

Trust Performance Report

Trust Board
3rd October 2019



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Summary

Operational Performance									
Metric	Target	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Month	Quarter	YTD
A&E 4 Hour Performance	✗ 95%	68.30%	73.08%	71.14%	73.47%	73.63%	↑	↑	↓
A&E Minor 4 Hour Performance	✗ 97%	96.40%	97.42%	96.79%	95.75%	95.40%	↓	↑	↑
Cancer 2WW all cancers, Urgent GP Referral	✗ 93%	82.20%	80.30%	81.70%	81.70%		↓	↓	↓
Cancer 2WW Symptomatic Breast	✗ 93%	28.00%	12.50%	15.20%	21.00%		↑	↓	↓
Cancer 31-Day Surgery, subsequent treatments	✗ 94%	86.49%	86.67%	97.50%	90.00%		↓	↓	↓
Cancer 31-Day Drugs, subsequent treatments	✓ 98%	100.00%	100.00%	100.00%	100.00%		↑	↑	↑
Cancer 31-Day Diag to treat, all new cancers	✓ 96%	97.50%	97.90%	97.10%	97.00%		↓	↓	↓
Cancer Waiting Times - 62 Day GP Referral	✗ 85%	72.10%	74.50%	71.60%	73.20%		↑	↓	↓
Cancer Waiting Times - 62 Day Screening	✓ 90%	92.20%	82.10%	73.70%	95.50%		↑	↓	↓
Cancer Waiting Times - 62 Day Upgrade		85.60%	86.60%	86.90%	82.80%		↓	↓	↓
RTT Performance	✗ 92%	87.45%	87.83%	87.01%	85.99%	85.77%	↓	↓	↓
RTT Volume of Patients on Incomplete Pathways Waiting List	✗ 18,027	18,902	18,745	18,860	18,825	19,176	↓	↓	↓
RTT Number of Patients over 52 weeks on Incomplete Pathways Waiting List	✓ 0	0	0	0	0	0	↑	↑	↑
Waiting Times - Diagnostic Waits <6 weeks	✗ 99%	99.17%	99.28%	99.52%	98.76%	97.58%	↓	↓	↓

Please note Cancer Waiting Times - 62 Day Upgrade does not have a national target

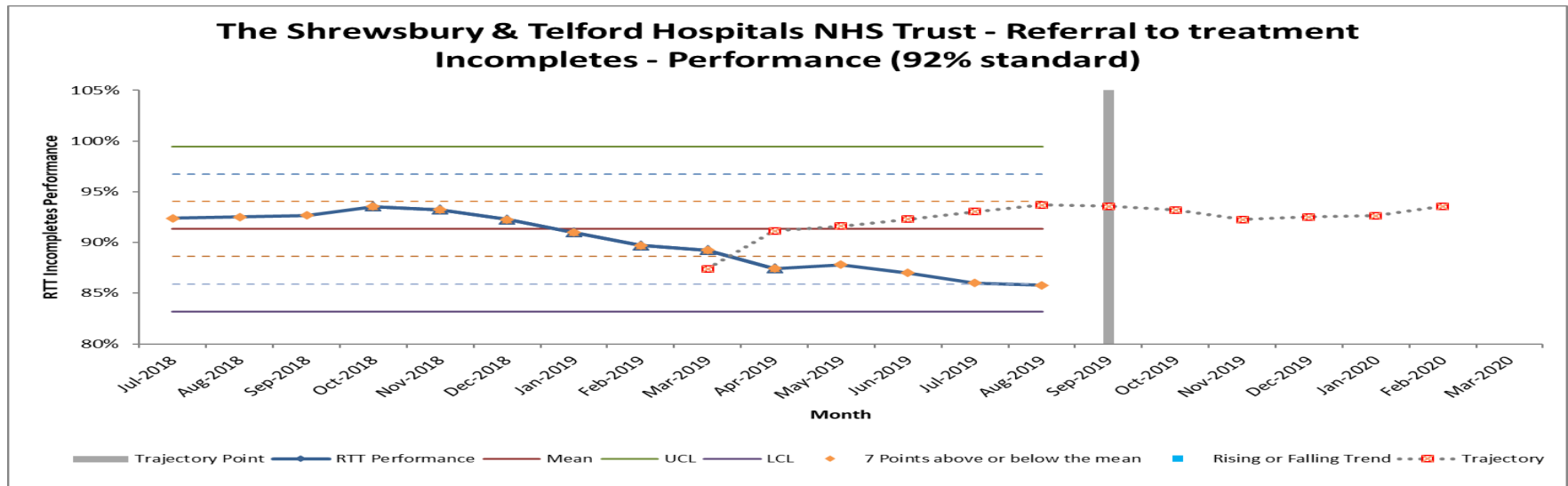
RTT



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Elective Activity - RTT 2019/2020 Trajectory

Please note the SPC graph has been calculated using 24 point, however only 14 points are illustrated



Aug-19 Actual:

85.77%

Aug-19 Trajectory:

93.06%

Variance to Trajectory

-7.29%

Key actions for Sep :

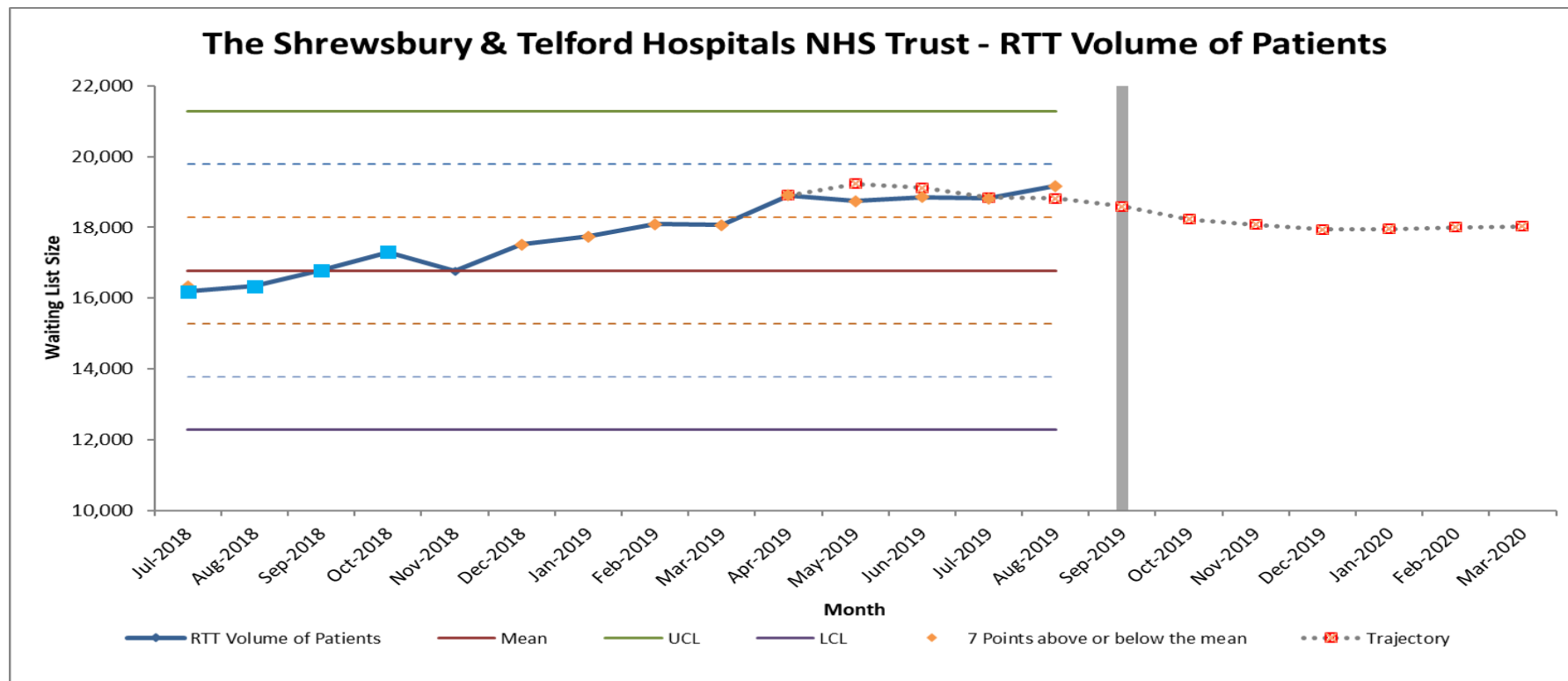
- Four Eyes on site during September to enable the embedding optimisation of theatre lists to improve utilisation and efficiency using 6 4 2 process
- Analysis of outpatient opportunities with Deloitte – workshop w/c 2nd Sept
- Consider capacity options for Quarter 3 and Quarter 4

