

# Performance Report Month 07

Trust Board  
29<sup>th</sup> November 2018



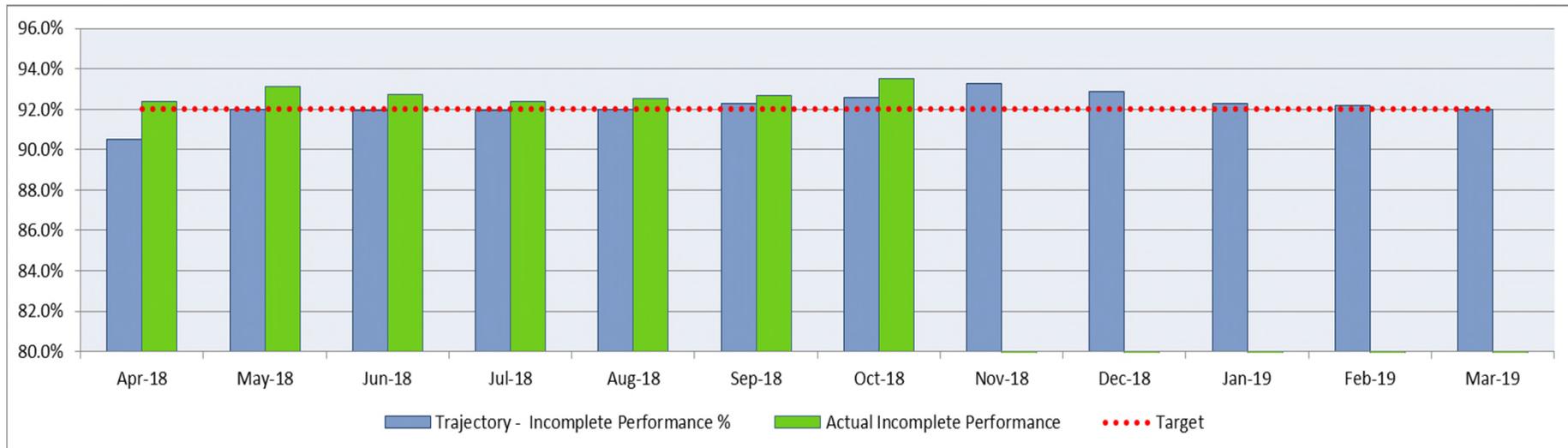
Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

# RTT



Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

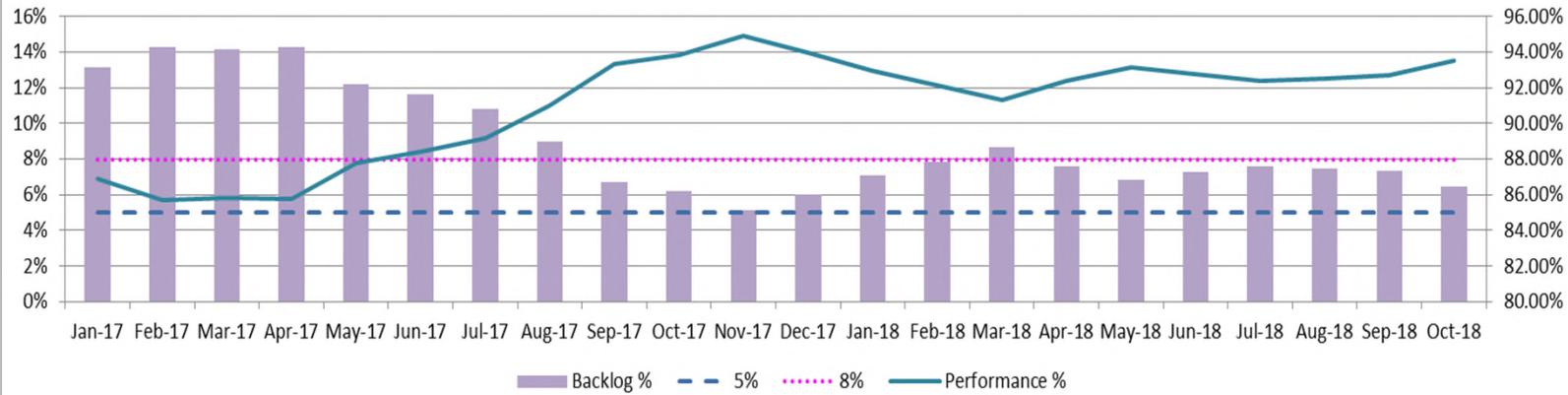
# Elective Activity - RTT 2018/2019 Trajectory



	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
Referral to treatment Incompletes Trajectory - >18 weeks	1,498	1,260	1,259	1,255	1,250	1,200	1,150	1,050	1,115	1,200	1,225	1,250
Referral to treatment Incompletes Trajectory - Total patients	15,780	15,699	15,650	15,599	15,600	15,600	15,500	15,605	15,600	15,600	15,660	15,600
Trajectory - Incomplete Performance %	90.5%	92.0%	92.0%	92.0%	92.0%	92.3%	92.6%	93.3%	92.9%	92.3%	92.2%	92.0%
Referral to treatment Incompletes Actual - >18 w eeks	1206	1096	1168	1229	1223	1229	1118					
Referral to treatment Incompletes Actual - Total patients	15827	15981	16106	16185	16339	16794	17308					
Actual Incomplete Performance	92.4%	93.1%	92.7%	92.4%	92.5%	92.7%	93.5%					

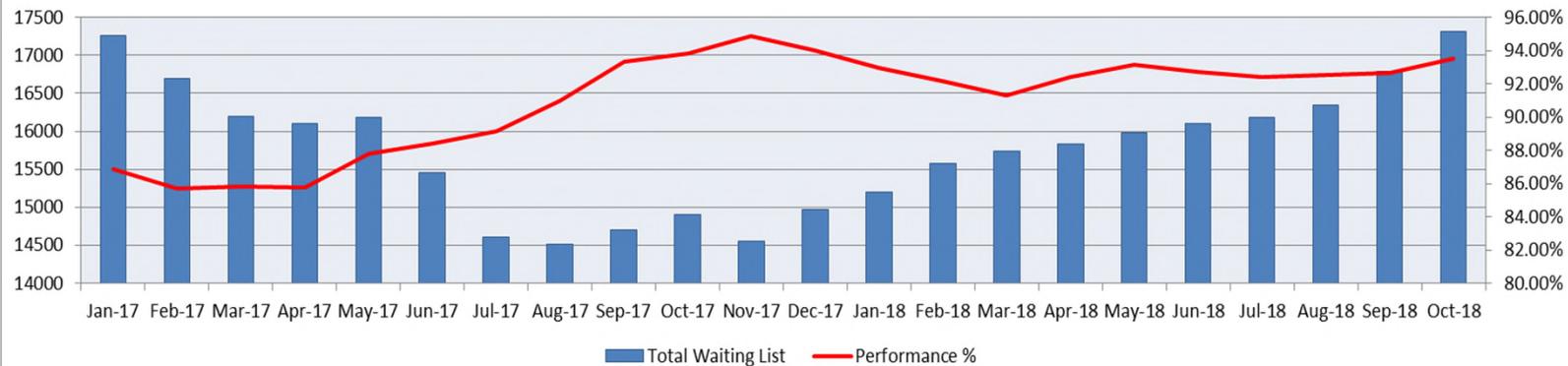
# RTT Summary October 2018

### Backlog as a percentage of the waiting list



As long as the RTT backlog is between 5% and 8% of total RTT waiting list size then the Trust will deliver the RTT target.

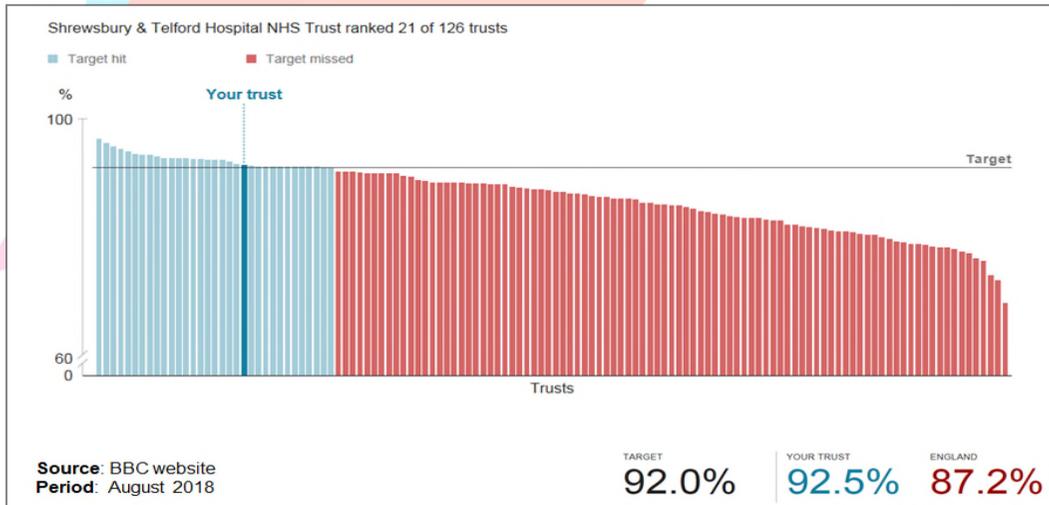
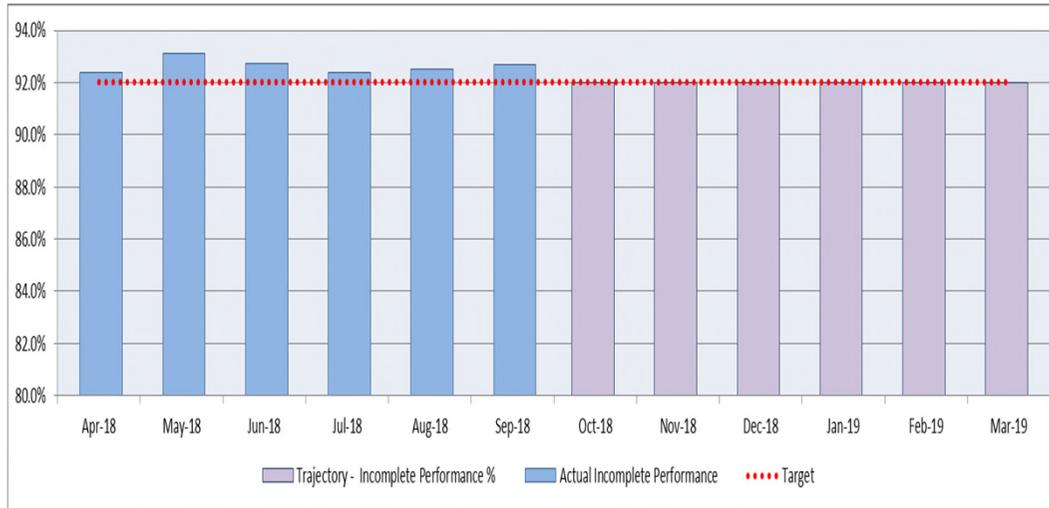
### Total Waiting List Vs 18 Weeks Performance



October's RTT performance was 93.54% against a national target of 92.0%.



# RTT Activity and Performance



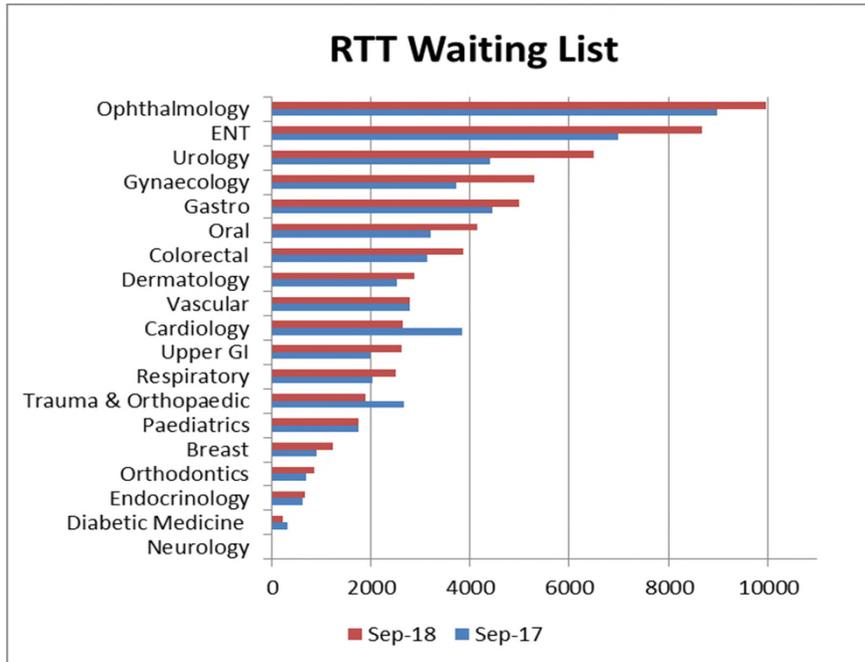
Incomplete Performance (%)	Target	Sep-17	Sep-18
General Surgery	92%	95.74%	93.59%
Urology	92%	91.20%	86.58%
Trauma & Orthopaedics	92%	86.25%	96.21%
Ear, Nose & Throat (ENT)	92%	96.80%	93.86%
Ophthalmology	92%	88.29%	92.46%
Oral Surgery	92%	94.37%	90.75%
Cardiothoracic Surgery	92%	100.00%	100.00%
General Medicine	92%	99.56%	98.56%
Gastroenterology	92%	94.26%	97.67%
Cardiology	92%	88.54%	92.90%
Dermatology	92%	99.52%	95.56%
Thoracic Medicine	92%	90.16%	83.65%
Neurology	92%	50.00%	-
Geriatric Medicine	92%	99.38%	92.31%
Gynaecology	92%	95.12%	90.80%
Other	92%	94.88%	95.02%
<b>TOTAL</b>	<b>92%</b>	<b>93.31%</b>	<b>92.68%</b>



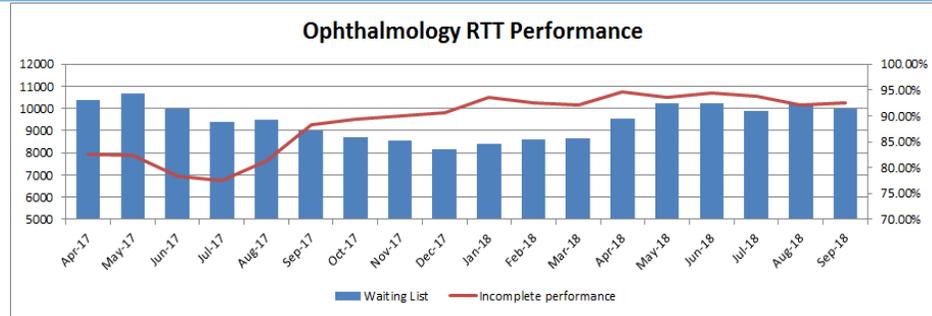
The Trust expects to continue to achieve the national RTT target.

In September 2017, six specialties were failing to deliver the RTT target and in September 2018 this had reduced to four specialties.

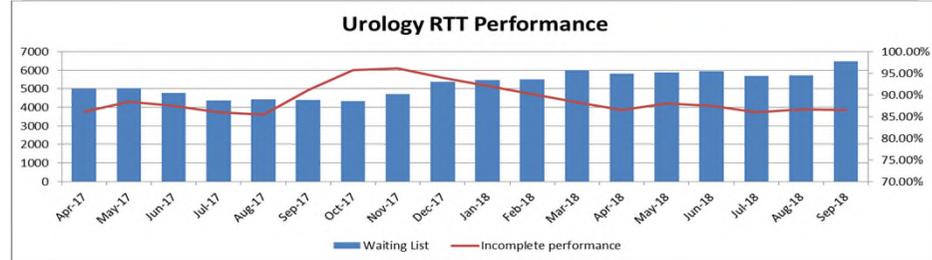
# RTT Waiting List



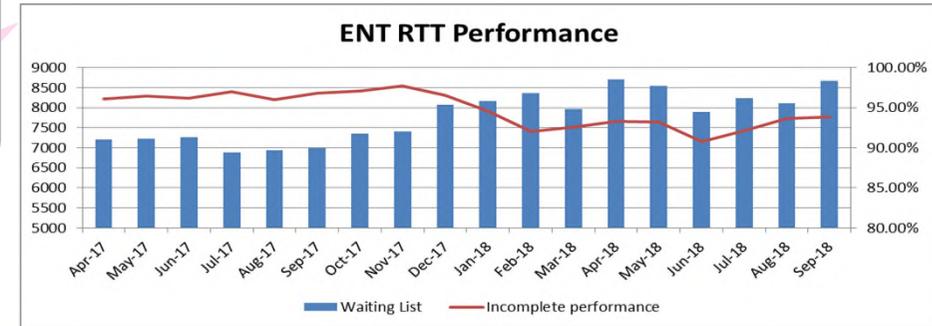
- Trauma and Orthopaedic has seen an overall reduction in its waiting list due to a decline in referrals to SaTH from the TEMs service. TEMs have introduced another provider, the Nuffield. Instead of using SaTH's available capacity, patients are being given the choice to go to the Nuffield and are opting to do this. Discussions are taking place in the Health Economy to repatriate this activity.



- Service reinstated in April 2018 resulting in an increased level of open pathways which has in turn increased the number of open clocks. Despite this it has continued to hit the target.



Urology has seen an increase in its 2 week wait referrals. This has resulted in the need to flex the core capacity to prioritise the 2 week wait referrals which has led to an increase in waiting times for routine patients.



Increase in ENT waiting list primarily due to temporary change in capacity which is currently being resolved.

# Projected RTT Performance – November 2018

## Admitted Incomplete Pathways

Cohort	Open Clocks		Performance %
	Total Open Clocks	C 18+ Wks	
<b>Reporting Specialty</b>			
Cardiology	90	8	91.11
Cardiothoracic Surgery	2		100.00
Dermatology	4	1	75.00
Ear, Nose & Throat (ENT)	295	61	79.32
Gastroenterology	9	1	88.89
General Medicine	10	1	90.00
General Surgery	751	176	76.56
Geriatric Medicine	5		100.00
Gynaecology	306	64	79.08
Neurology			
Neurosurgery			
Ophthalmology	597	110	81.57
Oral Surgery	190	79	58.42
Other	124	15	87.90
Plastic Surgery			
Thoracic Medicine	20	2	90.00
Trauma & Orthopaedics	313	21	93.29
Urology	570	193	66.14
	<b>3,286</b>	<b>732</b>	<b>77.72</b>

## Non Admitted

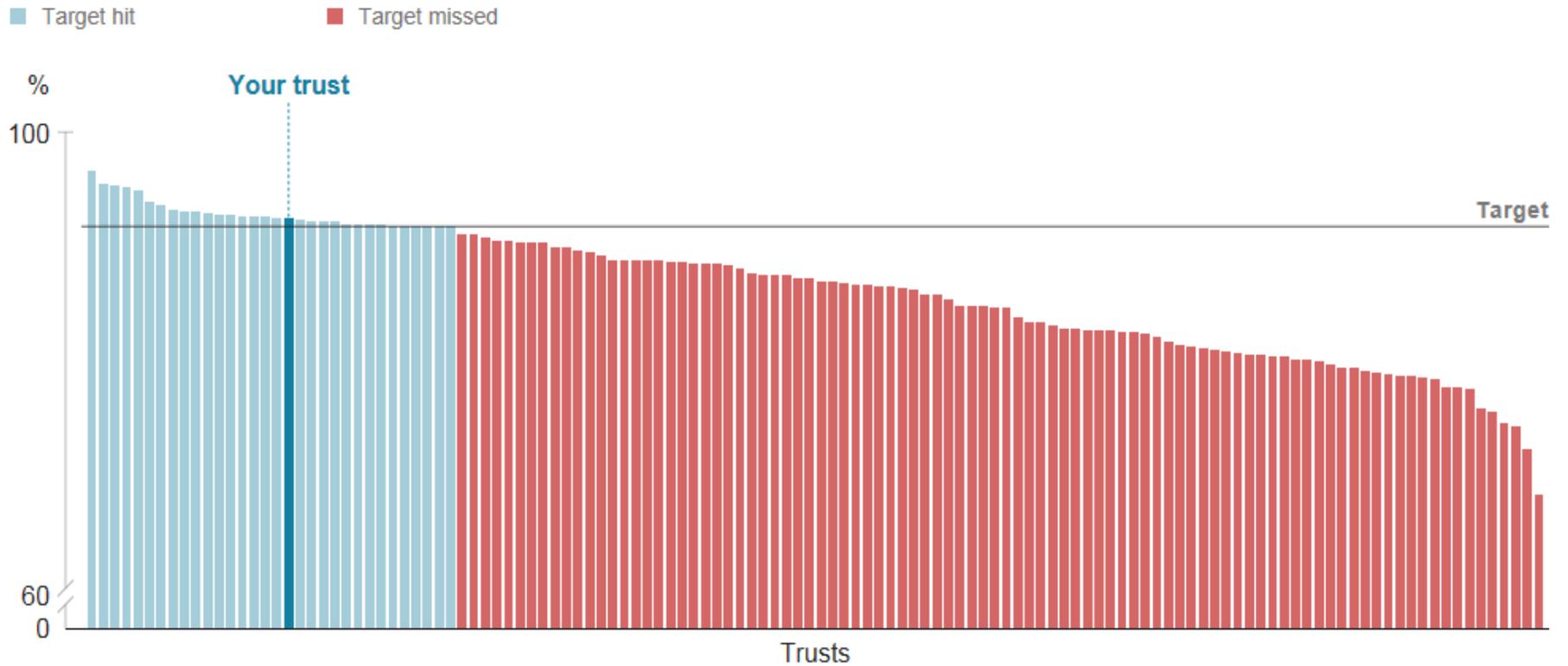
Cohort	Open Clocks		Performance %
	Total Open Clocks	C 18+ Wks	
<b>Reporting Specialty</b>			
Cardiology	519	43	91.71
Cardiothoracic Surgery	16		100.00
Dermatology	620	28	95.48
Ear, Nose & Throat (ENT)	1947	46	97.64
Gastroenterology	1392	29	97.92
General Medicine	579	9	98.45
General Surgery	2030	20	99.01
Geriatric Medicine	284	19	93.31
Gynaecology	1135	56	95.07
Neurology	1		100.00
Neurosurgery			
Ophthalmology	2069	91	95.60
Oral Surgery	895	39	95.64
Other	863	32	96.29
Plastic Surgery			
Thoracic Medicine	581	100	82.79
Trauma & Orthopaedics	121	1	99.17
Urology	1113	19	98.29
	<b>14,165</b>	<b>532</b>	<b>96.24</b>

## Combined

Cohort	Open Clocks		Performance %
	Total Open Clocks	C 18+ Wks	
<b>Reporting Specialty</b>			
Cardiology	609	51	91.63
Cardiothoracic Surgery	18		100.00
Dermatology	624	29	95.35
Ear, Nose & Throat (ENT)	2242	107	95.23
Gastroenterology	1401	30	97.86
General Medicine	589	10	98.30
General Surgery	2781	196	92.95
Geriatric Medicine	289	19	93.43
Gynaecology	1441	120	91.67
Neurology	1		100.00
Neurosurgery			
Ophthalmology	2666	201	92.46
Oral Surgery	1085	118	89.12
Other	987	47	95.24
Plastic Surgery			
Thoracic Medicine	601	102	83.03
Trauma & Orthopaedics	434	22	94.93
Urology	1683	212	87.40
	<b>17,451</b>	<b>1,264</b>	<b>92.76</b>

