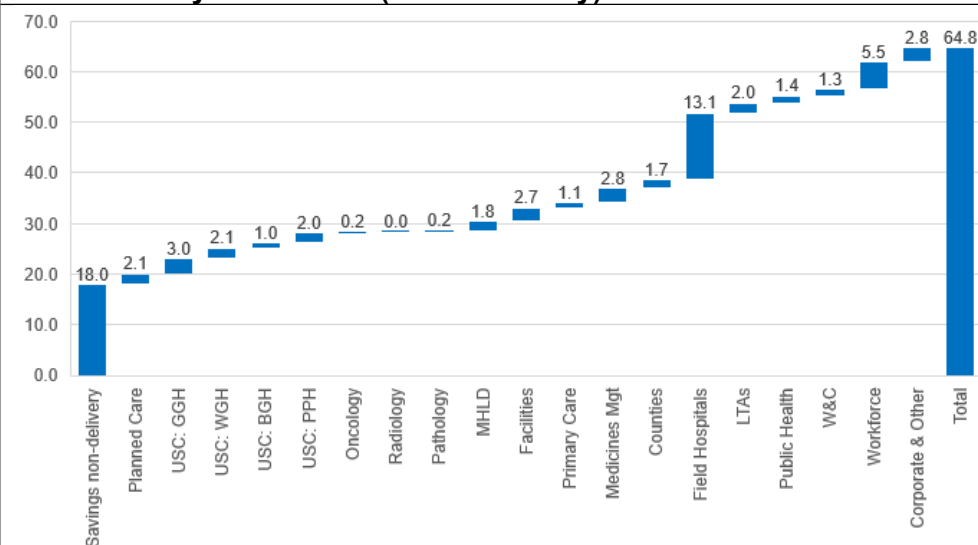
The Non-NHS PSPP risk has been rated Medium given the increase in volume of supplier payments due to the impact of COVID-19 and due to not achieving the PSPP target in September 2020. An action plan has been developed to re-prioritise resource to clear the backlog by the end of October, however this will mean that the improvement in the PSPP target will not be evidenced until the November PSPP figures are produced.

Revenue Summary

YTD variance by Directorate (against Plan)



YTD actual by Directorate (COVID-19 only)



Key drivers of YTD position:

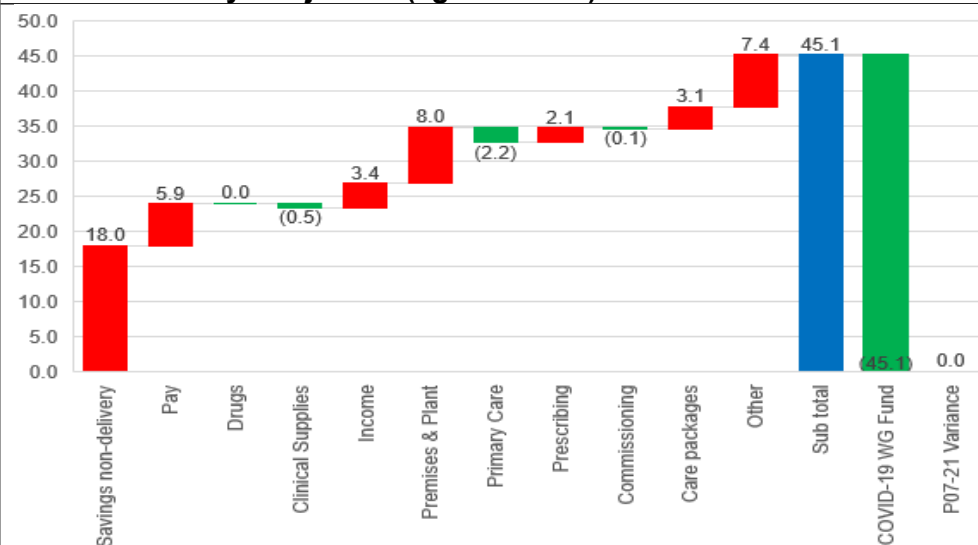
- **Savings non-delivery (£18.0m):** As a direct consequence of COVID-19, directorates have been unable to execute or identify additional savings plans as efforts are re-purposed to respond to the pandemic.
- **Planned Care (-£3.6m):** Underspend primarily driven by a reduction in non-pay due to reduced activity in elective services.
- **Medicines Management (£3.0m):** Pressures continue in Primary Care prescribing due to continued increases in the cost per item for Category M and baseline drugs. Costs have increased this month due to Flu immunisation campaigns commencing.
- **Field Hospitals (£13.1m):** 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 (£5.7m):** Fixed term staff recruited in response to the COVID-19 pandemic who have not yet been assigned to a directorate.
- **WG Funding (-£45.1m):** Funding has been received from WG to offset the cost of the Health Board's response to the COVID-19 pandemic.

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

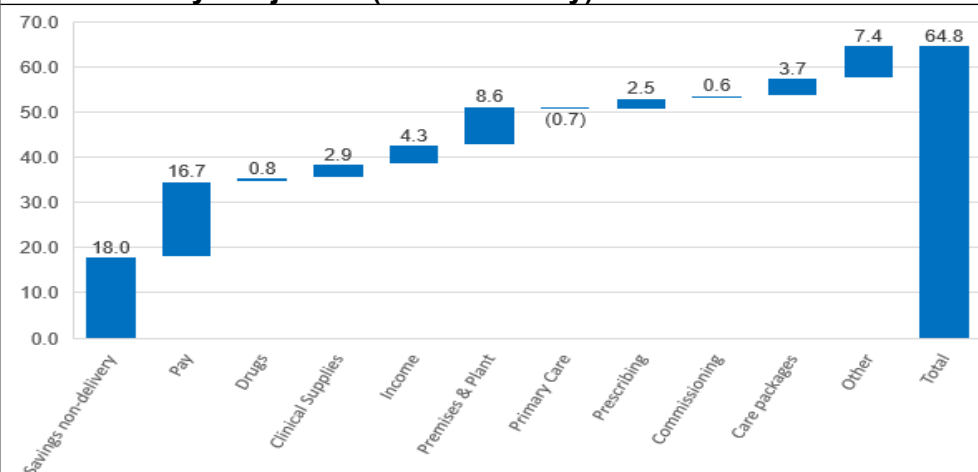
- **LTAs (£2.0m):** Loss in Non Contract Activity (NCA) income as lockdown restrictions have impacted the tourism industry which in turn has reduced visitors outside of Hywel Dda accessing services.
- **Facilities (£2.7m):** Additional Porters and Domestics recruited in response to the pandemic. Work and maintenance carried out to adapt sites, additional laundry costs and lost revenue.
- **Unscheduled Care (All sites) (£8.1m):** Increase in variable pay for Medical, Nursing and HCA staff, Medical pay enhancements, PPE expenditure and issue of home care drugs to avoid unnecessary Hospital contacts.

Revenue Summary

YTD variance by Subjective (against Plan)



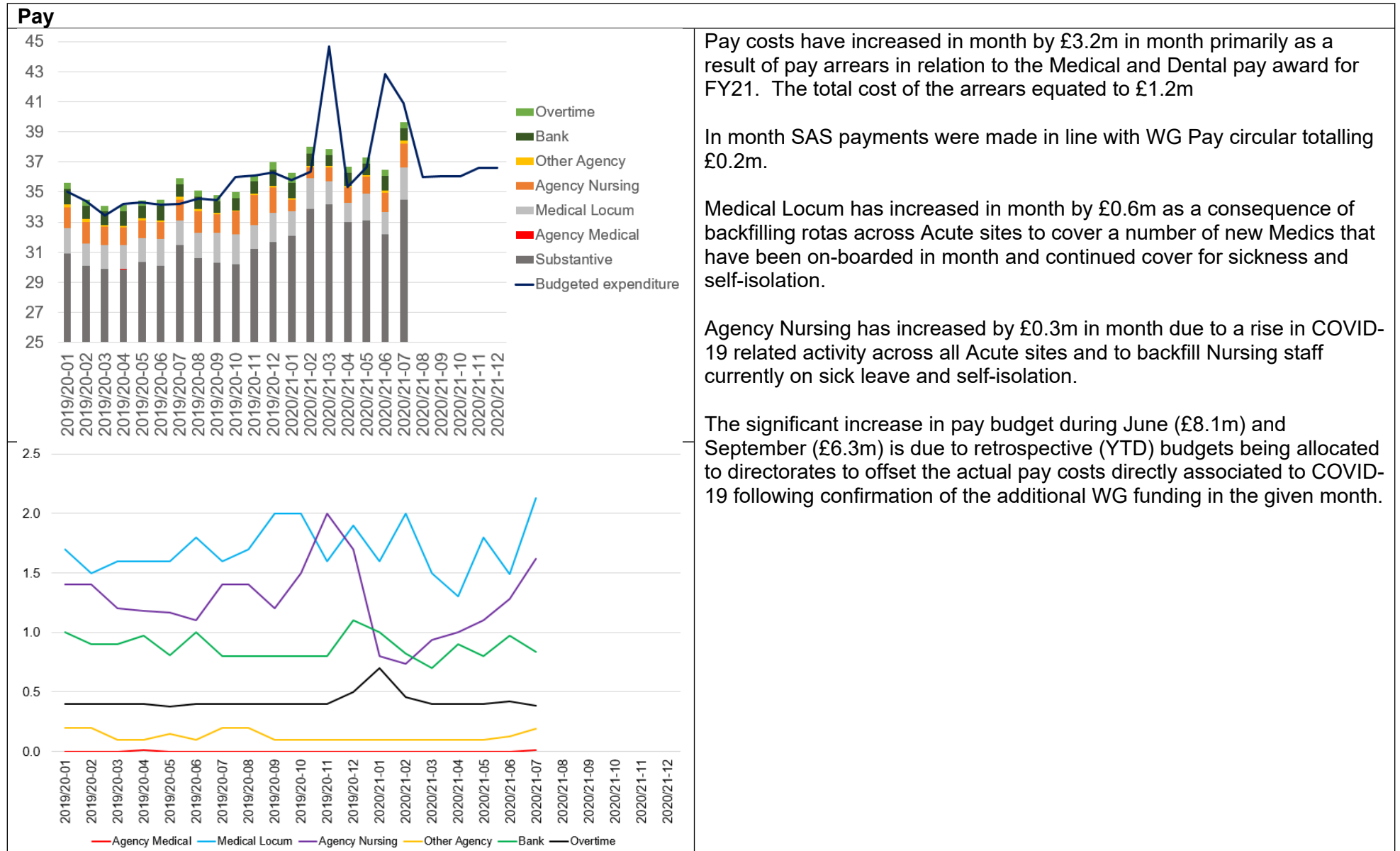
YTD actual by Subjective (COVID-19 only)



Key drivers of YTD position:

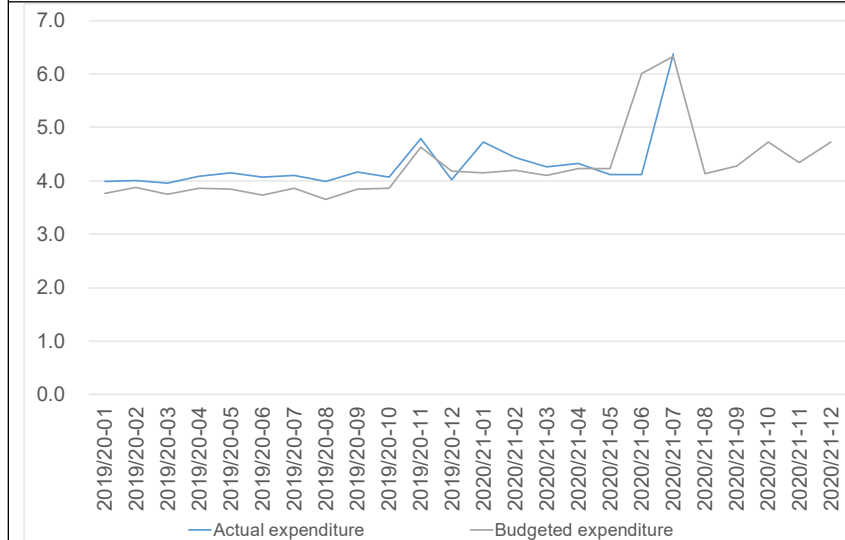
- **Savings non-delivery (£18.0m):** As a direct consequence of COVID-19, directorates have been unable to execute or identify additional savings plans as efforts are re-purposed to respond to the pandemic.
- **Pay (£5.9m):** See detailed analysis in key subjective summary slides.
- **Drugs & Clinical supplies (-£0.5m):** The net underspend is primarily driven by reduced activity in elective services within Planned Care and Podiatry offsetting COVID-19 related costs totalling £3.7m.
- **Income (£3.4m):** 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 (£8.0m):** Primarily driven by the cost of setting up, de-commissioning and operating the various Field Hospitals with the Health Board's localities.
- **Prescribing (£2.1m):** See detailed analysis in key subjective summary slides.
- **Care packages (£3.1m):** Additional costs have been incurred due to the expedited discharge of CHC Patients and patients being placed in out of area accommodation.
- **WG Funding (-£45.1m):** Funding has been received from WG to offset the cost of the Health Board's response to the COVID-19 pandemic.

Key Subjective Summary



Key Subjective Summary

CHC

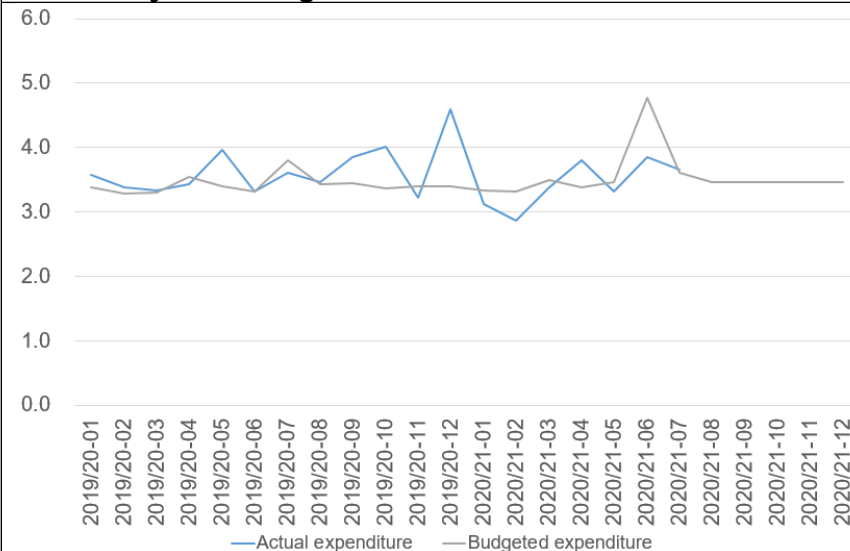


Continuing Health Care expenditure has increased by £2.3m in month which is largely driven by the recognition of the YTD costs of supporting Adult Social Care Providers following agreement between the Health Board and Local Authority colleagues (£1.6m).

