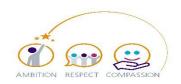
Paper ref: TB (10/22) 015







REPORT TITLE:	Month 5 Finance Report										
SPONSORING EXECUTIVE:	Dinah McLannahan – Chief Finance C	inah McLannahan – Chief Finance Officer									
REPORT AUTHOR:	Simon Sheppard – Director of Operat	mon Sheppard – Director of Operational Finance									
	Paul Stanaway - Associate Director of	f Finance									
	Craig Higgins – Associate Director of	Finance									
MEETING:	Public Trust Board	ublic Trust Board DATE: 5 October 2022									

1. Suggested discussion points [two or three issues you consider the Trust Board should focus on in discussion]

The Trust is measuring financial performance against the internal plan of a £17.2m deficit. The Integrated Care System (ICS) plan is breakeven.

At the end of August, the Trust reported a £8.7m adverse variance to the Trust plan (£14.3m deficit against a deficit plan of £5.5m). The key drivers for the year-to-date variance are described in the paper but continue to centre on, planned income for insourcing and outsourcing not being received; excess capacity – circa 50 beds (average) above the plan; drugs, including high cost drugs, with some being "pass through" – constrained by the block agreement.

The key focus for the Trust Board, considering the current financial position is to seek assurance on the financial recovery plan, in terms of actions, milestones and value.

The capital plan (exclusive of Midland Metropolitan University Hospital (MMUH) is £6.67m behind plan year to date. The Trust Board is asked to note that the Capital Management Group has received assurance following a re-forecast of the plan that the year end programme will be delivered in full.

2.	Alignment to our Vision supports]	[ina	licate with an 'X' which Strate	gic	Objective[s] this paper	
	OUR PATIENTS		OUR PEOPLE		OUR POPULATION	
	be good or outstanding	х	To cultivate and sustain		To work seamlessly with	
ir	n everything that we do	^	happy, productive and		our partners to improve	
			engaged staff		lives	

3. Previous consideration [at which meeting[s] has this paper/matter been previously discussed?]

Finance, Investment & Performance Committee 30 September 2022

4. | Recommendation(s)

The Public Trust Board is asked to:

- a. NOTE Month 5 report and the key drivers for the year to date performance
- **b. NOTE** the year end forecast and the financial recovery plan actions

5. Impact [indicate with an 'X' which g shown, elaborate in the paper]	1 1												
Board Assurance Framework Risk 01		Deliver safe, hig	h-q	uali	ty co	ire.							
Board Assurance Framework Risk 02	Х	Make best strate	egi	c us	e of	its r	esources						
Board Assurance Framework Risk 03	Х	Deliver the MMU	JН	ben	efits	cas	se						
Board Assurance Framework Risk 04	Х	Recruit, retain, t effective workfo		•	nd d	eve	lop an engaged and						
Board Assurance Framework Risk 05		Deliver on its am	nbit	ion	s as i	an i	ntegrated care orgo	nisation					
Corporate Risk Register [Safeguard Risk Nos]													
Equality Impact Assessment	Is	this required?	Υ		N	Х	If 'Y' date completed						
Quality Impact Assessment	ls	this required?	Υ		N	Х	If 'Y' date completed						

SANDWELL AND WEST BIRMINGHAM NHS TRUST

Report to the Public Trust Board on 5 October 2022

Month 5 Finance Report

1. INTRODUCTION

1.1 The Board held in early July confirmed that reporting will focus on delivery of the Internal deficit plan of £17.124m. This report will look at Month 5 (M5) performance against this plan.