# RTT National view – October 2018

Shrewsbury & Telford Hospital NHS Trust ranked 18 of 126 trusts



Source: BBC website  
Period: October 2018

TARGET

92.0%

YOUR TRUST

92.7%

ENGLAND

86.7%

# Diagnostics



Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

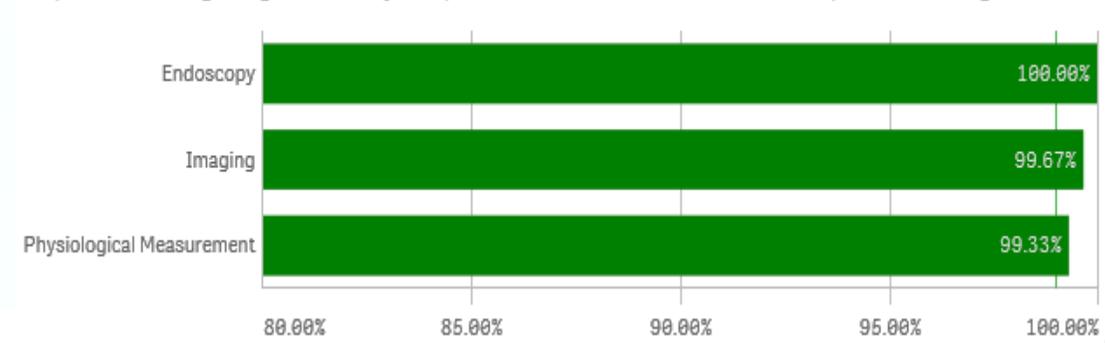
# Diagnostic Waiting Times

Oct-2018

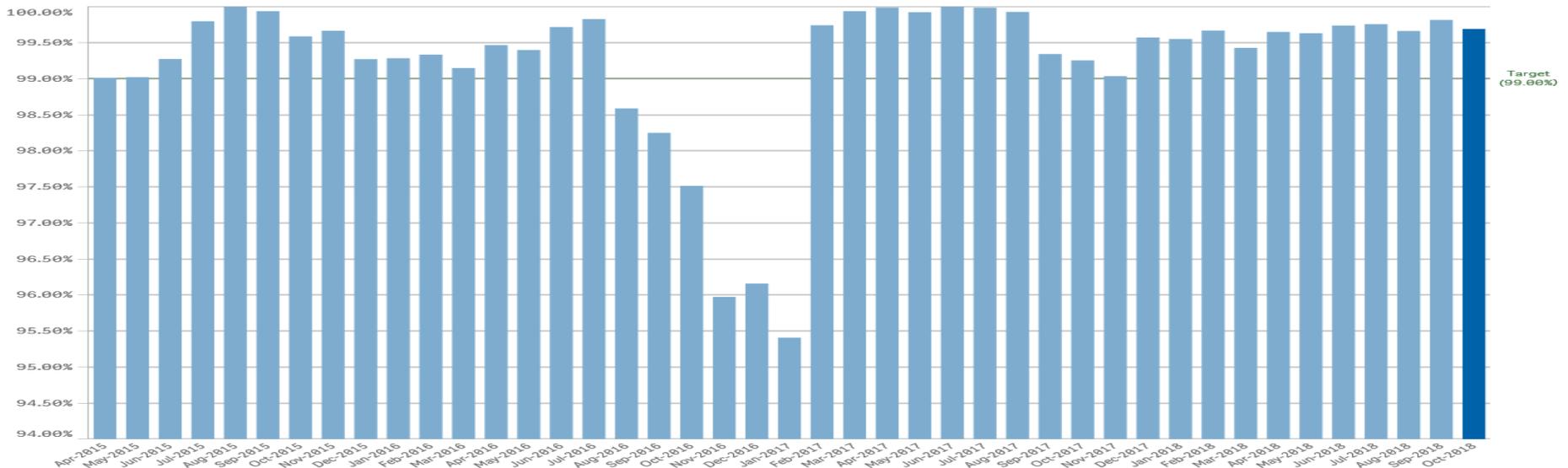
% of patients awaiting a diagnostic test, who have waited less than 6 weeks compared to 99% target



% of patients awaiting a diagnostic test by Group, who have waited less than 6 weeks compared to 99% target

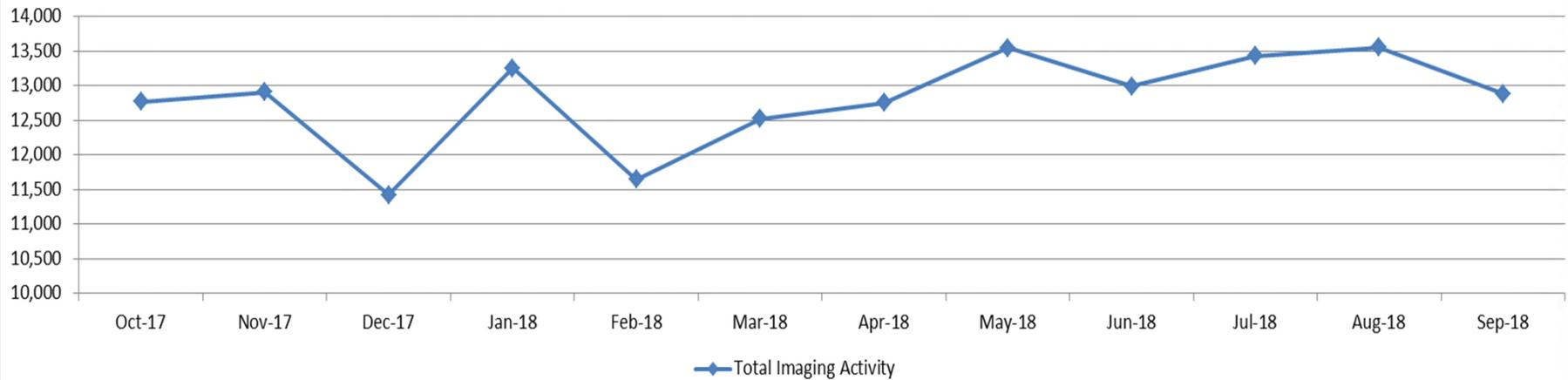


% of patients awaiting a diagnostic test, who have waited less than 6 weeks - monthly trend

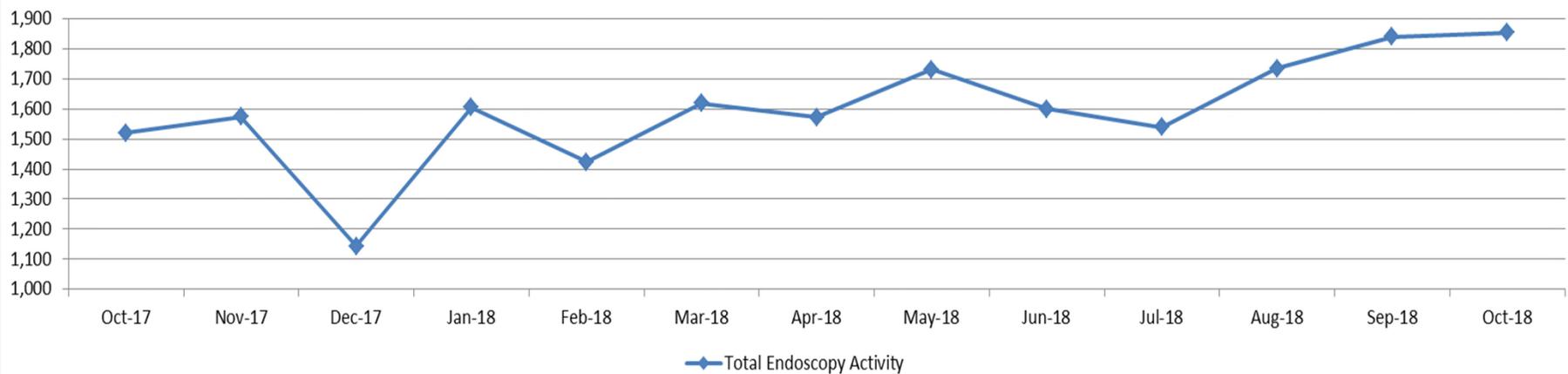


# DM01 – Activity Seen by Month

## DM01 - Imaging Tests/Procedures Carried Out By Month



## DM01 - Endoscopy Activity Seen

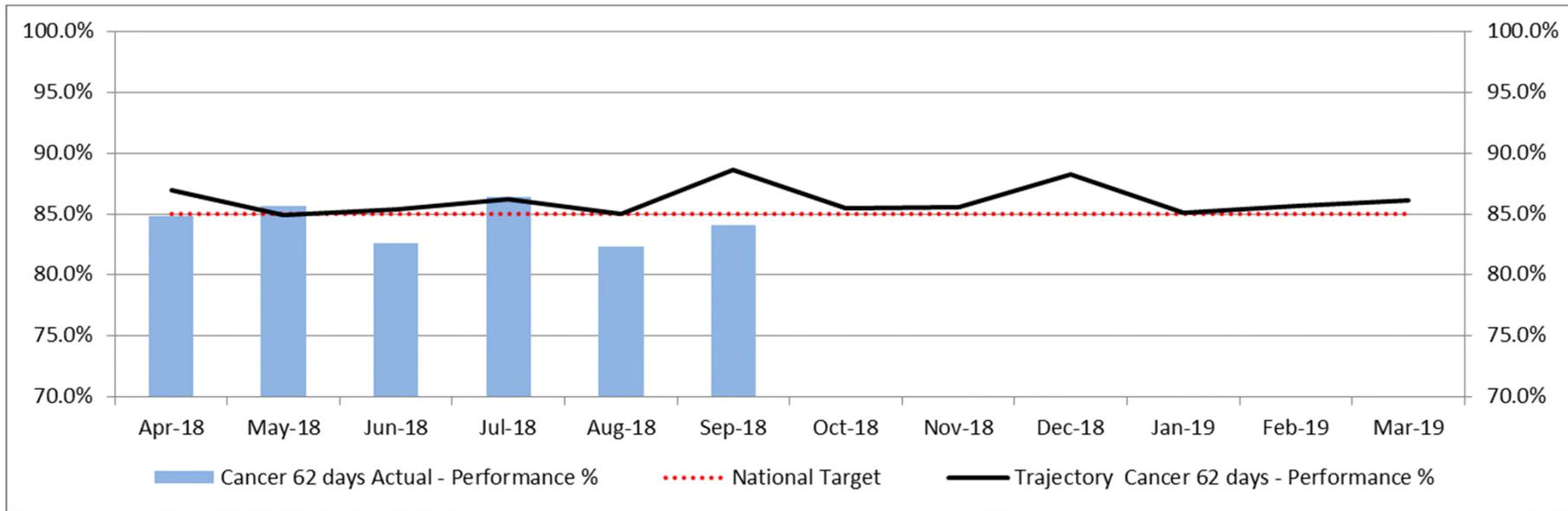


# Cancer



Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

# Cancer 2018/2019 Trajectory



	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
Cancer 62 days - >62 days	15.0	17.0	19.0	17.5	19.5	14.0	17.0	19.0	15.0	18.0	16.5	17.0
Cancer 62 days - Total seen	115.0	113.0	130.0	127.0	130.0	123.0	117.0	132.0	128.0	121.0	115.0	123.0
Trajectory Cancer 62 days - Performance %	<b>87.0%</b>	<b>85.0%</b>	<b>85.4%</b>	<b>86.2%</b>	<b>85.0%</b>	<b>88.6%</b>	<b>85.5%</b>	<b>85.6%</b>	<b>88.3%</b>	<b>85.1%</b>	<b>85.7%</b>	<b>86.2%</b>
Cancer 62 days Actual - >62 days	21.0	22.0	28.5	16.0	27.5	23.0						
Cancer 62 days Actual - Total seen	139	154	164	118	156	145						
Cancer 62 days Actual - Performance %	<b>84.8%</b>	<b>85.7%</b>	<b>82.6%</b>	<b>86.4%</b>	<b>82.3%</b>	<b>84.1%</b>						
<b>National Target</b>	<b>85.0%</b>											

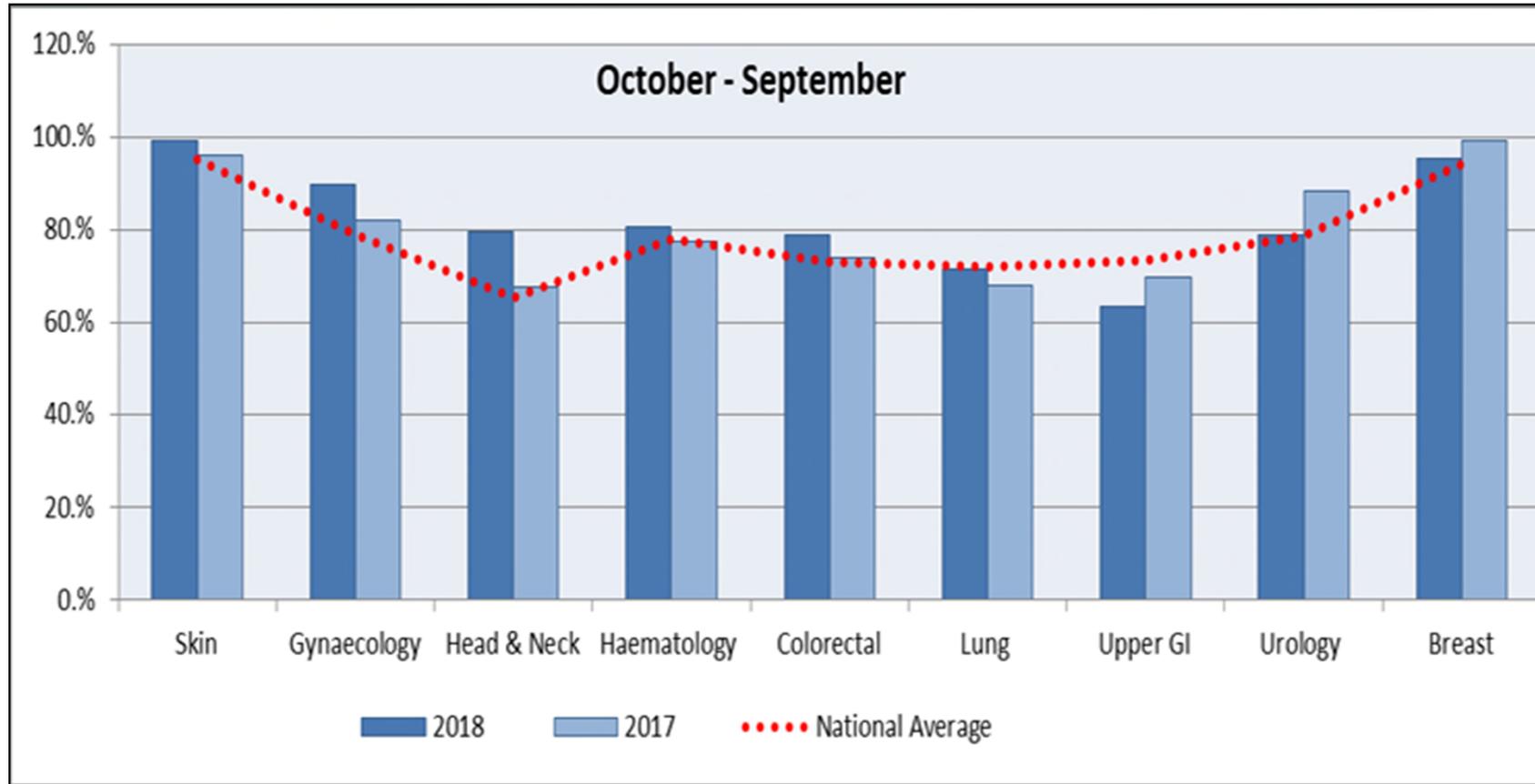
- September performance is 84.1% against a national target of 85.0%
- As of 16.11.18, October performance is predicted 74.1% . Validation on-going.

# Cancer Performance (Site Specific Performance)

Measure	Monthly Target %	March	April	May	June	July	August	September	SaTH YTD
62 days urgent ref to treatment	85	89.30%	84.84%	85.67%	82.60%	86.40%	82.32%	84.14%	83.77%
Brain	85	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Breast	85	96.00% 1/25	94.40% 1½/28	95.00% 1/20	92.70% 2/27½	100% 0/9	100% 0/15½	93.30% 1/15	95.24%
Colorectal	85	88.90% 1/9	78.80% 3½/17	81.80% 2/11	77.30% 5/22	88.90% 1½/13½	84.20% 3/19	69.20% 4/13	78.97%
Gynaecology	85	73.30% 2/7½	100% 0/3	100% 0/8	66.70% 1½/4½	100% 0/7	73.30% 2/7½	92.00% 1/12½	89.77%
Haematology	85	100% 0/6	66.70% 2/6	40.00% 3/5	85.70% 1/7	100% 0/6	100% 0/4	100% 0/1	80.65%
Head & Neck	85	100% 0/4	60.00% 2/5	100% 0/7	100% 0/3	66.70% 1/3	100% 0/3	73.90% 3/11½	79.49%
Lung	85	58.80% 3½/8½	80.00% 2/11	76.90% 3/13	33.33% 7/10½	57.50% 4½/10½	82.10% 2½/14	80.00% 2/10	71.43%
Skin	85	100% 0/21	100% 0/19	100% 0/27	100% 0/20	95.50% 1/22	98.40% ½/31½	100% 0/39	99.10%
Upper GI	85	66.70% 2/6	70.00% 3/11	42.90% 3/9½	82.60% 2/11½	100% 0/2½	55.30% 8½/19	66.70% 2½/7½	63.41%
Urology	85	92.90% 2/28	82.10% 7/39	73.90% 3/11½	81.30% 9/48	86.10% 5/36	71.80% 11/39	74.60% 8½/33½	79.04%

Cancer performance improvement plan updated and led by Deputy Chief Operating Officer

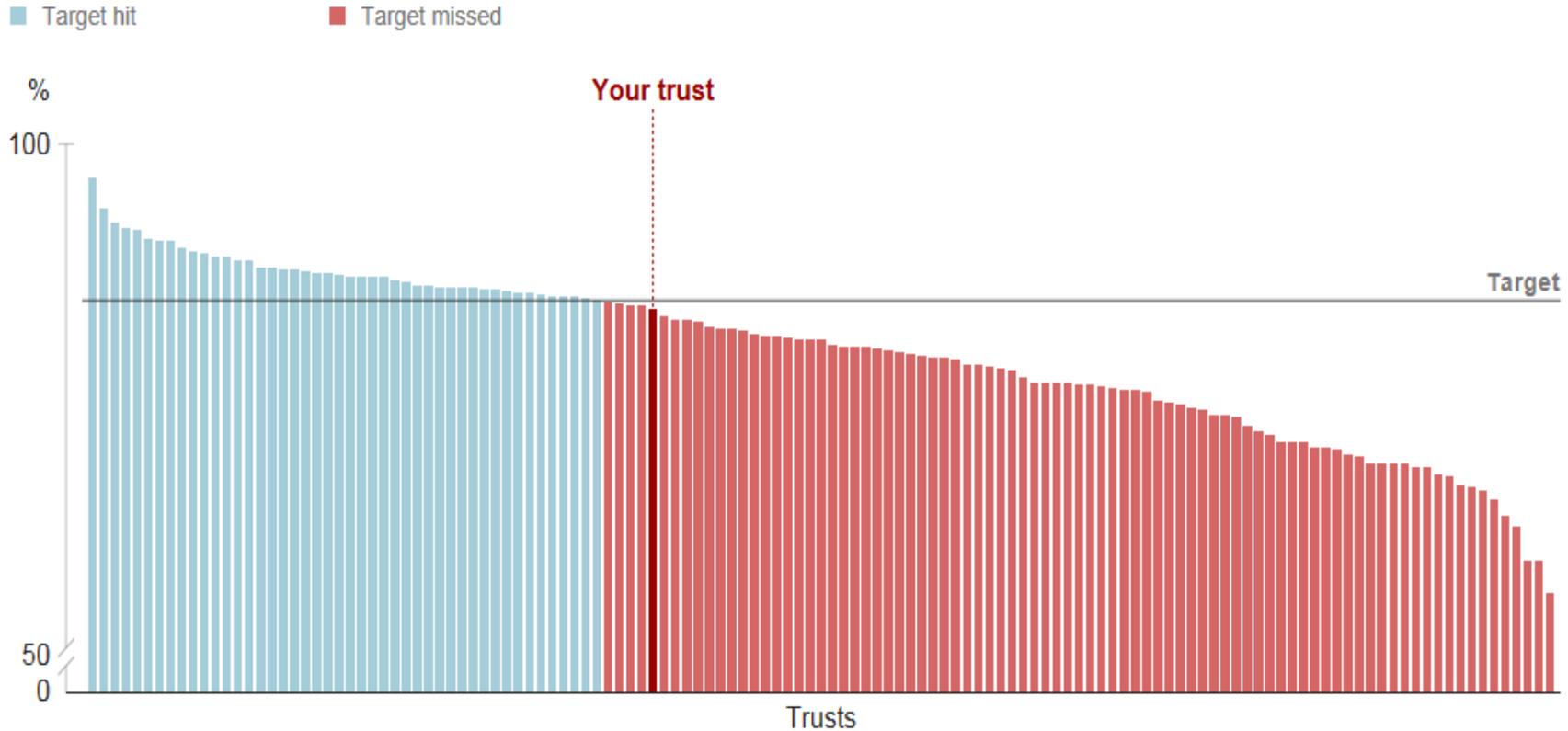
# Cancer Performance (Site Specific Performance)2017/2018



- Performance across the majority of tumour sites has improved.
- Concerns exist however in respect of Upper GI, Urology and Breast.
- Focussed work on Breast (including Radiology) and Urology.