Inflationary fee uplifts have also been applied in Month Seven totalling £0.8m.

Budgets were released from Reserves in-month to match the above costs incurred.

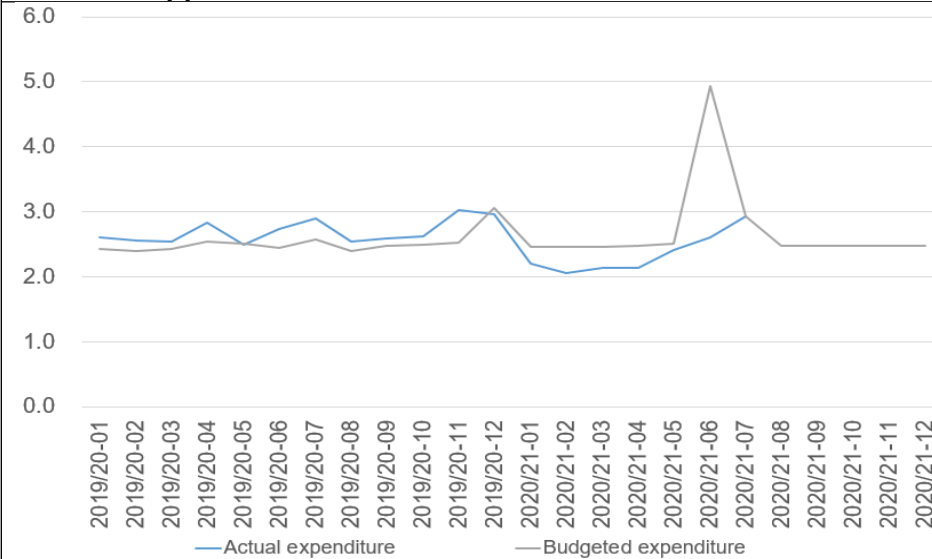
Secondary Care Drugs



Drug expenditure has decreased in month by £0.2m as Outpatient clinics have been suspended following the increase in COVID-19 activity and in preparation for Winter.

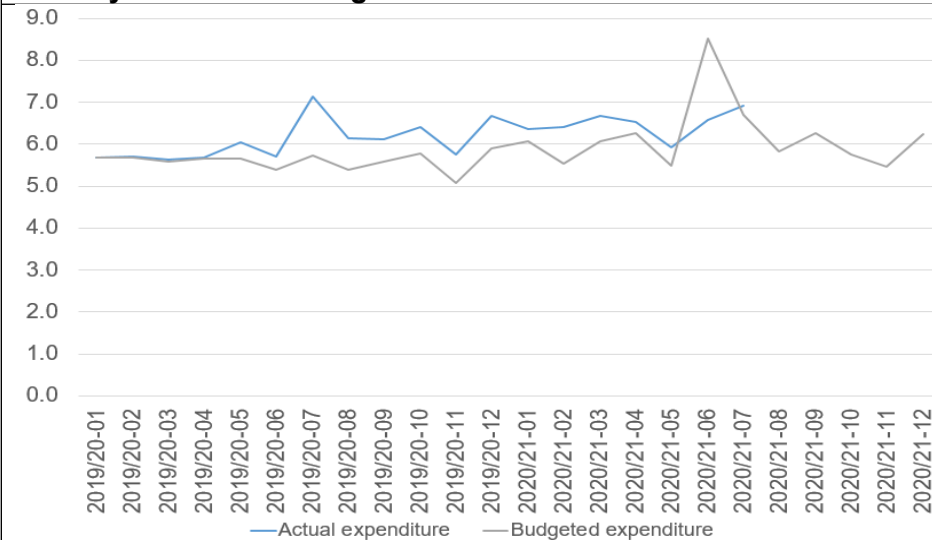
Key Subjective Summary

Clinical Supplies and Services



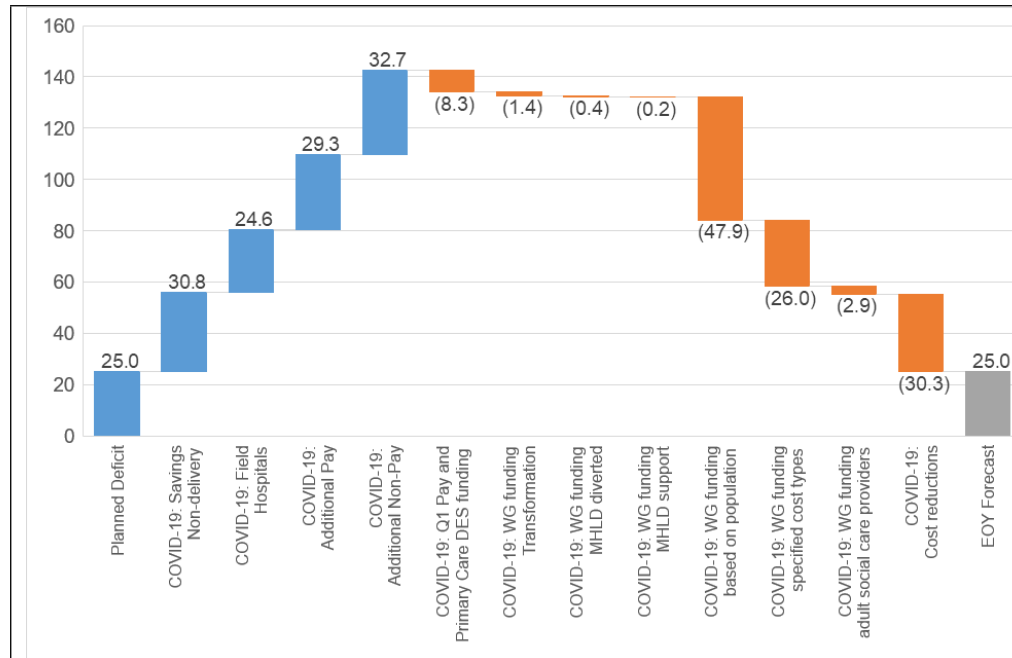
Clinical supply costs have increased by £0.3m during Month seven following an increase in the unit costs of PPE sourced through NWSSP.

Primary Care Prescribing



Prescribing costs have increased by £0.4m in Month seven following the recognition of Flu vaccination expenditure.

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 – no premium for Agency workers is included;
- 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

- The Health Board's Accountability statements in relation to the Budget for 2020/21 were replaced with a Delegations and Finance Delivery letter, issued in May 2020. These clarify the continuation of existing financial control principles and the importance of existing governance processes and frameworks, and state the significance of decision-making in response to, and the accurate recording of the financial impact of, COVID-19.
- Performance monitored monthly through System Engagement meetings for the highest risk Directorates.

Concerns

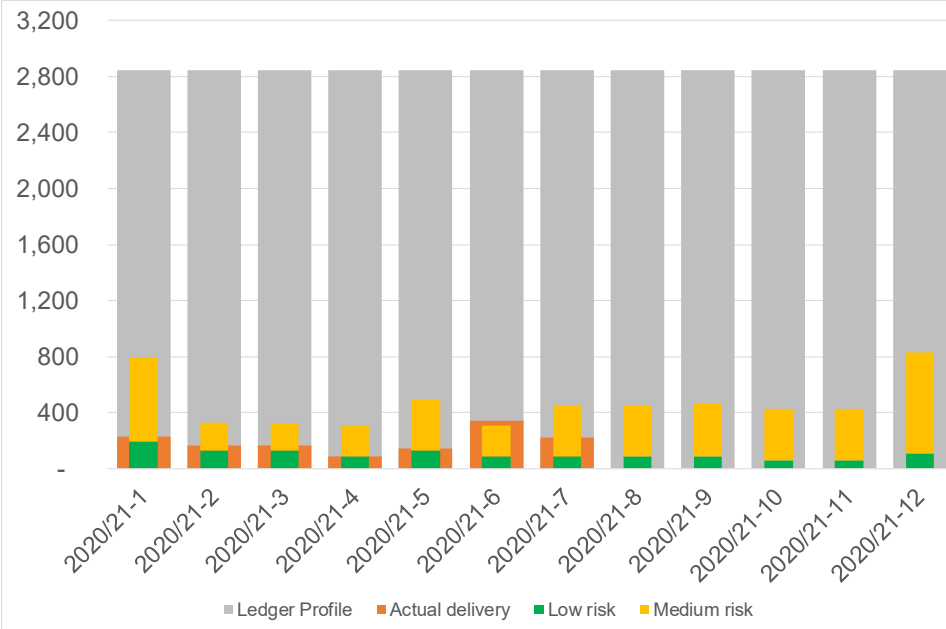
- Following confirmation of additional funding from WG in Month 6, the Health Board is currently forecasting to deliver the planned deficit of £25m. However, the Health Board is managing a number of varying elements in respect of Winter Planning, reinstating elective services and any unprecedented further impact of the pandemic that pose both opportunity and risk to the planned deficit. The Health Board is planning to utilise funding streams already available to mitigate these risks, however those funding streams shared with Local Authority partners represent a level of variability. The financial forecast is dependent on assurances provided by a range of teams across the Health Board and across the RPB on the drivers of spend. There is a risk that these assurances do not reflect future expenditure profiles and that the financial outturn differs from our current forecast.

Next Steps

- Clarity as to what current escalation measures can be safely and appropriately de-escalated/decommissioned and which ceased/deferred services/activities can be recommenced.
- Continue to work with Welsh Government to understand the level of additional revenue and capital funding available.
- Deep dive into savings and cost reduction opportunities.

Savings and turnaround actions

Risk-assessed directorate savings profile, delivery and forecast



Assurance

- Green and Amber plans of £5.6m identified to Month 7, 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 £0.2m, which is below plan, which is directly attributable to the COVID-19 pandemic.
- The Opportunities Framework is being refreshed to identify alternative ways of working in response to COVID-19 that may result in cost reductions/formal savings schemes identified.

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 Value for Money Framework, alongside existing financial governance arrangements, is to be further developed and embedded into the organisation's decision-making processes.
- Deep dive assessment of identified schemes not delivering.

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 30th November 2020. 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

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	<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 £4.1m is phased in line with the Month 7 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 5 months of the year, however this is subject to refinement. • 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:

Appendix 1: Monitoring return tables

Table	Commentary
	<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 <ul style="list-style-type: none"> • Following confirmation of the 'specific' funding streams available, the consequential losses (£6.6m) are assumed to be funded based on the current forecast. • Following confirmation of the 'specific' funding streams available, the all Field Hospital decommissioning costs (£4.3m) are assumed to be funded based on the current forecast. • Following confirmation of the 'specific' funding streams available, the PPE costs of £1.9m are assumed to be funded based on the current forecast. This has increased since Month 6 due to the price increases experienced for specific PPE items in Month 6 and 7 (fully recognised from Month 7 following validation); this is anticipated to continue for some months. • Following confirmation of the 'specific' funding streams available, Flu immunisations costs of £1.4m 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. • Additional WG funding of £47.9m to mitigate the impact of COVID-19 has been recognised. • Support for Adult Social Care Providers (£2.9m): this has now been 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 9 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>

Appendix 1: Monitoring return tables

Table	Commentary
	<p>An error has been identified within the reported position, whereby the YTD COVID-19 position in Table B3 is £0.4m less than the YTD COVID-19 funding recognised in Line 22. This will unwind over the future months as the impact of savings forecast phasing unwinds.</p> <p>The Welsh Risk Pool risk share is understood to be assessed as a potential £1.3m. There is £1.5m held in Reserves in line with the guidance provided during the Financial Planning process. No costs or corresponding release of Reserves has been recognised in the YTD Month 7 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 7.</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 7, 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.
Table A2: Risks	<p><u>Risks</u></p> <p>Given the current unprecedented situation, the assessment of risks reported in Table A2 could be materially affected by the COVID-19 pandemic.</p> <ul style="list-style-type: none"> • Field Hospitals (-£6.3m): The current forecast assumes COVID-19 activity to increase in the remainder of the financial year linked to the 'second wave' and Winter capacity requirements; therefore there has been an increase in the forecast costs included in Table B3 and a reduction to the Risk in Table A2 in Month 7. In the event that the R rate reaches 1.1, the current model indicates that the Health Board would require 501 additional beds to meet the increased demand in activity. There is a risk that workforce/recruitment plans would not be fulfilled to drive this level of expenditure, and current Workforce plans assess that this would need to be fulfilled by deploying existing staffing resource at £nil additional cost, however this may affect quality (such as Nursing ratios) and may mean some services are ceased or become fragile. • Agency premium in Field Hospitals (-£2.1m): The above risk includes the assumption that the Health Board can recruit Nurses on a fixed term basis to service the demands in the Field Hospitals. If these Nurses are unable to be

Appendix 1: Monitoring return tables

Table	Commentary
	<p>recruited, an additional cost would be incurred as Agency Nurses would have to be utilised. This is classified as low risk as current Workforce assessments have concluded that it is unlikely that there would be sufficient supply in the market to fulfil such a requirement.</p> <ul style="list-style-type: none"> Increased elective activity (-£1.2m): The Month seven forecast for scheduled care is based on a small increase in routine activity as COVID-19 cases remain relatively low in the locality. If numbers continue to remain low or reduce further, activity in the “Green sites” will continue to increase in an effort to catch up on delayed operations. This residual risk has not been included in the forecast as it is expected Winter demands on capacity would not allow this level of non-urgent elective activity. Asylum seekers health needs (£-0.25m): As a result of the Home Office directive of utilising the Penally army base as a site for the placement of asylum seekers, the Health Board is anticipating a range of health costs associated with this. A number of costs will be committed, including the cost of primary care (particularly within dental), translation and immunisations; it is also anticipated that in addition there will be other imminent health interactions around the condition of the patients, yet to be determined. This is not yet in the forecast position as it is unclear what the in-year financial impact will be; £0.25m has been included as a risk as a high level best estimate at this stage. COVID-19 vaccination programme (-£0.9m): Following the announcement of vaccinations being offered to patients, the Public Health directorate are currently working with partner organisations to prepare for a mass vaccination programme which is due to commence in December 2020. The current plans anticipate a total of 36,000 immunisations to take place between December and March 2021 in line with Welsh Government guidance which will prioritise Care home residents and staff in cohort one and frontline Health and Social Care staff along with patients over the age of 80 in the second. Discussions are currently taking place between the Health Board and GPC Wales with the intention of developing an Enhanced Service which will allow General Practice colleagues to support Health Board Immunising staff. The reduction compared to Month 6 is following these refinements. Benefit in Kind liability for staff accommodation during COVID-19 covered by the HB (-£0.5m): in line with a number of other Health Boards in Wales, it is expected that the Health Board would opt to cover any benefit-in-kind liability arising from the provision of accommodation to staff resulting from measures to address the COVID-19 pandemic which would otherwise be a liability to individual staff members. The estimate of £0.5m is based on analysis of the accommodation provided to the end of September extrapolated, and is therefore subject to further refinement.

