

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 30 March 2020
Title:	Financial Management Report for 11 months to 29 February 2020
Responsible Director:	Derek Lindsay, Director of Finance
Report Author:	Rob Whiteford, Assistant Director of Finance - Operational Services

1. Purpose

This is presented to the Board for:

- Discussion

This paper relates to:

- Annual Operational Plan

This aligns to the following NHS Scotland quality ambition(s):

- Effective

2. Report summary

2.1 Situation

The Annual Operating Plan financial outturn is £14.7 million deficit. At month 11 the year to date deficit is £12.6 million. This is an improvement on the position previously as received benefit from extra allocations for non-core DEL and capital to revenue transfers. The Board are asked to discuss the financial position.

2.2 Background

Month 11 showed an underspend of £0.8 million for the reasons outlined in section 2.1 above. The Board is therefore able to maintain a year end deficit forecast of £14.7 million, in line with the Annual Operating Plan.

2.3 Assessment

Appendix 4 shows that against a planned cash releasing efficiency savings target of £23.2 million there is projected to be a shortfall of £6.3 million, mainly in acute services. Demand pressures and delayed discharges from hospital have resulted in additional acute beds being opened which drives further acute division overspend. These pressures are increasing. In addition to a projected acute overspend of over £11 million, primary care prescribing volumes have increased by more than expected resulting in a projected £3.6 million overspend.

2.3.1 Quality/patient care

The financial overspend is due to protection of quality of patient care.

2.3.2 Workforce

Section five of the attached report comments on workforce numbers, agency spend, consultant vacancies and staff absence rate.

2.3.3 Financial

Delivery of cash releasing efficiency savings is a recurring shortfall which is planned to be non-recurrently covered in 2019/2020 by other funding sources.

2.3.4 Risk assessment/management

Section six in the paper attached sets out risk assessment and mitigations.

2.3.5 Equality and diversity, including health inequalities

An impact assessment has not been completed because this report is a monitoring report therefore does not require an equality and diversity impact assessment.

2.3.6 Other impacts

This report reflects the best value principles of governance and accountability in respect of use of resources.

2.3.7 Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage external stakeholders where appropriate:

2.3.8 Route to the meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Corporate Management Team, 17 March 2020.

2.4 Recommendation

Members are asked to discuss the attached report and take assurance from management actions so that the Board can take assurance from detailed scrutiny by Performance Governance Committee.

3. List of appendices (where required)

The following appendices are included with this report:

Appendix No 1, Income and expenditure summary for health services
Appendix No 2, Acute services
Appendix No 3, Allocations received
Appendix No 4, Cash releasing efficiency savings

1. Background

- 1.1 Scrutiny of all resource plans (revenue and capital) and the associated financial monitoring is considered by the Corporate Management Team, the Performance Governance Committee, and the Board. This report summarises the revenue position for the eleven months ended 29th February 2020.

2. Revenue resource limit and overall financial position

- 2.1 The revenue budget for the year is £900 million. This comprises £826 million of revenue allocations received (Appendix 3), £25 million of non-core allocations and £48 million of non-cash limited funding for Family Health Services.
- 2.2 Funding allocations in February (listed on Appendix 3) included £1.1 million for the third tranche of Primary Care Improvement funding, £0.2 million to achieve access targets and £0.15 million for supporting improvements to GP Premises. Anticipated allocations are £0.83 million.
- 2.3 The Board position is a cumulative overspend of £12.6 million. Month 11 saw an underspend of £0.8 million. Acute Services overspent by £0.6 million in February, and are now £10.8 million over for the year to date. Reserves in month 11 contributed a benefit of £0.5 million due to benefits from capital to revenue transfers and non-core DEL, whilst Other Clinical Services and Corporate Departments underspent by £0.9 million in aggregate. Primary Care Prescribing is £3.3 million overspent after 11 months, with the year-end forecast deteriorating by £0.3 million to £3.6 million in light of December information.
- 2.4 Whilst the month 11 position is a £12.6 million deficit, this includes underspends within Health and Social Care Partnerships which belong to Integrated Joint Boards. These underspends arise after the Health Board has funded prescribing overspends, which are £3.6 million in aggregate, as it is obliged to do.

3.1 Acute Services

- 3.1.1 The annual budget for Acute Services is £335.5 million. The directorate is overspent by £10.8 million for the year to date. (Appendix 2).

Table 1	Annual Budget	YTD Budget	YTD Actual	YTD Var
<i>Acute Services Division</i>	£000	£000	£000	£000
Pay	240,811	219,978	222,308	(2,330)
Non Pay	64,397	56,885	57,075	(190)
Other Operating Income	(894)	(818)	(1,081)	263
Unallocated Savings	(8,441)	(7,711)	0	(7,711)
Healthcare Provided to Others	(24,297)	(22,341)	(22,599)	258
Purchase Of Healthcare	63,885	58,318	59,457	(1,139)
	335,461	304,311	315,160	(10,849)

- 3.1.2 The in-month overspend was £0.6 million. The average monthly overspend in the first ten months was just over £1.0 million.

The year to date overspend is a result of:

- £8.4 million of unallocated annual savings which are £7.7 million overspent after 11 months;
- £3.3 million overspend on nursing pay (of which £0.6 million was in month 11);
- £0.2 million overspend on non-pay including drugs.
- £0.9 million overspend on external purchase and provision of healthcare.

The reduction against the average in month overspend was £0.4 million.

- £0.2 million reduction in forecast charges from the Golden Jubilee
- £0.3 million rebate for drugs used in the treatment of Hepatitis C

3.1.3 Unallocated Savings

The £8.4 million unallocated savings are £3.5 million brought forward from 2018/2019, £0.8 million of unachieved historic redesign savings plus additional savings targets in 2019/2020. This will cause an adverse variance of £0.7 million per month until savings are found.