# Cancer National view – September 2018

Shrewsbury & Telford Hospital NHS Trust ranked 51 of 131 trusts



- Source: BBC website
- Period: September 2018

TARGET  
**85.0%**

YOUR TRUST  
**84.1%**

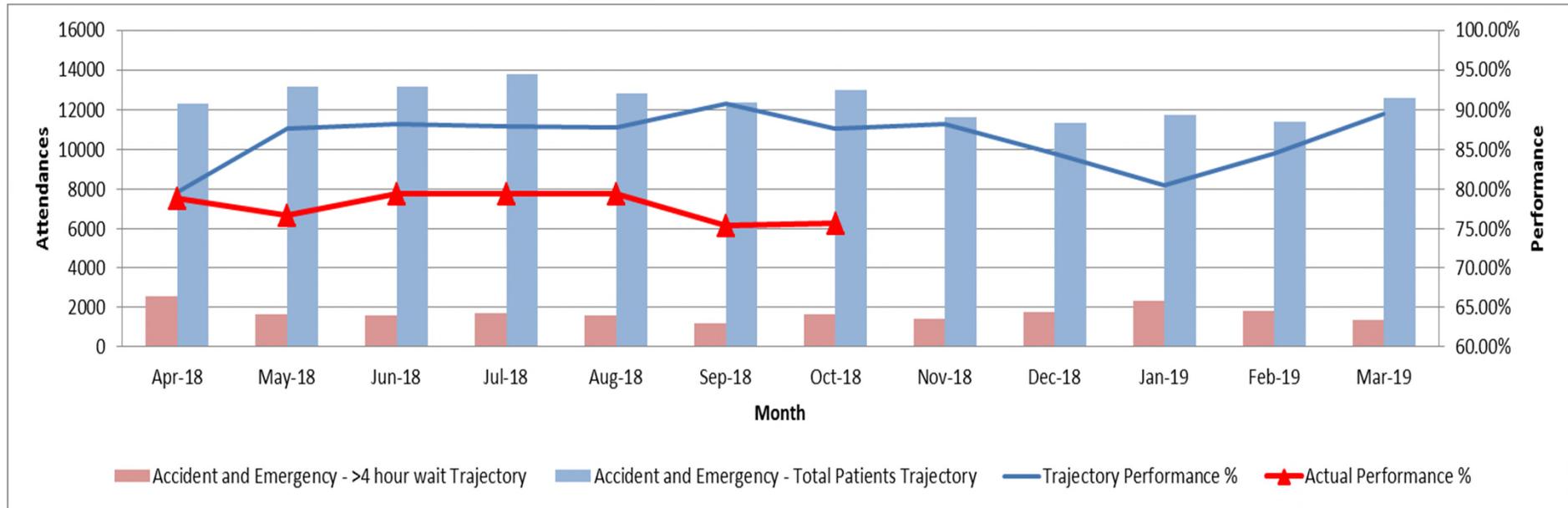
ENGLAND  
**78.2%**

# Urgent Care Update



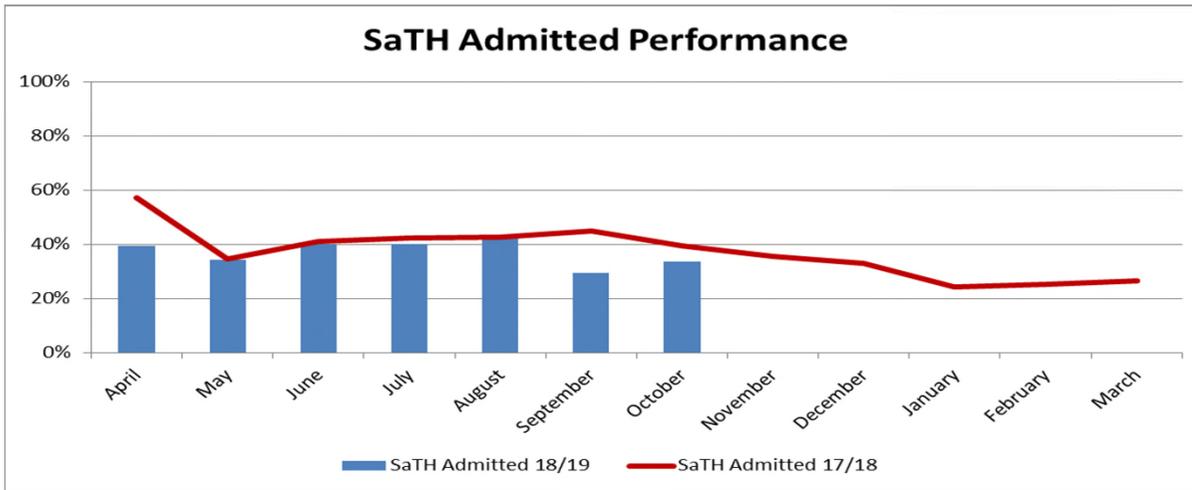
Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

# A&E 2018-2019 Trust Trajectory

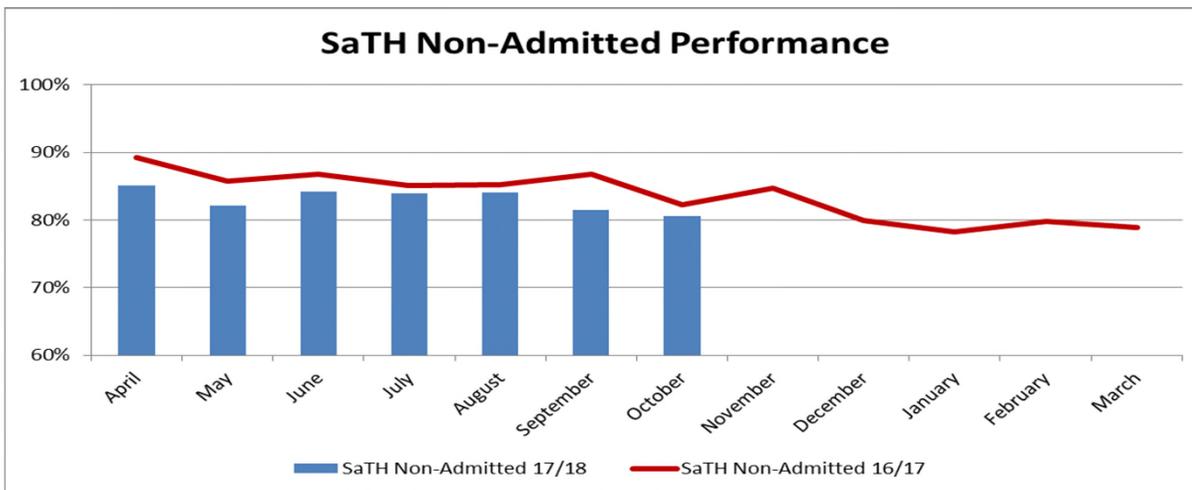


	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
Accident and Emergency - >4 hour wait Trajectory	2511	1639	1556	1661	1563	1153	1610	1372	1754	2296	1769	1326
Accident and Emergency - Total Patients Trajectory	12290	13181	13161	13763	12786	12370	12967	11586	11332	11724	11367	12593
<b>Trajectory Performance %</b>	<b>79.57%</b>	<b>87.57%</b>	<b>88.18%</b>	<b>87.93%</b>	<b>87.78%</b>	<b>90.68%</b>	<b>87.58%</b>	<b>88.16%</b>	<b>84.52%</b>	<b>80.42%</b>	<b>84.44%</b>	<b>89.47%</b>
Accident and Emergency - >4 Hour Wait Actual	2669	3347	2929	3097	2829	3274	3327					
Accident and Emergency - Total Patients Actual	12633	14373	14190	15012	13715	13346	13697					
<b>Actual Performance %</b>	<b>78.87%</b>	<b>76.71%</b>	<b>79.36%</b>	<b>79.37%</b>	<b>79.37%</b>	<b>75.47%</b>	<b>75.71%</b>					
Internal Accident and Emergency - >4 hour wait breaches							3625	3342	3889	4429	3870	4318
Internal Accident and Emergency - Total Patients							14129	13146	12841	13306	12193	13629
<b>Internal Forecast %</b>							<b>74.35%</b>	<b>74.58%</b>	<b>69.71%</b>	<b>66.72%</b>	<b>68.26%</b>	<b>68.32%</b>

# A&E SaTH Admitted/Non-Admitted Performance



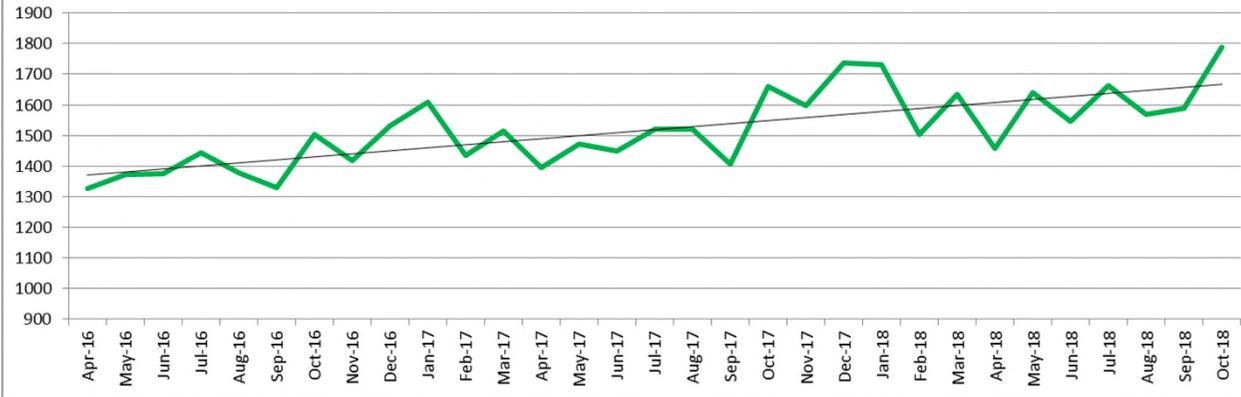
- SaTH Admitted performance was down 6% in Oct-18 compared to Oct-17.
- PRH Admitted performance was down 12.5% in Oct-18 compared to Oct-17.
- RSH Admitted performance was up 0.9% in Oct-18 compared to Oct-17.



- SaTH Non-Admitted performance was down 1.6% in Oct-18 compared to Oct-17.
- PRH Non-Admitted performance was down 3.5% in Oct-18 compared to Oct-17.
- RSH Non-Admitted performance was up 0.35% in Oct-18 compared to Oct-17.

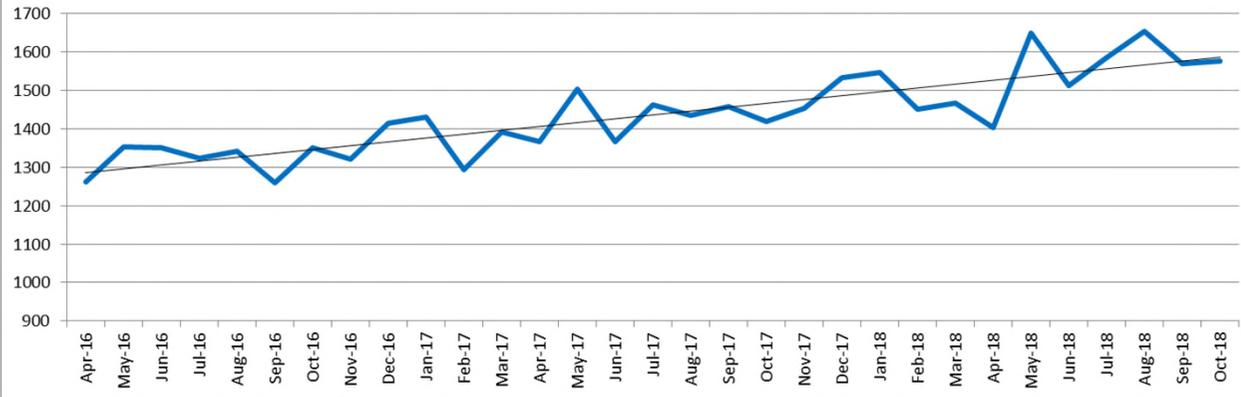
# A&E Arrivals via Ambulance

**PRH A&E Arrivals via Ambulance by Month**



- At PRH ambulance arrivals were up 7.7% (128) in Oct-18 compared to Oct-17.
- Ambulance arrivals are up 8% (830) YTD.

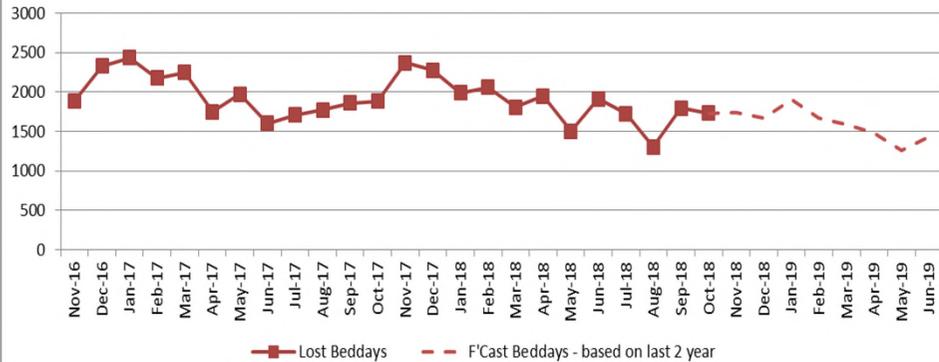
**RSH A&E Arrivals via Ambulance by Month**



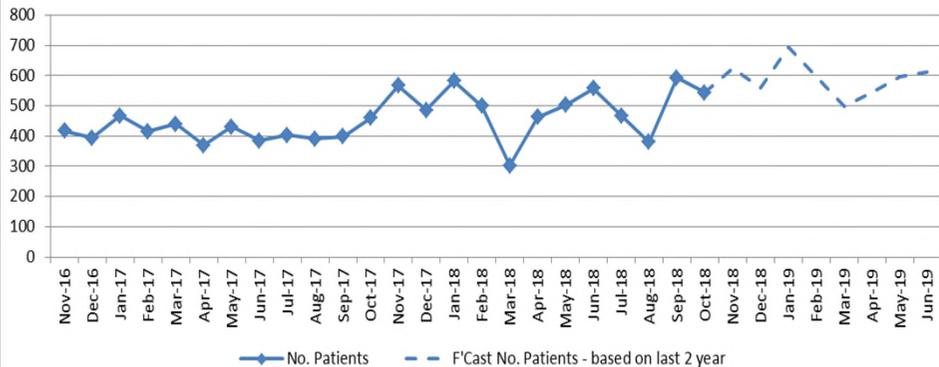
- At RSH ambulance arrivals were up 11% (157) in Oct-18 compared to Oct-17.
- Ambulance arrivals are up 9.4% (940) YTD.

# MFFD

**Total Current Position  
Lost Beddays**

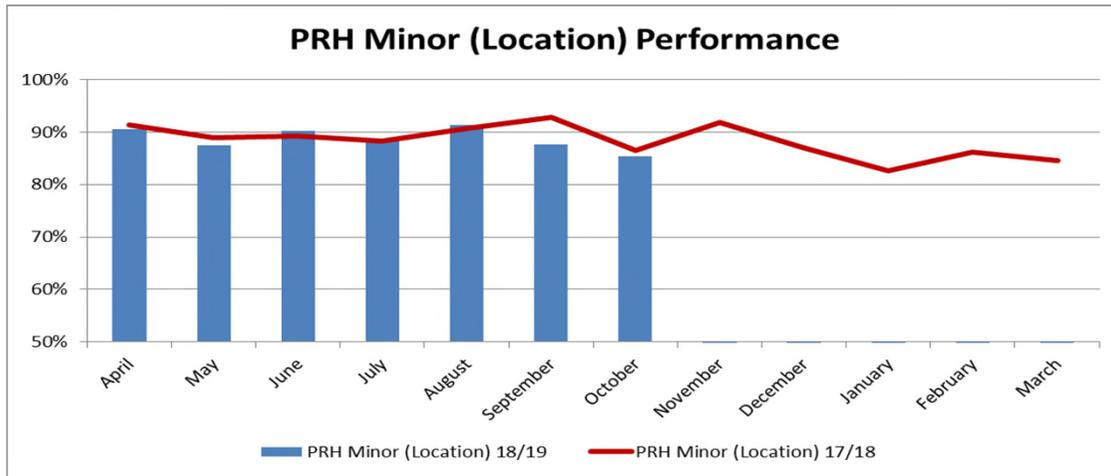


**Total Current Position  
Number of Patients**

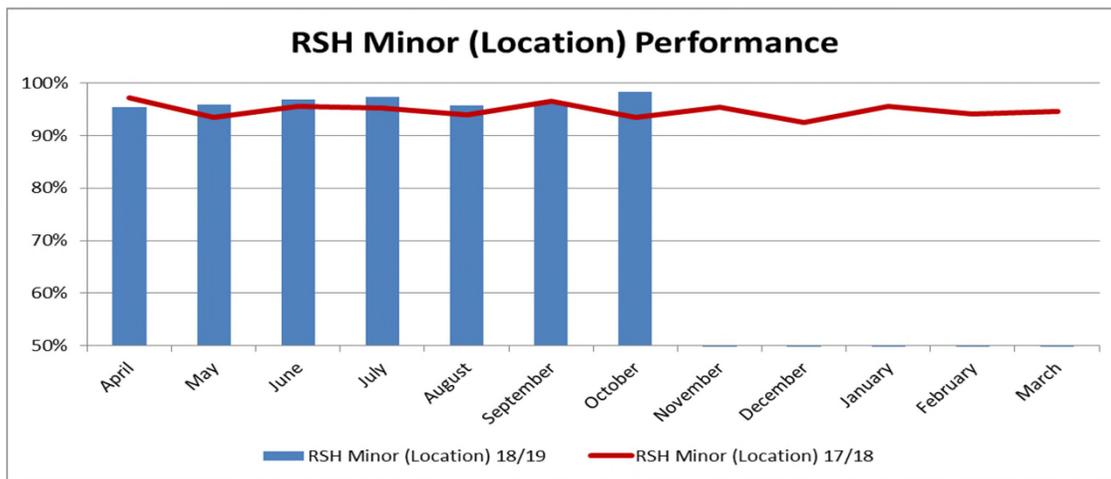


Discharge Month	No. Patients	Lost Beddays	Average Days on List	Avg Patients per week
Oct-16	384	2703	7	96
Nov-16	417	1886	5	104
Dec-16	394	2326	6	99
Jan-17	468	2434	5	117
Feb-17	415	2179	5	104
Mar-17	440	2247	5	110
Apr-17	370	1752	5	93
May-17	430	1971	5	108
Jun-17	385	1604	4	96
Jul-17	403	1711	4	101
Aug-17	391	1770	5	98
Sep-17	399	1860	5	100
Oct-17	459	1882	4	115
Nov-17	567	2369	4	142
Dec-17	485	2276	5	121
Jan-18	582	1987	3	146
Feb-18	499	2059	4	125
Mar-18	302	1808	6	76
Apr-18	463	1947	4	116
May-18	502	1505	3	126
Jun-18	557	1915	3	139
Jul-18	467	1726	4	117
Aug-18	380	1303	3	95
Sep-18	593	1798	3	148
Oct-18	544	1733	3	136

# A&E Minor Performance (Location) by Site



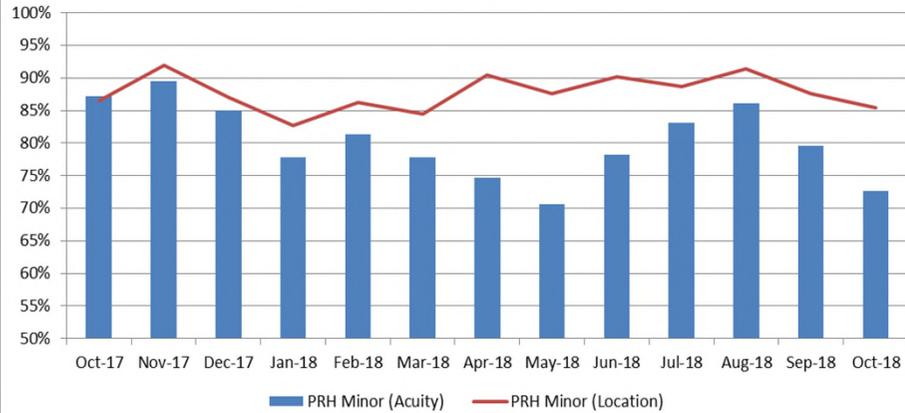
- PRH Minor (Location) attendance up 3.2% (125) in Oct-18 compared to Oct-17.
- PRH Minor (Location) breaches were up 11% (59) in Oct-18 compared to Oct-17.
- PRH Minor (Location) performance is down 1% in Oct-18 compared to Oct-17.



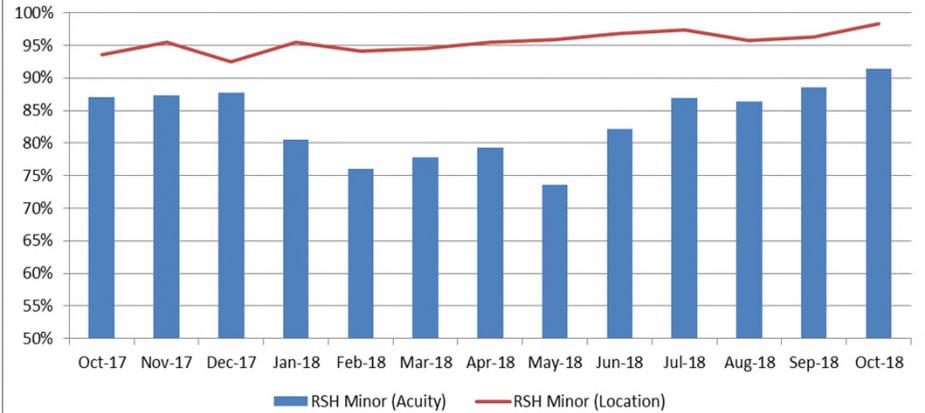
- RSH Minor (Location) attendance down 13% (-416) in Oct-18 compared to Oct-17.
- RSH Minor (Location) breaches were down 78% (-162) in Oct-18 compared to Oct-17.
- RSH Minor (Location) performance is up 4.85% in Oct-18 compared to Oct-17.