Key risks:

- Bed gap will impact on DSU usage if demand continues.
- Achievement of March 2020 waiting list size
- Staffing gaps within theatre teams and consultant anaesthetists
- Impact of pension/tax restrictions on impacting on additional waiting list.

RTT Waiting List

Please note the SPC graph has been calculated using 24 point, however only 14 points are illustrated



The waiting list size in August was 19176 against a trajectory of 18821. The target waiting list size for March 2020 is 18027.

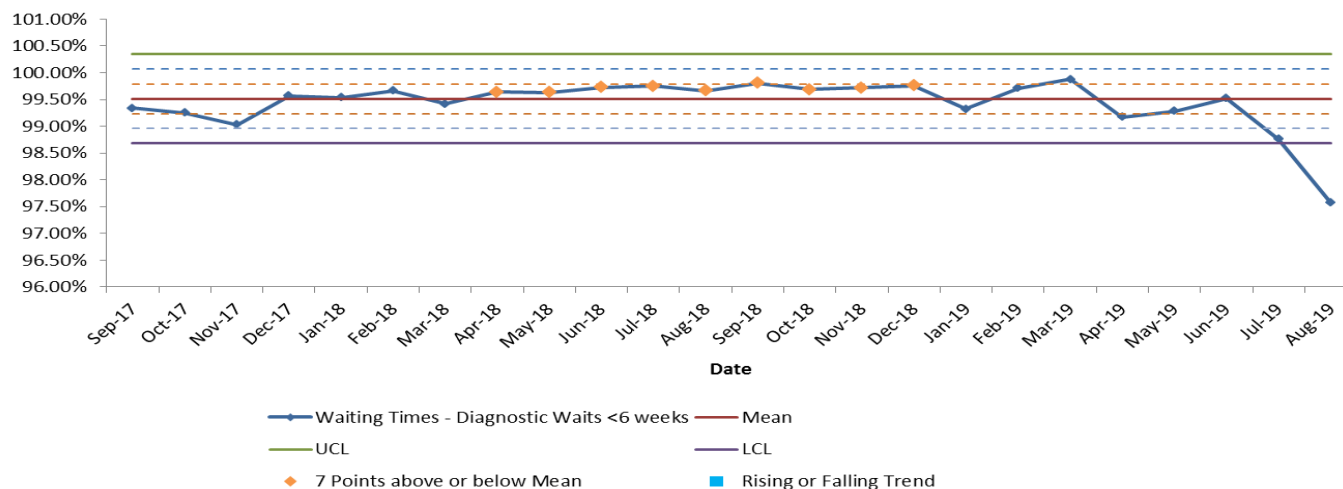
Diagnostics



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Diagnostics Waiting list – August 2019

The Shrewsbury & Telford Hospitals NHS Trust - Waiting Times - Diagnostic Waits <6 weeks



Key Actions:

- Radiology (Imaging) has been able to recover its position this month.
- 94 of the 99 breaches against Endoscopy procedures were as a direct consequence of washers being taken out of service as a precautionary measure following receipt of microbiology results
- Recover capacity for September

Key Risks:

- Recover of Endoscopy capacity
- Forecasting recover in Oct for DM01

	Jul-19			Aug-19		
	Total WL	Over 6wks	Performance	Total WL	Over 6wks	Performance
Imaging	4796	69	98.56%	4696	47	99.00%
Physiological Measurement	532	2	99.62%	642	1	99.84%
Endoscopy	736	4	99.46%	737	99	86.57%
Total	6064	75	98.8%	6075	147	97.58%

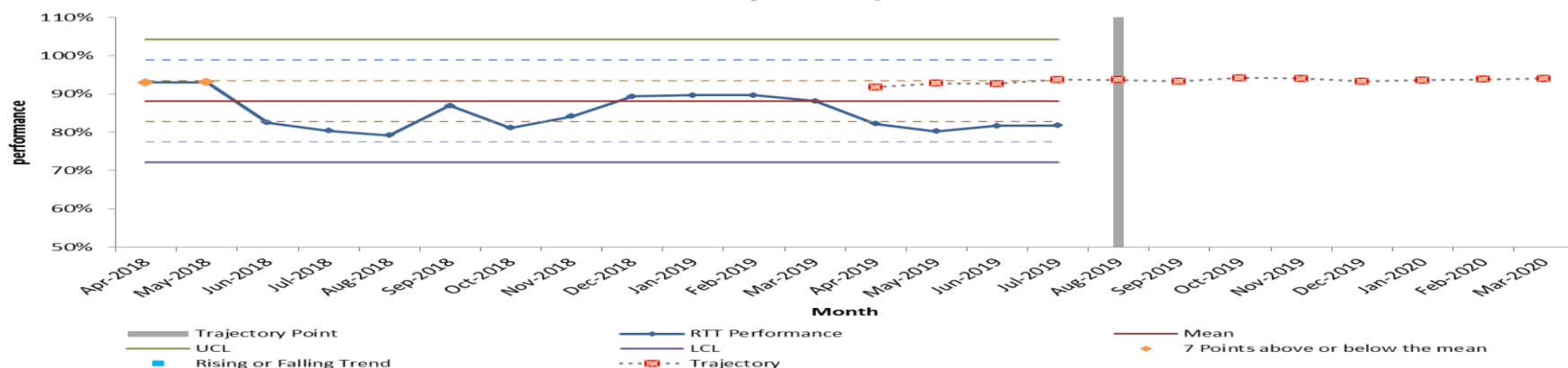
Cancer



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Cancer 2 Week Wait Trajectory 2019/20

The Shrewsbury & Telford Hospitals NHS Trust - 2 Weeks Wait (Cancer Suspected)