3.1.4 Nursing Pay

The main components of the £3.3 million nursing pay overspend are £2.3 million in Crosshouse Medical Wards and £0.8 million in Ayr Medical Wards. At Crosshouse the most material overspent areas are Ward 5d (£0.517 million), Winter Pressures (£0.355 million) and the Combined Assessment Unit (£0.352 million). Ward 5b opened with 12 beds in December, then expanded to 24 beds in January, and has now spent £0.271 million. Crosshouse medical nursing pay overspent by £0.374 million in month 11 alone.

	Annual Budget	YTD Budget	YTD Actual	YTD Var
Crosshouse Medical Ward Nursing Pay	£000	£000	£000	£000
Chouse Ward 5d Ger Asst Nrs	1,417	1,301	1,817	(517)
Chouse Ward 5b Winter Nrs	0	0	271	(271)
Chouse Winter Pressures	62	78	433	(355)
Chouse Ward 3d Medicine Nrs	1,347	1,235	1,334	(99)
Chouse Ward 2f Medicine Nrs	1,314	1,206	1,275	(69)
Chouse Anps - Acute Med	60	55	136	(81)
Chouse Gen Mgr Medical	249	228	256	(27)
Chouse Ward 3f A/Med Nrs	1,516	1,391	1,448	(57)
Chouse Combined Asst Unit Nrs	5,112	4,690	5,043	(352)
Chouse Ward 3b Medicine Nrs	1,478	1,356	1,452	(96)
Chouse A + E Dept Nrs	2,579	2,366	2,459	(93)
Chouse Discharge Lounge Nrs	205	188	249	(62)
Chouse Ward 4e Medicine Nrs	1,384	1,270	1,412	(142)
Chouse Ward 4f Medicine Nrs	1,298	1,191	1,253	(62)
Other smaller variances	11,814	10,827	10,801	26
	29,834	27,381	29,639	(2,258)

At Ayr Station 1 is £0.6 million overspent on nursing, having received non-recurring budget of £0.3 million. Station 1 overspent by £0.1 million in Month 11. Station 16, Station 14 and the Discharge Lounge together account for a further £0.264 million of the year to date overspend.

- 3.1.5 The 2019/2020 budget anticipated that all acute hospital beds were funded. However it has been necessary to open additional beds in response to demand and the number of delayed discharges. In Ayr Station 1, 24 beds have been open for most of the financial year, due to delays in discharge of South Ayrshire residents. There were 46 additional beds open at Crosshouse on average during February.

3.1.6 **Acute Medical Agency**

Medical Agency usage has decreased compared with last year. After removing the effect of VAT charged up to the 7 October 2019 we are on track to achieve the target £1.0 million reduction.

3.1.7 **Purchase and Provision of Healthcare**

Externals are overspent by £1.1 million in the year to date. An increase in the number of paediatric bone marrow transplants, which are exclusions from the Glasgow service level agreements (which are paid on a cost per case basis), led to an overspend of £0.3m. The Golden Jubilee SLA for cardiology/cardiac surgery is the main driver for the remaining overspend.

3.2 **Health and Social Care Partnerships**

- 3.2.1 The total health budgets for the three Health and Social Care Partnerships are £420.0 million.
- 3.2.2 Combined partnership health budget overspends are £1.6 million including the prescribing overspend of £3.3 million referred to in section 2.3 above. The Health Board is responsible for funding prescribing.
- 3.2.3 On an managed budget basis North Partnership are £0.828 million underspent, East £1.170 million underspent and South £0.120 million overspent. South are overspent on Biggart Hospital and District Nursing. East are underspent on Mental Health Services, Ayrshire Unscheduled Care, Dental Services and Allied Health Professionals, whilst North are underspent on Specialist Mental Health Services.

3.3 **Other Clinical Services**

- 3.3.1 The total budget for Other Clinical services is £24.0 million and it is underspent by £0.9 million for the year to date. It underspent by £0.5 million in month 11. This area includes the budgets for the Pharmacy teams, the New Medicines Fund and activity such as brain injuries and trans catheter aortic valve implantation (TAVI) replacements. The year to date underspend is partly due to vacancies in the central pharmacy team. The New Medicines Fund underspent by £0.25 million in the month which returns it to a break even position for the year to date. The balance of the in month underspend is made up of refunds on Neurosurgery (coil embolization) through SLAs.

3.4 Clinical and Non-Clinical Support Services

- 3.4.1 Support service departments have annual budgets totalling £118.0 million, with a £1.5 million underspend for the year to date. An average monthly underspend of c£0.1 million had been a consistent trend since April. However in February the Nursing Directorate underspent by £0.23 million with a further £0.1 million underspend in Corporate Support Services. The underspend in the Nursing Directorate follows a review of budgets which are unlikely to be spent in this financial year.

3.5 Corporate Resource and Reserves

- 3.5.1 Reserves are £2.5 million overspent for the eleven months to February. This is a result of the underlying deficit being held centrally and offset by one off benefits. There was a £0.5 million benefit from reserves in month 11.