2. MONTH 5

- The Trust reported a deficit of £14.287m, £8.748m adverse to plan at the end of August 2022. This is a significant adverse variance, and delivery of the plan is at significant risk.
- 2.2 Current drivers of the adverse variance remain in line with last month's report i.e.:
 - The non-recurrent issue with Scottish Power, this has now reduced to £0.58m as a consequence of Procurement negotiating a reduction of £0.5m.
 - The unfunded use of insourcing/outsourcing in Surgical Services (£1.83m). The use of TOUK for Orthopaedics has ended in September. The use of BEST in Ophthalmology will continue for the financial year due to the significant risks within that service currently. The Trust continues to seek financial support for this work from the ICB.
 - Additional capacity, in Medicine, in terms of staffing additional beds (£2.6m). In August a significant number of unfunded beds remained open, circa 50 throughout the month.
 - Medicine continues to have expenditure on unfunded schemes Same Day Emergency Care £0.39m, Additional Medical Cover £0.15m, Emergency Department Nursing £0.1m above the reserve available, Use of HIT Team £0.217m, (block booking of Agency Health Care Assistants)
 - Drugs previously treated as pass-through and now part of the block £0.87m adverse to budget
 - Use of Modality to support Production Plan delivery £1.0m
 - These pressures have plans to address as part of the recovery plan, and in varying stages of assurance.
 - Partially offsetting these pressures are vacancies and other savings across the Trust.
 The rest of the paper will detail some of the key issues, and the actions outlined to mitigate the risks to the position.
- 2.3 Elective Recovery Funding (ERF) performance at M5 was £54.408m against a plan of £63.256m, these numbers drive a potential net clawback of £5m year to date net of advice and guidance work. Any clawback of ERFis not assumed within the Month 5 numbers. This is in line with national guidance that confirms no clawback of income in the first 6 months of 2022/23. H2 clawback remains uncertain, and it is important both clinically and financially that plans are delivered. The Associate COO is leading this piece of work.

- 2.4 System Development Funding (SDF) (£7m): SDF is assumed in the position year to date. The risk around this is the ICB currently do not recognise our assumptions and may well expect additional spend against the income. The Trust plan assumes nothing above the current expenditure plan.
- 2.5 In terms of income, most Groups have adverse variances to their current income plans impact on total income is negligible given the block arrangements, but highlights that the Trust continues to do less work overall and at higher cost than pre-pandemic.
- The Trust Cost Improvement Plan (CIP) submitted within the break-even plan is £25.723m, year-to-date £10.303m. Actual delivery stands at £3.459m, an adverse variance of £6.844m. This is driven by the stretch CIP plan required to move the Trust to breakeven. The adverse variance, excluding the stretch is £0.57m. The forecast currently stands at £8.789m. c£9m of CIP delivery represents 1.3% of expenditure budgets for 2223. This is too low to protect against deficits or a worsening underlying financial position.
- 2.7 The Trust has agreed with the Integrated Care Board that from Month 6 it will include non-recurrent flexibility within its CIP delivery. It is important to note though that this will not improve the Trusts position against the Internal plan of £17.124m. £7.5m of flexibility was required to hit the Trust plan, and if agreed, the additional £7.5m within the recovery plan is required to return to plan.
- 2.8 In terms of energy costs, the announcement by the Government around support for businesses is being worked through, and on current forecast usage would significantly improve the Trust's forecast outturn. The Board will be verbally updated on the position on the 5 October.

3. CAPITAL AND CASH

- 3.1 The forecast Capital Plan reflects the previously agreed, overcommitted forecast which is c£5m more than available System funds. The Trust Board is asked to note that the Capital Management Group has received assurance following a re-forecast of the plan that the year end programme will be delivered in full despite the year to date underspend.
- 3.2 The Capital summary now reflects the new contract sums for MMUH completion, of which £92m is available in 22/23, with a further £12m due in future years. There will be monthly progress meetings with New Hospitals Programme to manage the Balfour Beatty contract and changes to contingency and compensation events.
- 3.3 Cash is ahead of plan for August with reimbursement for the cash expended on MMUH funded from Public Dividend Capital now received. The Trust will need to manage cash through flexibility in working balances, as dictated by I&E performance whilst maintaining payment performance (BPPC). Work continues to deliver the 2% spend commitment with local suppliers in line with Anchor Institution commitments and is reported through Audit and Risk Management Committee.