Appendix 1: Monitoring return tables

Table	Commentary
	<p>There is a further risk that the forecast does not include a significant increase in 'RTT' expenditure 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> <ul style="list-style-type: none"> • Welsh Risk Pool liability (£0.2m): The latest forecast provided by NWSSP of the Health Board's contribution towards the WRP will result in slippage on the reserve of £0.2m. • Test, Trace and Protect (£0.4m): As plans for the mass vaccination continue to develop, discussions are taking place to reduce the level of TTP provision to enable staff to focus on the vaccination campaign. Discussions are however at a preliminary stage and plans could change depending on the prevalence of COVID-19 in the locality as we enter the winter period.
Table B: Monthly position	<p>The Health Board's in month result was in line with the Month Six forecast. Key drivers in month include:</p> <ul style="list-style-type: none"> • RRL (-£1.0m): re-phasing of the RRL. • Primary Care Contractor (-£0.8m): In month release of prior year accruals in relation to Dental under performance and creditors. Enhanced Service payments to GMS contractors was also lower than anticipated. • Provider services – Non Pay (-£1.3m): Delays in Local Authority invoicing for ICF expenditure compared to the level forecast; meetings are on-going with Local Authority Leads to provide assurance over the end of year position. Actual costs were also lower than forecast in Facilities where a number of improvement and minor works projects to Health Board premises were delayed as a result of the increased COVID-19 activity. • Secondary Care drugs (-£0.2m): Lower than anticipated spend on drugs in-month due to the timing of rebates. • Healthcare: Other NHS (£1.6m): Pass through costs associated with WHSSC were recognised in month. • Continuing Care and Funded Nursing Care (£0.2m): Costs were lower than forecast due to some delayed discharges following outbreaks in a number of care homes. • AME (£1.5m): Revised indexation rates applied in month as per WG guidance.

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), which has led to an increase in Section D of Table B3. 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. • IMTP Plans: Due to delays in implementing IMTP plans as Service Managers' attention was focused on Directorate's response plans to COVID-19, allocations will start to be used for the majority of projects as we continue to plan for a return to increased core activity in Q4. • 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 has been some delays in the receipt of invoices from Local Authority partners. Therefore the remaining balance is expected to be spent over the remainder of the year, however further scrutiny of these assurances is required urgently. • RPB Winter pressure funding: For this return, the funds have been assumed to be spent on a straight line basis, however the phasing of this will be matched to costs incurred and aligned to the finalised Winter plans. • Variable pay: This reserve has been focused on the period November 2020 to February 2021 in line with previous year's trends of surge activity in Unscheduled Care. • Welsh Risk Pool: It has been assumed that this will be phased over Q4 as guidance has yet to be received with regards to the treatment of the additional cost for FY2020/21 • COVID-19 reserves: These reserves will be used to offset COVID-19 'specific' and 'non-specific' expenditure throughout the rest of the year. <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 - 6 and assumed that this 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>

Appendix 1: Monitoring return tables

Table	Commentary
	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 be utilised to report a position in line with the YTD planned deficit for Months 7-9. There is a risk that the Winter Pressures may drive over-spends in January and February and mitigating actions required in March.
Table B2: Pay and agency	See Key Subjective Summary Section. The same methodology as Table B has been applied for the split of Pay into type and use of Agency.
Table B3: COVID-19	<p>The forecast figures have been refined in Month Seven 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 Seven costs saw an increase against forecast of £0.2m. Key drivers to this are documented below:</p> <ul style="list-style-type: none"> • Medical and Dental (£0.3m): SAS Doctor Enhancement payments recognised in month as per the WG Circular. • Nursing & Midwifery (£0.2m): Higher than anticipated spend on Agency Nurses incurred during the month due to increased COVID-19 activity and also backfill for staff required to self-isolate or on sick leave relating to COVID-19. • Additional costs in Temporary Hospital Capacity (£0.3m): Notification received from Local Authority colleagues confirming additional set up costs for Field Hospital sites. • CHC (-£0.2m): Costs have been re-classified in-month from COVID-19 to Core Cost Centres in line with the revised principles. • Drugs (-£0.1m): Reduction in spend on Homecare drugs compared to spend in prior months. • PPE (£0.2m): In month increase in the unit cost of PPE provided by NWSSP on the WHS feed. • Primary Care Prescribing (-£0.1m): Forecast calculated on June prices but the in month accrual has been recalculated following as prices have reduced compared to what was used in the forecast.

Appendix 1: Monitoring return tables

Table	Commentary
	<p>In respect of the GDS contract, the YTD loss of income to the end of Month 7 is £1.5m; the projected loss for the full year is £2.737m.</p> <p>In respect of the Dental contract, the YTD loss of income to the end of Month 7 is £1.6m; the projected loss for the full year is £2.926m</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 £5.2m in Month 7 compared to what was reported in Month 6. Below are the key drivers of the movement between Month 7 and Month 6 forecasts:</p> <ul style="list-style-type: none"> • Medical & Dental (£0.5m): Increase in the forecast is due to the SAS Doctor Enhancement paid in Month 7 that was not anticipated in the Month 6 forecast. • Nursing & Midwifery (£1.3m): An adjustment to the forecast has taken place in Month 7 to account for the change in assumptions around the Field Hospital activity. This has been offset by the cost reductions (Section C) as the majority of staff will be deployed from Acute sites or community or corporate services based on current Workforce plans. • Additional Clinical Services (£1.6m): An adjustment to the forecast has taken place in Month 7 to account for the change in assumptions around the Field Hospital activity. This has been offset by the cost reductions (Section C) as the majority of staff will be deployed from Acute sites or community or corporate services based on current Workforce plans. The Health Board is also in the process of recruiting significant numbers of Bank staff to resource the additional forecast bed capacity requirement; this is being done on a 'bank' basis rather than fixed term basis to allow the service flexibility to only utilise what is required. • Nursing & Midwifery Agency (£0.8m): Agency spend forecast has increased in month in line with the Q3 and Q4 plan where Agency Nurses will be used to backfill those staff deployed to the Field Hospitals from Acute sites. • Estates and Ancillary (£1.2m): An adjustment to the forecast has taken place in Month 7 to account for the change in assumptions around the Field Hospital activity and more thorough cleaning regimes across all Health Board estates. These factors have resulted in the recruitment of Bank Porters and Domestics whose costs have been reflected in future periods.

Appendix 1: Monitoring return tables

Table	Commentary																								
	<ul style="list-style-type: none">• Continuing Health Care (-£0.6m): Costs have been re-classified in-month from COVID-19 to Core Cost Centres in line with the revised principles.• PPE (£0.9m): Forecasts have been adjusted to reflect the increase in unit prices of PPE items purchased from NWSSP through the WHS feed. <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 seven.</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> <p>The Flu Immunisations expenditure is included in the following lines of Section A:</p> <table><tr><th>Expenditure</th><th>Table B3 Line</th><th>YTD Month 7</th><th>EOY</th></tr><tr><td>Primary Care DES</td><td>Additional costs in Primary Care (line 59)</td><td>£Nil</td><td>£500k</td></tr><tr><td>Vaccinations</td><td>Drugs (line 70)</td><td>£40k</td><td>£826k</td></tr><tr><td>Consumables</td><td>M&SE consumables (line 80)</td><td>£Nil</td><td>£28k</td></tr><tr><td>Staff costs to deliver</td><td>Establishment Nursing (line 5)</td><td>£Nil</td><td>£88k</td></tr><tr><td>Total</td><td></td><td>£40k</td><td>£1,442k</td></tr></table> <p>The refinement of the costs associated with the COVID-19 Mass Vaccination programme expenditure is not yet finalised, and therefore could not be factored into the forecast (either costs or income); instead the current best estimate is included as a Risk in Table A2. This will be refined ahead of the Month 8 submission.</p> <p><u>Section B</u></p> <p>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</p>	Expenditure	Table B3 Line	YTD Month 7	EOY	Primary Care DES	Additional costs in Primary Care (line 59)	£Nil	£500k	Vaccinations	Drugs (line 70)	£40k	£826k	Consumables	M&SE consumables (line 80)	£Nil	£28k	Staff costs to deliver	Establishment Nursing (line 5)	£Nil	£88k	Total		£40k	£1,442k
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Total		£40k	£1,442k																						

Appendix 1: Monitoring return tables

Table	Commentary
	<p>response to the pandemic. A review is currently in progress to identify schemes for prioritisation should the demands of COVID-19 allow.</p> <p><u>Section C</u> 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.</p> <p>The cost reductions have now been reduced in relation to Planned Care based on the assumption of considerable increases in elective care activity. WHSSC slippage has been transferred to Section D to allow the reporting of the deployment of establishment staff to Field Hospitals as a material item.</p> <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>

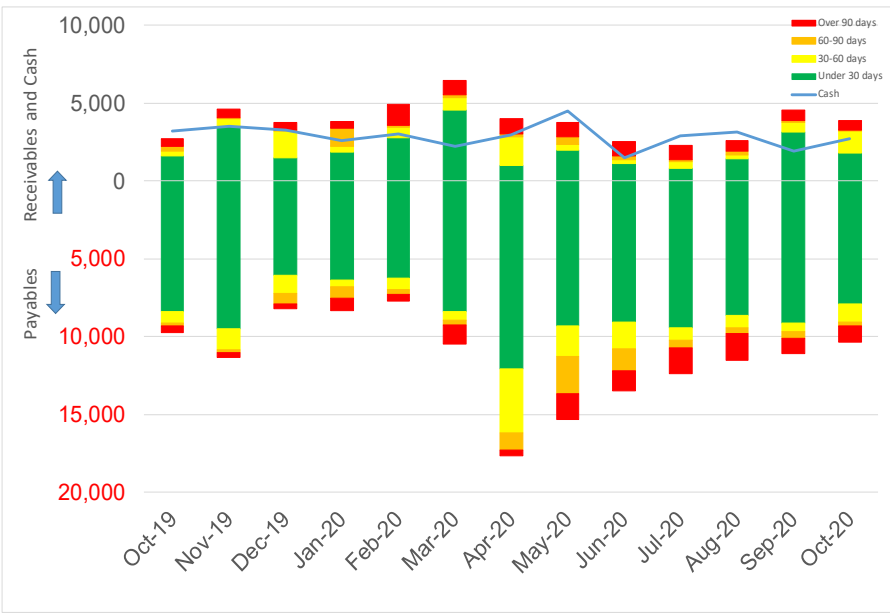
Appendix 1: Monitoring return tables

Table	Commentary
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, however this will be dependent on the continuing impact of the pandemic.</p> <p>The Risk to delivery on Amber Schemes has been set at £nil where the in-year delivery is forecast to be £nil. The remaining Amber schemes have not been assessed given the level of non-delivery already forecast due to the impact of COVID-19.</p> <p><u>Areas of immediate focus:</u></p> <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.
Table D: Welsh NHS Assumptions	<p>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.</p>

Appendix 1: Monitoring return tables

Table	Commentary																																																																												
Table E: Resource limits	<p>The Health Board's planning assumptions are that it will receive resource allocation income of £985.1m from Welsh Government in the 2020/21 financial year. This comprises of notified allocation of £900.2m and allocations pending of £84.9m.</p> <p>Pending allocations in relation to specific COVID-19 costs (PPE, Field Hospital set-up, decommissioning and consequential losses, Antigen and Antibody testing and Flu Immunisations) are based on the Month 7 Directorate forecast.</p>																																																																												
Table F: Statement of Financial Position	<table><tr><th></th><th>2020-21 Opening balance £m</th><th>31 OCT 2020 £'m</th><th>Movement £'m</th></tr><tr><td>Non Current assets</td><td></td><td></td><td></td></tr><tr><td>Fixed Assets</td><td>280</td><td>279</td><td>-1</td></tr><tr><td>Other non current assets</td><td>58</td><td>47</td><td>-11</td></tr><tr><td></td><td>338</td><td>326</td><td>-12</td></tr><tr><td>Current Assets</td><td></td><td></td><td></td></tr><tr><td>Inventories</td><td>9</td><td>9</td><td>0</td></tr><tr><td>Trade and other Receivables</td><td>69</td><td>62</td><td>-7</td></tr><tr><td>Cash</td><td>2</td><td>3</td><td>1</td></tr><tr><td>Total Assets</td><td>418</td><td>400</td><td>-18</td></tr><tr><td>Liabilities</td><td></td><td></td><td></td></tr><tr><td>Trade and other Payables</td><td>-120</td><td>-113</td><td>7</td></tr><tr><td>Provisions</td><td>-98</td><td>-78</td><td>20</td></tr><tr><td>Total Liabilities</td><td>-218</td><td>-191</td><td>27</td></tr><tr><td>Net Assets less Liabilities</td><td>201</td><td>209</td><td>8</td></tr><tr><td>Financed by:</td><td></td><td></td><td></td></tr><tr><td>General Fund</td><td>173</td><td>179</td><td>6</td></tr><tr><td>Revaluation Reserve</td><td>28</td><td>30</td><td>2</td></tr><tr><td>Total Funding</td><td>201</td><td>209</td><td>8</td></tr></table> <p>The movement since the end of 2019/20 in non-current assets is £12m. This is mainly due to a decrease of £11m in other assets, 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 current assets is £8m. This is due to a decrease of £7m in trade and other receivables. This is attributable to a decrease in the Welsh Risk Pool debtor as a result of medical negligence claims.</p>		2020-21 Opening balance £m	31 OCT 2020 £'m	Movement £'m	Non Current assets				Fixed Assets	280	279	-1	Other non current assets	58	47	-11		338	326	-12	Current Assets				Inventories	9	9	0	Trade and other Receivables	69	62	-7	Cash	2	3	1	Total Assets	418	400	-18	Liabilities				Trade and other Payables	-120	-113	7	Provisions	-98	-78	20	Total Liabilities	-218	-191	27	Net Assets less Liabilities	201	209	8	Financed by:				General Fund	173	179	6	Revaluation Reserve	28	30	2	Total Funding	201	209	8
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Appendix 1: Monitoring return tables