4. Efficiency and Transformation Programme

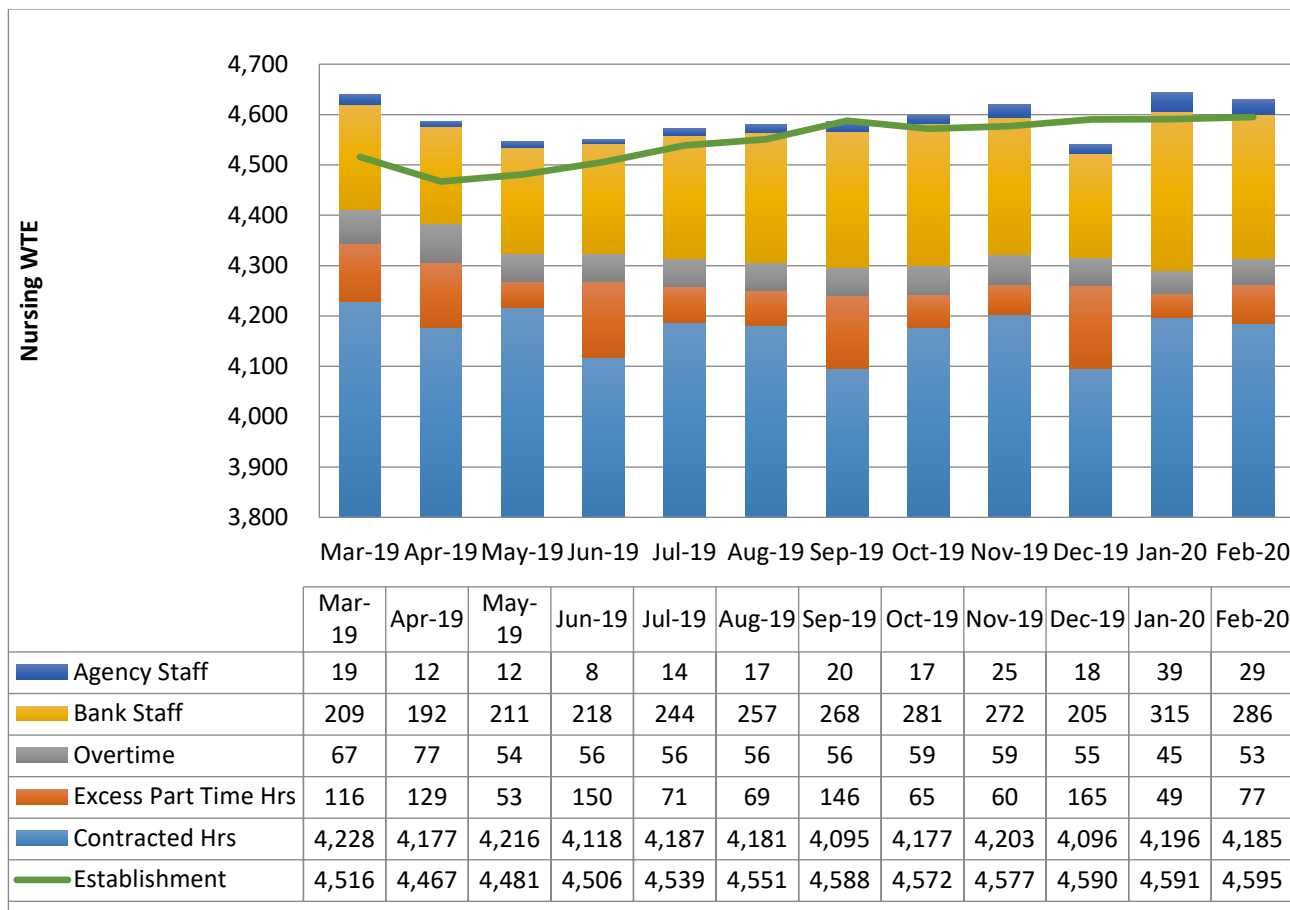
- 4.1 The target for cash releasing savings in the 2019/2020 revenue plan is £23.2 million. We have achieved £13.7 million (66%) by the end of month 11. Appendix 4 forecasts achievement of £16.8 million. Ensuring delivery of the remaining target is key to achieving our financial targets in 2019/2020.
- 4.2 The main schemes which are behind plan are Acute Operational CRES, adhering to the Nursing Budget and Intermediate Care and Rehabilitation. An evaluation of Intermediate Care and Rehabilitation indicates that it has prevented some emergency admissions however no cash releasing savings have been achieved as no hospital beds have closed due to high numbers of delayed transfer of care.

5. Workforce

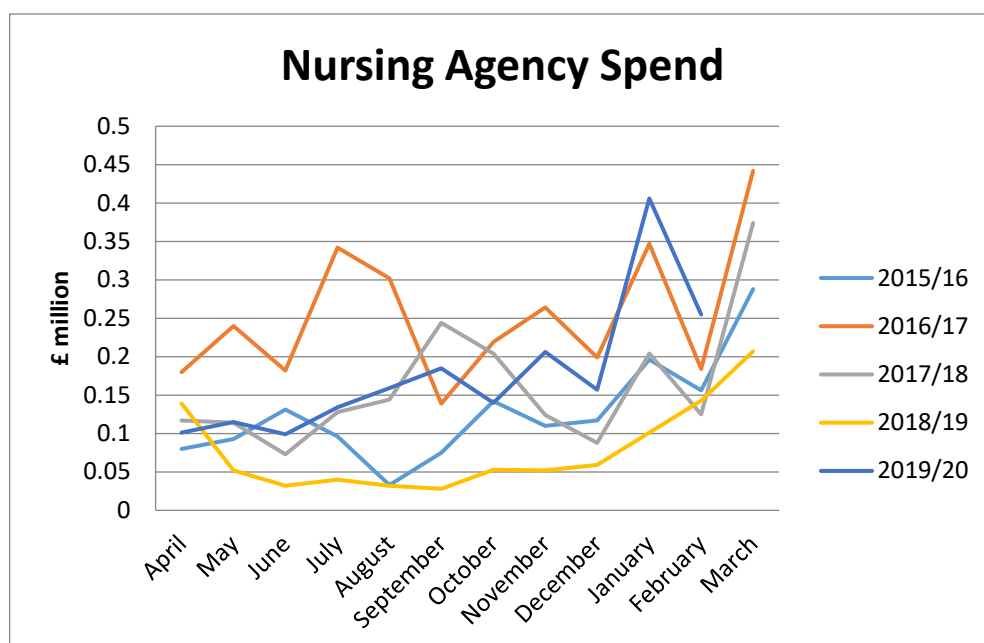
- 5.1 Against a funded establishment for the whole organisation of 9,616 whole time equivalent staff, hours worked in February 2020 amounted to 9,513.
- 5.2 The table below shows the WTE staff used in each month from April to February 2020. The average is then compared with the average from April to February 2019. This shows no change in overall WTE numbers although there has been a change towards contracted hours from bank.