4. FORECAST

- 4.1 The Trust Board is asked to note that the Executive Team have agreed the core elements of a financial recovery plan to ensure the £17.1m deficit plan is delivered in 2022/23. This recovery plan is a mixture of securing additional income, managing our cost base and ensuring our capacity, particularly beds, is used to the optimal level. Each specific action has an Executive lead.
- 4.2 The financial recovery plan is being tracked by fortnightly meetings with operational colleagues, an additional monthly run rate review meeting by group, and bi-monthly group reviews. Each group has its own specific share of the trust wide recovery actions. The key actions are summarised in Annex 9.
- 4.3 Month 6 reporting (period to 30 September 2022) will include a detailed report to the Trust Board on the financial recovery plan which will include:
 - Progress against the recovery plan actions including delivery against the milestones and monthly profiles
 - An assessment of the risk within the forecast this will take the form of a base case position, and upside and downside scenarios.
- 4.4 The Trust Board is also asked to note all partners within the Integrated Care System have been asked to produce a year end forecast to allow the system to understand any risks to delivery of the breakeven financial plan in 2022/23

5. Recommendations

The Trust Board is asked to:

- a) **NOTE** Month 5 report and the key drivers for the year-to-date performance
- b) **NOTE** the year end forecast and the financial recovery plan actions

Simon Sheppard - Director of Operational Finance Paul Stanaway - Associate Director of Finance Craig Higgins - Associate Director of Finance 20th September 2022

ANNEXES

Annex 1: Key Headlines

Annex 2: Summary Income and Expenditure Position

Annex 3: Better Value, Quality Care

Annex 4: Capital Annex 5: SOFP Annex 6: SOCF

Annex 7: Aged Receivables, Aged Debt, BPPC

Annex 8: Risk Matrix

Annex 9: Financial Recovery Plan

Annex 1 – Key Headlines

				and the second	100000		
		Plan	Actual	Variance	Plan	Actual	Variance
		£ms	£ms	£ms	£ms	£ms	£ms
				-			
áí	I&E Performance	(0.81)	(3.97)	(3.16)	(5.54)	(14.29)	(8.75)
200	NHSI Agency Ceiling	1.08	1.59	(0.51)	6.04	6.92	(0.88)
EVA	Efficiency Programme (CIP)	0.88	0.64	(0.23)	4.03	3.46	(0.57)
**		- No.					
A .	Capital Expenditure (Excl MMUH)	2.16	0.90	1.26	10.75	4.08	6.67
A	Capital Expenditure (MMUH)	16.51	9.38	7.13	53.26	48.13	5.13
	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1					
£ .	Cash Balance	32.19	64.58	32.39	32.19	64.58	32.39
6							