# A&E Minor Performance Location Vs. Acuity

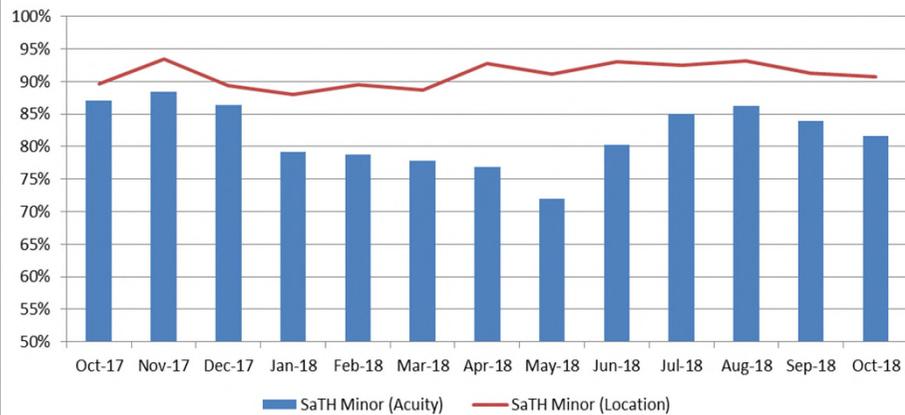
**PRH Minors Acuity Vs. Location**



**RSH Minors Acuity Vs. Location**



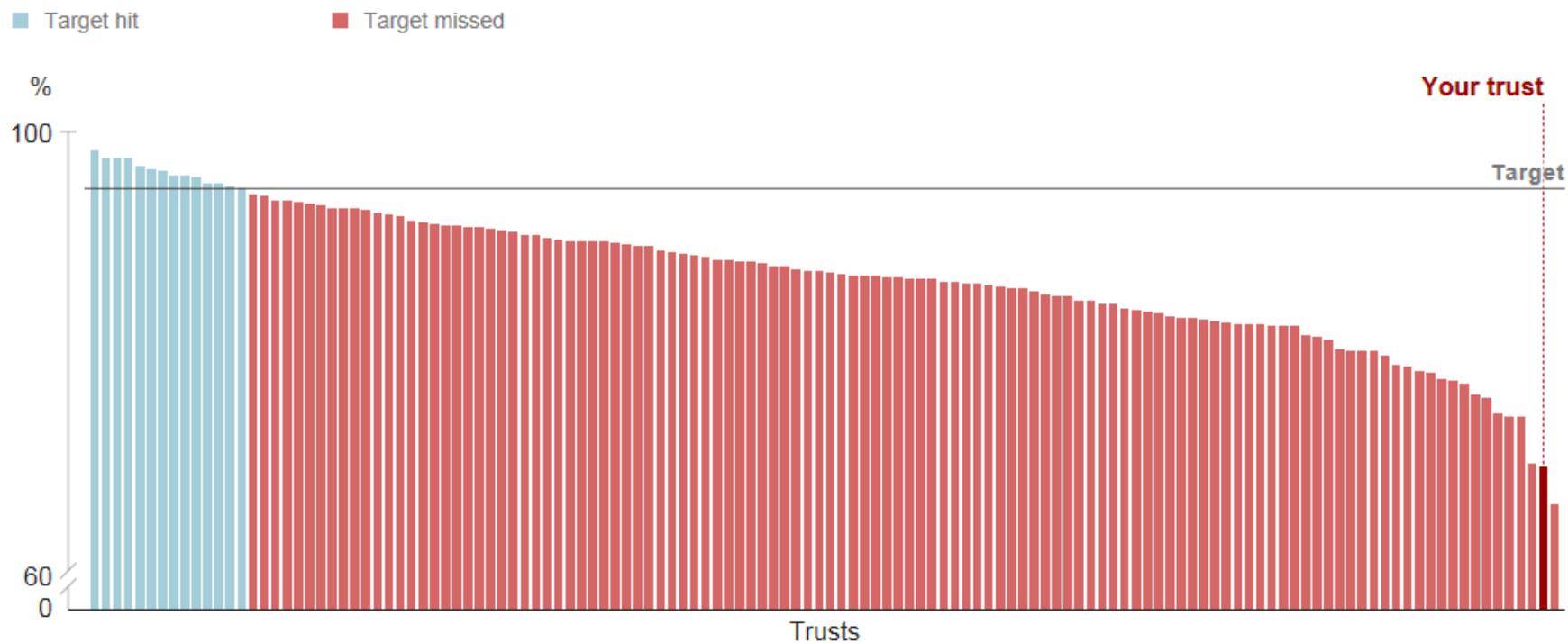
**SaTH Minors Acuity Vs. Location**



• *Please note that minor performance based on location is not comparable to minor performance based on acuity. Acuity splits Paeds and Resus out into its own category.*

# A&E National view – October 2018

Shrewsbury & Telford Hospital NHS Trust ranked 129 of 130 trusts



**Source:** BBC website  
**Period:** October 2018

TARGET  
**95.0%**

YOUR TRUST  
**70.5%**

ENGLAND  
**89.1%**

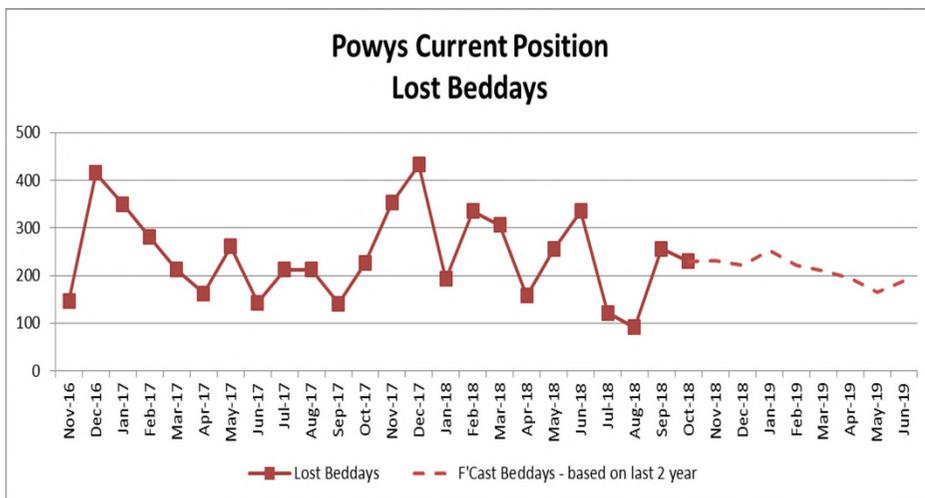
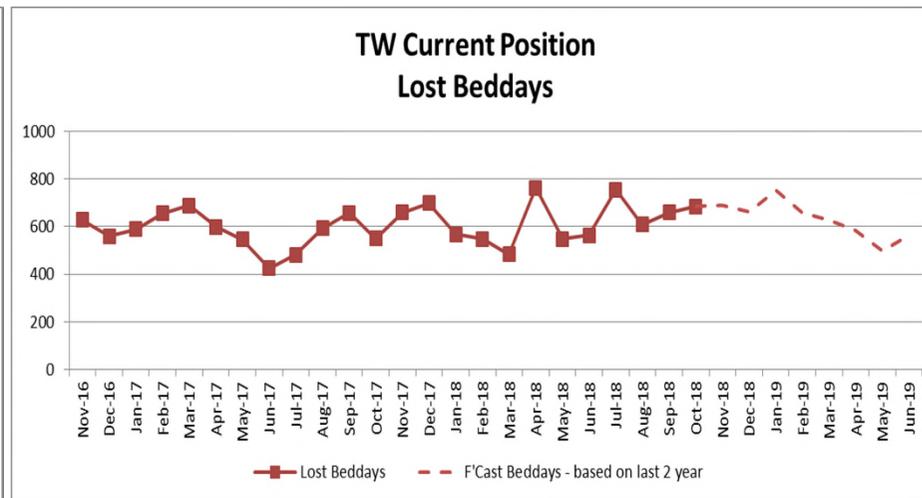
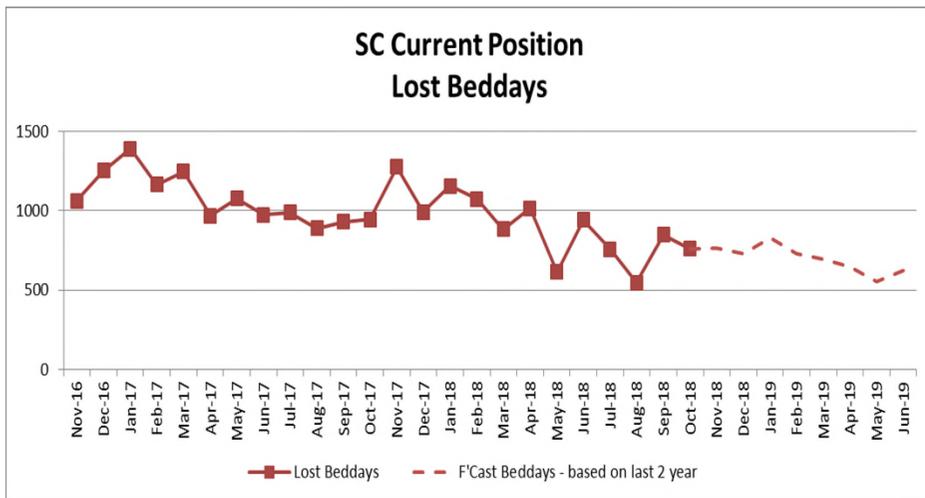
# Additional



Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**



# MFFD Lost Bed Days by CCG



- Lost bed days were down 8% (-149) when comparing Oct-18 to Oct-17.
- Shropshire down 20% (-187)
- Telford up 025% (136)
- Powys up 2% (4)

# Finance Report Month 7



Proud To **Care**  
Make It **Happen**  
We Value **Respect**  
Together We **Achieve**

# Income & Expenditure – Overview YTD

	Annual		YTD		
	NHSI Plan	Flexed Plan	Plan	Actual	Variance
	£000s	£000s	£000s	£000s	£000s
Income	355,007	359,641	210,451	210,368	(83)
Pay	(246,151)	(250,599)	(146,317)	(147,191)	(874)
Non-Pay & Reserves	(112,580)	(112,650)	(66,386)	(67,148)	(761)
<b>Total Expenditure</b>	<b>(358,731)</b>	<b>(363,249)</b>	<b>(212,703)</b>	<b>(214,339)</b>	<b>(1,635)</b>
<b>EBITDA</b>	<b>(3,724)</b>	<b>(3,608)</b>	<b>(2,253)</b>	<b>(3,971)</b>	<b>(1,718)</b>
Finance Costs	(14,715)	(14,831)	(7,990)	(7,802)	188
<b>Surplus/(deficit) against Control Total pre PSF and Phased Spend</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(10,243)</b>	<b>(11,773)</b>	<b>(1,530)</b>
Phased Spend	0	0	(1,257)	(1,257)	0
Medical Staffing Pay Award Allowance				212	212
<b>Adjusted Surplus/(deficit) post Phased Spend</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(11,500)</b>	<b>(12,818)</b>	<b>(1,318)</b>
<i>Provider Sustainability Funding (PSF)</i>	<i>9,824</i>	<i>9,824</i>	<i>4,421</i>	<i>1,032</i>	<i>(3,389)</i>
<i>Surplus/(deficit) against Control Total post Phased Spend and PSF</i>	<i>(8,615)</i>	<i>(8,615)</i>	<i>(7,079)</i>	<i>(11,786)</i>	<i>(4,707)</i>

At the end of October, 7 months into the 2018/19 financial year the Trust is reporting a year to date pre provider sustainability fund (PSF) deficit of £12.818m, £1.318m worse than plan.

Income is under performing by £0.083m, pay is overspent by £0.874m and non pay is overspent by £0.761m.

## Key Messages

- Year to date at the end of October the Trust is reporting a pre PSF deficit of £12.818m, £1.318m worse than plan.

# Income & Expenditure – Care Group YTD

Care Group	Income/Pay/Non Pay	YTD Plan £000s	YTD Actual £000s	YTD Variance £000s
Income	Income	210,451	210,368	(83)
Scheduled Care	Pay	(48,614)	(49,812)	(1,198)
	Non-Pay	(12,863)	(13,317)	(454)
<b>Scheduled Care Total</b>		<b>(61,477)</b>	<b>(63,129)</b>	<b>(1,652)</b>
Unscheduled Care	Pay	(35,468)	(36,346)	(878)
	Non-Pay	(7,379)	(7,834)	(455)
<b>Unscheduled Care Total</b>		<b>(42,847)</b>	<b>(44,180)</b>	<b>(1,333)</b>
Womens & Childrens Care Group	Pay	(19,547)	(19,919)	(372)
	Non-Pay	(3,105)	(2,998)	107
<b>Women &amp; Childrens Total</b>		<b>(22,652)</b>	<b>(22,917)</b>	<b>(265)</b>
Support services	Pay	(18,502)	(18,479)	23
	Non-Pay	(4,232)	(5,319)	(1,087)
<b>Support services Total</b>		<b>(22,734)</b>	<b>(23,798)</b>	<b>(1,064)</b>
Corporate and Reserves	Pay	(24,186)	(22,422)	1,764
	Non-Pay	(38,807)	(37,680)	1,127
<b>Corporate and Reserves Total</b>		<b>(62,993)</b>	<b>(60,102)</b>	<b>2,891</b>
<b>Total Expenditure</b>		<b>(212,703)</b>	<b>(214,126)</b>	<b>(1,423)</b>
<b>EBITDA</b>		<b>(2,252)</b>	<b>(3,758)</b>	<b>(1,506)</b>
Finance Costs	Finance Costs	(7,990)	(7,802)	188
<b>Surplus/(deficit) against Control Total pre PSF and Phased Spend</b>		<b>(10,242)</b>	<b>(11,560)</b>	<b>(1,318)</b>

The table to the left details the year to date position by care group pre phased spend.

As you can see the key headlines are:

- Scheduled care is overspent by £1.652m – this is due to increased costs associated with DSU, waiting list payments particularly within Urology and Gastroenterology and non pay expenditure within blood products and drugs.
- Unscheduled care is overspent by £1.333m – this is namely due to an increase in ED staffing and an increase in nursing volumes and agency.
- Womens & Children's is overspent by £0.265m which is due to under delivery within waste reduction.
- Support services is overspent by £1.064m – this is mainly within non pay and is due to an increase in pathology contracts offset partially by income and under delivery within waste reduction.
- Corporate areas and reserves are underspent by £2.891m – this is mainly due to a level of inflation reserves and medical staffing pay award.

# Income

	YTD Budget	YTD Actual	Variance	Variance %	YTD Budget	YTD Actual	Financial Variance Value	Price Variance	Volume Variance
	Activity	Activity	Activity		£000s	£000s	£000s	£000s	£000s
Accident and Emergency (Attendances)	70,709	71,704	995	1.4%	9,174	9,583	409	280	129
Outpatient Appts (Attendances)	250,564	249,153	(1,411)	(0.6%)	28,706	28,543	(163)	(140)	32
Elective Day Cases	29,020	28,676	(344)	(1.2%)	18,552	17,993	(559)	78	(637)
Elective Inpatient (Spells)	3,478	3,217	(261)	(7.5%)	11,023	10,422	(601)	166	(767)
Non Elective (Spells)	29,556	32,173	2,617	8.9%	60,426	63,216	2,791	(1,342)	4,133
Non Elective Other	3,936	3,724	(212)	(5.4%)	8,102	8,084	(17)	315	(333)
Emergency Threshold					(2,631)	(3,739)	(1,108)	(1,108)	
Others (Inc Reserves)					77,098	76,261	(837)	(837)	
<b>Total</b>	<b>387,264</b>	<b>388,647</b>	<b>1,383</b>	<b>0.4%</b>	<b>210,450</b>	<b>210,364</b>	<b>(86)</b>	<b>(2,589)</b>	<b>2,557</b>
Phased Spend					(890)	(890) <sup>0</sup>		0	
<b>Total after PSF</b>	<b>387,264</b>	<b>388,647</b>	<b>1,383</b>	<b>0.4%</b>	<b>209,560</b>	<b>209,474</b>	<b>(86)</b>	<b>(2,589)</b>	<b>2,557</b>
Provider Sustainability Funding (PSF)							(3,389)	(3,389)	
<b>Total after PSF</b>	<b>387,264</b>	<b>388,647</b>	<b>1,383</b>	<b>0.4%</b>	<b>213,981</b>	<b>210,506</b>	<b>(3,475)</b>	<b>(5,978)</b>	<b>2,557</b>

Income is under performing year to date by £0.083m pre PSF.

- Accident and Emergency attendances are above planned levels by 1.4%.
- Outpatient attendances are showing an underperformance to date of 0.6%, 1,411 attendances. This exists across gynaecology, neurology and accident and emergency.
- Elective Daycase activity is under plan by 344 spells (1.2%), and is due to reduced theatre capacity (theatres 10 and 11), theatre staffing and bedding down in RSH DSU during the months of April - July.
- Elective Inpatient spells are under delivering against plan by 261 spells (7.5%), this is across gynaecology, ENT and obstetrics and is also a knock on effect of theatre capacity aforementioned.
- Non Elective activity is 2,617 spells higher than the planned levels (8.9%), of which 3.4% (1,019 spells) is due to the introduction of a clinical decisions unit (CDU) at the PRH site.
- Others is underperforming by £0.834m year to date associated with private patient activity, rehab, critical care, antenatal and postnatal bookings (maternity pathway) and best practice tariff top ups.

## Key Messages

- After 7 months of the 2018/19 financial year the Trust had planned to receive income amounting to £210.451m excluding provider transformation funding (PSF) and had generated income amounting to £210.368m, an under performance of £0.083m.

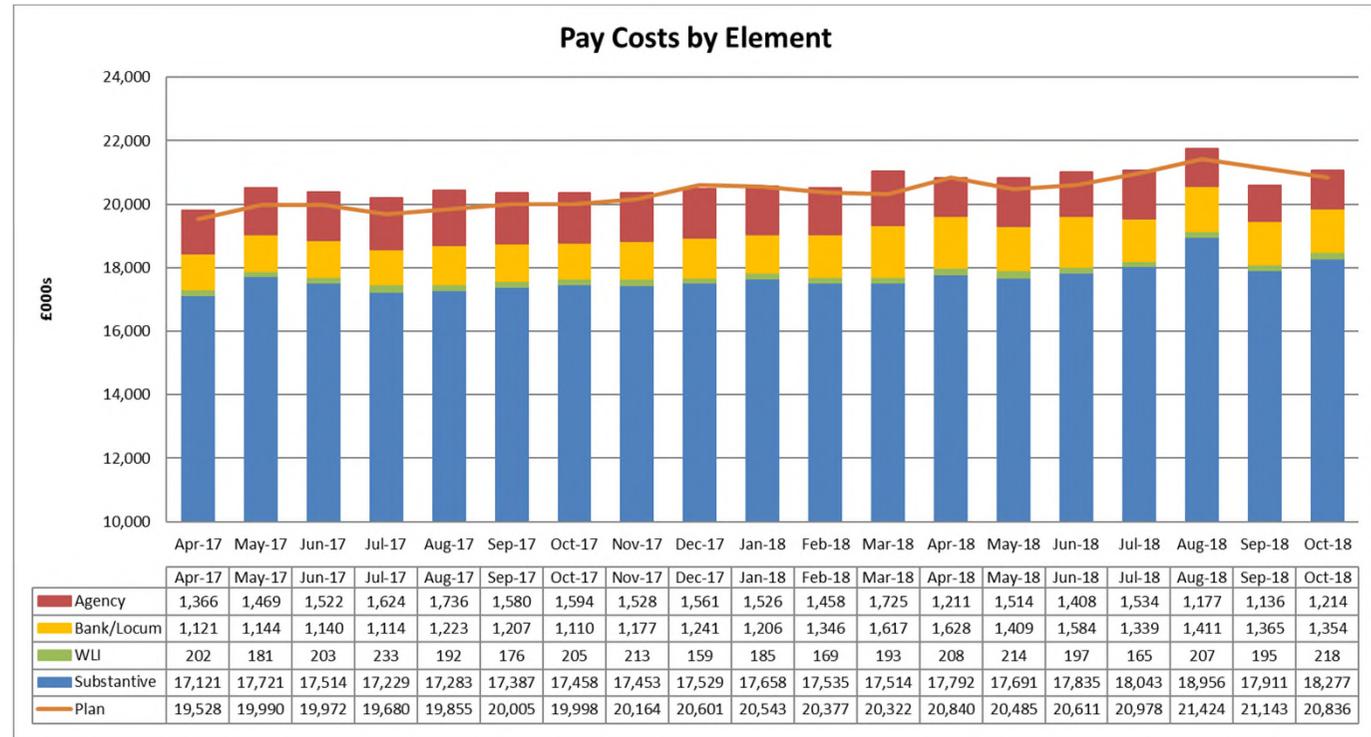
# Commissioner Contract Signature Update

Commissioner	Value	Agreed	Signed*	Update
Main CCG - Shropshire, Telford and Associates	£239,534,236	✓	Both	
NHS England – Specialised Services and Associates	£43,143,685	✓	Both	
Powys Teaching Health Board	£25,539,304	✓	Provider	Sent back to Powys 21/11/18 for counter signature awaiting returned copy.
Betsi Cadwaladr University Health Board (North Wales)	£1,650,553	✗	None	Contract value agreed. Quality Schedules and Reporting Requirement progressing but still to be finalised.
Welsh Health Specialised Services Committee (WHSSC)	£1,036,350	✗	None	Contract value agreed for the Fertility element, not for the Renal element. Discussions around supporting contract documentation have not progressed.
Hywel Dda	£92,671	✓	Both	

# Pay

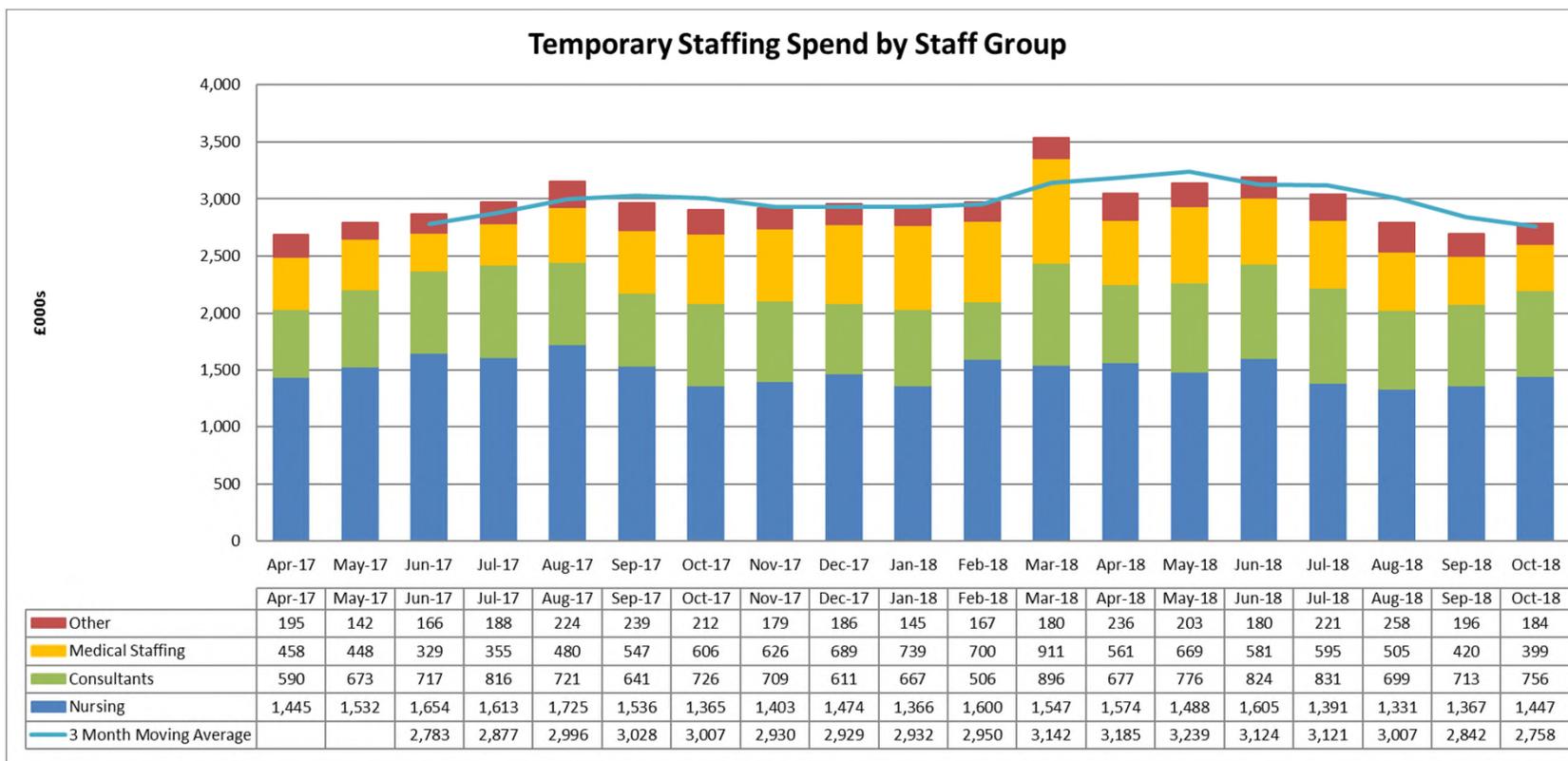
## Key Messages

- To date the pay spend has amounted to £147.191m against a plan of £146.317m resulting in an overspend of £0.874m.
- 13% of the Trust's pay costs in month 7 are attributable to temporary staffing.



The graph shows that 13% of the Trust's pay costs in month 7 were attributed to temporary staffing in line with the trend now seen over the last 3 months, this is due to a decrease in medical staffing. Agency spend accounts for 6%, £1.214m, £0.380m lower than October 2017.