August 2019 predicted figures

Cancer Waiting Times - 2 Week Wait	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Trajectory Number Seen < 2 Wks	1,923	2,216	2,075	2,177	2,143	2,009	2,342	2,290	2,016	2,112	2,203	2,287
Trajectory Total Number Seen	2,095	2,388	2,238	2,322	2,288	2,154	2,487	2,435	2,161	2,257	2,348	2,432
Trajectory Performance % (93% standard)	91.8%	92.8%	92.7%	93.8%	93.7%	93.3%	94.2%	94.0%	93.3%	93.6%	93.8%	94.0%
Actual Number Seen < 2 Wks	1905	1843	1914	2073	2000							
Actual Total Number Seen	2317	2296	2344	2536	2346							
Actual Performance % (93% standard)	82.2%	80.3%	81.7%	81.7%	85.3%							

Area	National Standard	SaTH Performance	England Performance	Regional Performance
2 Weeks Wait (Cancer Suspected)	93%	81.70%	90.0%	89.00%

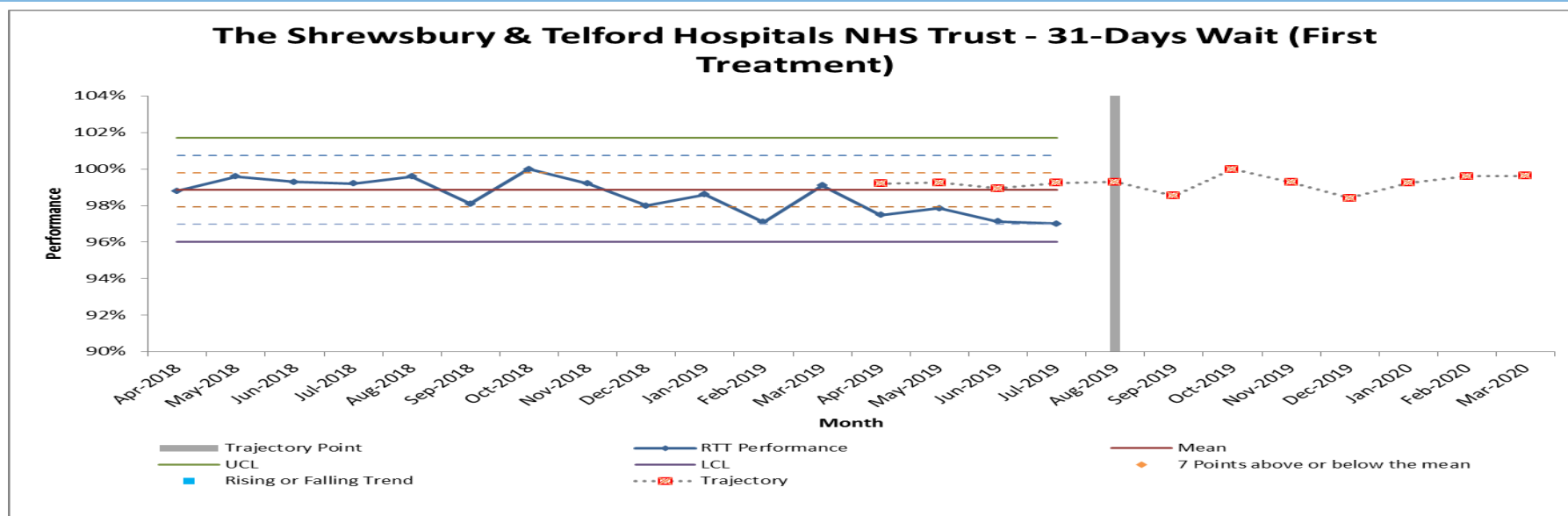
Key Actions For September 2019

Deep dive into 2 week wait for skin to understand the reasons for patient choice delays.
Continue to improve 7 day performance to improve 2 week wait target

Key Risks

National campaigns impacting on demand .
Pensions/tax impact on extra capacity.

Cancer Performance 31 Day Wait Summary

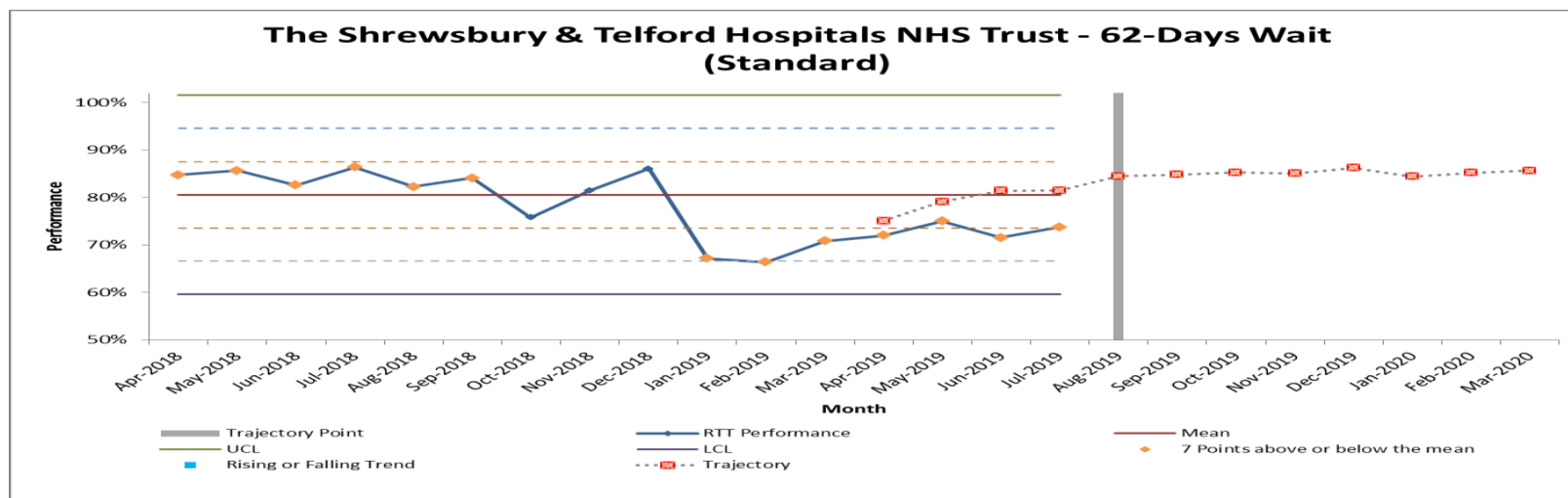


August 2019 predicted figures

Cancer Waiting Times - 31 Day First Treatment	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Number Treated < 31 Days	248	267	280	262	280	270	273	275	249	260	254	268
Total Number Seen	250	269	283	264	282	274	273	277	253	262	255	269
Performance % (96% standard)	99.2%	99.3%	98.9%	99.2%	99.3%	98.5%	100.0%	99.3%	98.4%	99.2%	99.6%	99.6%
Number Treated < 31 Days	272	274	237	290	226							
Total Number Seen	279	280	244	299	230							
Performance % (96% standard)	97.5%	97.9%	97.1%	97.0%	98.3%							