In Month

In Month

YTD

YTD

YTD

In Month

Annex 2: Summary Income and Expenditure Position

		Sum of		Sum of						
		WTE	Sum of MPE	Annual	Sum of CP	Sum of CP	Sum of CP	Sum of YTD	Sum of YTD	Sum of YTD
		Budget	Worked	Budget	Budget	Actual	Variance	Budget	Actual	Variance
■ Income from Activities	Other Income	0.00	0.00	1,348,296	112,358	0	112,358	561,790	0	561,790
	Other Non Protected Income	0.00	0.00	-1,294,080	-107,840	-211,083	103,243	-539,200	-575,182	35,982
	Private Patients Income	0.00	0.00	-2,588,153	-196,036	-126,918	-69,118	-1,078,390	-959,219	-119,171
	Service Level Agreements	0.00	0.00	-585,465,972	-48,808,880	-48,437,402	-371,478	-243,868,641	-242,677,436	-1,191,205
Income from Activities Total		0.00	0.00	-587,999,909	-49,000,398	-48,775,402	-224,996	-244,924,441	-244,211,837	-712,604
■Other Income	Education and Training	0.00	0.00	-19,830,376	-1,623,517	-1,650,790	27,273	-8,269,718	-8,619,385	349,667
	Other Income	0.00	0.00	-23,581,583	-1,977,613	-1,630,245	-347,368	-9,818,109	-9,711,496	-106,613
	Research and Development	0.00	0.00	-1,393,277	-116,107	-126,721	10,614	-580,535	-529,090	-51,445
Other Income Total		0.00	0.00	-44,805,236	-3,717,237	-3,407,756	-309,481	-18,668,362	-18,859,972	191,610
■ Pay Expenditure	Administration and Estates	1,142.21	1,124.70	50,101,338	4,196,944	3,246,522	950,422	20,876,989	16,734,416	4,142,573
	Healthcare Assistants and Support Staf	1,446.82	1,595.93	44,177,731	3,756,073	4,470,218	-714,145	18,317,763	21,162,363	-2,844,600
	Management	263.74	239.23	18,034,317	1,525,859	1,440,312	85,547	7,514,341	7,169,417	344,924
	Medical Staffing	1,022.24	1,063.10	113,837,676	9,399,717	10,527,079	-1,127,362	47,423,564	50,559,282	-3,135,718
	Other Pay	-59.77	0.00	5,696,053	12,674	20,094	-7,420	2,150,196	100,470	2,049,726
	Qualified Nursing and Midwifery	2,612.37	2,590.44	132,259,608	11,034,839	11,720,738	-685,899	54,717,286	57,662,051	-2,944,765
	Scientific, Therapeutic and Technical	1,105.24	1,000.18	48,907,858	3,987,462	4,013,882	-26,420	20,126,421	19,777,571	348,850
Pay Expenditure Total		7,532.85	7,613.58	413,014,581	33,913,568	35,438,845	-1,525,277	171,126,560	173,165,570	-2,039,010
■ Non Pay Expenditure	Drugs and Blood Products	0.00	0.00	39,677,232	3,221,176	3,605,432	-384,256	16,532,155	18,171,562	-1,639,407
	Energy and Utilities	0.00	0.00	24,984,618	1,885,532	1,515,181	370,351	9,894,994	10,269,342	-374,348
	Hotel Service Costs	0.00	0.00	5,851,004	487,614	499,883	-12,269	2,438,060	2,428,873	9,187
	IT Equipment and Consumables	0.00	0.00	8,607,776	717,614	710,749	6,865	3,588,075	3,435,951	152,124
	Medical Equipment and Consumables	0.00	0.00	35,752,448	3,080,600	4,932,414	-1,851,814	14,798,994	14,931,333	-132,339
	Other Costs	0.00	0.00	87,007,079	7,300,010	6,372,113	927,897	36,155,988	39,982,932	-3,826,944
	Postage, Printing and Stationery	0.00	0.00	3,879,047	323,262	471,392	-148,130	1,616,305	1,870,489	-254,184
	Recharges	0.00	0.00	-604	-49	0	-49	-243	0	-243
Non Pay Expenditure Total		0.00	0.00	205,758,600	17,015,759	18,107,163	-1,091,404	85,024,328	91,090,481	-6,066,153
■ Non Operational Costs	Depreciation	0.00	0.00	23,567,000	1,963,917	1,944,747	19,170	9,819,585	9,723,735	95,850
	Interest Payable	0.00	0.00	2,259,000	188,250	208,701	-20,451	941,250	1,041,867	-100,617
	Interest Receivable	0.00	0.00	0	0	-61,111	61,111	0	-245,720	245,720
	PDC Dividend	0.00	0.00	5,330,000	444,167	516,667	-72,500	2,220,835	2,583,333	-362,498
Non Operational Costs Total		0.00	0.00	31,156,000	2,596,334	2,609,004	-12,670	12,981,670	13,103,216	-121,546
		7,532.85	7,613.58	17,124,036	808,026	3,971,854	-3,163,828	5,539,755	14,287,458	-8,747,703