# Temporary Staffing Spend

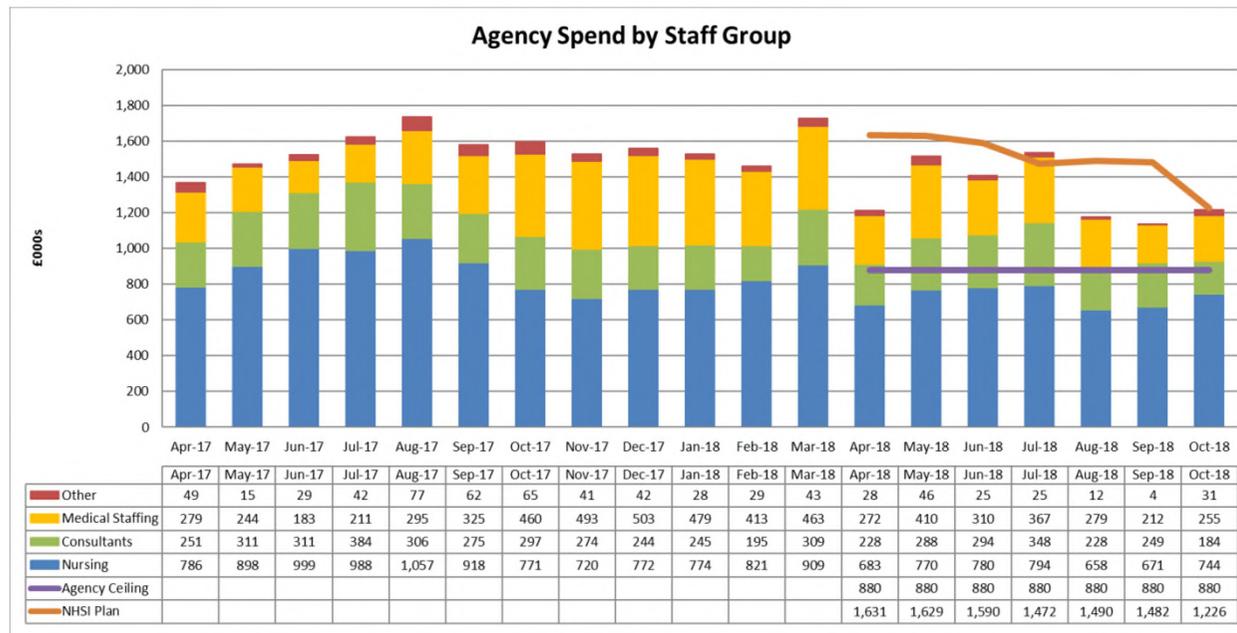


## Key Messages

- To date the temporary staffing (Bank, WLI, Agency and Locums) pay spend amounted to £20.685m. From the graph above you can also see that the 3 month moving average is decreasing.

# Agency

Annual		YTD					In Month		
Agency Ceiling	NHSI Agency Plan	Agency Ceiling Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/(Over) Agency Ceiling	Variance Under/(Over) Agency NHSI Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/(Over) Agency NHSI Plan
£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
10,559	16,660	6,159	10,520	9,195	(3,036)	1,325	1,226	1,214	12



## Key Messages

- The Trust continues to rely heavily on temporary staffing to support its fragile workforce and as a consequence remains above the agency ceiling as set by NHSI.
- Month 7 run rate up by £0.078m compared to month 6 2018/19.

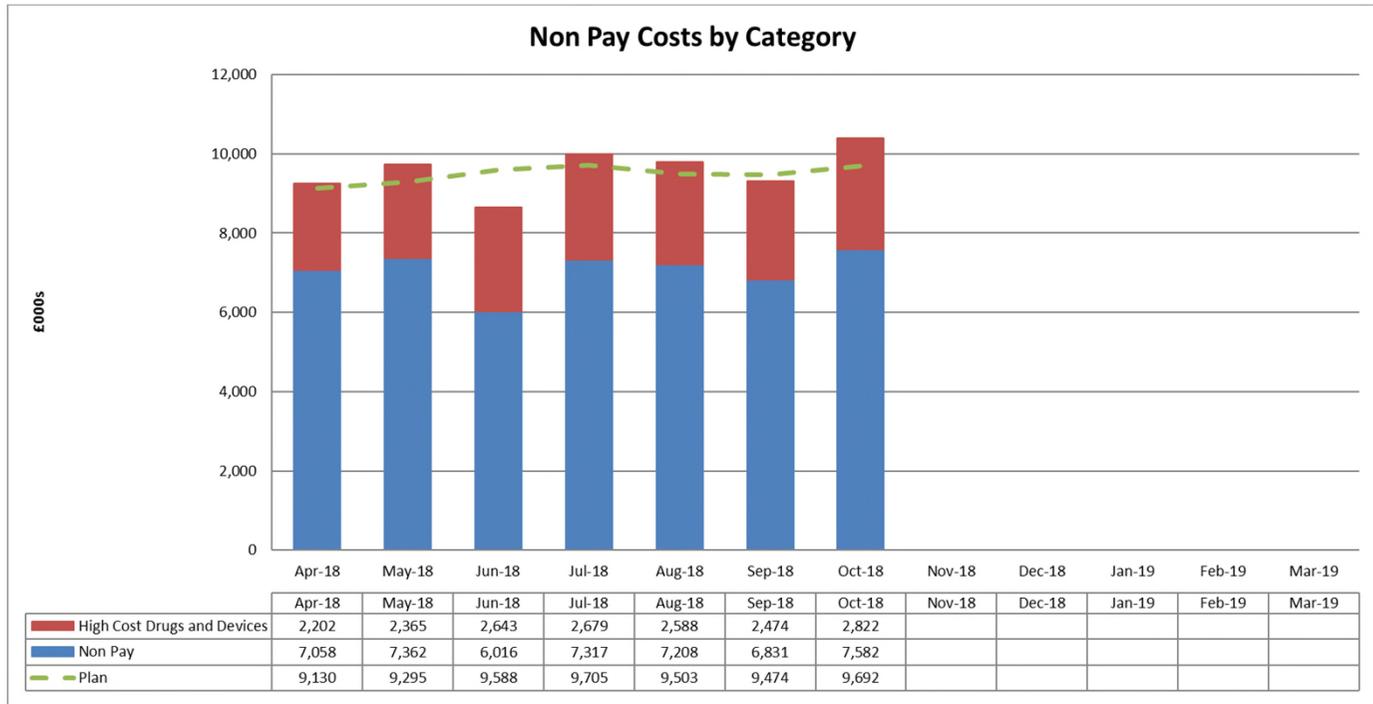
The table above details actual spend against the agency ceiling and agency plan, as can be seen, total agency spend in month amounted to £1.214m, £0.012m below the NHSI agency plan trajectory.

The graph shows the split of agency spend by staff group from April 2017 to present. Nurse agency accounts for 61% of the total agency spend in month, consultants and medical staffing account for 36% and other accounts for 3%.

# Non Pay

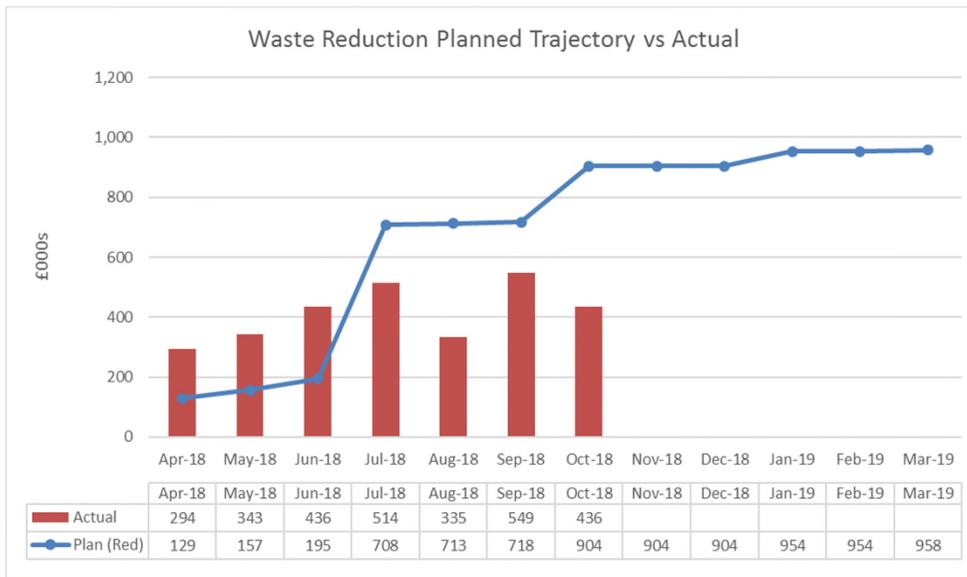
## Key Messages

- To date the non pay spend amounted to £67.148m against a plan of £66.386m resulting in an overspend of £0.761m.



The graph above shows that circa a quarter of the Trust's non pay spend is attributable to high cost drugs and devices which are a pass through cost to commissioners.

# Waste Reduction Performance



## Key Messages

- Against the year to date plan of £3.524m, £2.907m has been delivered, with an adverse variance of £0.617m. This most notably exists within the following schemes:
  - Unavailability
  - Womens & Children's

Scheme	Efficiency Programme Area	2018/19 Saving Plan	Plan YTD	Actual YTD	Variance YTD
<b>Stranded Patients</b>					
Unavailability	Workforce (Nursing)	960	493	60	(434)
Escalation	Workforce (Nursing)	700	312	510	198
Nurse Agency premium	Workforce (Nursing)	1,550	258	661	403
<b>Total Stranded Patients</b>		<b>3,210</b>	<b>1,063</b>	<b>1,231</b>	<b>168</b>
<b>Procurement</b>	Procurement	<b>1,300</b>	<b>717</b>	<b>546</b>	<b>(171)</b>
<b>Income Reduction</b>					
W&C's Addressing Income Reduction	Workforce (Nursing)	1,084	480	0	(480)
Radiology Addressing Income Reduction	Imaging	416	184	215	31
<b>Total Income Reduction</b>		<b>1,500</b>	<b>664</b>	<b>215</b>	<b>(449)</b>
<b>Other</b>					
Theatres, Outpatients and Endoscopy	Workforce (Medical)	750	332	177	(155)
Ophthalmology Consolidation	Other Savings plans	50	8	0	(8)
Corporate Services 1&2		500	256	170	(86)
Housekeeping	Other Savings plans	1,250	556	466	(90)
WLI	Workforce (Medical)	150	0	0	0
Drug Spend	Hospital Medicine and Pharmacy	180	43	101	58
<b>Total Other</b>		<b>2,880</b>	<b>1,195</b>	<b>914</b>	<b>(281)</b>
<b>Grand Total</b>		<b>8,890</b>	<b>3,639</b>	<b>2,907</b>	<b>(732)</b>
Assumed Slippage		(692)	(115)	0	115
<b>Revised Total</b>		<b>8,198</b>	<b>3,524</b>	<b>2,907</b>	<b>(617)</b>
Finance Costs					
Inflation Savings					
<b>Revised Total</b>		<b>8,198</b>	<b>3,524</b>	<b>2,907</b>	<b>(617)</b>

# Forecast Outturn Scenarios

Element	Flexed Annual Plan	Best	Worst	Most Likely	Variance to Most Likely
Income	359,641	359,193	359,193	359,193	(448)
MRET/Readmission monies		2,500		1,380	1,380
Contract challenges			(1,500)		0
Recover Fertility under performance		300		300	300
Urology income		200		200	200
<b>Income after adjustments</b>	<b>359,641</b>	<b>362,193</b>	<b>357,693</b>	<b>361,073</b>	<b>1,432</b>
Pay	(250,599)	(255,473)	(255,473)	(255,473)	(4,874)
Bank utilisation		400		400	400
<b>Pay after adjustments</b>	<b>(250,599)</b>	<b>(255,073)</b>	<b>(255,473)</b>	<b>(255,073)</b>	<b>(4,474)</b>
Non Pay	(112,650)	(116,402)	(116,402)	(116,402)	(3,752)
<b>Non Pay after adjustments</b>	<b>(112,650)</b>	<b>(116,402)</b>	<b>(116,402)</b>	<b>(116,402)</b>	<b>(3,752)</b>
Finance Costs	(14,831)	(13,364)	(13,364)	(13,364)	1,467
<b>Finance Costs after adjustments</b>	<b>(14,831)</b>	<b>(13,364)</b>	<b>(13,364)</b>	<b>(13,364)</b>	<b>1,467</b>
<b>Forecast Outturn Pre PSF and Rectification</b>	<b>(18,439)</b>	<b>(22,646)</b>	<b>(27,546)</b>	<b>(23,766)</b>	<b>(5,327)</b>
<b>Control Total</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>0</b>
<b>Variance</b>	<b>0</b>	<b>(4,207)</b>	<b>(9,107)</b>	<b>(5,327)</b>	
Further Potental Rectification Opportunities		2,162		1,081	1,081
<b>Forecast Outturn Pre PSF Post Rectification</b>	<b>(18,439)</b>	<b>(20,484)</b>	<b>(27,546)</b>	<b>(22,685)</b>	<b>(4,246)</b>
<b>Control Total</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>0</b>
<b>Variance</b>	<b>0</b>	<b>(2,045)</b>	<b>(9,107)</b>	<b>(4,246)</b>	

The table to the left details the best, worst and most likely forecast outturn position for the 2018/19 financial year against the Trusts pre PSF control total.

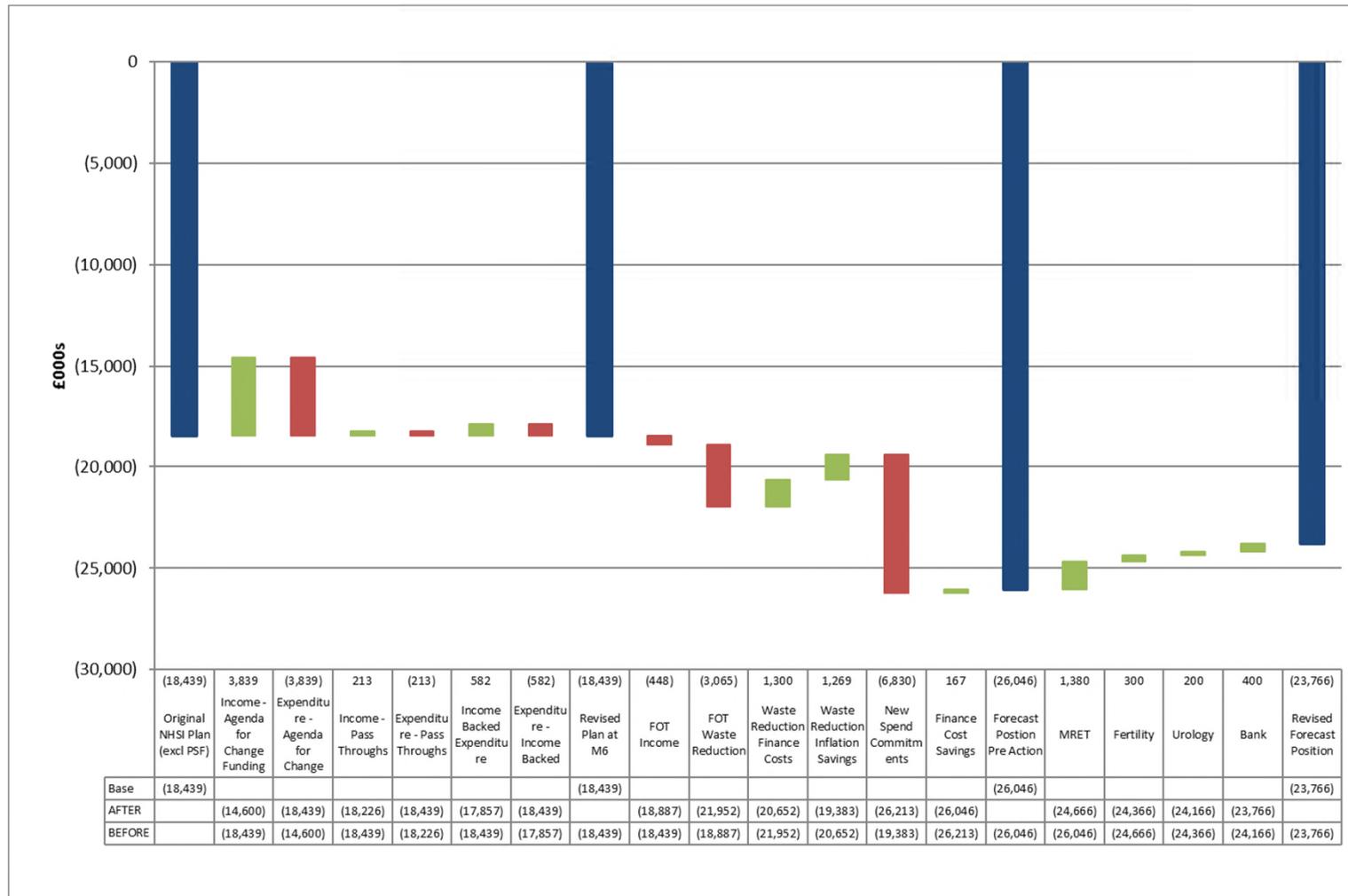
## Note

The forecast outturn scenarios currently constructed **do not** include the impact of keeping A&E open at the PRH. The value of these costs is to be concluded however, it is estimated that this will introduce an additional cost pressure of c£1.0-£2.0m.

## Key Messages

- Given the Trusts existing runrate, the Trusts most likely forecast position is to overspend against the Trusts control total by £4.246m, assuming that the Trust can realise benefits associated with rectification opportunities of £1.081m. Work is however taking place to pursue further opportunities to improve the end of year position. If each of the opportunities were realised this would have the effect of reducing the level of overspend against the control total to £2.045m.

# Forecast Position



The above bridge describes the Trusts forecast position at a high level, the subsequent slides describe these movements in detail. The bridge shows a forecast position of a £23.766m deficit against the Trusts agreed control total (pre PSF) of a £18.439m deficit, this means there is a **shortfall of £5.327m pre rectification.**

# Forecast Outturn Performance – Month 7

Income/Pay/Non Pay	Month 7 YTD FOT £000s	Month 7 YTD Actual £000s	Variance £000s
Income	210,094	210,368	274
Pay	(147,388)	(147,191)	197
Non-Pay	(67,470)	(67,432)	38
<b>Total Expenditure</b>	<b>(214,857)</b>	<b>(214,623)</b>	<b>234</b>
<b>EBITDA</b>	<b>(4,763)</b>	<b>(4,255)</b>	<b>508</b>
Finance Costs	(7,796)	(7,802)	(6)
<b>Surplus/(Deficit)</b>	<b>(12,559)</b>	<b>(12,057)</b>	<b>502</b>

## Key Messages

- The table to the left details the forecast year to date month 7 position as at last month against the actual delivered. The position is positive however, given the uncertainties around the winter period the Trust is not revising its year end expectation at this point.

# Forecast Outturn Average Runrate

Income/Pay/Non Pay	Months 1-7 Average Runrate £000s	Months 8-12 Average Runrate £000s	Variance Average Runrate £000s
Income	30,053	29,765	(288)
Pay	(21,027)	(21,657)	(629)
Non-Pay	(9,633)	(9,794)	(161)
Finance Costs	(1,115)	(1,112)	2
<b>Total</b>	<b>(1,722)</b>	<b>(2,798)</b>	<b>(1,076)</b>

## Income

- Reduction in elective activity inline with previous 3 year trend

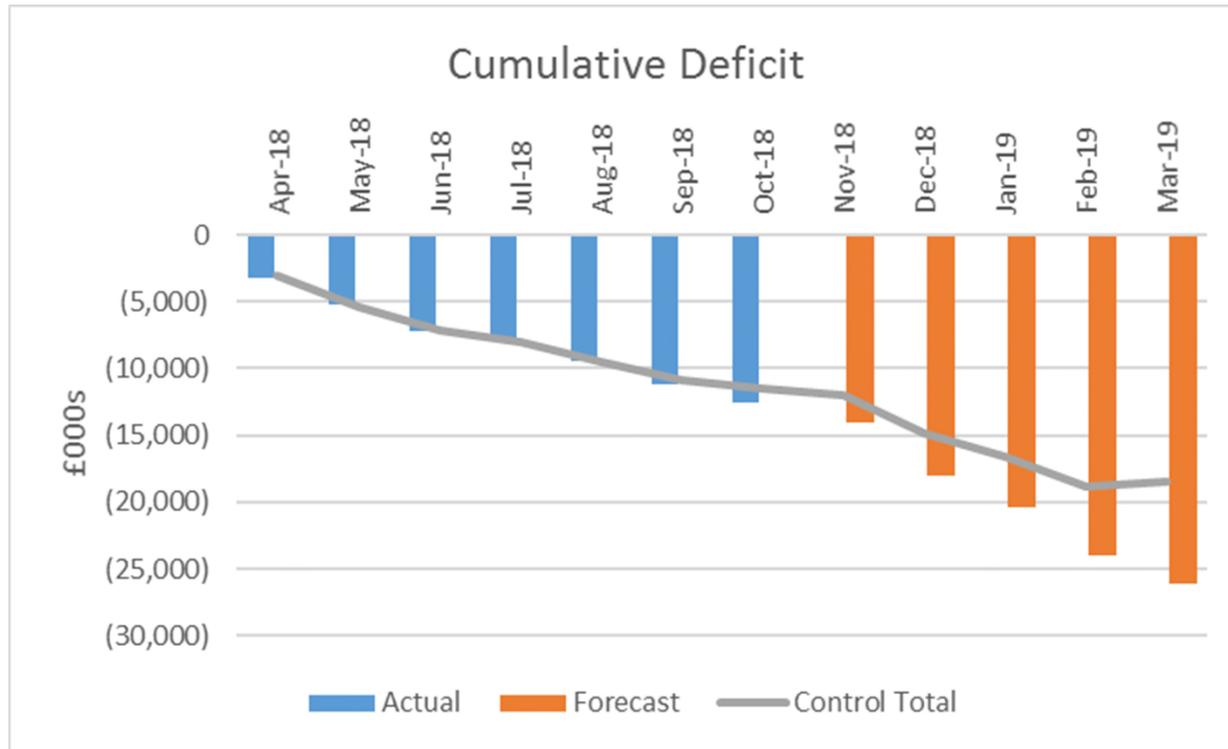
## Pay

- Increase in runrate due to:
  - Increased costs associated with winter inline with the Trusts winter plan (£2.3m, £383k per month)
  - Further increase in WLI expenditure to reduce past max waits, particularly with Unscheduled Care, £25k per month
  - Increase in core bed capacity, £47k per month
  - Increase in Unscheduled Care non ED Medical Staffing to move towards the agreed medical workforce plan

## Non Pay

- Increase in runrate due to:
  - Increased energy usage during winter

# Forecast Outturn – Cumulative Deficit

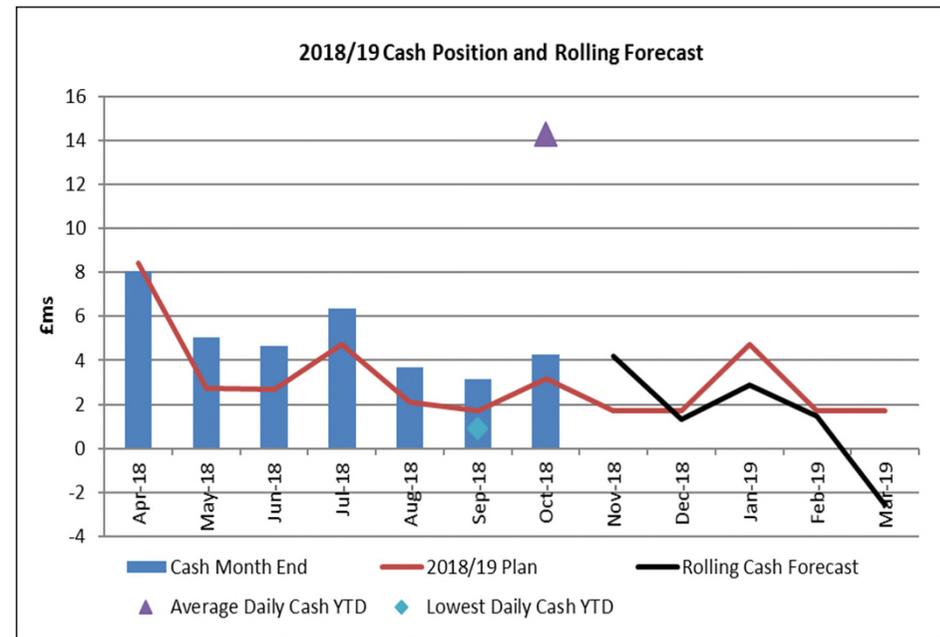


## Key Messages

- The cumulative deficit is expected to grow over the period November through to March due to increased expenditure associated with winter and ED workforce which is further compounded by an expectation of reduced income.