	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Apr - Feb 18/19 average	Apr - Feb 19/20 average
	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Contracted Hours	8,795	8,849	8,747	8,808	8,853	8,765	8,812	8,834	8,727	8,806	8,823	8,802	8,872
Excess Part Time Hour	349	216	332	258	272	336	254	250	349	238	261	283	281
Overtime	122	85	91	94	90	92	93	96	91	77	84	92	88
Bank Staff	192	211	218	244	257	268	281	272	205	315	286	250	191
Agency Staff	51	59	47	67	54	52	55	72	48	73	59	58	53
Total WTE	9,509	9,420	9,435	9,471	9,526	9,513	9,495	9,524	9,420	9,509	9,513	9,485	9,485

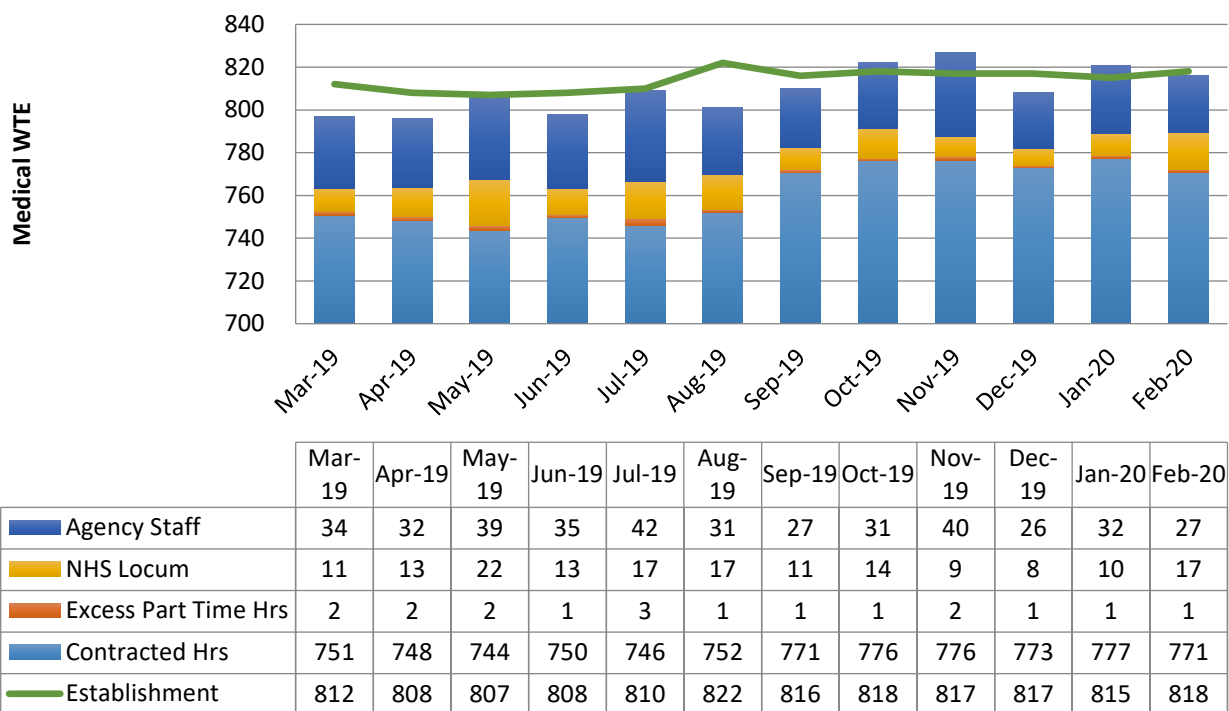
- 5.3 The graph below shows the trend for nursing staff. We were 35 above establishment in month 11.



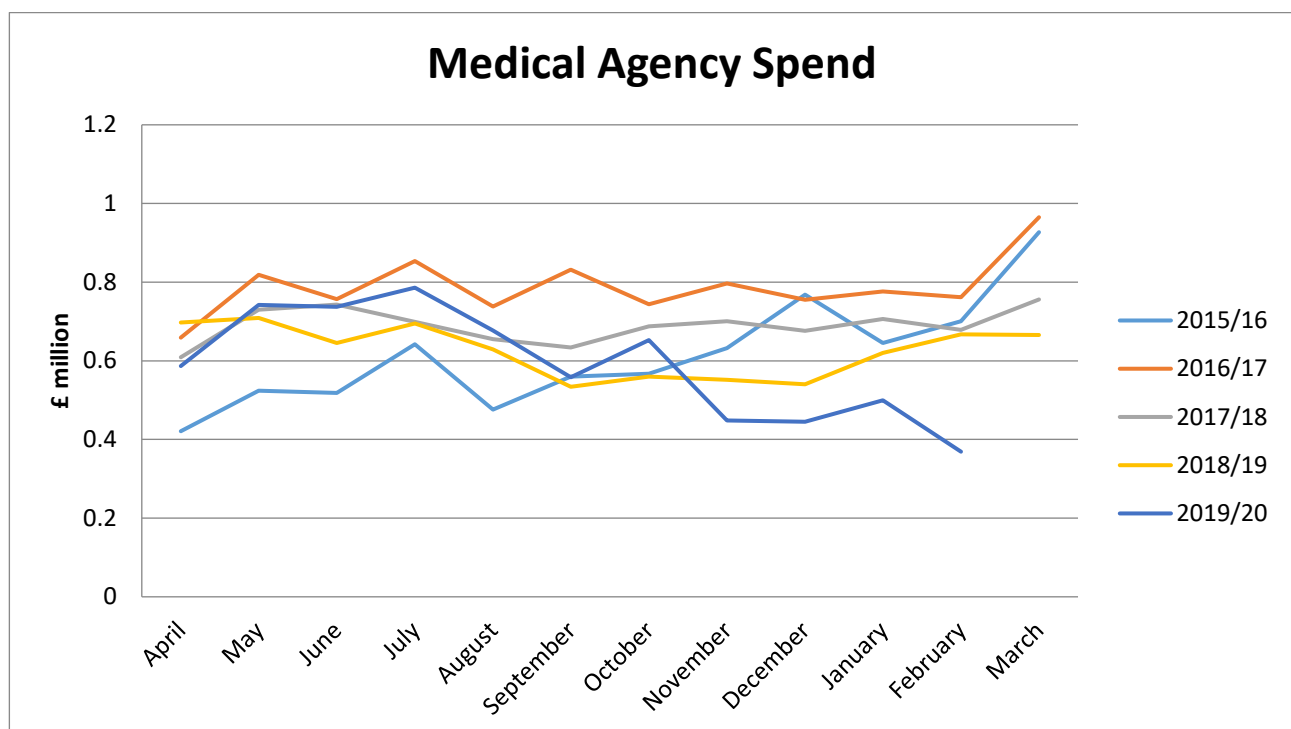
- 5.4 The year to date nursing agency spend of just over £1.95 million well above 2018/2019 levels. We spent £0.255 million in February which was £0.145 million less than in January. Nevertheless the trend has been increasing since June and agency spend is being incurred to meet demand pressures.