Annex 3: Better Value, Quality Care

	Y	EAR TO DAT	Έ		FORECAST	
					ACTUAL	YTD
SCHEME NAME	PLAN YTD	ACTUAL	VARIANCE	PLAN	YTD	VARIANCE
	£000's	£000's	£000's	£000's	£000's	£000's
Agency Reduction - 2 consultant and other hours (Respiratory	83	85	3	198	204	6
Black Country Pathology Service Collaboration Savings	172	108	(64)	412	258	(154)
Bulikmed Contractual Savings	5	0	(5)	13	0	(13)
CMU contract	73	0	(73)	176	0	(176)
ED Nursing Staff Model	54	0	(54)	129	0	(129)
Enhanced Bank Rates	3,034	2,929	(105)	7,282	6,730	(552)
Haematology Consultant Savings	54	55	1	130	132	2
Other Savings	(316)	0	316	(22)	0	22
Patient Access schemes	70	0	(70)	167	0	(167)
Pharmacy - ST&T Agency Reduction	10	10	(0)	25	24	(1)
Procurement	703	250	(453)	1,782	600	(1,181)
PTNS Service Development	70	0	(70)	167	0	(167)
Radiography Recruitment	0	0	0	137	0	(137)
Renegotiate Link rental agreement (non-clinical areas)	0	22	22	0	53	53
SLA Review	17	0	(17)	40	0	(40)
New Bank Rates	0	0	0	0	788	788
TOTAL CIP	4,028	3,459	(569)	10,635	8,789	(1,846)

Annex 4: Capital

IRMINGHAM HOSPIT	TALS NHS TRUST					
Expenditure: FY 202	2/23 to P05					
Annual		Year to Date		Y	ear End Forecast	
Original Plan	Plan	Actual	Variance	NHSI Plan	Forecast	Variance
£000s	£000s	£000s	£000s	£000s	£000s	£000s
3,810	1,580	1,131	449	3,810	3,810	0
6,015	3,499	1,083	2,416	6,015	8,465	-2,450
4,215	1,844	916	928	4,215	4,466	-251
4,965	3,140	238	2,902	4,965	7,540	-2,575
90	35	0	35	90	90	0
19,095	10,098	3,368	6,730	19,095	24,371	-5,276
585	585	585	0	585	585	0
5,456	5,456	5,456	0	5,456	5,456	0
92,132	47,183	42,057	5,126	92,132	92,132	0
35	35	35	0	35	35	0
98,208	53,259	48,133	5,126	98,208	98,208	0
117,303	63,357	51,501	11,856	117,303	122,579	-5,276
1,570	653	714	-61	1,570	1,570	0
118,873	64,010	52,215	11,795	118,873	124,149	-5,276
	Annual Original Plan £000s 3,810 6,015 4,215 4,965 90 19,095 585 5,456 92,132 35 98,208 117,303	Original Plan £000s Plan £000s 3,810 1,580 6,015 3,499 4,215 1,844 4,965 3,140 90 35 19,095 10,098 585 5,856 5,456 92,132 47,183 35 35 98,208 53,259 117,303 63,357 1,570 653	Annual	Annual Original Plan	Annual Original Plan	Annual Original Plan

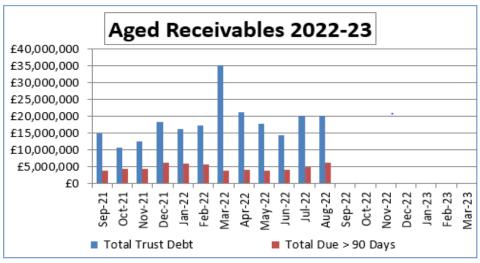
Sandwell & West Birmingham Hospitals NHS Trust STATEMENT OF FINANCIAL POSITION 2022/23