Area	National Standard	SaTH Performance	England Performance	Regional Performance
31 Days Wait (First Treatment)	96%	97.1%	96.5%	94.8%

Cancer 62 Day GP Referral



August 2019 predicted figures

Cancer Waiting Times - 62 Day GP Referral	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Trajectory Number Treated < 62 Days	106	122	132	115	142	129	113	138	132	136	110	114
Total Number Seen	141	154	162	141	168	152	133	162	153	161	129	133
Performance % (85% standard)	75.1%	79.2%	81.4%	81.5%	84.5%	84.9%	85.3%	85.1%	86.3%	84.5%	85.2%	85.7%
Number Treated < 62 Days	114.5	122	109.5	125.5	81							
Total Number Seen	158	162.5	153	170	112.5							
Performance % (85% standard)	72.5%	75.1%	71.6%	73.8%	72.0%							

Area	National Standard	SaTH Performance	England Performance	Regional Performance
62-Days Wait (Standard)	85%	73.0%	77.6%	73.7%

Key Actions

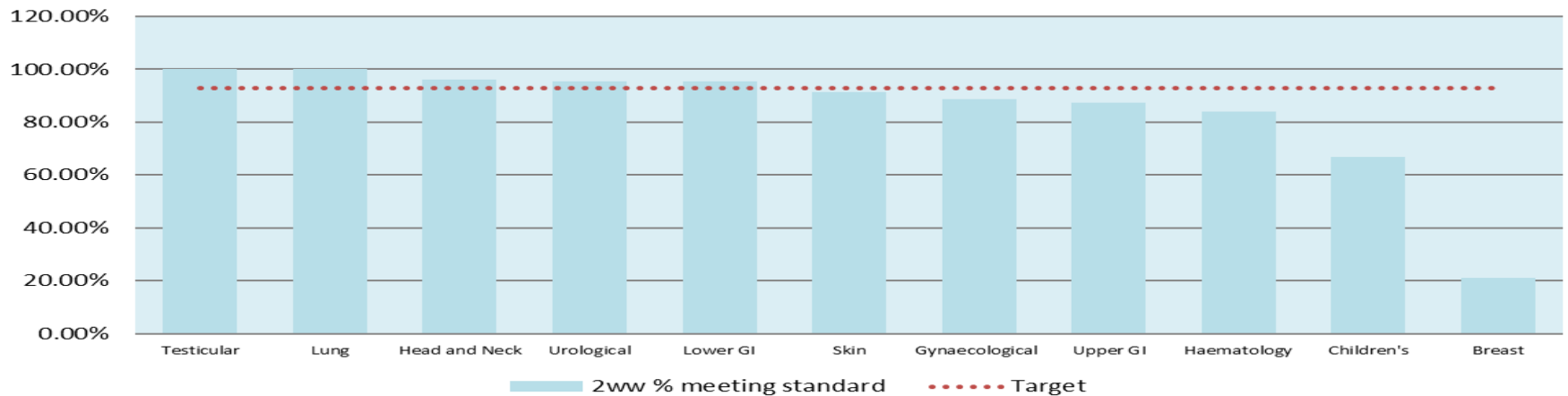
- Continue to clear backlog of patients over 62 days in line with trajectories by tumour site.
- T&F groups to progress actions in line with best practice guidance/pathways.

Key Risks

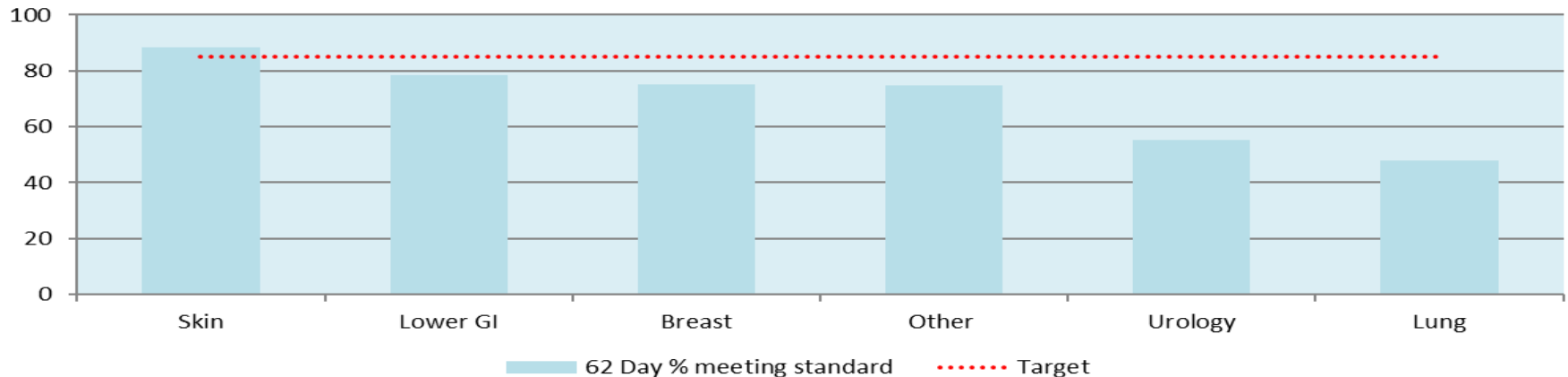
CT reporting capacity impacting on delays in pathways
H&N capacity for skin procedures

Cancer Performance By Tumour site

2Week Week % Meeting National Standard

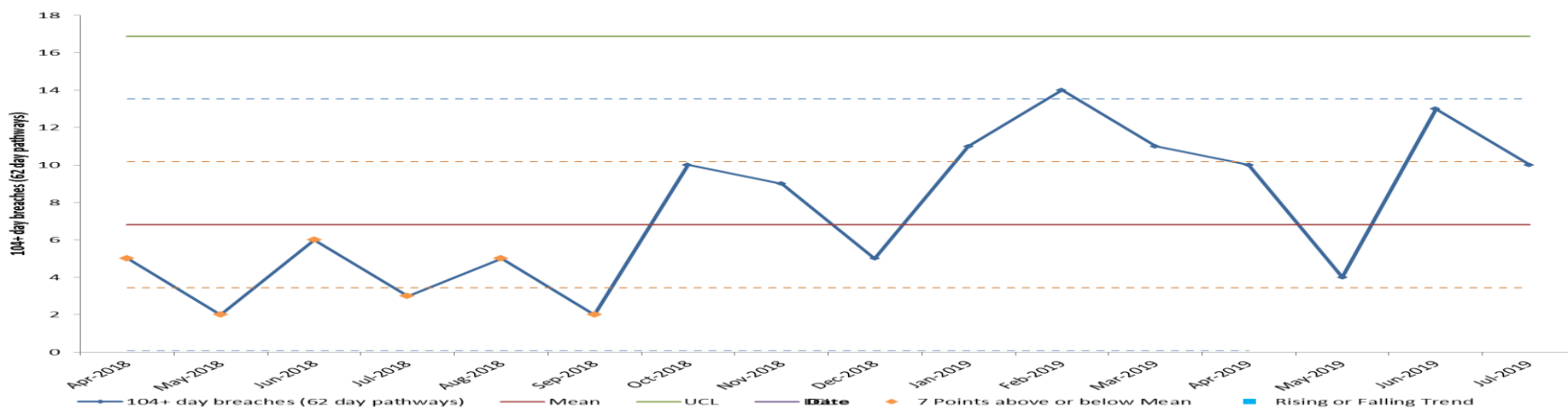


62 Day % Meeting National Standard



104 day breaches

The Shrewsbury & Telford Hospitals NHS Trust - 104+ day breaches (62 day pathways)