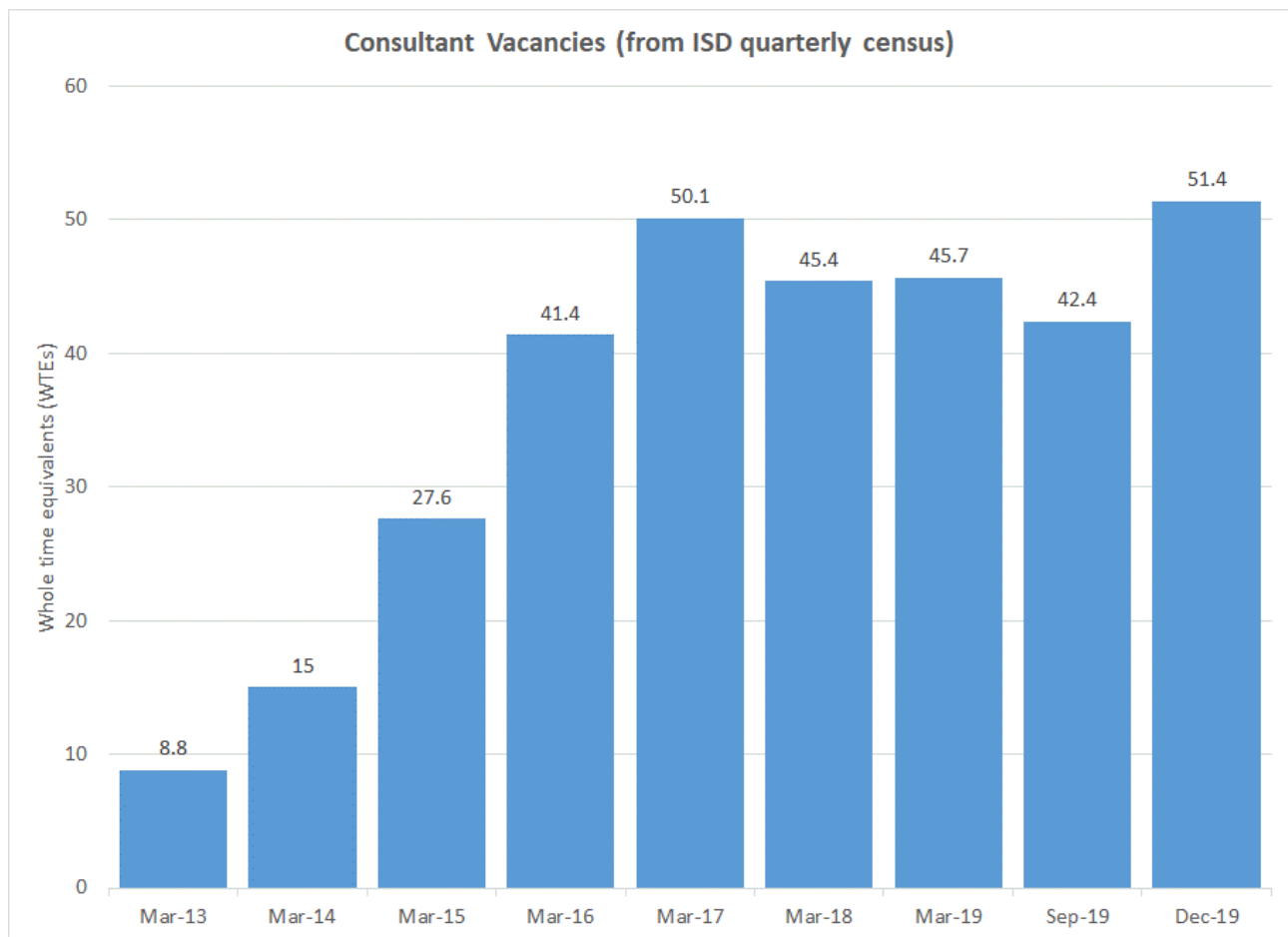
- 5.5 We used 816 WTE medical staff, including locums and agency, which is 2 below the establishment.