Table	Commentary
	<p>The movement since the end of 2019/20 in liabilities is £27m. This is due to a decrease of £7m in trade and other payables and a decrease of £20m in provisions. The decrease in trade and other payables is due to a decrease in , Non NHS accruals £13.7m (year end included an amount of £8.1m for a medical negligence accrual) offset by an increase in Statutory pay deductions £5.9m (due to a timing difference). The decrease in provision is due to medical negligence cases based on information provided by the Welsh Risk Pool.</p> <p>The movement since the end of 2019/20 in the Revaluation Reserve is £6m. This is due to Indexation in this financial year.</p>
Table G: Cashflow	 <p>The chart displays the monthly cash flow from October 2019 to October 2020. The Y-axis represents the amount in pounds, ranging from 10,000 (Payables) to 10,000 (Receivables and Cash). The X-axis shows the months from Oct-19 to Oct-20. The legend indicates five categories: Over 90 days (red), 60-90 days (orange), 30-60 days (yellow), Under 30 days (green), and Cash (blue line). Payables are shown as negative bars extending downwards, while Receivables and Cash are shown as positive bars extending upwards. A significant spike in payables is visible in April 2020, reaching nearly 20,000. Receivables remain relatively stable, fluctuating between 2,000 and 5,000.</p> <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 £3.9m in Month 7. It is also important that the Health Board pays its suppliers promptly. At the end of Month 7, £10.3m was owed to suppliers, of which £7.9m are less than 30 days old.

Appendix 1: Monitoring return tables

Table	Commentary																																																								
	<div>Cash</div> <div><table border="1"><thead><tr><th>Month</th><th>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>Oct-19</td><td>78</td><td>3.9</td><td>3.2</td></tr><tr><td>Nov-19</td><td>84</td><td>4.2</td><td>3.5</td></tr><tr><td>Dec-19</td><td>73</td><td>3.65</td><td>3.2</td></tr><tr><td>Jan-20</td><td>79</td><td>3.95</td><td>2.5</td></tr><tr><td>Feb-20</td><td>82</td><td>4.1</td><td>2.8</td></tr><tr><td>Mar-20</td><td>79</td><td>4.05</td><td>2.0</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>69</td><td>3.45</td><td>3.0</td></tr><tr><td>Sep-20</td><td>80</td><td>4.0</td><td>2.0</td></tr><tr><td>Oct-20</td><td>86</td><td>4.3</td><td>2.7</td></tr></tbody></table></div> <div><ul style="list-style-type: none">• The closing balance of £2.7m did not exceed 5% of the total monthly draw down from Welsh Government.• The Health Board has an approved cash limit of £910.1m split between revenue £884.9m and capital £25.2m.• Cumulative cash draw down to month 7 is £575.96m.• In accordance with the reply letter, the cashflow has been updated to reflect our request for strategic and working balances cash support. The total request is £22.8m which is split between working balances support of £6.8m (revenue £4.1m and capital £2.7m) and strategic cash support of £16m. This will leave us with a balance of £1m split equally between capital and revenue cash. The request for strategic and working balances support will be reviewed again in month 8 due to the fluidity of the position with COVID-19 and in accordance with the reply letter.</div>	Month	Draw down (£'m)	WG maximum cash balance (5% of draw down) (£'m)	Cash balance (£'m)	Oct-19	78	3.9	3.2	Nov-19	84	4.2	3.5	Dec-19	73	3.65	3.2	Jan-20	79	3.95	2.5	Feb-20	82	4.1	2.8	Mar-20	79	4.05	2.0	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	69	3.45	3.0	Sep-20	80	4.0	2.0	Oct-20	86	4.3	2.7
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Appendix 1: Monitoring return tables

Table	Commentary
Table H: PSPP	<p>The Health Board did not achieve its PSPP target of paying 95% of its non-NHS invoices within 30 days in September 2020 which has meant a cumulative position of 94.7%.</p> <p>The main reason for failure was due to staffing issues in PPH pharmacy with a number of staff in the Homecare team affected during the Covid-19 pandemic having to self-isolate and systems not in place to enable home working. An urgent meeting took place on the 6th October 2020 with representatives from the Finance team, Head of Medicines Management and other pharmacy staff members and NWSSP – Accounts Payable to agree an action plan. The Head of Medicines Management has re-prioritised staff workloads to clear the backlog by the end of October. This will however mean the improvement in the PSPP target will not be evidenced until the November PSPP figures are produced.</p> <p>A task and finish group, led by TAG and NHS Wales P2P group, is looking at ways to ensure NHS invoices are processed more efficiently and to ensure NHS PSPP target is achieved across Wales.</p>
Table I: Capital RLM	<p>An estimate of the future forecast of COVID-19 spend for 2020/21 has been reflected within the Month 7 return. If all the expenditure plans are delivered in year and no additional funding is available this will lead to a shortfall of £14.3m against the 2020/21 Capital Resource Limit.</p> <p>The reported capital expenditure on COVID-19 for M7 includes the equipping and oxygen costs for the Field Hospitals, but excludes the design, build and restoration costs and estimates.</p> <p>Any in-year slippage of capital schemes was be communicated to Welsh Government by the 2nd October. Further review will be undertaken and reported by the end of November 2020</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>
Table J: Capital In Year Schemes	<p>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. As part of ongoing discussions during the monthly Capital Review Meetings Welsh Government have indicated that they are prepared to consider a request by the Health Board to retain the proceeds. A letter has been sent and is with WG for consideration.</p>

Appendix 1: Monitoring return tables

Table	Commentary
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 7.
Table N: GMS	<p>The Table has been completed for Quarter 2.</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 2.</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 6 2020/21	Health Board Response
<p><u>Movement of Opening Financial Plan to Forecast (Table A)</u> The Covid-19 funding reported on Line 22 of Table A of £85.586m is £0.044m lower than the total value issued (£15.515m at date of submission) and anticipated within Table E (£70.115m). Please review and ensure that values are consistently reported in future returns. In addition, please note that any funding associated with the Urgent and Emergency Care fund should be reported on Line 22 of Table A (as Discharge to Assess\Emergency Primary Care\Ambulatory Care Funding will be Covid allocations), with the corresponding spend via Table B3. (Action Point 6.1)</p>	<p>Funding confirmation for Ambulatory Care was received after the Month 7 month end close down; this will be recognised in the Month 8 submission.</p>
<p><u>Monthly Positions (Table B)</u> Please provide a supporting explanation for the material increase in non pay expenditure within future months, with spend in the second half of the year being c. £9.000m higher than actually incurred between months 1 – 6. (Action Point 6.2)</p>	<p>The profile of expenditure in the future months of the financial year was discussed in detail in the WG six month review, and a potential level of flexibility was identified, however the Health Board has received assurances from a range of teams across the Health Board and across the RPB on the drivers of spend. There is a risk that these assurances do not reflect future expenditure profiles and that the financial outturn differs from our current forecast (linked to below action).</p>
<p>Your response and Actions to 4.6, in relation to Reserves, is noted. Please provide details of the outcome of your Month 7 review and consider if these may produce opportunities that could be reported in Table A2. (Action Point 4.6)</p>	<p>The Health Board will scrutinise the assurances provided by a range of teams across the Health Board and across the RPB on the drivers of spend. A formal schedule of these assurances will be shared with WG colleagues by separate cover as a matter of urgency.</p>
<p><u>Pay Expenditure Analysis (Table B2)</u> Please provide a supporting explanation for the below highlighted (yellow) annual pay expenditure movements (Action Point 6.3):</p>	<p>As referenced in Table B2, the highlighted movements have been refined in the Month 7 submission. Reviewing the basis of forecasting pay in P06-21, the extrapolations were based on assumptions that have now been refined and our assumptions as part of our</p>

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 6 2020/21				Health Board Response						
	Month 6 Forecast year-end position £'000	Month 5 Forecast year-end position £'000	Movement £'000	<p>pay forecasting process should improve the accuracy of future forecasts.</p> <p>P07-21 Year end positions are now reporting the following:</p> <table><tr><td>Medical & Dental</td><td>£100,115</td></tr><tr><td>Nursing & Midwifery</td><td>£147,090</td></tr><tr><td>Allied Health Professionals</td><td>£29,515</td></tr></table>	Medical & Dental	£100,115	Nursing & Midwifery	£147,090	Allied Health Professionals	£29,515
Medical & Dental	£100,115									
Nursing & Midwifery	£147,090									
Allied Health Professionals	£29,515									
Administrative, Clerical & Board Members	65,020	64,935	(85)							
Medical & Dental	98,978	100,402	1,424							
Nursing & Midwifery Registered	147,622	147,114	(508)							
Prof Scientific & Technical	17,023	16,997	(26)							
Additional Clinical Services	63,988	64,051	63							
Allied Health Professionals	30,517	29,717	(800)							
Healthcare Scientists	10,885	11,078	193							
Estates & Ancillary	29,689	29,854	165							
Students	2,225	2,177	(48)							
TOTAL PAY EXPENDITURE	465,948	466,325	377							
As highlighted below, you are forecasting a material step up in pay spend (c. £8.8m) within the second half of the year. As demonstrated below, this does not appear to be attributable to Covid-19; and it is unclear that you have workforce plans that would provide assurance on the ability to recruit to this level of increase. Please provide supporting explanations for this material operational pay increase (Action Point 6.4):										
	£000									
Actual pay spend 1st six months	227,821									
The Month 7 actual (after excluding the pay award arrears) supports an increased trend compared to the earlier part of the year, and previous years' Winter plans have evidenced the additional staffing costs incurred over the Winter period.										
The profile of expenditure in the future months of the financial year was discussed in detail in the WG six month review, and a potential level of flexibility was identified, however the Health Board has received assurances from a range of teams across the Health Board and across the RPB on the drivers of spend. There is a risk that these assurances do not reflect										

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 6 2020/21		Health Board Response								
<table><tr><td>Forecast Pay second six months (adj for removal of pay award £2.858m as per Table A section E)</td><td>235,269</td></tr><tr><td>Increase in spend in second half of year</td><td>7,448</td></tr><tr><td>Amount due to Covid-19 (2nd half year spend lower than 1st six months)</td><td>-1,296</td></tr><tr><td>Additional pay spend not due to Covid-19</td><td>8,744</td></tr></table>	Forecast Pay second six months (adj for removal of pay award £2.858m as per Table A section E)	235,269	Increase in spend in second half of year	7,448	Amount due to Covid-19 (2nd half year spend lower than 1st six months)	-1,296	Additional pay spend not due to Covid-19	8,744		<p>future expenditure profiles and that the financial outturn differs from our current forecast (linked to above action).</p> <p>The alignment to Workforce plans was discussed in detail in the WG six month review, and concluded that the financial forecast was the most accurate with WTEs in the Workforce plans unrealistic due to the available supply.</p>
Forecast Pay second six months (adj for removal of pay award £2.858m as per Table A section E)	235,269									
Increase in spend in second half of year	7,448									
Amount due to Covid-19 (2nd half year spend lower than 1st six months)	-1,296									
Additional pay spend not due to Covid-19	8,744									
<p>I understand that colleagues in FDU have also raised concerns in relation to the WTE data as there appears to be a correlation issue between the movement in costs and WTEs.</p>										
<p>Covid-19 Analysis (Table B3)</p> <p>In all future narratives, please confirm the lines within Section A where the Flu Extension vaccination costs (Line 108 in Section A1) are being reported i.e. Pay, Drugs, Primary Care etc. (Action Point 6.5)</p> <p>I note the risk in relation to the Mass Covid Vaccination costs and I trust these will be sufficiently finalised to populate the Table B3 (line 107) at Month 7. As with Flu above, please include a monthly analyses by Pay, Drugs, primary Care etc.</p>		<p>This breakdown has been included in Appendix 1, Table B3.</p>								
<p>Please provide a breakdown of the items included within Line 131 ‘Other slippage on planned investment / repurposed funding’. (Action Point 6.6)</p>		<p>This represents the YTD underspends across multiple Directorates and expenditure types as a result of the reduced levels of activity resulting from the COVID-19 pandemic.</p>								
<p>In all future narratives, please confirm the annual loss of patient dental income value being factored into Table B3. (Action Point 6.7)</p>		<p>This has been included in Appendix 1, Table B3.</p>								
<p>I trust you are in discussions with the TTP ‘Tracing’ Lead (Rob Griffiths), on the costing of your service plans which currently exceed the initial funding</p>		<p>Discussion are on-going with the TTP Lead and the latest operational intelligence is used to compile the financial forecasts. The additional funding is included in</p>								

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 6 2020/21	Health Board Response
<p>confirmation. I note you are anticipating this additional funding and are including a corresponding risk in Table A2.</p> <p>I remain concerned about the level of risk described in the Risk Table in relation to Covid. I Trust that your Q3/Q4 plans will provide further clarity and this will be discussed at the Mid-year Review Meeting.</p>	<p>anticipated allocations, however there is no corresponding risk in Table A2 as the Q3/4 guidance was interpreted to suggest all TTP costs would be match-funded.</p> <p>The two Low Risk items totalling £8.4m will continue to be reviewed in light of Workforce Plans given that the current assessment would suggest that the workforce supply could not be secured in addition to the existing establishment and agency use.</p>
<p><u>Savings (Table C, C1, C2 & C3)</u></p> <p>I note your response to Action Point 5.9, that a reply will be supplied via a separate cover. I do not believe that this information has been provided. Therefore, please expand the ‘Savings’ section of Appendix 1 to discuss future month savings delivery assumptions (e.g. increases in the final quarter and the focus being given to finalising the plans to enable them to imminently move from Amber to Green). (Action Point 5.9)</p>	<p>An update of next steps has been included in Appendix 1, Section C3.</p>
<p>Your narrative continues to refer to a ‘Deep Dive’ savings exercise; as we have now moved into the second half of the financial year please provide a progress update including the outcome of the exercise. (Action Point 6.8)</p>	<p>An update of next steps has been included in Appendix 1, Section C3.</p>
<p><u>Income/Expenditure Assumptions (Table D)</u></p> <p>As per the Month 6 income and expenditure reconciliation, there is a £0.030m income variance with WAST. I trust that this variance has since been reviewed and resolved. (Action Point 6.9)</p>	<p>This has been corrected in the Month 7 submission.</p>
<p><u>Anticipated Income (Table E)</u></p> <p>I have been informed by policy colleagues that all funding for Dental & Pharmacy pre-registered vocational trainees has been issued to HEIW as they have taken over the payments from 1 Aug for Pharmacy VTs and 1 Sep</p>	<p>This has been removed in the Month 7 submission.</p>