# Cash

	Actual YTD £000's	Total To Date And Forecast £000's
Balance B/fwd	1,649	1,649
<b>I&amp;E CASHFLOW</b>		
Income I&E (inc Donated & PSF)	206,596	363,128
Pay I&E	(147,166)	(254,317)
Non Pay I&E	(65,846)	(116,078)
Finance Costs I&E	(1,746)	(3,620)
Capital Expenditure (inc Donated) re Depreciation	(3,854)	(10,767)
<b>Total I&amp;E Cashflow</b>	<b>(12,016)</b>	<b>(21,654)</b>
<b>EXTERNAL FUNDING</b>		
Revolving Working Capital - I&E Deficit	5,401	8,615
Loan facility to cover non-receipt of PSF	0	8,792
PDC Allocation - NHS WiFi in Secondary Care (Expenditure)	(45)	(205)
PDC Allocation - NHS WiFi in Secondary Care (Income)	0	205
PDC Allocation - 30 Bedded Ward (Expenditure)	(108)	(3,192)
PDC Allocation - 30 Bedded Ward (Income)	0	3,192
<b>Total External Funding Cashflow</b>	<b>5,248</b>	<b>17,407</b>
<b>Total Balance Sheet Changes</b>	<b>9,377</b>	<b>51</b>
<b>Total Cashflow</b>	<b>2,609</b>	<b>(4,197)</b>
Balance C/fwd	4,258	(2,548)



The above cashflow is based on the most likely variance to the Trust's pre PSF control total of £4.246m. The above assumes that the Trust will receive cash support for the non-receipt of its total PSF ie shortfall of £8.792m. As it is assumed that no cash support will be available for the Trust's deficit over its agreed control total, there is a shortfall in cash of £4.246m. The Trust is required to hold a minimum cash balance of £1.700m.

Assuming that the Trust only receives external support for the agreed Control Total deficit of £8.615m and the shortfall in achieving PSF of £8.792m, it is forecast that the Trust's cash shortfall of £4.246m (forecast deficit over agreed Control Total) will start materialising in February 2019 with non-achievement of required cash balance.

## Key Messages

- It is forecast that the Trust's cash shortfall of £4.246m (forecast deficit over agreed Control Total) will start materialising in February 2019 with non-achievement of the required cash balance. The Trust will need to look at ways of reducing cash outflow and has a meeting to discuss options with NHSI on 3<sup>rd</sup> December.

**PERFORMANCE COMMITTEE –27<sup>th</sup> NOVEMBER 2018  
FINANCE REPORT – MONTH 7**

**1. Income & Expenditure position**

The financial position of the Trust at the end of month 7 is presented in the table below:

	Annual		YTD		
	NHSI Plan	Flexed Plan	Flexed Plan	Actual	Variance
	£000s	£000s	£000s	£000s	£000s
Income	355,007	359,641	210,451	210,368	(83)
Pay	(246,151)	(250,599)	(146,317)	(147,191)	(874)
Non-Pay & Reserves	(112,580)	(112,650)	(66,386)	(67,148)	(761)
<b>Total Expenditure</b>	<b>(358,731)</b>	<b>(363,249)</b>	<b>(212,703)</b>	<b>(214,339)</b>	<b>(1,635)</b>
<b>EBITDA</b>	<b>(3,724)</b>	<b>(3,608)</b>	<b>(2,253)</b>	<b>(3,971)</b>	<b>(1,718)</b>
Finance Costs	(14,715)	(14,831)	(7,990)	(7,802)	188
<b>Surplus/(deficit) against Control Total pre PSF and Phased Spend</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(10,243)</b>	<b>(11,773)</b>	<b>(1,530)</b>
Phased Spend	0	0	(1,257)	(1,257)	0
Medical Staffing Pay Award Allowance				212	212
<b>Adjusted Surplus/(deficit) post Phased Spend</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(11,500)</b>	<b>(12,818)</b>	<b>(1,318)</b>
<i>Provider Sustainability Funding (PSF)</i>	<i>9,824</i>	<i>9,824</i>	<i>4,421</i>	<i>1,032</i>	<i>(3,389)</i>
<i>Surplus/(deficit) against Control Total post Phased Spend and PSF</i>	<i>(8,615)</i>	<i>(8,615)</i>	<i>(7,079)</i>	<i>(11,786)</i>	<i>(4,707)</i>

**Key Messages**

- *At the end of October, seven months into the 2018/19 financial year the Trust is reporting a year to date pre provider sustainability fund (PSF) deficit of £12.818m, £1.318m worse than plan.*

## 2. Income

### 2.1 Income – Performance to date

After seven months of the 2018/19 financial year the Trust had planned to receive income amounting to £210.451m excluding provider transformation funding (PSF) and had generated income amounting to £210.368m, an under performance of £0.083m.

	YTD Budget	YTD Actual	Variance	Variance %	YTD Budget	YTD Actual	Financial Variance Value	Price Variance	Volume Variance
	Activity	Activity	Activity		£000s	£000s	£000s	£000s	£000s
Accident and Emergency (Attendances)	70,709	71,704	995	1.4%	9,174	9,583	409	280	129
Outpatient Appts (Attendances)	250,564	249,153	(1,411)	(0.6%)	28,706	28,543	(163)	(140)	32
Elective Day Cases	29,020	28,676	(344)	(1.2%)	18,552	17,993	(559)	78	(637)
Elective Inpatient (Spells)	3,478	3,217	(261)	(7.5%)	11,023	10,422	(601)	166	(767)
Non Elective (Spells)	29,556	32,173	2,617	8.9%	60,426	63,216	2,791	(1,342)	4,133
Non Elective Other	3,936	3,724	(212)	(5.4%)	8,102	8,084	(17)	315	(333)
Emergency Threshold					(2,631)	(3,739)	(1,108)	(1,108)	
Others (Inc Reserves)					77,098	76,261	(837)	(837)	
<b>Total</b>	<b>387,264</b>	<b>388,647</b>	<b>1,383</b>	<b>0.4%</b>	<b>210,450</b>	<b>210,364</b>	<b>(86)</b>	<b>(2,589)</b>	<b>2,557</b>
Phased Spend					(890)	(890)	0	0	
Provider Sustainability Funding (PSF)					4,421	1,032	(3,389)	(3,389)	
Total after PSF	387,264	388,647	1,383	0	213,981	210,506	(3,475)	(5,978)	2,557

A number of observations can be made from the above table, these being:

- i) Accident and Emergency attendances are above planned levels by 1.4%.
- ii) Outpatient attendances are showing an underperformance to date of 0.6%, 1,411 attendances. This exists across gynaecology, neurology and accident and emergency.
- iii) Elective Daycase activity is under plan by 344 spells (1.2%), and is due to reduced theatre capacity (theatres 10 and 11), theatre staffing and bedding down in RSH DSU during the months of April - July.
- iv) Elective Inpatient spells are under delivering against plan by 261 spells (7.5%), this is across gynaecology, ENT and obstetrics and is also a knock on effect of theatre capacity aforementioned.
- v) Non Elective activity is 2,617 spells higher than the planned levels (8.9%), of which 3.4% (1,019 spells) is due to the introduction of a clinical decisions unit (CDU) at the PRH site.
- vi) Others is underperforming by £0.834m year to date associated with private patient activity, rehab, critical care, antenatal and postnatal bookings (maternity pathway) and best practice tariff top ups.
  - i) Private patient income is expected to recover within Fertility now the move to the Severn Fields site has taken place, the underperformance to date is due to the need to wind down the service ready for the move.

#### **Key Messages**

- As at the end of October the Trust is reporting an under performance of £0.083m pre PSF.
- An overperformance exists within A&E and Non Electives, conversely an underperformance is present within Outpatients, Daycase, Elective Inpatients and Other Clinical and Non Clinical activity.

### 3. Expenditure

	YTD		
	Flexed Plan	Actual	Variance
	£000s	£000s	£000s
Pay	(146,317)	(147,191)	(874)
Non-Pay & Reserves	(66,386)	(67,148)	(761)
<b>Total Expenditure</b>	<b>(212,703)</b>	<b>(214,339)</b>	<b>(1,635)</b>

To date the pay spend has amounted to £147.191m against a plan of £146.317m resulting in an overspend of £0.874m, whilst non pay spend amounted to £67.148m against a plan of £66.386m resulting in an overspend of £0.761m, a total of £1.635m overspend on expenditure.

This is mainly driven by the following factors:

- Pay:
  - Under delivery of waste reduction schemes; Unavailability and Womens & Children's cost reduction
  - Scheduled care - increased costs associated with agency, DSU and waiting list payments particularly within Urology and Gastroenterology
  - Unscheduled care - due to an increase in ED staffing and increased fill rates
- Non Pay:
  - Support services - increase in pathology contracts offset partially by income

#### 3.1 Agency spend

The Trust continues to rely heavily on temporary staffing to support its fragile workforce and as a consequence remains above the agency ceiling as set by NHSI. The table below details actual spend against the agency ceiling and the NHSI plan.

Annual		YTD					In Month		
Agency Ceiling	NHSI Agency Plan	Agency Ceiling Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/(Over) Agency Ceiling	Variance Under/(Over) Agency NHSI Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/(Over) Agency NHSI Plan
£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
10,559	16,660	6,159	10,520	9,195	(3,036)	1,325	1,226	1,214	12

As you can see, total agency spend year to date amounted to £9.195m, £3.036m above the agency ceiling set by NHSI.

## Key Messages

- Pay spend has amounted to £147.191m against a plan of £146.317m resulting in an overspend of £0.874m driven most notably by an increase in ED staffing, an under delivery on waste reduction schemes and increased costs associated with DSU and waiting list initiative payments.
- Non pay spend amounted to £67.148m against a plan of £66.386m resulting in an overspend of £0.761m, this is mainly driven by an increase in pathology contracts offset partially by income.
- Agency spend continues to underspend against the NHSI plan however, is over the Trusts agency ceiling target.

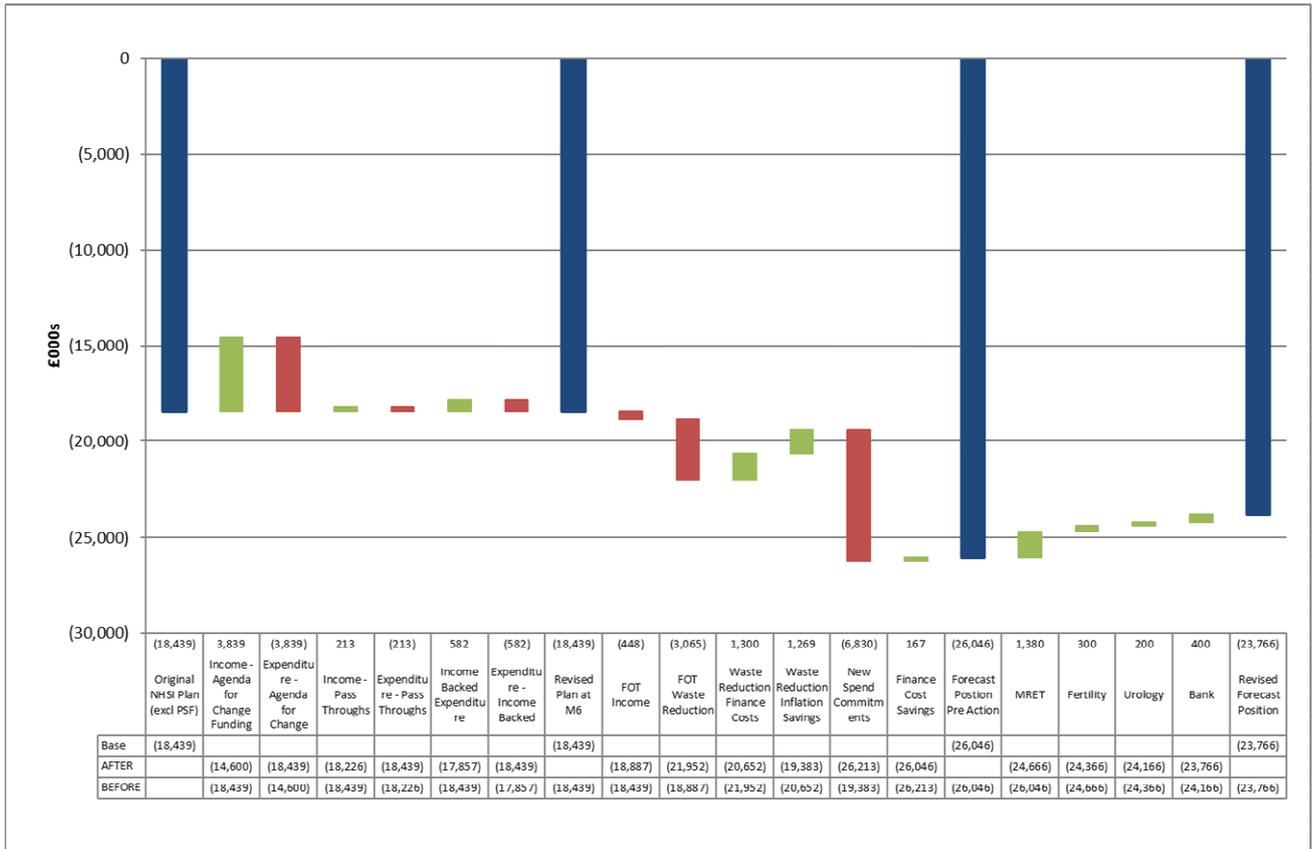
## 4. Forecast Outturn

The Trust has assessed its outturn under three scenarios; best, worst and most likely, these are detailed below. To note, the forecast outturn scenarios currently constructed do not include the impact of keeping A&E open at the PRH. The value of these costs is to be concluded however, it is estimated that this will introduce an additional cost pressure of c£1.0-2.0m.

Element	Flexed Annual Plan	Best	Worst	Most Likely	Variance to Most Likely
Income	359,641	359,193	359,193	359,193	(448)
MRET/Readmission monies		2,500		1,380	1,380
Contract challenges			(1,500)		0
Recover Fertility under performance		300		300	300
Urology income		200		200	200
<b>Income after adjustments</b>	<b>359,641</b>	<b>362,193</b>	<b>357,693</b>	<b>361,073</b>	<b>1,432</b>
Pay	(250,599)	(255,473)	(255,473)	(255,473)	(4,874)
Impact of weekly bank		400		400	400
<b>Pay after adjustments</b>	<b>(250,599)</b>	<b>(255,073)</b>	<b>(255,473)</b>	<b>(255,073)</b>	<b>(4,474)</b>
Non Pay	(112,650)	(116,402)	(116,402)	(116,402)	(3,752)
<b>Non Pay after adjustments</b>	<b>(112,650)</b>	<b>(116,402)</b>	<b>(116,402)</b>	<b>(116,402)</b>	<b>(3,752)</b>
Finance Costs	(14,831)	(13,364)	(13,364)	(13,364)	1,467
<b>Finance Costs after adjustments</b>	<b>(14,831)</b>	<b>(13,364)</b>	<b>(13,364)</b>	<b>(13,364)</b>	<b>1,467</b>
<b>Forecast Outturn Pre PSF and Rectification</b>	<b>(18,439)</b>	<b>(22,646)</b>	<b>(27,546)</b>	<b>(23,766)</b>	<b>(5,327)</b>
<b>Control Total</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>0</b>
<b>Variance</b>	<b>0</b>	<b>(4,207)</b>	<b>(9,107)</b>	<b>(5,327)</b>	
Further Potential Rectification Opportunities		2,162		1,081	1,081
<b>Forecast Outturn Pre PSF Post Rectification</b>	<b>(18,439)</b>	<b>(20,484)</b>	<b>(27,546)</b>	<b>(22,685)</b>	<b>(4,246)</b>
<b>Control Total</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>(18,439)</b>	<b>0</b>
<b>Variance</b>	<b>0</b>	<b>(2,045)</b>	<b>(9,107)</b>	<b>(4,246)</b>	

The Trusts most likely forecast position is to overspend against the Trusts control total by £4.246m, assuming that the Trust can realise benefits associated with rectification opportunities of £1.081m. Work is however taking place to pursue further opportunities to improve the end of year position. If each of the opportunities were realised this would have the effect of reducing the level of overspend against the control total to £2.045m.

The bridge diagram below describes how the Trust gets to its most likely position pre rectification. You can see that the key drivers are failure to deliver waste reduction and new spending commitments.



The below table details the actual runrate April-October and the forecast position November-March in order to achieve the most likely forecast pre rectification:

Income/Pay/Non Pay	Actual								Forecast					FOT £000s
	Month 1 £000s	Month 2 £000s	Month 3 £000s	Month 4 £000s	Month 5 £000s	Month 6 £000s	Month 7 £000s	YTD £000s	Month 8 £000s	Month 9 £000s	Month 10 £000s	Month 11 £000s	Month 12 £000s	
Income	28,322	29,877	30,597	30,650	30,006	29,192	31,724	210,368	30,692	28,475	30,274	28,876	30,509	359,193
Pay	(21,160)	(21,222)	(22,098)	(20,482)	(20,559)	(20,608)	(21,062)	(147,191)	(21,531)	(21,631)	(21,926)	(21,553)	(21,642)	(255,474)
Non-Pay	(9,261)	(9,597)	(9,311)	(9,779)	(9,894)	(9,235)	(10,355)	(67,432)	(9,766)	(9,752)	(9,726)	(9,740)	(9,986)	(116,402)
<b>Total Expenditure</b>	<b>(30,421)</b>	<b>(30,819)</b>	<b>(31,409)</b>	<b>(30,261)</b>	<b>(30,453)</b>	<b>(29,843)</b>	<b>(31,417)</b>	<b>(214,623)</b>	<b>(31,297)</b>	<b>(31,384)</b>	<b>(31,652)</b>	<b>(31,293)</b>	<b>(31,627)</b>	<b>(371,876)</b>
<b>EBITDA</b>	<b>(2,099)</b>	<b>(942)</b>	<b>(812)</b>	<b>389</b>	<b>(447)</b>	<b>(651)</b>	<b>307</b>	<b>(4,255)</b>	<b>(606)</b>	<b>(2,909)</b>	<b>(1,379)</b>	<b>(2,417)</b>	<b>(1,118)</b>	<b>(12,683)</b>
Finance Costs	(1,110)	(1,113)	(1,076)	(1,156)	(1,115)	(1,112)	(1,120)	(7,802)	(1,114)	(1,114)	(1,114)	(1,114)	(1,108)	(13,364)
<b>Surplus/(Deficit)</b>	<b>(3,209)</b>	<b>(2,055)</b>	<b>(1,888)</b>	<b>(767)</b>	<b>(1,562)</b>	<b>(1,763)</b>	<b>(813)</b>	<b>(12,057)</b>	<b>(1,719)</b>	<b>(4,023)</b>	<b>(2,492)</b>	<b>(3,531)</b>	<b>(2,225)</b>	<b>(26,048)</b>
<b>Cumulative</b>	<b>(3,209)</b>	<b>(5,264)</b>	<b>(7,152)</b>	<b>(7,919)</b>	<b>(9,481)</b>	<b>(11,244)</b>	<b>(12,057)</b>	<b>(24,114)</b>	<b>(13,776)</b>	<b>(17,799)</b>	<b>(20,291)</b>	<b>(23,822)</b>	<b>(26,048)</b>	
MRET	0	0	0	0	0	0	0	0	920	115	115	115	115	1,380
Fertility/Urology	0	0	0	0	0	0	0	0	100	100	100	100	100	500
Bank Utilisation	0	0	0	0	0	0	0	0	0	0	0	0	400	400
<b>Revised Surplus/(Deficit)</b>	<b>(3,209)</b>	<b>(2,055)</b>	<b>(1,888)</b>	<b>(767)</b>	<b>(1,562)</b>	<b>(1,763)</b>	<b>(813)</b>	<b>(12,057)</b>	<b>(699)</b>	<b>(3,808)</b>	<b>(2,277)</b>	<b>(3,316)</b>	<b>(1,610)</b>	<b>(23,768)</b>
<b>Control Total pre PSF</b>														<b>(18,439)</b>
<b>Variance</b>														<b>(5,329)</b>

The table below details the forecast month 7 position as constructed in September against the actual. The position is positive however, given the uncertainties around the winter period the Trust is not revising its year end expectation at this point.

Income/Pay/Non Pay	Month 7 YTD FOT £000s	Month 7 YTD Actual £000s	Variance £000s
Income	210,094	210,368	274
Pay	(147,388)	(147,191)	197
Non-Pay	(67,470)	(67,432)	38
<b>Total Expenditure</b>	<b>(214,857)</b>	<b>(214,623)</b>	<b>234</b>
<b>EBITDA</b>	<b>(4,763)</b>	<b>(4,255)</b>	<b>508</b>
Finance Costs	(7,796)	(7,802)	(6)
<b>Surplus/(Deficit)</b>	<b>(12,559)</b>	<b>(12,057)</b>	<b>502</b>

You can see from the below that the average runrate (pre corrective action and rectification) assumed going forward reflects a reasonable judgement that is neither optimistic nor pessimistic.

Income/Pay/Non Pay	Months 1-7 Average Runrate £000s	Months 8-12 Average Runrate £000s	Variance Average Runrate £000s
Income	30,053	29,765	(288)
Pay	(21,027)	(21,657)	(629)
Non-Pay	(9,633)	(9,794)	(161)
Finance Costs	(1,115)	(1,112)	2
<b>Total</b>	<b>(1,722)</b>	<b>(2,798)</b>	<b>(1,076)</b>

An increase in the pay runrate is assumed associated with:

- Increased costs associated with winter in line with the Trusts winter plan (£2.3m, £383k per month)
- Further increase in WLI expenditure to reduce past max waits, particularly with Unscheduled Care, £25k per month
- Increase in core bed capacity, £47k per month
- Increase in Unscheduled Care non ED Medical Staffing to move towards the agreed medical workforce plan

Non pay is anticipated to grow by £0.161m on average and is reflective of the increased energy usage seen during the winter period.

A reduction in income has been assumed to reflect the profile in line with the previous 3 year trend when the Trust typically sees a reduction in elective capacity over the winter period.