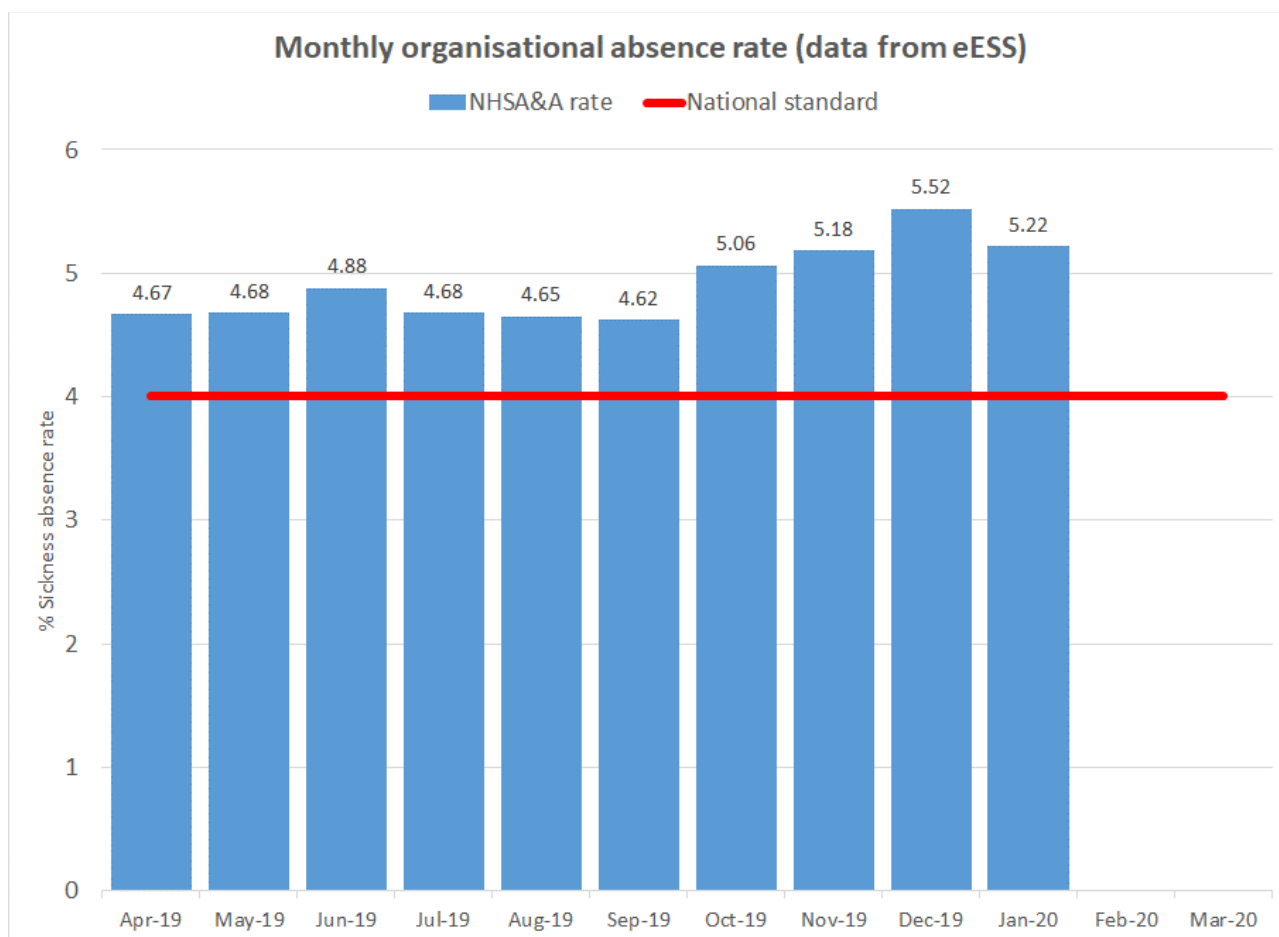
- 5.6 The graph below shows the trend in medical agency spend, which was £0.369 million in February. The spend up to and including the 7 October 2019 includes VAT which was not reclaimable. Subsequent agency spend is VAT recoverable and partially explains the reductions since September. The Board is on track to achieve the £1.0 million target reduction in the plan.



- 5.7 All NHS Boards formally report consultant vacancies. Consultant vacancies are a main driver for medical agency expenditure. The chart below illustrates the trend of consultant vacancies within NHS Ayrshire & Arran over the last seven years.



- 5.8 Staff sickness absence from work has organisational impact beyond the individual staff member, affecting other staff, service delivery, productivity and cost, where backfill arrangements have to be put in place.
- 5.9 Driven by the Board's People Strategy, the Health, Safety & Wellbeing Improvement Plan identifies the programme of work being undertaken to improve staff health and wellbeing and, through the Promoting Attendance Policy, to have a clear process for appropriately managing staff sickness absence.
- 5.10 A national standard for sickness absence of 4% exists across NHS Scotland. The graph below shows our performance against this target.



6. Risk assessment and mitigation

- 6.1 The Strategic Risk Register has set out a risk for financial performance as very high. The Board has taken a number of steps to mitigate this position.
- 6.2 A new cost pressure emerged following the rise in delayed discharges. In August 2019 we had 61% higher occupied bed days by delayed discharge patients than in August 2018. This equated in August 2019 to 178 hospital beds being occupied by people who did not need hospital care. This resulted in not living within nursing budget as additional beds require to be staffed. This pressure was evident at both main hospitals and continued during the whole of the second and third quarters. It remains a pressure with Station 1 open at Ayr and 46 additional beds open at Crosshouse.
- 6.3 The Chief Executive previously agreed to fund 34 care home places at a cost of £0.4 million to improve patient flow and unblock delayed discharges at Ayr and Biggart Hospitals. This funding is non-recurrent and on a specific patient basis. This funding has been used to place patients in Care Homes who were previously in Ayr and Biggart Hospitals. An additional £0.3 million was also allocated to allow Biggart to have an additional 12 beds open until the 31st March 2020.
- 6.4 Based on the first nine months of Primary Care prescribing data there is a risk of an annual overspend of £3.6 million. Volume growth has averaged 3.77% whilst 0.8% was provided for in budgets. A driver of this is the use of oral anticoagulants in place of Warfarin, causing £0.7 million of the projected overspend. Another driver is Freestyle Libre for type 1 diabetes patients, for which a new budget of £0.25 million was created in 2019/20, however spend is projected to be £0.6 million.

7. Conclusion

- 7.1 The revenue plan approved by the Board was a deficit of £14.75 million.
- 7.2 After eleven months the Board is £12.6 million overspent. The £12.6 million includes partnership underspends which do not belong to the Health Board (see section 2.4).
- 7.3 Additional beds resulting from operational pressure and delayed discharges, combined with high primary care prescribing costs and shortfall in CRES are the main reasons for the overspend being higher than expected. This has been offset in part by non-recurring benefits.
- 7.4 The projection based on Month 11 figures shows a deficit of £14.74 million, in line with plan.
- 7.5 The Board has a reasonable prospect of achieving the required £14.75 million deficit outturn.