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 6 2020/21	Health Board Response
for Dental VTs. If applicable, please ensure that any anticipated funding, along with any associated costs, is removed from these dates (Action Point 6.10)	
<u>Cash Flow (Table G)</u> Within your Month 7 narrative, please confirm if your Health Board will be requesting any strategic or working balances cash support. Any requirement should be reflected in the cash flow as a shortfall in March. Any working balances requirements associated with movements in payables (revenue and capital) should be supported by the payables analysis in Table F. The position next month will inform the request to Treasury. (Action Point 6.11)	Noted, please see narrative for Table G.
I note that you are reporting that the September revenue draw amount as £83.430m, which is higher than our record of £77.417m. Please review this variance. (Action Point 6.12)	We are unable to reconcile to the figure of £77,417m. Our September draw down consisted of £80.8m received on 1st September and £2.5m on 29th September with the remaining difference for NCL.
<u>PSPP (Table H)</u> I note that you are only just below the 95% best practice value for Non NHS invoices at 94.7%. The performance for NHS invoice is lower at 89.5%, although I acknowledge the improvement during Q2. I look forward to seeing the improved trend continuing, in Q3. (Action Point 6.13)	We are working with the local P2P group targeting poor performance, breaches to the Purchase order No PO No Pay policy, to enable an improved PSPP performance both for Non NHS and NHS.
<u>20/21 Capital Resource Limit (Table I)</u> I note that you are currently forecasting to overspend against the reported CRL by £14.753m, details of the attributable items/schemes have been shared with my capital colleagues.	Forecast overspend is attributable to COVID 19 priorities which are currently unfunded. Detailed returns are submitted to the Welsh Government Capital Team noting the areas of potential overspend. Current forecast following latest allocation received is included in the Executive Summary.

Appendix 2: Monitoring return reply letter

Reply Letter Action – Month 6 2020/21	Health Board Response
<p><u>Risk & opportunities (Table A2)</u> Please ensure the Risk section of your narrative clarifies the reasons why any risks or opportunities have been removed (e.g. Exit from Werndale opportunity removed at Month 6). (Action Point 6.14)</p> <p>In relation to your risk described as ‘Asylum Seekers Health needs’, this is being progressed by Policy colleagues and we hope to provide an update in due course.</p>	<p>The change in risks from Month 6 to 7 has been included in Appendix 1, Table A2.</p>
<p><u>Monthly Positions (Table B)</u> Please report the SoCNE Line references (e.g. Line 10 Provider Services Pay) against each item listed in Section E to highlight where it is being profiled within the SoCNE (Section A). (Action Point 5.12)</p>	<p>This is included in the Month 7 submission.</p>
<p>Please can you provide an update on the ICF plans (which involve the Local Authorities), which I understand are still being developed; this will assist to provide assurance that you have firm plans to utilise this funding in the remaining months of the year. (Action Point 6.15)</p>	<p>Whilst in overall terms the intention and expectation is to fully and appropriately spend the full ICF allocation, the regional partnership team have identified a risk of underspending against the allocation and, whilst across several programmes, this is particularly significant for the current forecast outturn of the Dementia programme. This will be reviewed as additional projects come on stream in the remaining quarters. Work is also ongoing to further challenge the underlying assumptions and bring invoicing up to date, which should provide a clearer and more accurate indication for our next submission.</p>
<p><u>Anticipated Income (Table E)</u> As advised in my Month 5 reply letter, I have been informed by policy colleagues that the Delivery Plan funding is with the NHS Collaborative who will then agree with the applicable Implementation Groups on how this funding will be utilised. Therefore, please ensure this WG anticipated income item is removed from the next submission. (Action Point 5.11)</p>	<p>This has been removed in the Month 7 submission.</p>

Hywel Dda ULHB

Period : Sep 20

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	-5	288	-293	0
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)	87,106	87,106		
23	Operational Expenditure Cost Increase Due To Covid-19 (Negative Value)	-86,624	-86,624		
24	Planned Operational Expenditure Cost Reduction Due To Covid-19 (Positive Value)	21,116	21,116		
25	Slippage on Planned Investments/Repurposing of Developmental Initiatives Due To Covid-19 (Positive Value)	9,177	9,177		
26	Net In Year Operational Variance to IMTP/AOP (material gross amounts to be listed separately)	5	5		
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	32,905	-57,905	-57,022

	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	-27,707	-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	-26,755	-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	-54,462	-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	19,685	33,745
5	798	330	320	304	493	304	449	450	460	428	428	828	2,999	5,592
6	38	38	38	38	38	38	38	38	38	38	38	38	263	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	16,932	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	-14,584	-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	-16,932	-28,576
14	-566	-124	-133	-22	-99	-129	-133	-194	-199	-103	-103	-394	-1,206	-2,199
15	0	0	0	-196	-249	170	-109	84	85	69	69	69	-383	-5
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	6,886	7,449	6,873	6,571	11,326	48,002	87,106
23	-4,190	-7,486	-9,374	-6,541	-8,974	-4,548	-7,784	-5,972	-7,344	-6,757	-6,532	-11,123	-48,896	-86,624
24	2,136	3,313	1,971	1,441	2,753	1,757	1,445	892	1,541	1,279	1,272	1,316	14,816	21,116
25	61	53	441	75	146	2,796	1,034	700	853	1,005	1,006	1,006	4,606	9,177
26	569	701	-42	405	669	-2,302	-5					10	-5	5
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	-2,085	-2,136	-2,220	-1,892	-14,583	-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)

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 £'000	IMTP Underlying Position c/f £'000
	(964)
	(10,496)
	(5,302)
	(1,414)
	(3,918)
	1,874
	99
	25
	0
(2,630)	(4,569)
(685)	(1,396)
	(632)
	(2,065)
	(129)
	(2,515)
(1,500)	(2,924)
	(2,139)
	(1,644)
(4,709)	(10,095)
	0
	(8,820)
(9,524)	(57,022)

New, Recurring, Full Year Effect of Unmitigated Pressures (- £'000	IMTP Underlying Position c/f £'000
(750)	(2,589)
	1,694
(685)	(3,448)
(4,709)	(7,520)
	(9,737)
	(24,597)
	(5,408)
	766
(1,880)	(2,317)
(1,500)	(3,342)
	(524)
(9,524)	(57,022)

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	WHSCC Performance		
9	Other Contract Performance		
10	GMS Ring Fenced Allocation Underspend Potential Claw back		
11	Dental Ring Fenced Allocation Underspend Potential Claw back		
12	Reasonable worst case scenario' for R rate of 1.1 - Field Hospitals	(6,300)	Low
13	Agency premium in Field Hospitals if staff cannot be recruited or deployed to Field Hospitals	(2,100)	Low
14	Increased elective activity December to March based on operational plans	(1,200)	Medium
15	Asylum seekers health needs	(250)	High
16	COVID-19 Vaccination programme	(900)	High
17	Benefit in Kind liability for staff accommodation during COVID-19 covered by HB	(500)	High
18			
19			
20			
21			
22			
23			
24			
25			
26	Total Risks	(11,250)	
	Further Opportunities (positive values)		
27			
28	Welsh Risk Pool Reserve not utilised based on Month 7 assessment	175	Medium
29	TTP	400	Medium
30			
31			
32			
33			
34	Total Further Opportunities	575	
35	Current Reported Forecast Outturn	(25,000)	
36	IMTP / AOP Outturn Scenario	(25,000)	
37	Worst Case Outturn Scenario	(35,675)	
38	Best Case Outturn Scenario	(24,425)	

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	83,980	84,404	84,479	84,436	91,367	556,389	985,055
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	2,086	2,086	2,086	2,086	2,086	14,920	25,350
4	WHSSC Income	Actual/F'cast	190	174	204	213	219	201	195	200	200	200	200	200	1,396	2,397
5	Welsh Government Income (Non RRL)	Actual/F'cast	122	158	112	141	147	181	168	144	144	144	144	144	1,029	1,747
6	Other Income	Actual/F'cast	1,985	1,449	1,744	1,588	1,764	1,810	1,429	1,696	1,696	1,696	1,696	1,696	11,769	20,249
7	Income Total		74,981	74,234	80,394	80,641	82,141	101,856	91,283	88,106	88,530	88,725	88,562	95,699	585,530	1,035,150
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	10,876	10,473	10,429	10,427	10,404	69,199	121,808
9	Primary Care - Drugs & Appliances	Actual/F'cast	6,368	6,418	6,668	6,535	5,917	6,585	6,992	6,471	6,882	6,353	6,048	6,851	45,483	78,087
10	Provided Services - Pay	Actual/F'cast	36,319	38,066	37,790	36,664	37,343	36,446	39,264	38,771	38,974	38,825	38,944	38,112	261,892	455,518
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	10,371	10,559	10,908	10,924	13,917	55,688	112,367
12	Secondary Care - Drugs	Actual/F'cast	3,199	2,883	3,387	3,803	3,312	3,853	3,665	3,823	3,843	3,826	3,837	3,854	24,102	43,287
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	13,302	13,302	13,302	13,302	13,302	90,939	157,451
14	Non Healthcare Services Provided by Other NHS Bodies	Actual/F'cast	8	8	8	8	8	1	8	7	7	7	7	7	49	83
15	Continuing Care and Funded Nursing Care	Actual/F'cast	4,729	4,432	4,255	4,330	4,120	4,110	6,377	4,573	4,577	5,114	5,114	5,114	32,353	56,845
16	Other Private & Voluntary Sector	Actual/F'cast	43	113	116	84	90	105	95	102	102	102	102	102	646	1,156
17	Joint Financing and Other	Actual/F'cast	48	131	104	37	102	57	125	94	94	94	94	94	604	1,073
18	Losses, Special Payments and Irrecoverable Debts	Actual/F'cast	158	135	135	148	175	156	126	143	143	143	143	143	1,033	1,748
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	1,600	1,600	1,699	1,781	1,805	10,777	19,262
23	AME Donated Depreciation\Impairments	Actual/F'cast	55	45	(4,109)	6,185	3,541	56	1,575	57	58	58	58	3,888	7,348	11,467
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	90,190	90,614	90,860	90,781	97,593	600,113	1,060,150
27	Net surplus/ (deficit)	Actual/F'cast	(6,288)	(8,446)	(1,494)	(9,015)	(6,526)	19,227	(2,041)	(2,084)	(2,084)	(2,135)	(2,220)	(1,894)	(14,583)	(25,000)

B. Assessment of Financial Forecast Positions

Year-to-date (YTD)	£'000	
28 . Actual YTD surplus/ (deficit)	(14,583)	
29. Actual YTD surplus/ (deficit)	(12,542)	
30. Current month actual surplus/ (deficit)	(2,041)	
31. Average monthly surplus/ (deficit)	(2,083)	Trend ▲
32. YTD /remaining months	(2,917)	

Full-year surplus/ (deficit) scenarios	£'000
33. Extrapolated Scenario	(24,788)
34. Year to Date Trend Scenario	(24,999)

E. Committed Reserves & Contingencies

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: Continuing Healthcare	Forecast Only										724	724	724	0	2,172
47	COVID-19: Non-Pay	Forecast Only								4,431	4,098	3,353	3,027	7,926	0	22,835
48	COVID-19: Pay	Forecast Only								2,455	3,351	3,520	3,545	3,400	0	16,271
49		Forecast Only								2,069	2,556	1,780	1,661	5,196	0	13,262
50	Elective IMTP Funding: Pay	Forecast Only								37	37	37	37	37	0	185
51	Estates: IMTP Funding: Non pay	Forecast Only								87	87	87	87	87	0	433
52	Frailty project: Pay	Forecast Only								45	45	45	45	45	0	226
53	ICF: Non pay	Forecast Only								986	986	986	986	986	0	4,928
54	ICF: Pay	Forecast Only								657	657	657	657	657	0	3,285
55	IMTP Non pay	Forecast Only								64	64	64	64	64	0	321
56	IMTP Pay: Pay	Forecast Only								18	18	18	18	18	0	90
57	Major Trauma: Healthcare Services Provided by other NHS Bodies	Forecast Only								22	22	22	22	22	0	111
58	MH: IMTP Funding: Pay	Forecast Only								145	145	145	145	145	0	723
59	Passthrough to Commissioners: Healthcare Services Provided by other NHS Bodies	Forecast Only								28	28	28	28	28	0	139
60	Public Health: IMTP Funding: Non pay	Forecast Only								106	106	106	106	106	0	531
61	Therapies IMTP Funding: Pay	Forecast Only								67	67	67	67	67	0	334
62	Transformation: Pay	Forecast Only								34	34	34	34	34	0	169
63	Treatment fund: Pay	Forecast Only								24	24	24	24	24	0	122
64	Variable pay: Pay	Forecast Only								952	952	952	952		0	3,809
65	Wage award: Pay	Forecast Only								141	141	141	141	141	0	706
66	Welsh Risk Pool: Non pay	Forecast Only										500	500	500	0	1,500
67	RPB Winter Pressures: Pay	Forecast Only								258	258	258	258	258	0	1,290
68		Forecast Only													0	0
69		Forecast Only													0	0
70		Forecast Only													0	0
71		Forecast Only													0	0
72		Forecast Only													0	0
73		Forecast Only													0	0
74	Total		0	0	0	0	0	0	0	12,626	13,677	13,548	13,128	20,465	0	73,444
	Phasing		0%	0%	0%	0%	0%	0%	0%	17%	19%	18%	18%	28%	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
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
REF	TYPE														
1	Administrative, Clerical & Board Members	5,217	5,329	5,268	5,255	5,289	5,302	5,409	5,580	5,440	5,392	5,407	5,305	37,069	64,193
2	Medical & Dental	8,315	9,202	8,523	7,651	8,208	7,372	9,482	8,472	8,304	8,232	8,255	8,098	58,753	100,115
3	Nursing & Midwifery Registered	11,665	11,766	11,737	11,814	11,993	12,091	12,808	12,726	12,741	12,646	12,689	12,414	83,874	147,089
4	Prof Scientific & Technical	1,367	1,412	1,398	1,387	1,419	1,408	1,415	1,427	1,400	1,388	1,392	1,365	9,806	16,777
5	Additional Clinical Services	5,188	5,247	5,294	5,289	5,328	5,260	5,215	5,323	5,602	5,573	5,605	5,448	36,821	64,372
6	Allied Health Professionals	2,329	2,337	2,347	2,365	2,399	2,422	2,458	2,510	2,566	2,545	2,550	2,484	16,657	29,311
7	Healthcare Scientists	841	884	842	893	908	874	871	939	922	914	917	900	6,113	10,705
8	Estates & Ancillary	2,239	2,396	2,722	2,444	2,435	2,403	2,346	2,568	2,776	2,908	2,906	2,856	16,985	30,998
9	Students	0	377	482	489	256	143	142	135	135	135	135	135	1,889	2,566
10	TOTAL PAY EXPENDITURE	37,161	38,950	38,613	37,587	38,235	37,275	40,147	39,678	39,886	39,734	39,855	39,004	267,968	466,126