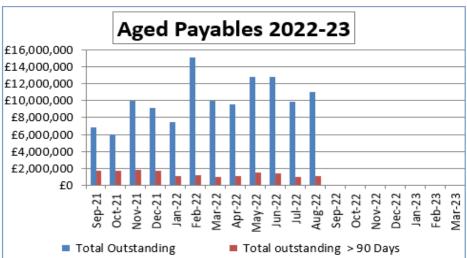
	Balance as at 31st March 2022	Balance as at 31st August 2022	NHSI Planned Balance as at 31st August 2022	Variance to plan as at 31st August 2022	NHSI Plan as at 31st March 2023	Forecast 31st March 2023
	£000	£000	£000	£000	£000	£000
Non Current Assets	040 700	000 470	001 511	(000 005)	770 105	770 405
Property, Plant and Equipment	646,763	689,176	891,541	(202,365)	773,405	
Intangible Assets	183	163	162	(F)	131	1/23/01
Investment Assets	0	0	0		0	
Trade and Other Receivables	100	100	100	0	100	100
Current Assets						
Inventories	3,585	3,585	3,437	148	3,585	3,585
Trade and Other Receivables	44.141	30.267	37.852		22.852	100000000000000000000000000000000000000
Cash and Cash Equivalents	55,013	64,580	32,189		41,503	
Current Liabilities						
Trade and Other Payables	(85,865)	(106,369)	(99,786)	(6,583)	(91,881)	(91,881)
Provisions	(3,580)	(3,522)	(950)	(2,572)	(2,950)	(2,950)
Borrowings	(2,587)	(17,290)	(2,408)	(14,882)	(17,511)	(17,511)
DH Loan	0	0	0	0	0	0
Non Current Liabilities						
Provisions	(3,391)	(3,391)	(3,529)	138	(3,529)	(3,529)
Borrowings	(39,145)	(23,364)	(23,769)	405	(23,769)	(23,769)
DH Loan	Ó	O	Ó	О	O	O
	615,217	633,935	834,839	(200,904)	701,936	701,936
Financed By						
Taxpayers Equity						
Public Dividend Capital	664.941	698.042	664,151	33.891	757.659	757,659
Retained Earnings reserve	(73,442)	(87,713)	152,969		(73,442)	
Revaluation Reserve	14.660	14,548	8,661	5,887	8,661	
Other Reserves	9,058	9,058	9,058		9,058	
	615,217	633.935	834.839	(200,904)	701.936	701.936

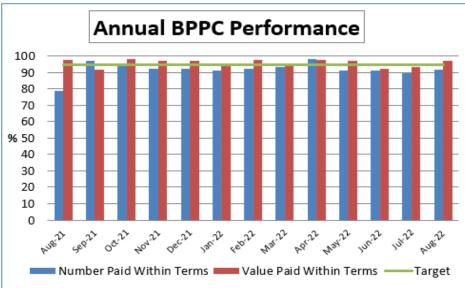
Sandwell & West Birmingham Hospitals NHS Trust CASH FLOW 2022/23

	April	May	June	July	August	September	October	November	December	January	February	March
ACTUAL/FORECAST	Actual	Actual	Actual	Actual	Actual	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast
	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
Receipts												
SLAs: NHS Black Country ICB	51,872	33,575	33,333	26,942	25,453	33,200	33,200	33,200	33,200	33,200	33,200	33,200
Associates	7,592	7,705	7,973	17,823	17,991	7,800	7,800	7,800	7,800	7,800	7,800	7,800
Other NHS	695	103	80	363	262	907	701	709	707	701	701	721
Specialised Services	4,804	5,073	4,517	4,278	5,658	4,740	4,740	4,740	4,740	4,740	4,740	4,740
STF Funding	0	0	0	0	0	0	0	0	0	0	0	0
Over Performance	0	0	0	0	0	0	0	0	0	0	0	0
Education & Training - HEE	0	3,699	5,304	0	0	0	0	0	4.400	0	0	4,400
Public Dividend Capital	0	0	0	17,532	15,568	0	0	0	0	0	0	0
Loans	0	0	0	0	0	0	0	0	0	0	0	0
Other Receipts	4,325	1,847	4,350	1,886	8,870	2,075	2,075	2,075	2,075	2,075	2,075	2,075
·												· 1
TotalReceipts	69,288	52,002	55,557	68,824	73,803	48,722	48,516	48,524	52,922	48,516	48,516	52,936
Payments Payments												
Payroll	18,811	18,076	17,693	18,523	18,099	19,300	18,480	18,066	19,300	17,660	18,480	17,092
Tax. NI and Pensions	904	14,155	13,926	14,122	13,793	,	12,700	12,700	12,700	12,700	12,700	12,700
Non Pay - Trade	14,971	16,283	17,874	18,623	20,559	, , , , , , , , , , , , , , , , , , , ,	17,000	16,741	16,624	17,000	17,930	16,549
Non Pay - Capital	5,367	692	686	981	1,000	,	2,550	2,550	2,550	2,550	2,550	2,550
MMH Balfour Beatty	11,456	12,225	10.836	7,473	7,812	,	2,000	2,000	2,000	2,000	2,000	2,000
PDC Dividend	0	0	0	0	0		0	0	0	0	0	1,360
Repayment of Loans & Interest	0	0	0	0	0	,	0	0	0	0	0	0
BTC Unitary Charge	440	440	440	440	440	-	440	440	440	440	440	440
NHS Litigation Authority	1,615	1.615	1,615	1,615	1,615		1,325	1,325	1,325	1,325	0	0
Other Payments	884	747	768	1,385	908	,	139	189	299	179	239	179
				,								
TotalPayments	54,448	64,234	63,839	63,161	64,225	58,732	52,634	52,011	53,238	51,854	52,339	50,870
Cash Brought Forward	54,975	69,815	57,582	49,301	54,964	,	54,532	50,414	46,928	46,612	43,273	39,450
Net Receipts/(Payments)	14,840	(12,232)	(8,281)	5,663	9,577	(10,009)	(4,118)	(3,487)	(316)	(3,338)	(3,823)	2,066
Cash Carried Forward	69,815	57,582	49,301	54,964	64,542	54,532	50,414	46,928	46,612	43,273	39,450	41,517