Appendix 1

	Salaries				Supplies				Total				FOT M11
	Year to Date				Year to Date				Year to Date				
	Annual Budget £000	Budget £000	Expenditure £000	Variance £000	Annual Budget £000	Budget £000	Expenditure £000	Variance £000	Annual Budget £000	Budget £000	Expenditure £000	Variance £000	Variance £000
Acute	£240,811	£219,978	£222,308	(£2,330)	£94,651	£84,333	£92,852	(£8,520)	£335,461	£304,311	£315,160	(£10,849)	(£11,065)
East Hscp	£44,901	£39,877	£40,815	(£938)	£137,721	£122,250	£121,302	£949	£182,622	£162,127	£162,116	£10	(£1,160)
North Hscp	£71,472	£65,650	£64,382	£1,268	£78,140	£71,377	£73,070	(£1,693)	£149,612	£137,026	£137,451	(£425)	(£1,767)
South Hscp	£25,538	£23,425	£23,794	(£369)	£61,831	£56,215	£57,051	(£837)	£87,368	£79,640	£80,846	(£1,206)	(£1,136)
Other Clinical Services	£9,334	£8,506	£7,690	£816	£14,711	£13,505	£13,443	£62	£24,045	£22,010	£21,133	£877	£900
Hospital Community and Family Health Services (section 1)	£392,055	£357,435	£358,988	(£1,553)	£387,053	£347,679	£357,718	(£10,039)	£779,108	£705,114	£716,707	(£11,593)	(£14,228)
Chief Executive	£1,125	£1,030	£994	£36	£79	£72	£56	£16	£1,204	£1,101	£1,050	£51	£51
Director Public Health	£5,060	£4,640	£4,343	£297	£767	£673	£624	£48	£5,828	£5,312	£4,967	£345	£345
Medical Director	£3,823	£3,571	£3,359	£212	(£2,792)	(£2,814)	(£2,749)	(£64)	£1,032	£757	£610	£147	£147
Nursing Director	£4,878	£4,433	£4,064	£369	£135	£114	£115	(£2)	£5,013	£4,546	£4,179	£367	£367
Corporate Support Services	£37,385	£34,140	£34,014	£125	£55,938	£49,832	£49,925	(£94)	£93,323	£83,971	£83,940	£32	£0
Finance	£4,187	£3,838	£3,622	£216	(£680)	(£627)	(£532)	(£94)	£3,507	£3,211	£3,089	£122	£138
ORG and HR Development	£4,547	£4,151	£4,026	£125	£265	£244	£256	(£12)	£4,812	£4,396	£4,282	£113	£144
West Of Scotland Region Ce	£0	£0	£368	(£368)	£1,766	£389	£21	£368	£1,766	£389	£389	£0	£0
Transformation+sustainability	£1,394	£1,276	£984	£292	£111	£53	£43	£10	£1,505	£1,328	£1,026	£302	£300
Clinical and Non Clinical Support Services (Section 2)	£62,399	£57,078	£55,773	£1,305	£55,591	£47,935	£47,760	£176	£117,990	£105,013	£103,533	£1,480	£1,492
Corporate Income (non RRL)	£459	£459	£459	£0	£3,442	£1,091	£1,353	(£263)	£3,901	£1,550	£1,813	(£263)	(£300)
Corporate Reserves	£769	£769	£0	£769	(£1,695)	(£3,025)	£0	(£3,025)	(£926)	(£2,256)	£0	(£2,256)	(£1,704)
Corporate Resource and Reserves	£1,228	£1,228	£459	£769	£1,747	(£1,934)	£1,353	(£3,287)	£2,975	(£705)	£1,813	(£2,518)	(£2,004)
NHS A&A Total	£455,683	£415,741	£415,221	£521	£444,391	£393,680	£406,831	(£13,151)	£900,074	£809,422	£822,052	(£12,630)	(£14,740)

Acute M11

	Salaries				Supplies				Total			
	Annual Budget £000	Budget £000	Year to Date Expenditure £000	Variance £000	Annual Budget £000	Budget £000	Year to Date Expenditure £000	Variance £000	Annual Budget £000	Budget £000	Year to Date Expenditure £000	Variance £000
Surgical - Ayr	£34,570	£31,719	£31,181	£538	£11,640	£10,650	£10,930	(£281)	£46,210	£42,369	£42,111	£258
Medical - Ayr	£29,677	£27,214	£28,316	(£1,102)	£2,311	£2,064	£2,908	(£844)	£31,988	£29,278	£31,224	(£1,946)
Surgical - Chouse	£46,629	£42,770	£43,228	(£458)	£8,359	£6,062	£6,719	(£657)	£54,989	£48,832	£49,947	(£1,115)
Medical - Chouse	£49,064	£45,014	£48,057	(£3,042)	£10,767	£9,899	£11,193	(£1,294)	£59,831	£54,914	£59,250	(£4,337)
Women + Childrens	£33,431	£30,628	£30,508	£120	£2,426	£2,131	£2,741	(£609)	£35,856	£32,759	£33,248	(£490)
Diagnostic Svs	£27,898	£25,572	£24,375	£1,197	£5,819	£5,175	£6,586	(£1,411)	£33,717	£30,747	£30,962	(£214)
Other	£12,815	£10,893	£10,553	£340	£53,207	£48,239	£51,646	(£3,407)	£66,022	£59,132	£62,200	(£3,068)
Acute Medical Records	£6,727	£6,168	£6,090	£78	£122	£112	£128	(£16)	£6,849	£6,281	£6,218	£62
Acute	£240,811	£219,978	£222,308	(£2,330)	£94,651	£84,333	£92,852	(£8,520)	£335,461	£304,311	£315,160	(£10,849)