Analysis of Pay Expenditure															
11	LHB Provided Services - Pay	36,319	38,066	37,790	36,664	37,343	36,446	39,264	38,771	38,974	38,825	38,944	38,112	261,892	455,518
12	Other Services (incl. Primary Care) - Pay	842	884	823	923	892	829	883	907	912	909	911	892	6,076	10,608
13	Total - Pay	37,161	38,950	38,613	37,587	38,235	37,275	40,147	39,678	39,886	39,734	39,855	39,004	267,968	466,126

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
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
REF	TYPE														
1	Administrative, Clerical & Board Members	10	11	11	13	10	5	2	2	2	2	2	2	62	71
2	Medical & Dental	313	369	319	313	475	424	474	426	420	417	418	413	2,687	4,781
3	Nursing & Midwifery Registered	843	748	948	1,028	1,112	1,288	1,617	1,650	1,626	1,628	1,631	1,606	7,584	15,725
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	13	13	12	12	12	33	96
6	Allied Health Professionals	68	60	58	76	78	73	115	49	48	48	48	47	528	767
7	Healthcare Scientists	8	31	0	37	22	24	26	30	30	30	30	30	148	298
8	Estates & Ancillary	3	0	6	27	(6)	30	36	37	37	36	36	36	97	279
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	2,206	2,175	2,173	2,178	2,145	11,150	22,027

11	Agency/Locum (premium) % of pay	3.4%	3.2%	3.5%	4.0%	4.4%	4.9%	5.7%	5.6%	5.5%	5.5%	5.5%	5.5%	4.2%	4.7%
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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
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
REF	REASON														
1	Vacancy	834	711	1,031	1,075	1,305	1,473	1,552	1,607	1,577	1,563	1,567	1,537	7,981	15,832
2	Maternity/Paternity/Adoption Leave	3	2	3	3	4	4	5	5	5	5	5	4	24	47
3	Special Leave (Paid) – inc. compassionate leave, interview	1	1	1	1	1	1	2	2	2	2	2	1	8	16
4	Special Leave (Unpaid)	0		1	1	1	1	2	2	2	2	2	1	6	14
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	86	84	83	84	82	418	837
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	506	506	519	519	519	2,713	5,282
14	TOTAL AGENCY/LOCUM (PREMIUM) EXPENDITURE	1,248	1,241	1,347	1,494	1,693	1,845	2,282	2,206	2,175	2,173	2,178	2,145	11,150	22,027

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	124	84	83	84	84	304	765
4	Medical & Dental	181	1,034	703	85	104	(521)	194	79	63	62	63	63	1,781	2,110
5	Nursing & Midwifery Registered	108	259	217	355	208	210	288	422	657	653	654	606	1,644	4,637
6	Prof Scientific & Technical	12	2	8	1	27	28	1	1	1	1	1	1	78	81
7	Additional Clinical Services	176	108	175	132	135	129	206	224	594	608	617	553	1,061	3,655
8	Allied Health Professionals	35	28	58	61	42	39	22	44	145	145	144	124	285	886
9	Healthcare Scientists	0	2	4	6	15	12	12	13	13	13	13	13	51	114
10	Estates & Ancillary	0	81	78	78	122	94	84	99	344	493	486	474	537	2,434
11	Sub total Establishment & Bank Additional Hours	512	1,590	1,291	770	665	48	866	1,005	1,901	2,057	2,061	1,917	5,742	14,683
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	124	124	124	124	124	875	1,496
15	Nursing & Midwifery Registered	263	458	48	227	134	155	348	343	343	356	356	356	1,633	3,387
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	0	0	0	0	0	0	1	1
18	Allied Health Professionals	0	15	17	4	9	0	76	9	9	9	9	9	121	166
19	Healthcare Scientists	0	0	0	0	0	27	33	30	30	30	30	30	60	210
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	506	506	519	519	519	2,712	5,282
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	76	76
34	Nursing & Midwifery Registered	0	374	469	455	103	95	137	128	128	128	128	128	1,633	2,271
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	4	4	4	4	4	199	218
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	131	131	131	131	131	1,942	2,599
41	Other Temp Staff (Provide WTE to the right):														
42	Administrative, Clerical & Board Members	0	33	25	69	100	67	55	55	55	55	55	55	349	625
43	Medical & Dental	0	35	96	91	80	32	32	40	40	40	40	40	366	566
44	Nursing & Midwifery Registered	13	39	36	51	36	29	26	30	30	30	40	40	230	398
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	184	184	184	194	194	2,074	3,016
47	Allied Health Professionals	3	3	3	0	47	87	18	18	18	18	18	18	161	252
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	486	486	486	486	486	3,095	5,523
50	Sub total Other Temp Staff	539	690	1,403	1,073	1,027	851	693	813	813	813	833	833	6,276	10,380
51	Other (specify below and in narrative)														
52														0	0
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	2,455	3,351	3,520	3,545	3,400	16,672	32,943

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	Accomodation 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	535	420	293	267	256	1,554	3,324
60	Additional costs in Private Sector including via WHSSC	0	64	88	66	57	42	43	42	22	22	0	0	359	444
61	Additional costs in Temporary Hospital Capacity - Set Up Costs e.g. Field Hospitals	14	8	2,436	25	3,474	90	408	0	0	0	0	0	6,455	6,455
62	Catering Costs	19	27	2	99	(1)	35	(13)	(7)	27	24	20	12	169	244
63	CHC	122	147	245	249	155	242	1,653	2	602	0	0	600	2,813	4,017
64	Cleaning Costs	42	46	43	10	12	9	7	30	30	30	30	30	169	318
65	Costs as a result of lost income (inc SLA, services & private patients)	32	315	130	47	49	0	0	0	0	0	0	0	573	573
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	0	0	0	4,147	191	4,338
68	Discharge to assess	0	158	88	18	0	(88)	0	0	0	0	0	0	176	176
69	Discharge to recover	0	8	4	15	8	0	12	8	8	8	8	8	47	89
70	Drugs inc Medical Gases	104	15	39	128	51	257	160	401	412	369	286	159	754	2,379
71	Equipment Costs - beds	49	86	187	44	31	88	8	0	0	0	0	0	493	493
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	110	110	112	111	111	911	1,464
74	Estates\Security costs	490	293	280	208	166	147	106	79	86	86	86	84	1,690	2,111
75	External Project Management Costs	0	0	0	0	0	0	4	4	11	4	0	0	4	23
76	Insurance	0	0	0	0	0	1	1	1	1	1	1	1	2	7
77	IT Costs	42	22	11	44	11	61	28	28	28	28	28	28	219	361
78	Laundry Costs	6	79	35	44	3	24	2	3	12	11	10	9	193	240
79	Legal Fees	0	0	0	5	5	2	17	5	5	5	5	5	29	54
80	M&SE - consumables	182	336	270	246	418	510	285	282	305	303	294	283	2,248	3,714
81	Mortuary/Funeral Expenses	0	0	0	0	0	0	0	2	2	2	2	2	0	10
82	PPE	136	84	114	101	69	48	360	190	203	199	193	189	913	1,886
83	Rates	0	0	22	(15)	2	2	2	3	3	3	3	3	14	28
84	Rent	645	1,112	865	871	610	(3,237)	125	71	97	47	47	47	992	1,301
85	Reprovision of existing services to external facilities e.g. Haemophilia services	0	0	0	0	0	0	0	0	0	0	0	0	1	2
86	Telephony	0	0	0	0	0	10	6	3	3	10	10	10	15	51
87	Temporary LTA Arrangements	332	799	516	309	215	0	9	2	2	2	2	2	2,181	2,191
88	Training	0	4	19	3	0	0	2	105	22	22	22	22	28	219
89	Transportation	3	4	5	17	9	17	(0)	1	3	3	2	2	54	64
90	Utility Costs	120	15	42	39	26	104	21	27	42	42	39	33	366	550
91	Other costs (specify below and in narrative)	0	0	0	0	0	69	168	149	105	180	105	180	237	957
92	Consequential losses (Field Hospitals)				0	28	3,812	432	480	448	448	448	448	4,272	6,544
93	Primary Care Prescribing	0	456	0	859	388	492	403	357	381	379	363	403	2,598	4,482
94	MHLD Transformation (Month 6) Transformation Optimise Flow and Outcomes (Months 7-12)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
95	Local Authority spend	0	0	0	0	460	0	616	604	604	604	607	648	1,076	4,142
96	TOTAL ADDITIONAL NON PAY EXPENDITURE	2,728	4,304	5,952	3,849	6,716	3,230	5,445	3,517	3,993	3,236	2,988	7,722	32,224	53,680
97	TOTAL ADDITIONAL OPERATIONAL EXPENDITURE (Agrees to Table A)	4,190	7,486	9,374	6,541	8,974	4,548	7,784	5,972	7,344	6,757	6,532	11,123	48,896	86,624

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	Cararthenshire Field Hospitals	8	175	317	282	3,296	712	569	408	773	766	762	2,374	5,360	10,444
100	Pembrokeshire Field Hospital	663	880	2,685	687	913	358	476	460	906	891	868	3,006	6,661	12,792
101	Ceredigion Field Hospitals	5	38	526	54	90	67	240	29	29	29	29	263	1,019	1,400
102														0	0
103	GMS Extended Hours DES Cost			203										203	203
104														0	0
105														0	0
106														0	0
107														0	0
108	Flu immunisations							40	535	440	268	152	6	40	1,441
109	Test, Trace, Protect Costs	126	95	5	0	527	13	184	821	821	821	824	865	950	5,101
110	TOTAL MAJOR PROJECTS: ADDITIONAL CAPACITY EXPENDITURE	802	1,187	3,736	1,023	4,826	1,150	1,509	2,253	2,970	2,775	2,635	6,515	14,234	31,382

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	1,206	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	16,932	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	18,138	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
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
	Enter as Negative values														
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)	(202)	(200)	0	0	(146)	(4,801)	(5,349)
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)	(150)	(150)	(125)	(125)	(125)	(1,049)	(1,724)
119	Catering	(58)	(61)	(31)	(29)	(29)	(29)	(29)	(29)	(29)	(29)	(29)	(29)	(266)	(411)
120	Deployment of establishment staff to Field Hospitals							(211)	(879)	(875)	(868)	(733)		0	(3,566)
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)	(900)	(1,650)
123	Other Acute Services, CHC treatment, admission regimes/deaths and Secondary Care drugs	0	(500)	0	0	(1,100)	(300)	(300)	(150)	(133)	(100)	(100)	(133)	(2,200)	(2,816)
124	Unscheduled Care Various	(500)	(700)	(400)	(300)	(450)	(450)	(450)	0	0	0	0	0	(3,250)	(3,250)
125	TOTAL EXPENDITURE REDUCTION (Agrees to Table A)	(2,136)	(3,313)	(1,971)	(1,441)	(2,753)	(1,757)	(1,445)	(892)	(1,541)	(1,279)	(1,272)	(1,316)	(14,816)	(21,116)

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
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
	Enter as Negative values														
126	Slippage on Planned Investments/Repurposing of Developmental Initiatives (due to C19)														
127	NICE/HCD Reserve					(140)	140							0	0
128	Pay Reserves						(400)	(200)	(215)	(368)	(520)	(520)	(520)	(600)	(2,743)
129	Non-Pay Reserves							(463)	(463)	(463)	(463)	(463)	(463)	(463)	(2,777)
130	Commisioning Reserves							(21)	(21)	(21)	(21)	(21)	(21)	(21)	(123)
131	Other slippage on planned investments/repurposed funding						(2,456)	(200)						(2,656)	(2,656)
132	WHSSC slippage	(61)	(53)	(441)	(75)	(6)	(80)	69	(2)	(2)	(2)	(2)	(2)	(647)	(658)
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)	(700)	(853)	(1,005)	(1,006)	(1,006)	(4,606)	(9,177)

137	NET EXPENDITURE DUE TO Covid-19	4,608	6,666	9,717	7,590	8,528	2,667	7,837	6,971	7,537	6,995	6,777	11,213	47,612	87,106
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Table C - Identified Expenditure Savings Schemes (Excludes Income Generation & Accountancy Gains)