The following patients received their first definitive treatment for cancer after 104 days in July 2019 (the target for referral to treatment being 62 days):-

1 x Lung (115 Days) - Patient choice.
 1 x Lung (120 Days) - Treatment delay for medical reasons.
 1 x Lung (129 Days) - Patient choice.
 1 x Skin (112 Days) - Patient choice
 1 x UGI (126 Days) - Complex pathway. Initial referral to colorectal. Late tertiary referral to UHNM (day 70) for MDT discussion.
 1 x Urology (142 Days) - Elective capacity inadequate. Only one surgeon performs prostatectomy at SaTH. 24 days for TRUSB from request to report. 16 days for MRI from request to report. 13 days for OPA from MDT discussion.
 1 x Urology (126 Days) - Delay for diagnostics / complex pathway. 26 days for TRUSB. MRI requested without red dot (as per procedure for patients on cancer pathways). Ref'd to RJAH day 91. Further investigations and OPA at RJAH. Ref'd back to SaTH for treatment.

1 x Urology (104 Days) - Delay for diagnostics . out-patient capacity inadequate. 23 days for TRUSB from request to report. 22 day wait for OPA following MDT discussion.

1 x Urology (169 Days) - Elective capacity inadequate / delay for diagnostics. Long wait to arrange OPA ahead of TRUSB. One surgeon only performs prostatectomy at SaTH. Known capacity issues.

1 x Urology (143 Days) - Delay for diagnostics. 35 days for TRUSB from request to report. 12 days for OPA from MDT discussion. Patient requested time to consider treatment options. Ref'd to UHNM for surgery day 94. Ref'd back to SaTH for further investigation

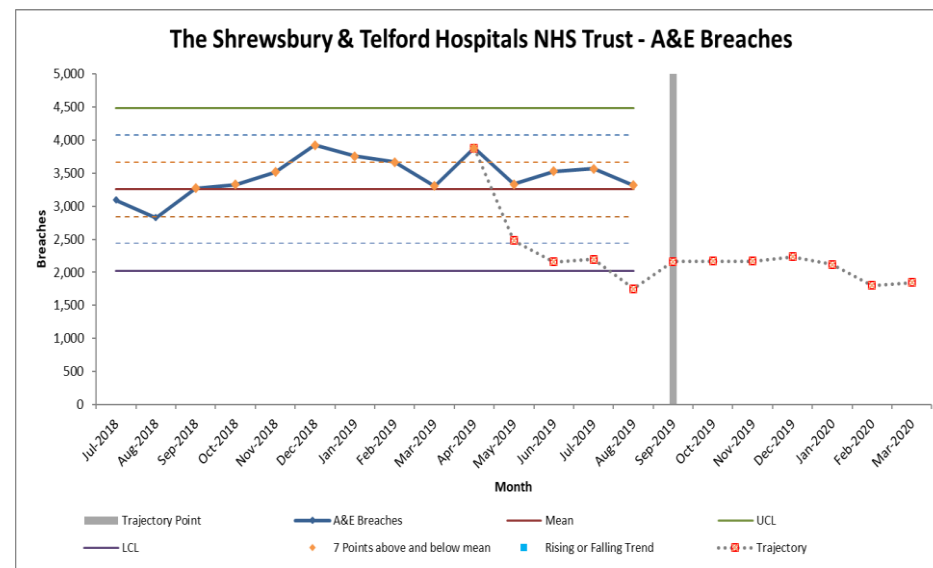
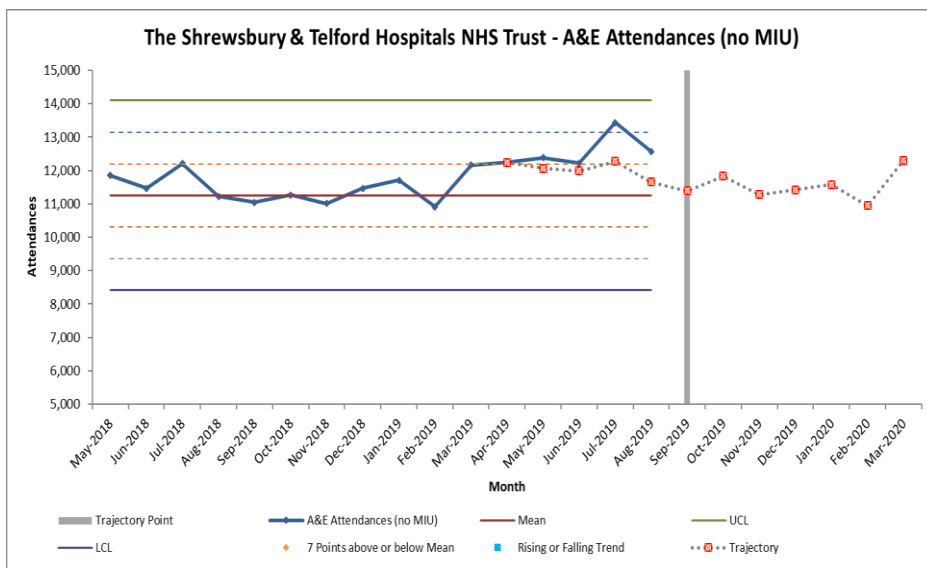
Urgent Care Update



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A&E attendances (excluding MIU)

Please note the SPC graph has been calculated using 24 point, however only 14 points are illustrated