**Activity Assessment**  
**Month**  
**Future Months based on**

7  
 FOT

	Actual										Plan						
	Apr	May	Jun	Average Per Month Apr-Jun	Jul	Aug	Sep	Average Per Month Jul-Sep	Oct	Nov	Dec	Average Per Month Oct-Dec	Jan	Feb	Mar	Average Jan-Mar	Annual
A&E	9,431	10,720	10,245	10,132	11,023	10,167	9,974	10,388	10,144	9,746	9,565	9,818	9,753	9,293	10,389	9,812	120,449
Outpatient Attendances	34,201	36,133	35,277	35,204	36,497	34,424	33,678	34,866	38,943	37,279	29,757	35,326	35,077	33,582	35,808	34,822	420,656
Elective Daycases	3,785	4,144	4,049	3,993	4,015	4,196	3,992	4,068	4,495	4,101	3,701	4,099	3,953	3,813	4,304	4,023	48,547
Elective Inpatient Spells	419	466	534	473	486	437	399	441	476	464	417	452	367	380	439	395	5,284
Emergency Spells	4,459	4,715	4,468	4,547	4,696	4,693	4,402	4,597	4,740	4,863	4,836	4,813	4,867	4,519	5,025	4,804	56,284
Maternity/Non Elective Other Spells	504	598	524	542	523	511	491	508	573	515	517	530	523	504	529	519	6,312

**Elective Day Case**

	Apr	May	Jun	Average Per Month Apr-Jun	Jul	Aug	Sep	Average Per Month Jul-Sep	Oct	Nov	Dec	Average Per Month Oct-Dec	Jan	Feb	Mar	Average Jan-Mar	Annual
18/19 FOT	3,785	4,144	4,049	3,993	4,015	4,196	3,992	4,068	4,121	4,101	3,701	3,974	3,953	3,813	4,304	4,023	48,173
Actual	3,785	4,144	4,049	3,993	4,015	4,196	3,992	4,068	4,495			4,495					28,676
Variance	0	0	0	0	0	0	0	0	374			521				(4,023)	0
17/18	3,761	4,161	3,991	3,971	3,819	4,116	4,118	4,018	4,197	4,038	3,263	3,833	3,879	3,532	3,990	3,800	46,865
16/17	3,814	3,577	3,874	3,755	3,811	3,919	3,895	3,875	3,751	3,895	3,576	3,741	3,742	3,695	4,436	3,958	45,985

**Elective Inpatient**

	Apr	May	Jun	Average Per Month Apr-Jun	Jul	Aug	Sep	Average Per Month Jul-Sep	Oct	Nov	Dec	Average Per Month Oct-Dec	Jan	Feb	Mar	Average Jan-Mar	Annual
18/19 FOT	419	466	534	473	486	437	399	441	467	464	417	449	367	380	439	395	5,275
Actual	419	466	534	473	486	437	399	441	476			476					3,217
Variance	0	0	0	0	0	0	0	0	9			27				(395)	0
17/18	397	484	525	469	551	478	452	494	486	499	416	467	330	384	436	383	5,438
16/17	490	493	558	514	525	484	505	505	498	551	489	513	390	424	556	457	5,963

**Non Elective**

	Apr	May	Jun	Average Per Month Apr-Jun	Jul	Aug	Sep	Average Per Month Jul-Sep	Oct	Nov	Dec	Average Per Month Oct-Dec	Jan	Feb	Mar	Average Jan-Mar	Annual
18/19 FOT	4,459	4,715	4,468	4,547	4,696	4,693	4,402	4,597	4,740	4,863	4,836	4,813	4,867	4,519	5,025	4,804	56,284
Actual	4,459	4,715	4,468	4,547	4,696	4,693	4,402	4,597	4,740			4,740					32,173
Variance	0	0	0	0	0	0	0	0	(0)			(73)				(4,804)	0
17/18	4,014	4,269	4,235	4,173	4,232	4,100	3,968	4,100	4,261	4,437	4,196	4,298	4,624	4,091	4,561	4,425	50,988
16/17	3,993	4,125	4,158	4,082	4,159	3,974	4,099	4,077	4,057	4,207	4,310	4,191	4,149	3,860	4,528	4,179	49,619

**Maternity/Non Elective Other**

	Apr	May	Jun	Average Per Month Apr-Jun	Jul	Aug	Sep	Average Per Month Jul-Sep	Oct	Nov	Dec	Average Per Month Oct-Dec	Jan	Feb	Mar	Average Jan-Mar	Annual
18/19 FOT	504	598	524	542	523	511	491	508	559	515	517	530	523	504	529	519	6,298
Actual	504	598	524	542	523	511	491	508	573			573					3,724
Variance	0	0	0	0	0	0	0	0	14			43				(519)	0
17/18	613	649	603	622	556	609	605	590	590	535	609	578	563	512	601	559	7,045
16/17	606	697	631	645	666	646	677	663	712	689	648	683	669	647	675	664	7,963

**Outpatients**

	Apr	May	Jun	Average Per Month Apr-Jun	Jul	Aug	Sep	Average Per Month Jul-Sep	Oct	Nov	Dec	Average Per Month Oct-Dec	Jan	Feb	Mar	Average Jan-Mar	Annual
18/19 FOT	34,201	36,133	35,277	35,204	36,497	34,424	33,678	34,866	36,068	37,279	29,757	34,368	35,077	33,582	35,808	34,822	417,781
Actual	34,201	36,133	35,277	35,204	36,497	34,424	33,678	34,866	38,943			38,943					249,153
Variance	0	0	0	0	0	0	0	0	2,875			4,575				(4,822)	0
17/18	31,303	37,930	37,769	35,667	36,233	35,719	35,765	35,906	37,632	38,077	27,162	34,290	36,148	33,724	35,336	35,069	422,798
16/17	35,444	35,987	37,404	36,278	34,449	37,056	38,043	36,516	36,417	39,650	31,059	35,509	37,037	34,626	39,227	36,963	435,799

**A&E**

	Apr	May	Jun	Average Per Month Apr-Jun	Jul	Aug	Sep	Average Per Month Jul-Sep	Oct	Nov	Dec	Average Per Month Oct-Dec	Jan	Feb	Mar	Average Jan-Mar	Annual
18/19 FOT	9,431	10,720	10,245	10,132	11,023	10,167	9,974	10,388	10,321	9,746	9,565	9,877	9,753	9,293	10,389	9,812	120,626
Actual	9,431	10,720	10,245	10,132	11,023	10,167	9,974	10,388	10,144			10,144					71,704
Variance	0	0	0	0	0	0	0	0	(177)			267				(9,812)	0
17/18	8,870	9,677	9,538	9,362	9,948	9,372	9,109	9,476	9,702	9,062	8,888	9,217	9,244	8,527	9,380	9,050	111,317
16/17	8,703	9,523	9,143	9,123	9,729	9,058	9,025	9,271	9,352	8,724	8,616	8,897	8,357	7,995	9,282	8,545	107,507

*\*Please note a change in point of delivery for planned c-sections between Non Elective Other and Elective Inpatients from 2017/18 to 2018/19.*

*\*Please also note that the UCC at PRH came into effect from October 2017.*

The table above shows that activity in the 2018/19 financial year is higher than in previous years within Non Electives, A&E and Daycase activity. In constructing the forecast position this position has been factored in and in light of what has been delivered in the first seven months, the remaining five months of the year appear reasonable considering the levels of growth seen and also previous trends.

### **Key Messages**

- *The Trusts most likely forecast position is to overspend against the Trusts control total by £4.246m, assuming that the Trust can realise benefits associated with rectification opportunities of £1.081m.*
- *The key drivers associated with the overspend against the Trusts control total are failure to deliver waste reduction and new spending commitments.*
- *When comparing the month 7 actual position to that that was forecast there is positive variance however, given the uncertainties around the winter period the Trust is not revising its year end expectation at this point.*
- *The average runrate assumed going forward assumes increased spend of £1.076m, this appears reasonable over the winter period.*

## 5. Trust Capital Programme

The Trust's Capital Programme for 2018/19 is presented in the table below:

The Shrewsbury and Telford Hospital NHS Trust								
2018/19 Capital Programme Update as at Month 7 (October 2018)								
Scheme	2018/19 Capital Budget	2018/19 Spend to date	Expenditure committed - ordered	Total expenditure/ committed to date	Expenditure committed - to be ordered	Scheme yet to be identified	Forecast Outturn	Variance under/ (over) spend
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's
Outstanding Commitments from 2017/18	200	55	88	142	27	31	200	0
PC Ophthalmology move into Cophorne Building - Phase 3	1,196	0	974	974	222	0	1,196	0
PC In House costs of delivery of schemes	820	412	295	706	114	0	820	0
PC Replacement Linac (ref Lingen Davies Grant) Equipment	1,770	1,759	8	1,767	0	0	1,767	3
PC RSH MLU/PAU - P2 FCHS	402	307	121	428	0	0	428	-26
PC Subway Duct - RSH (further phases following on from 2017/18 agreement)	200	2	0	2	198	0	200	0
Total Delegated Contingency Funds	1,257	287	392	679	146	410	1,235	22
Capitalisation of Expenditure	1,820	706	540	1,246	574	0	1,820	0
Corporate Contingency (In Year Allocations)	598	170	54	225	231	164	619	-21
Estates Risks Rated Priority 1	524	267	57	324	202	0	526	-2
Medical Equipment Replacement Priority 1	170	0	0	0	170	0	170	0
IT Replacement Priority 1	113	0	0	0	113	0	113	0
NIY - NHS WiFi in Secondary Care (PDC Allocation)	205	45	131	176	29	0	205	0
NIY - Additional Bed Capacity - 30 Bedded Ward (Ward 19)	3,192	108	2,782	2,890	302	0	3,192	0
<b>Total Capital Schemes</b>	<b>12,467</b>	<b>4,117</b>	<b>5,442</b>	<b>9,558</b>	<b>2,328</b>	<b>605</b>	<b>12,491</b>	<b>-24</b>
<b>Total</b>	<b>12,467</b>	<b>4,117</b>	<b>5,442</b>	<b>9,558</b>	<b>2,328</b>	<b>605</b>	<b>12,491</b>	<b>-24</b>

At October, the Capital Resource Limit (CRL) for 2018/19 remains at £12.467m:

- £9.070m Internally Generated CRL
- £0.205m NHS WiFi in Secondary Care
- £3.192m Capital to support increased winter capacity (Ward 19)
- **£12.467m CRL**

Below shows the overall position at Month 7 (ie end of October 2018) :

Status	£m	%
<b>Expensed</b>	<b>4.117</b>	<b>33.02</b>
<b>Ordered - not yet expensed</b>	<b>5.442</b>	<b>43.65</b>
<b>Committed – not yet ordered or expensed</b>	<b>2.328</b>	<b>18.67</b>
<b>Schemes yet to be identified</b>	<b>0.581</b>	<b>4.66</b>
<b>(reduced in respect of overspend of £24k)</b>		

The Trust is not permitted to overspend on CRL, so the above forecast over-commitment of £0.024m will be rectified before year end.

It should be noted that there **only remains £0.164m** in Corporate Contingency for the remaining five months of the financial year.

To date, several capital schemes have been completed including the Fire Safety Works on the Ward Block and minor refurbishment works whilst wards were decanted; Replacement Linear Accelerator now in operational use; completion of upgrade to PRH Data Centre; Consultant Histology Accommodation at RSH.

Works are progressing on the additional winter capacity scheme to create additional beds on former Ward 19, Copthorne Building. The timescales for delivery by 24 December are extremely challenging, particularly as there has already been unforeseen delays. The Project is being progressed on extended working hours (ie double shifts) to endeavour to deliver within the NHSI prescribed deadline.

<b><i>Key Messages</i></b>
----------------------------

- |  |
|--|
| <ul style="list-style-type: none"><li>• <i>At October, the Capital Resource Limit (CRL) for 2018/19 remains at £12.467m.</i></li><li>• <i>There only remains £0.164m in Corporate Contingency for the remaining five months of the financial year.</i></li></ul> |
|--|

## 6. Trust cash position

The Shrewsbury and Telford Hospital NHS Trust								Cashflow 2019/20						
Cashflow - 2018/19								Cashflow 2019/20						
	Actual October Month	Forecast November Month	Forecast December Month	Forecast January Month	Forecast February Month	Forecast March Month	Total To Date And Forecast	Forecast April Month	Forecast May Month	Forecast June Month	Forecast July Month	Forecast August Month	Forecast September Month	Forecast October Month
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's
Balance B/fwd	3,159	4,258	4,216	1,316	2,878	1,462	1,649	(2,548)	(1,319)	(3,043)	(4,574)	(4,693)	(4,765)	(4,788)
I&E Cashflow														
INCOME														
Income I&E/Donated & PSF	33,784	30,478	28,544	32,304	28,216	36,990	363,128	31,892	29,582	29,750	30,819	29,305	29,668	33,110
PAY														
Pay I&E	(21,255)	(21,422)	(21,548)	(21,585)	(21,515)	(21,081)	(254,317)	(20,385)	(20,621)	(20,538)	(20,843)	(21,044)	(20,875)	(20,300)
NON PAY														
Non Pay I&E	(10,766)	(10,194)	(10,697)	(10,437)	(8,095)	(10,809)	(116,078)	(8,997)	(9,406)	(9,233)	(9,332)	(9,584)	(9,736)	(9,941)
Finance Costs														
Finance Costs I&E	6	5	(66)	(53)	(124)	(1,635)	(3,620)	(39)	(39)	(39)	(39)	(39)	(1,615)	(39)
Capital														
Capital Expenditure (inc Donated)	(185)	(453)	(1,427)	(1,252)	(1,741)	(2,041)	(10,767)	(494)	(494)	(724)	(724)	(924)	(924)	(924)
Total I&E Cashflow	1,584	(1,586)	(5,195)	(1,023)	(3,259)	1,424	(21,654)	1,976	(978)	(784)	(119)	(2,286)	(3,482)	1,906
External funding														
Revolving Working Capital - I&E Deficit		1,545	1,669				8,615					2,214	3,459	
Loan facility to cover non-receipt of PSF			853	4,341	3,598		8,792							
Repayment of RWC - on receipt of PSF 1819							0							
PDC Allocation - NHS WiFi in Secondary Care (Expenditure)	(45)	(160)					(205)							
PDC Allocation - NHS WiFi in Secondary Care (Income)		205					205							
PDC Allocation - 30 Bedded Ward (Expenditure)	(102)	(192)	(964)	(964)	(964)	0	(3,192)							
PDC Allocation - 30 Bedded Ward (Income)		300	964	964	964	0	3,192							
Total Loan Cashflow	(147)	1,698	2,522	4,341	3,598	0	17,407	0	0	0	0	2,214	3,459	0
Balance sheet Changes														
Total Balance Sheet Changes	(339)	(154)	(227)	(1,756)	(1,756)	(5,434)	51	(747)	(747)	(747)	0	0	0	0
Total Cashflow	1,099	(42)	(2,900)	1,563	(1,416)	(4,010)	(4,197)	1,229	(1,724)	(1,531)	(119)	(72)	(23)	1,906
Balance C/fwd	4,258	4,216	1,316	2,878	1,462	(2,548)	(2,548)	(1,319)	(3,043)	(4,574)	(4,693)	(4,765)	(4,788)	(2,882)

The above cashflow is based on the most likely variance to the Trust's pre PSF control total of £4.246m. The above assumes that the Trust will receive cash support for the non-receipt of its total PSF ie shortfall of £8.792m. As it is assumed that no cash support will be available for the Trust's deficit over its agreed control total, there is a shortfall in cash of £4.246m. The Trust is required to hold a minimum cash balance of £1.700m.

The Trust will receive support of Department of Health and Social Care loan in order to underpin the Trust's agreed Control Total of deficit £8.615m. To date the Trust has drawn £5.401m of loan, with a further £1.545m to be received in November and the remaining £1.669m requested in December. The Trust has also requested loan of £0.853m in December in respect of non-receipt of PSF funding.

The Trust has not needed to draw loan to cover all of the reported I&E deficit to date as it currently benefits from cash relating to prior year, eg receipt in cash of income relating to 2017/18 Forecast Outturn (c£7m); 2017/18 STP Bonus funding received in cash 2018/19 (c£2.7m); unwinding of pre-paid creditors in 2017/18. As these benefits are utilised as the year progresses, the Trust will require cash support to underpin the reported I&E deficit.

Assuming that the Trust only receives external support for the agreed Control Total deficit of £8.615m and the shortfall in achieving PSF of £8.792m, it is forecast that the Trust's cash shortfall of £4.246m (forecast deficit over agreed Control Total) will start to present in February 2018 with non-achievement of required cash balance.

#### **Key Messages**

- *It is forecast that the Trust's cash shortfall of £4.246m (forecast deficit over agreed Control Total) will start materialising in February 2019 with non-achievement of the required cash balance.*
- *The Trust will need to look at ways of reducing cash outflow and has a meeting to discuss options with NHSI on 3rd December.*

## **7. Receivables/Payables**

### **7.1 Receivables**

Accounts Receivable aged debt summary as at 31 October 2018:

	<b>1-30 Days</b>	<b>31-60 Days</b>	<b>61+ Days</b>	<b>Total</b>
	£000	£000	£000	£000
NHS (English)	1,825	2,349	651	4,825
NHS (Non-English)	191	18	105	314
Private Patients	52	12	25	89
Other*	240	11	261	512
<b>Total</b>	<b>2,308</b>	<b>2,390</b>	<b>1,042</b>	<b>5,740</b>

\*Other includes prescriptions, catering recharges, accommodation, overseas visitors and MES activity.

The outstanding receivables balances as at 31 October 2018 over £0.100m are:

	<b>1-30 Days</b>	<b>31-60 Days</b>	<b>61+ Days</b>	<b>Total</b>
	£000	£000	£000	£000
Telford & Wrekin CCG	334	1,339	12	1,685
Shropshire CCG	93	886	167	1,146
NHS England Commissioning*	684	0	29	713

University Hospitals of North Midlands	242	1	20	263
Shropshire Community Health Trust	44	62	150	256
RJAH	87	3	128	218
Powys LHB	153	12	0	165
CP Plus	124	0	36	160
Western Sussex Hospitals NHS Trust	137	0	0	137
Welsh Health Specialised Services	17	0	93	110

\*The NHS England Commissioning 1-30 days balance includes £0.484m of invoices raised in advance for Month 8 contract income to ensure payment is received during November 2018.

Credit notes raised over £0.100m in October 2018 were:

Telford & Wrekin CCG £0.180m to credit a duplicated invoice already raised in July 2018.

## 7.2 Payables

Accounts Payable aged summary of outstanding invoices as at 31 October 2018:

	1-30 Days	31-60 Days	61+ Days	Total
	£000	£000	£000	£000
NHS	301	159	875	1,335
Non- NHS	6,316	2,700	1,275	10,291
<b>Total</b>	<b>6,617</b>	<b>2,859</b>	<b>2,150</b>	<b>11,626</b>

## Appendices

### Pay Spend

	Jan – Mar-16	Apr- Jun-16	Jul- Sep-16	Oct- Dec-16	Jan- Mar-17	Apr- Jun-17	Jul- Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's
Consultants	3,218	3,361	3,443	3,503	3,396	3,491	3,550	3,554	3,507	3,632	3,547	3,374	3,725	3,528	3,598	3,724	3,689	3,557	3,572	3,679
Medical Staffing	2,268	2,133	2,230	2,241	2,193	2,228	2,229	2,381	2,361	2,415	2,490	2,424	2,655	2,379	2,486	2,505	2,396	2,421	2,335	2,367
Nursing	7,619	7,649	7,581	7,694	8,022	8,117	8,124	7,924	8,002	7,989	8,079	8,233	8,108	8,337	8,146	8,112	8,241	8,424	8,042	8,259
Other Clinical	2,477	2,581	2,587	2,561	2,594	2,612	2,641	2,680	2,673	2,685	2,642	2,656	2,662	2,700	2,740	2,746	2,773	2,942	2,767	2,851
Non Clinical	3,492	3,573	3,601	3,603	3,550	3,787	3,784	3,829	3,829	3,769	3,816	3,821	3,898	3,895	3,856	3,938	3,980	4,408	3,892	4,013
Actual Pay Spend £	19,074	19,296	19,441	19,602	19,755	20,235	20,328	20,367	20,371	20,490	20,575	20,508	21,048	20,840	20,826	21,025	21,079	21,752	20,608	21,169
Consultants	240	246	247	250	249	252	254	251	253	253	252	251	251	250	250	251	252	249	253	251
Medical Staffing	349	340	356	357	361	365	336	340	353	345	341	344	350	349	361	361	356	381	382	379
Nursing	2,416	2,355	2,358	2,390	2,412	2,392	2,398	2,443	2,444	2,416	2,453	2,489	2,488	2,414	2,400	2,404	2,399	2,380	2,388	2,437
Other Clinical	795	793	805	807	811	809	818	825	830	826	816	824	819	826	845	847	850	853	847	844
Non Clinical	1,526	1,533	1,548	1,550	1,541	1,550	1,571	1,574	1,578	1,567	1,565	1,580	1,595	1,583	1,578	1,581	1,586	1,587	1,574	1,565
Actual Pay wte	5,327	5,267	5,313	5,354	5,374	5,368	5,377	5,434	5,459	5,407	5,427	5,488	5,503	5,422	5,433	5,444	5,443	5,450	5,444	5,477

### Agency Usage

	Average Jan-Mar 2016	Average Apr-Jun 2016	Average Jul-Sep 2016	Average Oct-Dec 2016	Average Jan-Mar 2017	Average Apr-Jun 2017	Average Jul-Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018	Jun 2018	Jul 2018	Aug 2018	Sep 2018	Oct 2018
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's						
Consultants	217	212	286	256	255	291	322	297	274	244	245	195	309	228	288	294	348	228	249	184
Medical Staff	478	282	307	309	265	236	277	460	493	503	479	413	463	272	410	310	367	278	212	255
Nursing	527	508	516	567	910	894	988	771	720	772	774	821	909	683	770	780	794	659	671	744
Other Clinical	52	61	51	32	41	27	40	46	39	42	25	26	42	29	44	25	25	12	4	31
Non clinical	55	43	52	17	1	4	21	20	2	0	3	3	0	-1	2	0	0	0	0	0
Total Agency Staff	1,329	1,107	1,213	1,180	1,472	1,452	1,647	1,594	1,528	1,561	1,526	1,458	1,724	1,211	1,514	1,409	1,534	1,177	1,136	1,214

	Average Jan-Mar 2016	Average Apr-Jun 2016	Average Jul-Sep 2016	Average Oct-Dec 2016	Average Jan-Mar 2017	Average Apr-Jun 2017	Average Jul-Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018	Jun 2018	Jul 2018	Aug 2018	Sep 2018	Oct 2018
	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE						
Consultants	10	11	14	14	13	14	15	13	15	13	12	10	12	10	12	13	14	13	13	10
Medical Staff	38	28	33	28	26	25	24	30	40	41	37	37	37	27	35	34	36	28	24	23
Nursing	101	86	92	99	140	135	142	128	129	134	145	162	162	116	121	129	134	114	113	124
Other Clinical	12	10	9	7	8	8	6	8	7	6	5	4	8	6	7	6	5	5	3	6
Non Clinical	11	11	13	6	2	1	1	0	2	1	0	0	0	0	0	0	0	0	0	0
Total Agency Staff	172	146	161	155	155	184	189	179	192	194	198	213	219	160	175	183	189	160	154	163

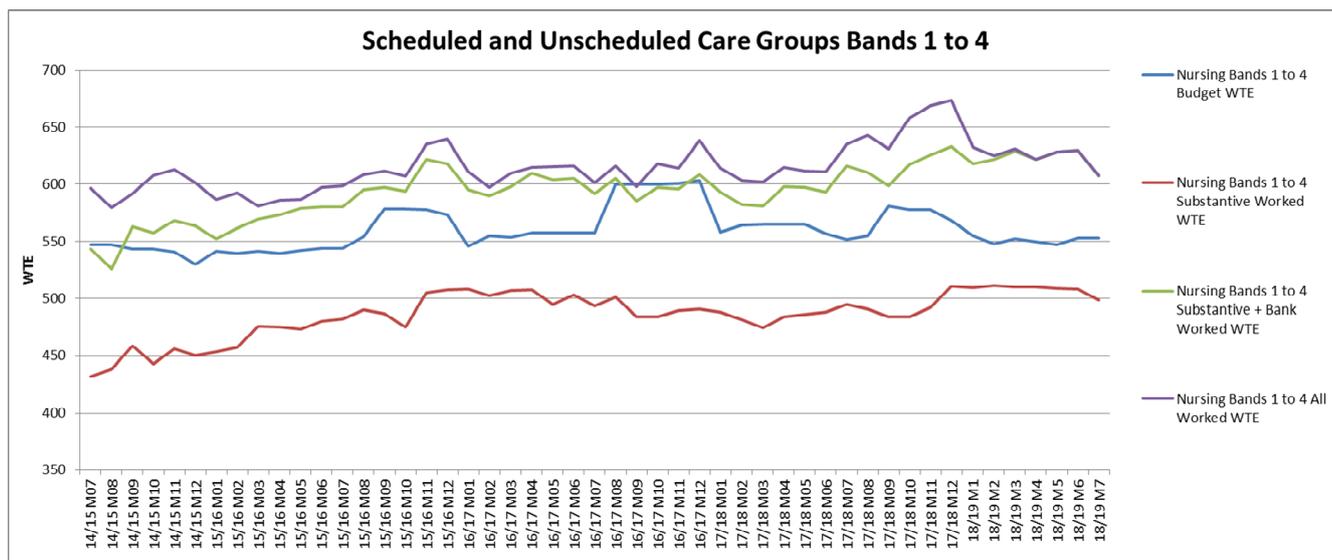
### Bank Usage

	Average Jan-Mar 2016	Average Apr-Jun 2016	Average Jul-Sep 2016	Average Oct-Dec 2016	Average Jan-Mar 2017	Average Apr-Jun 2017	Average Jul-Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018	Jun 2018	Jul 2018	Aug 2018	Sep 2018	Oct 2018
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's						
Nursing	738	524	557	581	584	649	637	594	683	702	592	778	638	890	719	725	597	673	697	703
Other Clinical	39	45	45	30	29	28	35	37	30	34	28	27	29	38	24	29	42	45	51	37
Non Clinical	135	154	154	140	119	108	122	110	108	110	89	112	108	169	133	126	155	201	141	115
Total Bank Staff	912	723	756	751	732	786	794	741	821	846	709	917	776	1,098	876	880	793	920	889	856