			1	2	3	4	5	6	7	8	9	10	11	12	Total YTD	Full-year forecast	YTD as %age of FY	Assessment		Full In-Year forecast		Full-Year Effect of Recurring Savings £'000	
			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			YTD variance as %age of YTD Budget/Plan	Green £'000	Amber £'000	on recurring £'000	recurring £'000		
1	CHC and Funded Nursing Care	Budget/Plan	425	25	25	25	25	25	58	58	58	58	58	58	605	895		895	0				
2		Actual/F'cast	0	43	24	(36)	0	20	18	111	112	112	112	112	69	625	11.02%	625	0	400	225	495	
3		Variance	(425)	18	(1)	(61)	(25)	(4)	(40)	53	54	54	54	54	(537)	(270)	(88.62%)	(270)	0				
4	Commissioned Services	Budget/Plan	1	1	1	1	1	1	34	34	34	34	34	34	40	212		210	2				
5		Actual/F'cast	0	0	0	0	0	1	(1)	33	33	33	33	33	0	167	0.00%	167	0	0	167	210	
6		Variance	(1)	(1)	(1)	(1)	(1)	(0)	(35)	(1)	(1)	(1)	(1)	(1)	(40)	(45)	(100.00%)	(43)	(2)				
7	Medicines Management (Primary & Secondary Care)	Budget/Plan	17	17	17	17	17	17	17	17	17	17	17	17	117	200		200	0				
8		Actual/F'cast	17	17	17	3	13	13	13	13	13	17	17	17	93	170	54.90%	170	0	0	170	200	
9		Variance	(0)	0	0	(13)	(3)	(3)	(3)	(3)	(3)	0	0	0	(23)	(30)	(20.00%)	(30)	0				
10	Non Pay	Budget/Plan	200	131	127	131	321	132	208	209	219	213	213	343	1,252	2,448		1,618	830				
11		Actual/F'cast	107	38	36	14	31	203	97	101	106	179	179	289	527	1,381	38.13%	1,123	259	912	469	947	
12		Variance	(92)	(93)	(91)	(118)	(290)	71	(111)	(108)	(113)	(34)	(34)	(54)	(725)	(1,067)	(57.92%)	(495)	(572)				
13	Pay	Budget/Plan	156	156	151	130	130	130	132	132	132	106	106	377	985	1,837		1,176	661				
14		Actual/F'cast	108	108	110	106	101	108	79	82	82	54	54	54	720	1,045	68.96%	1,045	0	813	232	294	
15		Variance	(48)	(48)	(40)	(25)	(28)	(22)	(53)	(50)	(50)	(52)	(52)	(323)	(264)	(792)	(26.84%)	(132)	(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	2,999	5,592		4,099	1,493				
20		Actual/F'cast	232	206	187	86	146	345	206	340	346	394	394	504	1,409	3,388	41.60%	3,130	259	2,125	1,263	2,146	
21		Variance	(566)	(124)	(133)	(218)	(348)	41	(242)	(110)	(114)	(34)	(34)	(324)	(1,589)	(2,204)	(53.00%)	(970)	(1,235)				
22			Variance in month	(70.94%)	(37.44%)	(41.54%)	(71.57%)	(70.48%)	13.40%	(53.99%)	(24.35%)	(24.69%)	(7.88%)	(7.88%)	(39.14%)	(53.00%)							
23			In month achievement against FY forecast	6.84%	6.09%	5.53%	2.55%	4.30%	10.19%	6.09%	10.04%	10.22%	11.63%	11.63%	14.88%								

Table D - Income/Expenditure Assumptions

Annual Forecast

	LHB/Trust	Contracted Income	Non Contracted Income	Total Income
		£'000	£'000	£'000
1	Swansea Bay University	4,474	(382)	4,092
2	Aneurin Bevan University	351	192	543
3	Betsi Cadwaladr University	4,518		4,518
4	Cardiff & Vale University	324	220	544
5	Cwm Taf Morgannwg University	432		432
6	Hywel Dda University	0		0
7	Powys	7,883	703	8,586
8	Public Health Wales	2,168		2,168
9	Velindre	3,264		3,264
10	NWSSP			0
11	NWIS			0
12	Wales Ambulance Services	117		117
13	WHSSC	1,629		1,629
14	EASC			0
15	HEIW	7,004		7,004
16	NHS Wales Executive			0
17	Total	32,164	733	32,897

Contracted Expenditur e	Non Contracted Expenditur e	Total Expenditure
£'000	£'000	£'000
35,861	706	36,567
264	202	466
276		276
5,740	640	6,380
465		465
0		0
188	223	411
2,454		2,454
15,059		15,059
		0
		0
4,573		4,573
77,678	(1,068)	76,610
24,341		24,341
3		3
		0
166,902	703	167,605

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:	48	3	5	5					
2	Total Confirmed Funding	788,810	21,133	17,956	72,271	900,170		884,852	25,178	25,178
2. ANTICIPATED ALLOCATIONS										
3	DEL Non Cash Depreciation - Baseline Surplus / Shortfall	146				146	NR			
4	DEL Non Cash Depreciation - Strategic	3,797				3,797	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	10,788				10,788	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	22				22	R	22		
18	A Healthier Wales - Rehab, Reablement and Recovery	25				25	R	25		
19	A Healthier Wales - AHP AAC	8				8	R	8		
20						0				
21						0				
22	GMS Global sum estimate				552	552	NR	552		
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						0				
31	COVID-19: TTP including IT, Antigen and Antibody (HB and LA)	2,994				2,994	NR	2,994		
32						0				
33	COVID-19: Field Hospitals set up costs	538				538	NR	538		
34	COVID-19: Field Hospitals decommissioning costs	4,338				4,338	NR	4,338		
35	COVID-19: Field Hospitals consequential losses	6,544				6,544	NR	6,544		
36	COVID-19: PPE	1,333				1,333	NR	1,333		
37	COVID-19: Flu Immunisations	1,442				1,442	NR	1,442		
38	COVID-19: Additional funding	47,900				47,900	NR	47,900		
39	RPB: Discharge to Recover and Assess (D2RA) pathways	1,290				1,290	NR	1,290		
40						0				
41						0				
42						0				
43						0				
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	84,331	0	0	552	84,883		69,826	0	0
3. TOTAL RESOURCES & BUDGET RECONCILIATION										
57	Confirmed Resources Per 1. above	788,810	21,133	17,956	72,271	900,170		884,852	25,178	25,178
58	Anticipated Resources Per 2. above	84,331	0	0	552	84,883		69,826	0	0
59	Total Resources	873,141	21,133	17,956	72,823	985,053		954,678	25,178	25,178

Table F - Statement of Financial Position For Monthly Period		Opening Balance Beginning of Apr 20	Closing Balance End of Oct 20	Closing Balance End of Mar 21
	Non-Current Assets	£'000	£'000	£'000
1	Property, plant and equipment	278,649	277,207	274,901
2	Intangible assets	1,461	1,195	1,195
3	Trade and other receivables	58,101	47,899	58,101
4	Other financial assets	0	0	0
5	Non-Current Assets sub total	338,211	326,301	334,197
	Current Assets			
6	Inventories	9,216	9,230	9,216
7	Trade and other receivables	68,507	62,449	68,507
8	Other financial assets	0	0	0
9	Cash and cash equivalents	1,654	2,698	(21,839)
10	Non-current assets classified as held for sale	832	392	0
11	Current Assets sub total	80,209	74,769	55,884
12	TOTAL ASSETS	418,420	401,070	390,081
	Current Liabilities			
13	Trade and other payables	119,136	113,340	112,297
14	Borrowings (Trust Only)	0	0	
15	Other financial liabilities	0	0	
16	Provisions	39,837	37,512	37,512
17	Current Liabilities sub total	158,973	150,852	149,809
18	NET ASSETS LESS CURRENT LIABILITIES	259,447	250,218	240,272
	Non-Current Liabilities			
19	Trade and other payables	0	0	
20	Borrowings (Trust Only)	0	0	
21	Other financial liabilities	0	0	
22	Provisions	58,365	40,637	40,637
23	Non-Current Liabilities sub total	58,365	40,637	40,637
24	TOTAL ASSETS EMPLOYED	201,082	209,581	199,635
	FINANCED BY:			
	Taxpayers' Equity			
25	General Fund	173,027	178,528	168,582
26	Revaluation Reserve	28,055	31,053	31,053
27	PDC (Trust only)	0		
28	Retained earnings (Trust Only)	0		
29	Other reserve	0		
30	Total Taxpayers' Equity	201,082	209,581	199,635

		Opening Balance Beginning of Apr 20	Closing Balance End of Oct 20	Closing Balance End of Mar 21
EXPLANATION OF ALL PROVISIONS				
31	Clinical negligence	92,541	70,842	70,842
32	Personal injury	3,203	4,953	4,953
33	Defence fees	1,673	1,567	1,567
34	Pensions	29	30	30
35	CHC	756	756	756
36				
37				
38				
39				
40	Total Provisions	98,202	78,148	78,148

ANALYSIS OF WELSH NHS RECEIVABLES (current month)		£'000
41	Welsh NHS Receivables Aged 0 - 10 weeks	1,266
42	Welsh NHS Receivables Aged 11 - 16 weeks	0
43	Welsh NHS Receivables Aged 17 weeks and over	0

ANALYSIS OF TRADE & OTHER PAYABLES (opening, current & closing)		£'000	£'000	£'000
44	Capital	8,355	5,185	5,611
45	Revenue	110,781	108,155	106,686

ANALYSIS OF CASH (opening, current & closing)		£'000	£'000	£'000
46	Capital	240	2,319	500
47	Revenue	1,414	379	(22,339)

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	74,500	93,000	71,828	954,678
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	650	650	650	650	650	7,224
4	WG Capital Funding - Cash Limit - LHB & SHA only	5,000	8,000	3,000	5,000	0	0	0	0	2,000	1,000	1,000	178	25,178
5	Income from other Welsh NHS Organisations	7,087	8,453	8,082	16,158	4,685	7,145	7,972	2,500	2,500	9,100	2,500	2,500	78,682
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	3,877	8,356	2,346	2,346	2,826	36,540
11	TOTAL RECEIPTS	98,451	95,889	96,464	101,262	75,454	91,523	97,707	77,527	102,506	87,596	99,496	77,982	1,101,857
	PAYMENTS													
12	Primary Care Services : General Medical Services	5,216	4,774	6,437	4,546	4,518	5,204	5,161	4,190	4,372	4,372	4,372	4,372	57,534
13	Primary Care Services : Pharmacy Services	1,535	1,403	1,486	2,065	0	877	1,952	0	500	472	500	500	11,290
14	Primary Care Services : Prescribed Drugs & Appliances	11,450	6,297	5,791	11,267	0	5,977	11,054	0	14,000	0	7,000	7,000	79,836
15	Primary Care Services : General Dental Services	1,078	1,056	1,103	1,110	1,387	1,331	1,427	1,184	1,400	1,400	1,400	1,400	15,276
16	Non Cash Limited Payments	84	34	74	(68)	19	3	(181)	(172)	(172)	(172)	(172)	(172)	(895)
17	Salaries and Wages	31,255	37,375	37,756	37,906	37,669	37,175	37,575	38,505	38,354	38,722	39,120	39,220	450,632
18	Non Pay Expenditure	34,176	34,925	41,584	35,603	28,379	35,542	32,633	30,546	35,616	40,171	46,658	48,800	444,633
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	2,529	2,000	1,000	1,000	178	25,629
22	Other items (Specify in narrative)	5,531	4,255	4,394	5,871	2,090	3,968	5,655	1,800	6,350	500	500	501	41,415
23	TOTAL PAYMENTS	97,160	94,338	99,487	99,806	75,266	92,738	96,911	78,582	102,420	86,465	100,378	101,799	1,125,350
24	Net cash inflow/outflow	1,291	1,551	(3,023)	1,456	188	(1,215)	796	(1,055)	86	1,131	(882)	(23,817)	
25	Balance b/f	1,654	2,945	4,496	1,473	2,929	3,117	1,902	2,698	1,643	1,729	2,860	1,978	
26	Balance c/f	2,945	4,496	1,473	2,929	3,117	1,902	2,698	1,643	1,729	2,860	1,978	(21,839)	

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%		-95.0%		-95.0%	99.2%	4.2%	95.0%	0.0%
2	% of NHS Invoices Paid Within 30 Days - By Number	95.0%	87.2%	-7.8%	92.7%	-2.3%		-95.0%		-95.0%	89.5%	-5.6%	92.0%	-3.0%
3	% of Non NHS Invoices Paid Within 30 Days - By Value	95.0%	97.1%	2.1%	95.5%	0.5%		-95.0%		-95.0%	96.4%	1.4%	95.0%	0.0%
4	% of Non NHS Invoices Paid Within 30 Days - By Number	95.0%	95.1%	0.1%	94.3%	-0.7%		-95.0%		-95.0%	94.7%	-0.3%	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%						69.9%		70.0%	
6	% of NHS Invoices Paid Within 10 Days - By Number		65.3%		47.4%						46.9%		50.0%	
7	% of Non NHS Invoices Paid Within 10 Days - By Value		36.9%		31.7%						34.6%		35.0%	
8	% of Non NHS Invoices Paid Within 10 Days - By Number		33.9%		36.4%						35.1%		35.0%	

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

£'000	25,178
Approved CRL / CEL issued at :	4/11/20

Ref:	Performance against CRL / CEL	Year To Date		
		Plan £'000	Actual £'000	Variance £'000
	<i>Gross expenditure (accrued, to include capitalised finance leases)</i>			
	All Wales Capital Programme:			
	Schemes:			
1	Womens and Childrens - Phase II - Glangwili Hospital - Main works	2,754	2,754	0
2	Imaging Equipment	392	392	0
3	WGH MRI Scheme	10	10	0
4	Slippage from 19/20 (Statutory Fire and Estate Allocation)	171	171	0
5	Covid 19 - Digital	743	743	0
6	Covid 19 - IT Other	446	446	0
7	Covid 19 - Estates	203	203	0
8	Covid 19 - Equipment - Field Hospitals	3,456	3,456	0
9	Covid 19 - Equipment - Acute Sites	5,558	5,558	0
10	COVID 19 - Other	139	139	0
11	Cross Hands	31	31	0
12	Bronglais MRI	0	0	0
13	Cardigan	0	0	0
14	Advanced Fire Compliance works - Withybush	14	14	0
15	COVID 19 - Digital Spend IT	0	0	0
16	ICF - MCP - South Pembs Hospital Health and Social Care Resource Centre, Sunderland Ward	66	66	0
17	Covid 19 - PHW Molecular Hot lab PPH	20	20	0
18				0
42	Sub Total	14,002	14,002	0

	Discretionary:			
43	I.T.	898	898	0
44	Equipment	590	590	0
45	Statutory Compliance	102	102	0
46	Estates	110	110	0
47	Other	49	49	0
48	Sub Total	1,748	1,748	0

	Other Schemes:			
49	Donated Assets	27	27	0
50	Disposal Cardigan Hospital			0
51				0
52				0
69	Sub Total	27	27	0