Annex 7: Aged Receivables, Aged Payables, Better Payment Policy Compliance (BPPC)







Analysis

- The overall Debt owed to the Trust has remained largely static. The over 90 days
 debt increased, despite Frimley Hospitals NHS Trust settling their debt, due to aging
 debts owed by Royal Wolverhampton NHS Trust (No dispute advised) and NHS
 England. Other, large over 90 days debt comprises Birmingham CC (bed days) and
 NHS Property (for which the debt is provided in full)
- The overall value of Payables remained steady compared with the past 12 months'
 average. The value of over 90 days has increased slightly as the Trust continues to
 query charges from Scottish Power (Procurement disputing out of contract rates),
 Community Health Partnerships and Castle Water. We continue to work with
 receipting departments for resolution of old queries; having cleared over half the
 outstanding debt on the accounts of University of Birmingham (for which Education
 and Training are chasing student forms) and Community Health Partnerships.
- BPPC has recovered in value following a reduction in July 22 where it dipped below target as older invoices were paid in month, the Trust expects this to recover in future months and targets and improvement in the volume of invoices paid withing 30 days

Annex 8: Risk Matrix

Financial Risks as at August 2022 for Delivery of the 2022/23 Financial I&E Plan

Ref	Risk#	Identified Risk	Likelihood	Severity	Trend	A STATE OF THE REAL PROPERTY.	Risk Rating M10	Risk Rating M8	Risk Rating M7	Risk Rating M6	Risk Rating M5	Rating	Risk Rating M3		Risk Rating M1	Impact	Mitigating Actions	Exec Lead
1	4994	Taper funding from NHSEI is not secured in line with the Plan	1	5	No Change						5	5	5	5	5	Financial		CFO
2	4572	Delivery of the 2022/23 Cost Improvement Programme	4	5	No Change						20	20	20	20	20	Financial	Fortnightly efficiency board chaired by CFO Additional resource in post to lead the programme	CFO
3	4995	Energy prices increase above the funded level	4	5	1						20	25	20	15	15	Financial	Forward purchase on energy	DST
4	4996	Increased sickness levels resulting in greater use of agency and bank staff	4	5	No Change						20	20		20	20	Financial Quality Workforce Operational	Trust wellbeing offering to staff as exit covid Post covid People and OD restoration of sickness management in full.	СРО
5	4997	Staffing levels are not within the funded establishment	3	5	No Change						15	15	15	15	15	Financial Quality Workforce Operational	Revised establishment levels have been agreed for 2022/23 plans	СРО
6	4998	Elective Recovery trajectory delivery	5	5	No Change						25	25	*	20	20	Financial Quality Workforce Operational	Agreed monthly trajectories Ongoing tracking on costs against the income forecasts through the Groups	coo
7	4999	Decisions are made at System or Trust level without appropriate approval	3	4	No Change						12	12	12	12	12	Financial Quality Workforce Operational	Proposed new Business Case process ready for consideration and adoption External governance review commissioned and findings to be adopted Vacancy Approvals process to be reintroduced	Dir of Governance
8	5000	Increasing number of contracts with Independent Sector providers - potential clinical, operational, workforce and financial implications if not procured appropriately	3	5	No Change						15	15	15	15	15	Financial Quality Workforce Operational	Full engagement with Procurement to ensure appropriate contracts	CFO
9	5001	Clincial Group Risks identified at planning stage	4	5	No Change						20	20	20	20	20	Financial Quality Workforce Operational	Group Review meetings	CF0
10	5002	Delivery of the £17.2m ICS Stretch	5	5	No Change						25	25	×	25	25	Financial Quality Workforce Operational	Ongoing engagement in the ICS wide 22/23 plan	CFO
11	4998	Securing £7m of income from the Strategic Development Fund	4	5	No Change						20	20	20	20	20	Financial Quality Workforce Operational	Ongoing engagement in the ICS wide 22/23 plan	CFO
12	5003	Securing the £3.8m funding for the insourcing / outsourcing services (T&O / Ophthal)	5	5	No Change						25	25	20	20	20	Financial Quality Workforce Operational	Ongoing engagement in the ICS wide 22/23 plan	CFO