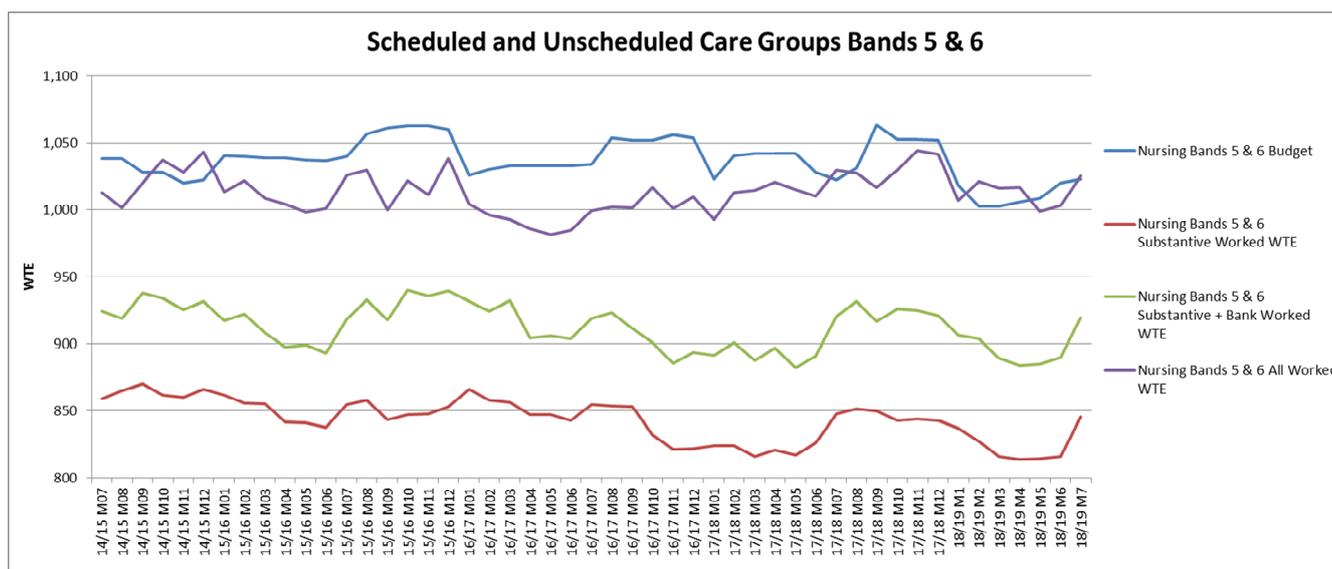
	Average Jan-Mar 2016	Average Apr-Jun 2016	Average Jul-Sep 2016	Average Oct-Dec 2016	Average Jan-Mar 2017	Average Apr-Jun 2017	Average Jul-Sep 2017	Oct 2017	Nov 2017	Dec 2017	Jan 2018	Feb 2018	Mar 2018	Apr 2018	May 2018	Jun 2018	Jul 2018	Aug 2018	Sep 2018	Oct 2018
	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE						
Nursing	225	167	182	182	196	193	195	214	217	194	230	232	222	194	208	214	203	214	218	226
Other Clinical	12	10	12	11	10	12	15	12	11	10	10	12	12	11	10	11	17	16	16	13
Non Clinical	71	71	72	66	49	46	55	45	50	45	50	51	62	61	63	64	67	72	59	58
Total Bank Staff wte	308	248	265	259	256	252	265	271	278	250	290	294	296	265	281	288	287	302	293	297

## Nursing spending - Scheduled and Unscheduled Care Groups

### Unqualified

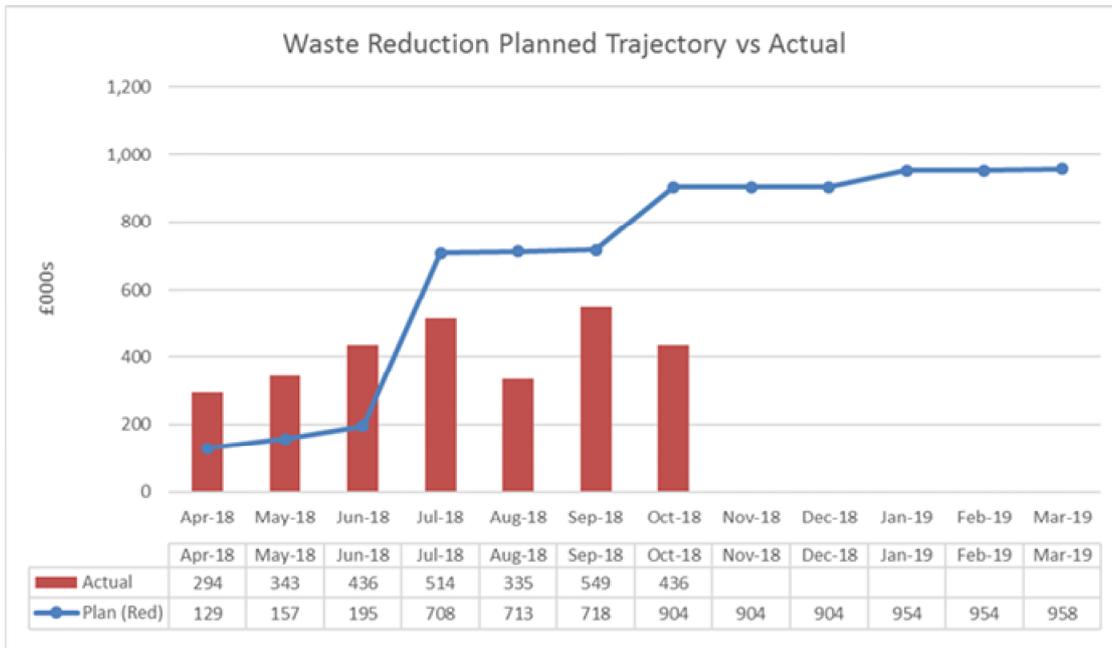


### Qualified



**Waste Reduction Programme**

Waste Reduction Trajectory v Actual and Forecast



Against the year to date plan of £3.524m, £2.907m has been delivered, with an adverse variance of £0.617m. This most notably exists within the following schemes:

- Unavailability is showing a negative variance to date due to mandated statutory training having an impact on the fill rate.
- Womens & Children’s is also not performing and but it now working on finding schemes to mitigate some of this risk through rectification.

## Forecast Outturn

Waste Reduction Savings Programme 2018_19						
Scheme	Efficiency Programme Area	2018/19 Saving Plan	2018/19 Identified	2018/19 Variance	Improvement Possibility	
<b>Stranded Patients</b>						
Unavailability	Workforce (Nursing)	960	60	(900)	R	
Escalation	Workforce (Nursing)	700	510	(190)	R	
Nurse Agency premium	Workforce (Nursing)	1,550	1,175	(375)	R	
<b>Total Stranded Patients</b>		<b>3,210</b>	<b>1,746</b>	<b>(1,464)</b>		
<b>Procurement</b>	Procurement	<b>1,300</b>	<b>952</b>	<b>(348)</b>	A	
<b>Income Reduction</b>						
W&C's Addressing Income Reduction	Workforce (Nursing)	1,084	0	(1,084)	R	
Radiology Addressing Income Reduction	Imaging	416	474	58	A	
<b>Total Income Reduction</b>		<b>1,500</b>	<b>474</b>	<b>(1,026)</b>		
<b>Other</b>						
Theatres, Outpatients and Endoscopy	Workforce (Medical)	750	429	(321)	A	
Ophthalmology Consolidation	Other Savings plans	50	0	(50)	R	
Corporate Services 1&2		500	369	(131)	A	
Housekeeping	Other Savings plans	1,250	985	(265)	A	
WLI	Workforce (Medical)	150	0	(150)	R	
Drug Spend	Hospital Medicine and Pharmacy	180	176	(4)	A	
<b>Total Other</b>		<b>2,880</b>	<b>1,960</b>	<b>(920)</b>		
<b>Grand Total</b>		<b>8,890</b>	<b>5,133</b>	<b>(3,757)</b>		
Assumed Slippage		(692)		692		
<b>Revised Total</b>		<b>8,198</b>	<b>5,133</b>	<b>(3,065)</b>		
Finance Costs			1,300	1,300		
Inflation Savings			1,269	1,269		
<b>Revised Total</b>		<b>8,198</b>	<b>7,702</b>	<b>(496)</b>		

**Statement of Financial Position**

	<b>March 18</b>	<b>September 18</b>	<b>October 18</b>	<b>Variance to March 18</b>	<b>Variance to September 18</b>
	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>	<b>£000</b>
Property, Plant and Equipment	154,334	153,442	153,179	(1,155)	(263)
Intangible Assets	3,118	2,661	2,632	(486)	(29)
Trade and Other Receivables	1,370	797	895	(475)	98
<b>Total Non Current Assets</b>	<b>158,822</b>	<b>156,900</b>	<b>156,706</b>	<b>(2,116)</b>	<b>(194)</b>
Inventories	7,769	8,021	7,971	202	(50)
Trade and Other Receivables	18,610	19,334	19,381	771	47
Cash and Cash Equivalents	1,700	3,146	4,032	2,332	886
<b>Total Current Assets</b>	<b>28,079</b>	<b>30,501</b>	<b>31,384</b>	<b>3,305</b>	<b>883</b>
Trade and Other Payables	(28,183)	(34,639)	(34,956)	(6,773)	(317)
DOH loans	(15,200)	(15,200)	(15,200)	0	0
Provisions	(532)	(430)	(455)	77	(25)
Other liabilities - Deferred Income	(1,166)	(359)	(2,183)	(1,017)	(1,824)
<b>Total Current Liabilities</b>	<b>(45,081)</b>	<b>(50,628)</b>	<b>(52,794)</b>	<b>(7,713)</b>	<b>(2,166)</b>
<b>Net Current Assets/Liabilities</b>	<b>(17,002)</b>	<b>(20,127)</b>	<b>(21,410)</b>	<b>(4,408)</b>	<b>(1,283)</b>
<b>Total Assets less Current Liabilities</b>	<b>141,820</b>	<b>136,773</b>	<b>135,296</b>	<b>(6,524)</b>	<b>(1,477)</b>
DOH loans	(24,209)	(29,610)	(29,610)	(5,401)	0
Provisions	(159)	(143)	(143)	16	0
<b>Total Assets Employed</b>	<b>117,452</b>	<b>107,020</b>	<b>105,543</b>	<b>(11,909)</b>	<b>(1,477)</b>
<b>Financed by:</b>					
Public dividend capital	201,372	201,372	201,372	0	0
Income and expenditure reserve	(111,643)	(122,075)	(123,552)	(11,909)	(1,477)
Revaluation reserve	27,723	27,723	27,723	0	0
<b>Total Taxpayers' Equity</b>	<b>117,452</b>	<b>107,020</b>	<b>105,543</b>	<b>(11,909)</b>	<b>(1,477)</b>

## Trust Capital Programme

The Trust's Capital Programme for 2018/19 is presented in the table below:

The Shrewsbury and Telford Hospital NHS Trust								
2018/19 Capital Programme Update as at Month 7 (October 2018)								
Scheme	2018/19 Capital Budget	2018/19 Spend to date	Expenditure committed - ordered	Total expenditure/ committed to date	Expenditure committed - to be ordered	Scheme yet to be identified	Forecast Outturn	Variance under/ (over) spend
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's
<b>Outstanding Commitments from 2017/18</b>	<b>200</b>	<b>55</b>	<b>88</b>	<b>142</b>	<b>27</b>	<b>31</b>	<b>200</b>	<b>0</b>
<b>Pre-Committed Schemes</b>								
PC Ophthalmology move into Copthorne Building - Phase 3	1,196	0	974	974	222	0	1,196	0
PC In House costs of delivery of schemes	820	412	295	706	114	0	820	0
PC Replacement Linac (ref Lingen Davies Grant) Equipment	1,770	1,759	8	1,767	0	0	1,767	3
PC RSH MLU/PAU - P2 FCHS	402	307	121	428	0	0	428	-26
PC Subway Duct - RSH (further phases following on from 2017/18 agreement)	200	2	0	2	198	0	200	0
Contingency Fund - Estates	350	67	135	203	146	1	350	0
Contingency Fund - Medical Equipment	250	164	0	164	0	51	215	35
Contingency Fund - IT Equipment	250	27	18	45	0	205	250	0
Contingency Fund - Non-Patient Connected Equipment Replacement	50	0	11	11	0	39	50	0
Contingency Fund - VitalPac/PSAG	100	0	0	0	0	100	100	0
Contingency Fund - Support Services Care Group Equipment	157	0	156	156	0	1	157	0
Contingency Fund - Facilities Equipment	50	29	8	37	0	13	50	0
Contingency Fund - Patient Environment (inc Furniture)	50	0	63	63	0	0	63	-13
<b>Total Delegated Contingency Funds</b>	<b>1,257</b>	<b>287</b>	<b>392</b>	<b>679</b>	<b>146</b>	<b>410</b>	<b>1,235</b>	<b>22</b>
Capitalisation of Expenditure	1,820	706	540	1,246	574	0	1,820	0
<b>Corporate Contingency (In Year Allocations)</b>	<b>598</b>	<b>170</b>	<b>54</b>	<b>225</b>	<b>231</b>	<b>164</b>	<b>619</b>	<b>-21</b>
CC - 6 Facet Survey Update	20	20	0	20	0	0	20	0
CC - Clinic 6/Colposcopy Upgrade	21	28	0	29	0	0	29	-8
CC - Estates Strategy Refresh	20	19	0	19	0	0	19	1
CC - Consultant Histologist Accommodation - Phase 2	50	43	0	43	0	0	43	7
CC - PRH Clinic F Breast Imaging Redesign 18.19	22	0	4	4	18	0	22	0
CC - PRH Temperature Control for Pharmacy Supplies	70	0	2	2	68	0	70	0
CC - Video Conferencing at SBP	21	21	0	21	0	0	21	0
CC - Mattresses - replacement and store facility	40	31	31	61	0	0	61	-21
CC - Treatment Room in Ward 17	50	0	4	4	47	0	50	0
CC - Replacement of Medical Records Racking at RSH	12	0	0	0	12	0	12	0
CC - Excessive Levels of Nitrous Oxide in Maternity Birthing Facilities	84	0	0	0	84	0	84	0
CC - SSD Independent Monitoring System Upgrade	14	0	14	14	0	0	14	0
CC - Endoscopy Suite Reconfiguration - Both Sites	10	8	0	8	2	0	10	0
<b>Estates Risks Rated Priority 1</b>								
Estates Risks Priority 1: Asbestos	145	43	0	43	102	0	145	0
Estates Risks Priority 1: Fire ( Potential Enforcement Notice)	200	99	22	122	78	0	200	0
Estates Risks Priority 1: Ward refurbishment works whilst wards decan	100	90	12	102	0	0	102	-2
Estates Risks Rated Priority 1: Roadways/pathways/external lighting	79	35	23	58	21	0	79	0
Medical Equipment Replacement Priority 1	170	0	0	0	170	0	170	0
IT Replacement Priority 1	113	0	0	0	113	0	113	0
<b>New In Year Capital Projects</b>								
NIY - NHS WiFi in Secondary Care (PDC Allocation)	205	45	131	176	29	0	205	0
NIY - Additional Bed Capacity - 30 Bedded Ward (Ward 19)	3,192	108	2,782	2,890	302	0	3,192	0
<b>Total Capital Schemes</b>	<b>12,467</b>	<b>4,117</b>	<b>5,442</b>	<b>9,558</b>	<b>2,328</b>	<b>605</b>	<b>12,491</b>	<b>-24</b>
Overcommitted/Unallocated	0	0	0	0	0	0	0	0
<b>Total</b>	<b>12,467</b>	<b>4,117</b>	<b>5,442</b>	<b>9,558</b>	<b>2,328</b>	<b>605</b>	<b>12,491</b>	<b>-24</b>

## Service Line Reporting Position 18/19 Month 6 YTD

### Centre Summary 18/19 M1-6 YTD

Metrics	Surgical	Oncology	MSK	H&N	Theatre & Critical Care	Medicine	Emergency	Womens & Childrens	Support Services	TOTAL
<b>Income</b>	30,199	10,120	12,671	11,087	3,749	48,646	11,423	27,308	25,353	180,556
Cost										
Direct										
Nursing	(4,740)	(1,721)	(2,108)	(629)	(1,644)	(15,451)	(3,413)	(9,913)	(243)	(39,862)
Consultants	(3,311)	(1,176)	(1,141)	(1,956)	(49)	(3,834)	(479)	(2,487)	(43)	(14,476)
Other Clinical	(2,642)	(1,496)	(1,859)	(2,724)	(53)	(5,492)	(3,009)	(3,918)	(369)	(21,561)
Non Clinical	(1,413)	(704)	(590)	(947)	(84)	(1,962)	(538)	(1,558)	(236)	(8,032)
<b>Total Direct Pay Costs</b>	<b>(12,105)</b>	<b>(5,096)</b>	<b>(5,699)</b>	<b>(6,256)</b>	<b>(1,830)</b>	<b>(26,739)</b>	<b>(7,439)</b>	<b>(17,876)</b>	<b>(891)</b>	<b>(83,932)</b>
Drugs	(590)	(1,083)	(142)	(132)	(122)	(2,040)	(307)	(416)	(13,727)	(18,559)
Supplies	(304)	(345)	(275)	(953)	(167)	(2,518)	(327)	(980)	(20)	(5,889)
Other Direct Costs	(723)	(259)	(169)	(465)	(44)	(1,360)	(593)	(792)	(83)	(4,488)
<b>Total Direct Non Pay Costs</b>	<b>(1,617)</b>	<b>(1,687)</b>	<b>(587)</b>	<b>(1,550)</b>	<b>(333)</b>	<b>(5,917)</b>	<b>(1,227)</b>	<b>(2,189)</b>	<b>(13,830)</b>	<b>(28,937)</b>
<b>Direct Cost Total</b>	<b>(13,722)</b>	<b>(6,783)</b>	<b>(6,286)</b>	<b>(7,807)</b>	<b>(2,163)</b>	<b>(32,656)</b>	<b>(8,666)</b>	<b>(20,065)</b>	<b>(14,721)</b>	<b>(112,869)</b>
Indirect										
Blood	(0)	(0)	(0)	(0)	(0)	(16)	(0)	(3)	(0)	(20)
Allied Healthcare Professionals	(463)	(315)	(133)	(394)	(1)	(1,303)	(84)	(111)	(1,256)	(4,059)
Radiology	(1,013)	(193)	(564)	(160)	(30)	(1,230)	(1,269)	(153)	(1,664)	(6,277)
Pathology	(758)	(548)	(162)	(168)	(53)	(1,783)	(368)	(605)	(2,716)	(7,162)
Theatre	(4,853)	(12)	(3,030)	(2,052)	(359)	(348)	(11)	(1,869)	(4)	(12,539)
Other Services	(2,221)	(56)	(91)	(496)	(21)	(741)	(49)	(313)	(70)	(4,058)
Prosthetics	(41)	(0)	(650)	(16)	(0)	(4)	(1)	(15)	(0)	(728)
Hotel Services	(814)	(325)	(327)	(318)	(82)	(1,885)	(506)	(760)	(172)	(5,189)
Pharmacy	(318)	(462)	(96)	(106)	(5)	(1,056)	(43)	(190)	(21)	(2,296)
CNST	(984)	(83)	(947)	(215)	0	(250)	(653)	(3,832)	0	(6,964)
<b>Total Indirect Costs</b>	<b>(11,464)</b>	<b>(1,995)</b>	<b>(6,000)</b>	<b>(3,925)</b>	<b>(551)</b>	<b>(8,616)</b>	<b>(2,985)</b>	<b>(7,852)</b>	<b>(5,903)</b>	<b>(49,291)</b>
<b>Direct/ Indirect Total</b>	<b>(25,186)</b>	<b>(8,778)</b>	<b>(12,286)</b>	<b>(11,732)</b>	<b>(2,714)</b>	<b>(41,272)</b>	<b>(11,651)</b>	<b>(27,917)</b>	<b>(20,625)</b>	<b>(162,160)</b>
<b>Direct Contribution</b>	5,013	1,342	385	(645)	1,035	7,373	(227)	(609)	4,729	18,396
<b>Contribution %</b>	16.60%	13.27%	3.04%	(5.82%)	27.60%	15.16%	(1.99%)	(2.23%)	18.65%	10.19%
Overheads										
Site Costs	(993)	(494)	(425)	(528)	(102)	(1,645)	(423)	(1,135)	(648)	(6,392)
Corporate Costs	(2,927)	(1,092)	(1,118)	(1,444)	(333)	(5,567)	(1,230)	(3,176)	(1,263)	(18,150)
<b>Overhead Total</b>	<b>(3,919)</b>	<b>(1,586)</b>	<b>(1,543)</b>	<b>(1,972)</b>	<b>(436)</b>	<b>(7,213)</b>	<b>(1,653)</b>	<b>(4,311)</b>	<b>(1,910)</b>	<b>(24,542)</b>
<b>Total Cost</b>	<b>(29,105)</b>	<b>(10,364)</b>	<b>(13,829)</b>	<b>(13,704)</b>	<b>(3,150)</b>	<b>(48,485)</b>	<b>(13,303)</b>	<b>(32,228)</b>	<b>(22,535)</b>	<b>(186,702)</b>
<b>EBITDA</b>	1,094	(243)	(1,158)	(2,617)	599	161	(1,880)	(4,920)	2,818	(6,146)
<b>EBITDA %</b>	3.62%	(2.41%)	(9.14%)	(23.60%)	15.98%	0.33%	(16.46%)	(18.02%)	11.12%	(3.40%)
Finance Costs	(1,103)	(395)	(396)	(556)	(130)	(2,180)	(430)	(1,205)	(230)	(6,625)
<b>Profit/Loss</b>	(9)	(638)	(1,554)	(3,172)	469	(2,019)	(2,310)	(6,125)	2,588	(12,771)
<b>Profitability %</b>	(0.03%)	(6.31%)	(12.26%)	(28.61%)	12.50%	(4.15%)	(20.22%)	(22.43%)	10.21%	(7.07%)
Donated Assets Adjustment										(106)
Provider Sustainability Funding										1,033
Reserves/ Phased spend Adjustment										760
Flex to Freeze Adjustment										653
<b>Trust Surplus/(Deficit) as per Board Paper</b>										<b>(10,325)</b>
NOTE	CNST costs are now shown in Indirect Costs previously shown in Overheads in line with national costing standards									