70	Total Expenditure	15,777	15,777	0
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	Less:			
	Capital grants:			
71				0
72				0
73				0
74				0
75				0
76	Sub Total	0	0	0

	Donations:			
77	Donated Assets	27	27	0
78	Sub Total	27	27	0

	Asset Disposals:			
79	Disposal - Cardigan Hospital	450	450	0
80				0
81				0
82				0
83				0
84				0
90	Sub Total	450	450	0

91	Technical Adjustments			0
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92	CHARGE AGAINST CRL / CEL	15,300	15,300	0
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93	PERFORMANCE AGAINST CRL / CEL (Under)/Over		(9,878)	
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Forecast		
Plan £'000	F'cast £'000	Variance £'000
6,488	6,686	198
0	407	407
1,440	1,500	60
315	315	0
743	743	0
238	1,214	976
0	203	203
3,720	3,753	33
3,626	16,611	12,985
139	235	96
0	31	31
0	44	44
0	223	223
350	350	0
192	192	0
202	202	0
0	40	40
		0
17,453	32,749	15,296

1,345	1,345	0
1,262	817	(445)
846	1,070	224
2,547	2,547	0
1,726	984	(742)
7,726	6,763	(963)

353	353	0
450	450	0
		0
		0
803	803	0

25,982	40,315	14,333
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		0
		0
		0
		0
		0
0	0	0

353	353	0
353	353	0

450	450	0
		0
		0
		0
		0
		0
450	450	0

		0
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25,179	39,512	14,333
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	14,334	
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Table J - In Year Capital Scheme Profiles

Ref:	All Wales Capital Programme: Schemes:	Project Manager	In Year Forecast		Capital Expenditure Monthly Profile												YTD	Total	Risk Level
					April	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar			
			Min. £'000	Max. £'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	
1	Womens and Childrens - Phase II - GGH - Main works	LH	6,686	6,686	229	207	310	314	444	478	771	704	710	710	710	1,098	2,754	6,686	Low
2	Imaging Equipment	AE	407	407	58	(7)	66	15	116	153	(10)	15	0	0	0	0	392	407	Low
3	WGH MRI Scheme	AE	1,500	1,500	0	0	0	0	0		10	190	300	300	350	350	10	1,500	Low
4	Slippage from 19/20 (Statutory Fire and Estate Allocation)	RE	315	315	12	17	5	0	0	15	122	59	42	43	0	0	171	315	Low
5	Covid 19 - Digital	AT	743	743	720	23			0		0						743	743	Low
6	Covid 19 - IT Other	AT	1,214	1,214				242	121	6	77	93	93	93	210	279	446	1,214	Low
7	Covid 19 - Estates	RE	203	203	29	62	37	59	9		7						203	203	Low
8	Covid 19 - Equipment - Field Hospitals	GR	3,753	3,753	2,474	593	379	519	27	122	(658)	297					3,456	3,753	Low
9	Covid 19 - Equipment - Acute Sites	GR	16,611	16,611		2,361			567	1,047	1,581	2,500	2,500	2,500	2,500	1,055	5,556	16,611	Low
10	COVID 19 - Other	GR	235	235					151		(12)	0	0	0	0	96	139	235	Low
11	Cross Hands	RD	31	31	7	24	(11)	0	0		11						31	31	Low
12	Bronglais MRI	AE	44	44	0	0	0	0			0					44	0	44	Low
13	Cardigan	PS	223	223	0	0	0	0			0					223	0	223	Low
14	WGH Advanced Fire Compliance work	RE	350	350					14		0	66	66	66	68	70	14	350	Low
15	COVID 19 IT Digital	AT	192	192								42	42	42	34	32	0	192	Low
16	ICF - MCP - South Pembs Hospital Health and Social Care Resource Centre, Sunderland Ward	RE	202	202						15	51	50	40	46	0	0	66	202	Low
17	PHW Molecular Hot lab PPH	AS	40	40						7	13	15	5	0	0	0	20	40	Low
18																	0	0	
19																	0	0	
20																	0	0	
21																	0	0	
22																	0	0	
23																	0	0	
24																	0	0	
25																	0	0	
26																	0	0	
27																	0	0	
28																	0	0	
29																	0	0	
30																	0	0	
31																	0	0	
32																	0	0	
33																	0	0	
34	Sub Total		32,749	32,749	3,530	3,281	786	1,150	1,449	1,843	1,963	4,031	3,798	3,800	3,872	3,247	14,002	32,750	
	Discretionary:																		
35	I.T.	AT	1,345	1,345	339	119	(155)	318	52	240	(18)	89	89	89	89	93	896	1,345	Low
36	Equipment	GR	817	1,262	78	45	12	5	9	442	0	45	45	45	45	47	590	817	Low
37	Statutory Compliance	RE	1,070	1,070	0	0	0	4	18	53	27	193	193	193	193	196	102	1,070	Low
38	Estates	RE	2,547	2,547	0	2	28	37	24	10	10	150	350	550	680	707	110	2,547	Low
39	Other	RE	984	1,502			6	15		17	11	187	188	188	188	184	49	984	Low
40	Sub Total		6,763	7,726	417	166	(109)	379	103	762	30	664	865	1,065	1,195	1,227	1,748	6,764	
	Other Schemes:																		
41	Donated Assets	RE	27	453				20			7			120		206	27	353	Low
42	Disposal Cardigan Hospital	RE	450	450												450	0	450	Low
43																	0	0	
44																	0	0	
45																	0	0	
46																	0	0	
47																	0	0	
48																	0	0	
49																	0	0	
50																	0	0	
51																	0	0	
52																	0	0	
53																	0	0	
54																	0	0	
55																	0	0	
56																	0	0	
57																	0	0	
58																	0	0	
59																	0	0	
60																	0	0	
61	Sub Total		477	903	0	0	0	20	0	0	7	0	0	120	0	656	27	803	
62	Total Capital Expenditure		39,989	41,378	3,947	3,447	677	1,549	1,553	2,605	2,000	4,695	4,663	4,985	5,067	5,130	15,776	40,316	

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 N - General Medical Services

Operating Expenditure - ring fenced GMS budget

SUMMARY OF GENERAL MEDICAL SERVICES FINANCIAL POSITION		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date
	LINE NO.	£000's	£000's	£000's	£000's	£000's
Global Sum	1					17,997
MPIG Correction Factor	2					203
Total Global Sum and MPIG	3	38,963	36,387	36,244	(143)	18,200
Quality Aspiration Payments	4					513
Quality Achievement Payments	5					0
Quality Assurance Improvement Framework (QAIF)	6					1,925
QAIF (In hours Access)	7					947
Total Quality	8	5,938	6,113	6,128	15	3,385
Direct Enhanced Services (To equal data in Section A (i) Line 32)	9		2,732	2,473	(259)	219
National Enhanced Services (To equal data in Section A (ii) Line 42)	10		1,727	302	(1,425)	52
Local Enhanced Services (To equal data in Section A (iii) Line 95)	11		2,192	3,506	1,314	2,176
Total Enhanced Services (To equal data in section A Line 96)	12	9,844	6,651	6,281	(370)	2,447
LHB Administered (To equal data in Section B Line 109)	13	2,040	6,660	7,925	1,265	4,173
Premises (To equal data in section C Line 138)	14	4,821	4,923	4,330	(593)	2,168
IM & T	15	231	30	4	(26)	2
Out of Hours (including OOHDF)	16	4,826	5,952	5,615	(337)	2,781
Dispensing (To equal data in Line 154)	17	5,608	5,661	5,260	(401)	2,749
Total	18	72,271	72,377	71,787	(590)	35,905
SUPPLEMENTARY INFORMATION						
Directed Enhanced Services Section A (i)	LINE NO.	£000's	£000's	£000's	£000's	£000's
Learning Disabilities	19		77	30	(47)	
Childhood Immunisation Scheme	20		605	497	(108)	208
Mental Health	21		37		(37)	
Influenza & Pneumococcal Immunisations Scheme	22		876	869	(7)	
Services for Violent Patients	23		16		(16)	
Minor Surgery Fees	24		349	171	(178)	
MENU of Agreed DES						
Asylum Seekers & Refugees	25		20	13	(7)	
Care of Diabetes	26			445	445	
Care Homes	27		679	410	(269)	
Extended Surgery Opening	28		73	38	(35)	11
Gender Identity	29				0	
Homeless	30				0	
Oral Anticoagulation with Warfarin	31				0	
TOTAL Directed Enhanced Services (must equal line 9)	32		2,732	2,473	(259)	219
National Enhanced Services A (ii)	LINE NO.	£000's	£000's	£000's	£000's	£000's
INR Monitoring	33		721	257	(464)	52
Shared care drug monitoring (Near Patient Testing)	34				0	
Drug Misuse	35		116	45	(71)	
IUCD	36		237		(237)	
Alcohol misuse	37				0	
Depression	38				0	
Minor injury services	39				0	
Diabetes	40		653		(653)	
Services to the homeless	41				0	
TOTAL National Enhanced Services (must equal line 10)	42		1,727	302	(1,425)	52

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		3	198	195	70
Immunisations (inc Pertussis excluding DES - Childhood Imm & Influenza & Pneumococcal Imm)		59		289	14	(275)	
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	5	1	
Multiple Sclerosis		66				0	
Muscular Skeletal		67				0	
Nursing Homes		68				0	
Orthopaedic (Upper Limb GPwSi/Clinical Assessments)		69				0	
Osteopathy		70		12	15	3	
Phlebotomy		71		137	91	(46)	67
Physiotherapy (inc MT3)		72				0	
Referral Management		73				0	
Respiratory (inc COPD)		74				0	
Ring Pessaries		75				0	
Sexual Health Services		76		9	115	106	
Shared Care		77		291	112	(179)	
Smoking Cessation		78				0	
Substance Misuse		79		12		(12)	
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	83	(29)	
COVID-19 ES		87		0	2,039	2,039	2,039
Shingles		88		33	25	(8)	
Treatment Room		89		1,017	534	(483)	
GMS Local Enhanced Services		90		35		(35)	
Specimen Transport		91			45	45	
Students		92		8		(8)	
Bank Holiday opening		93		230	230	0	
		94				0	
TOTAL Local Enhanced Services (must equal line 11)		95		2,192	3,506	1,314	2,176

TOTAL Enhanced Services (must equal line 12)	96		6,651	6,281	(370)	2,447
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GENERAL MEDICAL SERVICES
Operating Expenditure

		WG Allocation	Current Plan	Forecast Outturn	Variance	Year to Date
LHB Administered	Section B	LINE NO.	£000's	£000's	£000's	£000's
Seniority		97				515
Doctors Retainer Scheme Payments		98				18
Locum Allowances consists of adoptive, paternity & maternity		99				219
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				339
Supply of syringes & needles		107				5
Other (please provide detail below, this should reconcile to line 128)		108				3,077
TOTAL LHB Administered (must equal line 13)		109	2,040	6,660	7,925	(1,265)

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
						2,871
Additional Managed Practice costs (costs in excess of Global Sum/MPIG)	110					(9)
CRB checks	111					50
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					
Stationery & Distribution	117					8
Training	118					20
Translation fees	119					8
	120					
Management salary costs apportioned	121					129
	122					
	123					
	124					
	125					
	126					
	127					
TOTAL of Other Payments (must equal line 108)	128					3,077

Premises	Section C	LINE NO.	£000's	£000's	£000's	£000's	£000's
Notional Rents		129					751
Actual Rents: Health Centres		130					
Actual Rents: Others		131					980
Cost Rent		132					
Clinical Waste/ Trade Refuse		133					1
Rates, Water, sewerage etc		134					323
Health Centre Charges		135					
Improvement Grants		136					109
All other Premises (please detail below which should reconcile to line 146)		137					4
TOTAL Premises (must equal line 14)		138	4,821	4,923	4,330	593	2,168

Analysis of Other Premises (Line 137)	LINE NO.	£000's	£000's	£000's	£000's	£000's
Miscellaneous	139					4
	140					
	141					
	142					
	143					
	144					
	145					
TOTAL of Other Premises (must equal line 137)	146					4

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)						1,261
Dispensing Doctors	149					756
Prescribing Medical Practitioners - Personal Administration	150					16
Dispensing Service Quality Payment	151					
Professional Fees and on-cost						479
Dispensing Doctors	152					237
Prescribing Medical Practitioners - Personal Administration	153					
TOTAL DISPENSING DATA (must equal line 17)	154	5,608	5,661	5,260	401	2,749

Table O - General Dental Services

Operating Expenditure from the revenue allocation for the dental contract

SUMMARY OF DENTAL SERVICES FINANCIAL POSITION					Year to Date
	LINE NO.	WG Allocation £000's	Current Plan £000's	Forecast Outturn £000's	Variance £000's
Expenditure / activities included in a GDS contract and / or PDS agreement					
Gross Contract Value - Personal Dental Services	1		17,085	13,827	(3,258)
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
Domiciliary Services	6				0
Maternity/Sickness etc.	7		89	20	(69)
Sedation services including GA	8				0
Seniority payments	9		11	8	(3)
Employer's Superannuation	10		656	667	11
Oral surgery	11				0
OTHER (PLEASE DETAIL BELOW)	12		4,077	4,339	262
TOTAL DENTAL SERVICES EXPENDITURE	13	18,246	22,002	18,961	(3,041)
OTHER (PLEASE DETAIL BELOW) - Activities / expenditure not included in a GDS contract and / or	LINE NO.		£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				
Occupational Health / Hepatitis B	18				
Gwen Am Byth - Oral Health in care homes	19				
Refund of patient charges	20				
Design to Smile	21			375	
Other Community Dental Services inc WHC/2015/001	22			1,694	
Dental Foundation Training/Vocational Training	23			401	
DBS/CRB checks	24				
Health Board staff costs associated with the delivery / monitoring of the dental contract	25			175	
Oral Surgery	26			814	
Orthodontics	27				
Special care dentistry e.g. WHC/2015/002	28				
Oral Health Promotion/Education	29			50	
Other	30			34	
	31				
	32				
	33				
	34				
	35				
	36				
	37				
	38				
	39				
	40				
	41				
	42				
TOTAL OTHER (must equal line 12)	43			4,339	
RECEIPTS					
TOTAL DENTAL SERVICES INCOME (Enter as a negative value)	44		(3,545)	(504)	3,041