Annex 9: Financial Recovery Plan

		Date of	22/23	10 M 10 M		
		confirming the	Value			Risk of
Action	Exec Lead	220000000	W/ / (W/ / W/ / W/ / W/ / W/ / W/ / W/	Confidence	Monitoring	Delivery
1 Confirm ICS resource, or not, for the Insourcing / Outsourcing SWB commitments	CFO	30/09/2022	1,200		Exec Group	
2 Confirmation of the Strategic Development Funding (SDF) plan assumption	CFO	30/09/2022	7.000		Exec Group	
3 Confirmation of additional ERF baseline funding from BSOL	CFO	30/09/2022	7,000		Exec Group	
4 Agree the bank rate proposal from January 2022 CLE	Exec Team	31/08/2022	788		Exec Group	
Review the additional bed capacity open above plan assumptions to assess whether any can be closed						
5 (review LOS; BSOL transfers; Delayed discharges) - Conveyancing	COO	30/09/2022	1,000		Exec Group	
Review the additional bed capacity open above plan assumptions to assess whether any can be closed				1		
6 (review LOS; BSOL transfers; Delayed discharges) - Beds xxx from 1 October		30/09/2022			Exec Group	
6 a) Medicine	C00		1,236		Exec Group	
6 b) PCCT	COO			(i	Exec Group	
6 c) Surgical Services	coo		. .	$(0, \dots, 0)$	Exec Group	
7 Re-instate staff car parking charges	Exec Team	30/09/2022			Exec Group	
8 Stop the MMUH related recruitment until 1 April 2023	Exec Team	30/09/2022	1,000		Exec Group	
9 Reduce sickness absence rate from 6% by targetted individual plans	СРО	30/09/2022	tbc		Exec Group	-
10 Assess any further balance sheet flexibility as a non recurrent solution above £7,500k plan assumption	CFO	31/08/2022	7,500		Exec Group	
11 Enhanced controls on discretionary spend e.g. well being	CFO	30/09/2022	800		Exec Group	
12 Enhanced controls on discretionary spend e.g. training	COO	30/09/2022	450		Exec Group	
13 Review of all non clincial agency spend with a view to recruit substantive or remove the agency	CPO	31/10/2022	tbc		Exec Group	
14 Elective Recovery funding improvement plan	C00	30/09/2022	tbc		Exec Group	
15 Vacancy management	CPO	30/09/2022	5,000		Exec Group	
16 Review of the modality contract - VFM	CFO	30/09/2022	tbc		Exec Group	
17 Pass through costs for drugs above baseline	CFO	30/09/2022	1,500		Exec Group	
18 22/23 year end energy forecast - scenarios for Exec discussion	CDO	30/09/2022	1,400		Exec Group	
19 Stop all Covid related workforce expenditure - security	C00	30/09/2022	400		Exec Group	
20 Agreement of maternity pathway recharges with BSOL ICB	CFO	30/09/2022	1,000		Exec Group	
TOTAL			30,274			