Aug-19 Actual: 12,575

Aug-19 Trajectory: 11,658

Variance to Trajectory 917

Aug-19 Actual: 3,315

Aug-19 Trajectory: 2,482

Variance to Trajectory 833

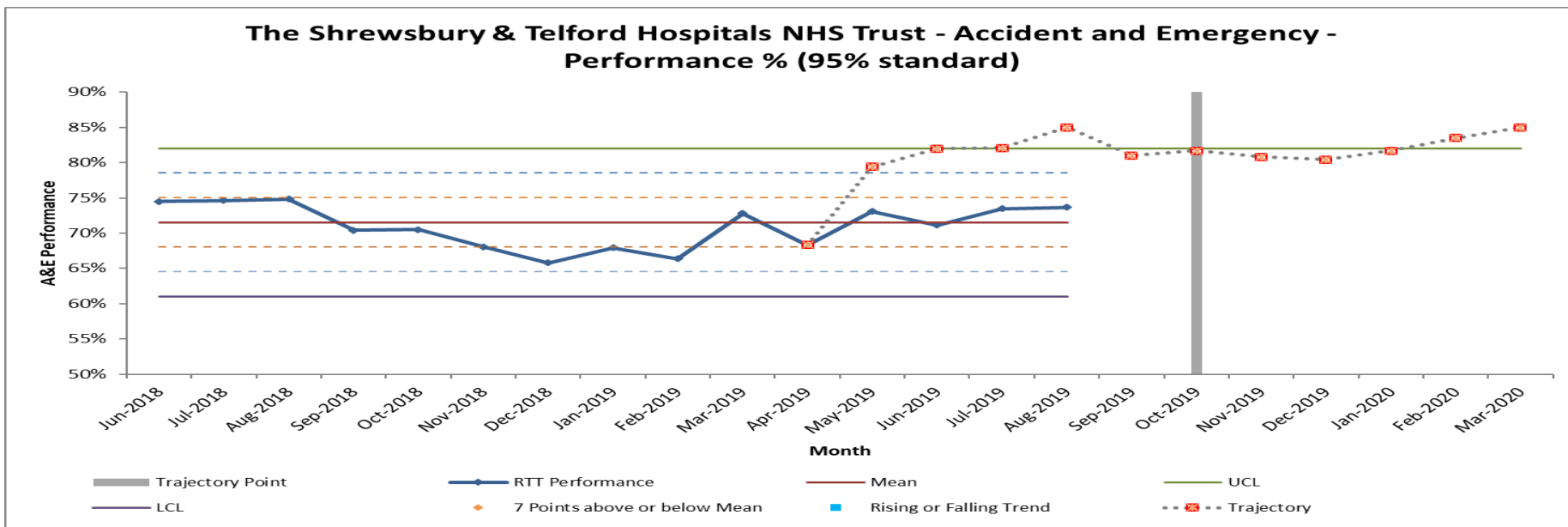
The following recovery actions are included within the trajectory:

- Reduction in 4 - 4 1/2 hour breaches - validation process
- Reduction in 4 - 4 1/2 hour breaches - in hours/ ED owned
- Utilisation of CDU
- Paediatric patients streamed/triaged direct to PAU
- T&O Fracture clinic trial

- Use of ENT treatment room to pull patients from ED
- Improved ED systems and processes
- Adhering to Internal Professional Standards

A&E Performance – (excluding MIU)

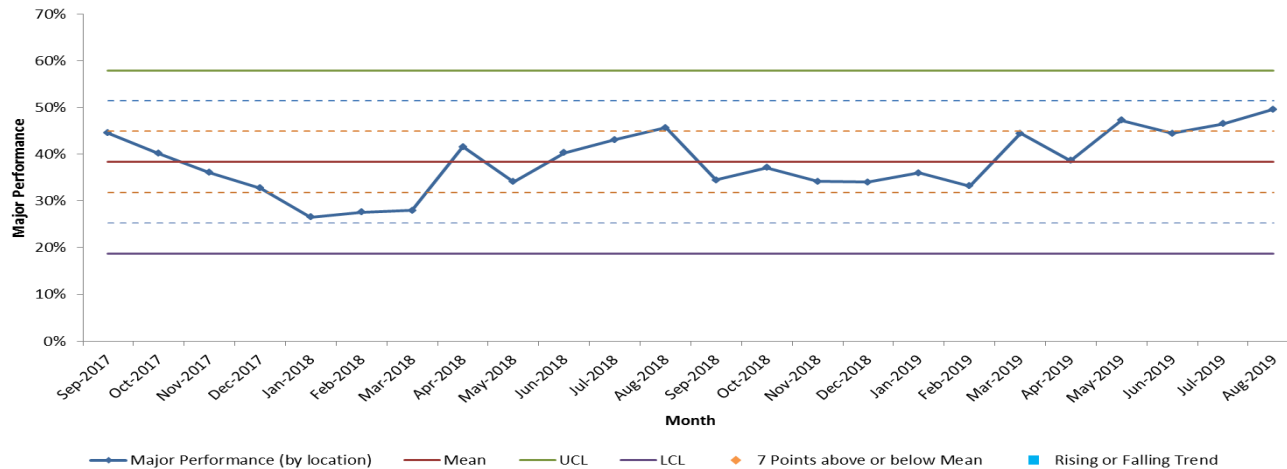
Please note the SPC graph has been calculated using 24 point, however only 14 points are illustrated



Accident and Emergency Performance	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20
Trajectory A&E - Total Patients	12243	12063	11986	12278	11658	11387	11828	11281	11424	11583	10942	12305
Actual A&E - >4 hour wait	3881	2482	2156	2196	1753	2164	2170	2169	2236	2120	1800	1843
Trajectory A&E - Performance % (95% standard)	68.3%	79.4%	82.0%	82.1%	85.0%	81.0%	81.7%	80.8%	80.4%	81.7%	83.5%	85.0%
Actual A&E - Total Patients	12243	12383	12225	13440	12575							
Actual A&E - >4 hour wait	3881	3332	3528	3566	3375							
Trajectory A&E - Performance % (95% standard)	68.3%	73.1%	71.1%	73.5%	73.2%							

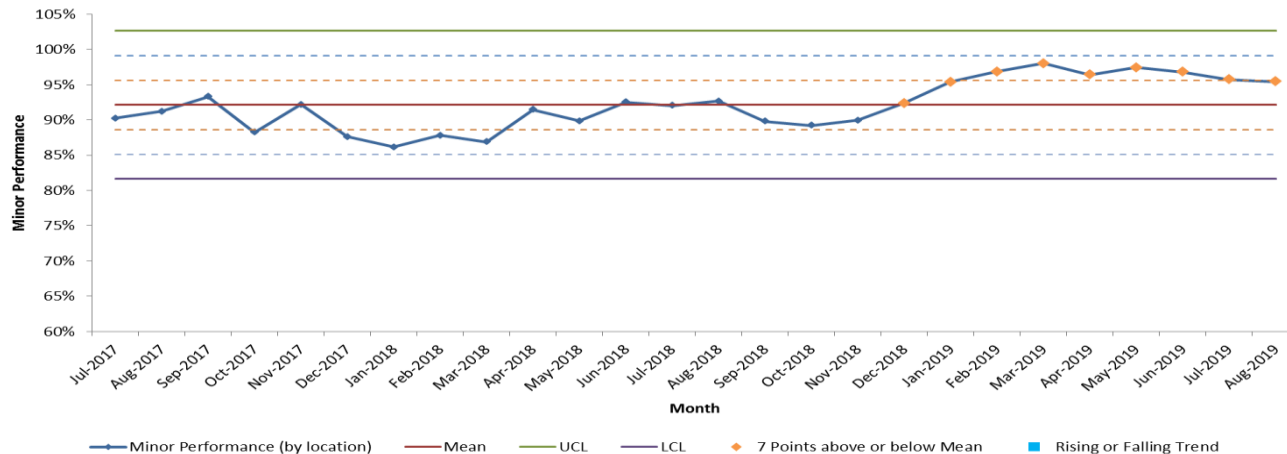
Minor and Major Performance (by location)

The Shrewsbury & Telford Hospitals NHS Trust - Major Performance (by location)



Significant improvement in minor performance since December 2018, majors remains primary challenge due to flow, space and overnight medical capacity.