Appendix 3

Description	Baseline recurring £	Earmarked recurring £	Non-recurring £	Total £
Initial baseline including uplift	719,959,000			719,959,000
Adjustment for 2018-2019 recurring allocations	2,167,948			2,167,948
SLA Children's Hospices Across Scotland (Year 3 / 5)			(443,595)	(443,595)
S28 Carers (Scotland) Act 2016 - tests of change/evaluation			75,972	75,972
Elective activity as per AOPs			4,153,340	4,153,340
To implement recommendations in Best Start			387,116	387,116
6EA -Unscheduled Care			550,000	550,000
Open University Nursing Students Q3 & 4			75,000	75,000
Implementation of type 2 diabetes prevention			289,000	289,000
Outcomes Framework 2019-20		3,869,280		3,869,280
Employer Pension Contributions	17,680,000			17,680,000
General Dental Services element of the Public Dental Service		1,950,000		1,950,000
Implementation - Child Weight Management Services Standards			83,000	83,000
FASD Project			192,084	192,084
Family Nurse Partnership programme			770,759	770,759
Breastfeeding PfG year 2 project funding			194,500	194,500
Transforming NHS Services			1,050,000	1,050,000
Excellence in Care			70,000	70,000
Embedding advice services in health settings			62,500	62,500
Cancer and diagnostics activity in 2019/20			394,000	394,000
Mental Health Strategy Action 15 Workforce - First Tranche		639,798		639,798
£20m (2018-19) tariff reduction to global sum		(1,391,389)		(1,391,389)
£20m (2019-20) tariff reduction to global sum		(1,550,290)		(1,550,290)
Disestablishment of 4 year GPST programmes			475,566	475,566
Additional funding for elective activity as per AOPs			60,000	60,000
eHealth Strategic Fund			1,401,988	1,401,988
Integrated Primary and Community Care			591,200	591,200
Employer Pension Contributions - second instalment	427,000			427,000
Alcohol & Drug Partnership - Local Improvement Fund		1,108,932		1,108,932
Woodhill Unitary Charge		4,271,861		4,271,861
Draw down of 2018/19 carry forward			494,000	494,000
NDC Top slice			(966,687)	(966,687)
Primary Care Improvement Fund 2019-20 Tranche 1		2,026,931		2,026,931
Draw down of 2018/19 carry forward			1,032,500	1,032,500
GP Out of Hours (OOH) Fund			369,663	369,663
Contribution to Pharmacy Global Sum			(203,200)	(203,200)
CSO - support for research infrastructure			661,000	661,000
Elective activity as per AOPs			600,000	600,000
Flow Variability Programme			70,000	70,000
Combat Stress Specialist Mental Health Services			1,424,090	1,424,090
Veterans First Point Service			103,923	103,923
Supporting improvements in primary care digital			249,605	249,605
Salary cost for JC - Sept - March			52,800	52,800
Primary Medical Services - provision and support		60,196,490		60,196,490
Supporting improvements to GP premises			221,798	221,798
TEC funding to support local scale up			58,000	58,000
Supporting better value healthcare in Boards			77,864	77,864
Paid as if at work			600,000	600,000
National Cancer Strategy			110,321	110,321
Shingles, Rotavirus, Seasonal Flu			1,043,923	1,043,923
Open University Nursing Students 1st & 2nd Quarter			110,000	110,000
Pre-Registration Pharmacist Scheme		(170,740)		(170,740)
Positron Emission Tomography (PET) Scans - Winter funding			(587,547)	(587,547)
AOP funding for elective activity			709,728	709,728
Voluntary Redundancy Funding			676,680	676,680
Cancer and diagnostics activity in 2019/20			1,200,000	1,200,000
Additional funding for Elective activity			133,020	133,020
Non-core expenditure - Depreciation			119,500	119,500
NSD Topslice			(13,880,000)	(13,880,000)
NSD Topslice - Pay & Pensions	(591,405)		(3,370,219)	(3,370,219)
Transforming NHS Services			(591,405)	(591,405)
Golden Jubilee Foundation top slice 2019-20 Boards			450,000	450,000
SLA's			(1,292,151)	(1,292,151)
Mental Health Outcomes Framework		1,492,428		1,492,428
Microsoft National Licensing			(145,484)	(145,484)
New Medicines Fund		5,845,849		5,845,849
Primary Care Improvement Fund 2019-20 Tranche 2		646,126		646,126
Additional funding for elective activity			300,000	300,000
Mental Health Strategy Action 15 Workforce - Second Tranche		442,202		442,202
Infrastructure Support			4,315,000	4,315,000
ScotSTAR 2019/20			(359,832)	(359,832)
Community Audiology			51,000	51,000
Additional Elective Activity			686,880	686,880
Distinction Awards for NHS Consultants		188,751		188,751
Additional Funding to Support Elective Activity			200,000	200,000
Supporting improvements to GP premises			147,865	147,865
Primary Care Improvement Fund Tranche 3		1,098,044		1,098,044
Other Smaller Allocations	(32,302)	(4,379)	267,365	230,684
Total	739,610,241	80,659,894	6,163,835	826,433,970

Plan v Forecast		£000	£000	£000	£000
Plan Area	Plan	Forecast M11	Variance	YTD Savings	
Acute Operational	4,500	482	(4,018)	426	
Reduce Medical Agency	1,000	1,136	136	949	
External SLAs	2,000	2,000	0	1,833	
Corporate Support Services	1,360	1,360	0	1,235	
Intermediate care and rehab	1,000	-	(1,000)	-	
Close Unfunded Beds	1,300	1,300	0	1,192	
Corporate Dept CRES	880	820	(60)	751	
Outpatient Paperlite	100	100	0	87	
Cardiac ward reconfiguration	450	412	(38)	375	
Energy	100	100	0	92	
Estate Rationalisation	200	200	0	183	
Adherence to Nursing Budget	2,300	736	(1,564)	624	
Stop Nurse pool	200	200	0	200	
Redeployment Pool	400	690	290	621	
Primary Care Prescribing	2,773	2,674	(99)	2,483	
Acute Prescribing	3,000	3,034	34	2,773	
Mental Health Legacy CRES	1,600	1,600	0	1,438	
Total	23,163	16,844	(6,319)	15,261	