The Shrewsbury & Telford Hospitals NHS Trust - Minor Performance (by location)



Ambulance arrivals and handover delays

Please note the SPC graph has been calculated using 24 point, however only 14 points are illustrated

Aug-19 Actual:

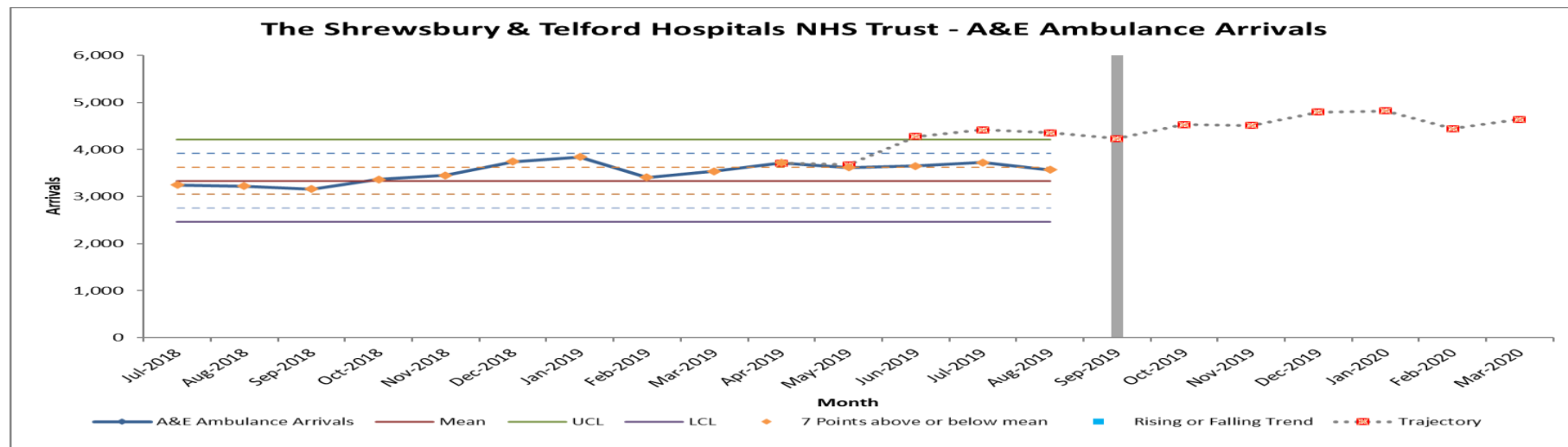
3,568

Aug-19 Trajectory:

4,355

Variance to Trajectory

-787



Handover breaches by time band for August 2019:

Please note based on WMAS Figures

	Trajectory			Actual			% Variance Trajectory vs Actual		
	15-30 mins	30-60 mins	>60mins	15-30 mins	30-60 mins	>60mins	15-30 mins	30-60 mins	>60mins
Aug-19	1986	561	98	1384	573	115	-30.31%	2.14%	17.35%

Continuing to work with system wide handover group and West Midlands Ambulance Service to reduce overall handover delays

Finance Report Month 05



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Finance Overview 2019/20

Income & Expenditure Position Month 5 Year to Date

The Trust has a planned deficit of £6.257m for the period April – August 2019. (Annual Plan £17.351m deficit). Actual Deficit reported is £9.557m, £3.3m away from planned levels

Income £4.767m overachieved, predominately within

- non elective activity £1.6m (2.3%) above plan.
- A&E activity £0.4m (2.8%) above plan.
- Non Elective Other (Maternity) £0.8m
- Income support for the hire of vanguard unit £0.6m.
- Non delivery of CIP of £0.2m
- Phased income adjustment from both local CCGs of £1.6m.
- Additional £0.3m for additional posts funded externally including Health Education England.

Pay £3.686m overspent, as a result of an overspend on agency costs of **£2.6m** and non delivery of CIP of **£1.2m**

Non Pay £5.709m and hire of vanguard unit £0.6m (contra to income, additional costs of clinical waste and other estates costs £1m, additional consultancy fees £0.6m, use of outsourcing services £0.6m, recruitment and legal fees £0.4m and non delivery of CIP of £2.1m

Balance Sheet Review £1.2m Release of Balance Sheet items transacted in the Month 3 financial position.

The August position continues to assume full receipt of July and August support funding of £2.474m , £1.680m is at risk if the Trust does not deliver the required control at the end of Qtr2.

	Annual	YTD		
	NHSI Plan	Plan	Actual	Variance
	£000s	£000s	£000s	£000s
Income	349,204	144,654	149,421	4,767
Income for pass through costs	31,855	13,023	13,601	578
Pay	(273,760)	(111,994)	(115,680)	(3,686)
Non-Pay & Reserves	(78,636)	(33,245)	(38,954)	(5,709)
Non Pay pass through costs	(31,855)	(13,023)	(13,601)	(578)
Reserves			1,200	1,200
Total expenditure	(384,251)	(158,262)	(167,035)	(8,773)
EBITDA	(3,192)	(585)	(4,013)	(3,428)
Finance Costs	(14,159)	(5,672)	(5,544)	128
Surplus/(deficit) against Control	(17,351)	(6,257)	(9,557)	(3,300)
Total pre Support				
Provider Support	17,351	5,553	5,553	0
Surplus/(deficit) against Control	0	(704)	(4,004)	(3,300)
Total post PSF				

Cash If the Trust achieves the planned breakeven position, it will be eligible for funding totalling £12.593m in respect of conditional PSF/FRF funding. It is projected that the minimum cash balance of £1.700m will be achieved..

Based on revised forecast projection of deficit of £31.122m and non recurrent assumption on delivery of PSF/FRF/MRET the trust will require external cash support of £19.908m phased from November onwards.

Capital The Internally Generated Capital Resource Limit (CRL) re Purchased Assets for 2019/20 remains at £10.450m. At Month 05, only £1.794m remains uncommitted.

£0.9m of CRL re Donated Assets has been initially allocated for the purchase of the System C Emergency Department System (“EDS”). Trust awaits outcome of application for £1.6m of PDC to fund necessary Fire Safety Works in Copthorne Building.

Underlying Income and Expenditure

	Month 1 £000s	Month 2 £000s	Month 3 £000s	Month 4 £000s	Month 5 £000s	Total £000s
Income (excluding PSF)	31,601	31,629	33,792	33,042	32,958	163,022
Income finalisation phasing	(566)	926	105	640	(1,105)	0
Pay	(23,408)	(23,029)	(22,980)	(23,206)	(23,057)	(115,680)
Non-Pay	(9,631)	(10,080)	(10,680)	(11,410)	(10,754)	(52,555)
Balance Sheet Write off			1,200			1,200
EBITDA	(2,004)	(554)	1,437	(934)	(1,958)	(4,013)
Finance Costs	(1,073)	(1,140)	(1,104)	(1,109)	(1,118)	(5,544)
Actual Deficit exc PSF	(3,077)	(1,694)	333	(2,043)	(3,076)	(9,557)
less Non Recurrent						0
Negotiated Support			(1,600)			(1,600)
Balance Sheet Write off			(1,200)			(1,200)
Underlying Deficit	(3,077)	(1,694)	(2,467)	(2,043)	(3,076)	(12,357)
Planned Deficit	(2,770)	(840)	(1,294)	(836)	(517)	(6,257)
Variance	(307)	(854)	(1,173)	(1,207)	(2,559)	(6,100)
Planned CIP Profile	829	829	829	1,157	1,157	4,801
CIP Delivery	359	365	(279)	643	224	1,312
Variance	(470)	(464)	(1,108)	(514)	(933)	(3,489)

Key Message

- The average underlying deficit in each of the first five months in circa £2.5m, a cumulative position of £12.4m, £6.1m above planned levels.
- Income levels for individual months have been adjusted to reflect the actual income relating to the month once all activity has been coded.

Income & Expenditure – In Month

	In month		
	Plan	Actual	Variance
	£000s	£000s	£000s
Income	28,850	30,313	1,463
Income for pass through costs	2,604	2,645	41
Pay	(21,562)	(23,057)	(1,495)
Non-Pay & Reserves	(6,666)	(8,109)	(1,443)
Non Pay pass through costs	(2,604)	(2,645)	(41)
Reserves			
Total expenditure	(30,832)	(33,811)	(2,979)
EBITDA	622	(853)	(1,475)
Finance Costs	(1,139)	(1,118)	21
Surplus/(deficit) against Control			
Total pre Support	(517)	(1,971)	(1,454)
<i>Provider Support</i>	<i>1,237</i>	<i>1,237</i>	<i>0</i>
Surplus/(deficit) against Control	720	(734)	(1,454)
Total post PSF			

Key Message

- In Month the Trust is £1.454m adverse to control total.
- For the month of August income has over-achieved by £1.463m of which £1.1m relates to July income finalisation, pay has overspent by £1.495m and non-pay by £1.484m.
- Income continues to over-deliver against plan in non-electives.
- Non-delivery of CIP and agency usage above plan are the main drivers behind the material expenditure changes in August.

Income Analysis by Activity Type

	YTD Budget	YTD Actual	Variance	Variance %	YTD Budget	YTD Actual	Financial Variance Value
	Activity	Activity	Activity		£000s	£000s	£000s
Accident and Emergency (Attendances)	54,531	56,098	1,567	2.8%	8,293	8,690	397
Outpatient Appts (Attendances)	179,909	177,304	(2,605)	(1.5%)	21,934	21,654	(280)
Elective Day Cases	21,682	21,421	(261)	(1.2%)	13,727	13,735	8
Elective Inpatient (Spells)	2,187	2,351	164	7.0%	7,155	7,540	385
Non Elective (Spells)	24,493	25,059	566	2.3%	50,843	52,394	1,551
Non Elective Other	2,225	2,604	379	14.6%	4,647	5,450	803
Others (Inc Reserves)					38,055	39,958	1,903
Total	285,026	284,837	(189)	(0.1%)	144,654	149,421	4,767
Provider Sustainability Funding (PSF)					5,553	5,553	0
Total after PSF	285,026	284,837	(189)	(0.1%)	150,207	154,974	4,767

Accident and Emergency attendances are above planned levels by 2.8%, creating a positive variance to plan of £0.397m.

In July the outpatient attendances had recovered broadly backed to planned levels . In August , however, the underperformance is 1.5%

Elective Inpatient spells are over delivering against plan by 164 spells generating a positive variance of £385k

Non Elective activity is 566 spells higher than the planned levels (2.3%); this includes the clinical decisions unit (CDU) at the PRH site. This has delivered a positive variance of £1.551m to plan. In the planning assumptions the Trust has assumed a circa 8% growth in non electives in comparison to 18/19 levels and this has been overachieved by a further 2.3%.

Blended tariff adjustment , the contract adjustment to income values for non elective and Accident and Emergency activity amounted to £2.696m

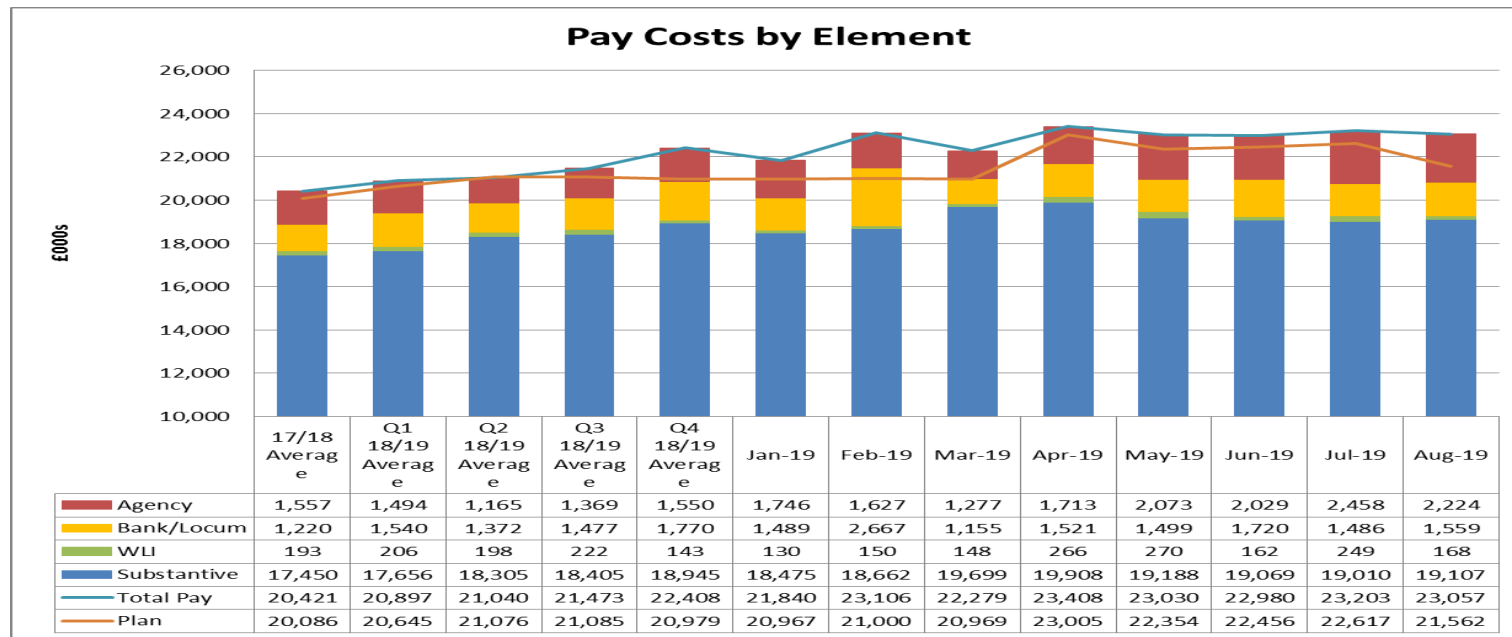
Other includes the phased income adjustment from both local Health Economy CCGs of £1.6m.

When compared to the signed CCG contract financial values , Shropshire CCG are over performing by £3.197m (5.2%) and Telford & Wrekin by £1.506m (3.6%). This is mainly in non elective activity with over performance (adjusted for CDU) of 2294 spells (9.0%) for Shropshire and 1316 spells (8.1%) for Telford & Wrekin.

Key Messages

- Income over performance of £4.767m year to date. Non elective activity above plan by 2.3% and circa 10% higher than activity levels in 18/19
- Receipt of phased income adjustment from local CCGs of £1.6m in Q1.

Pay 2019/20

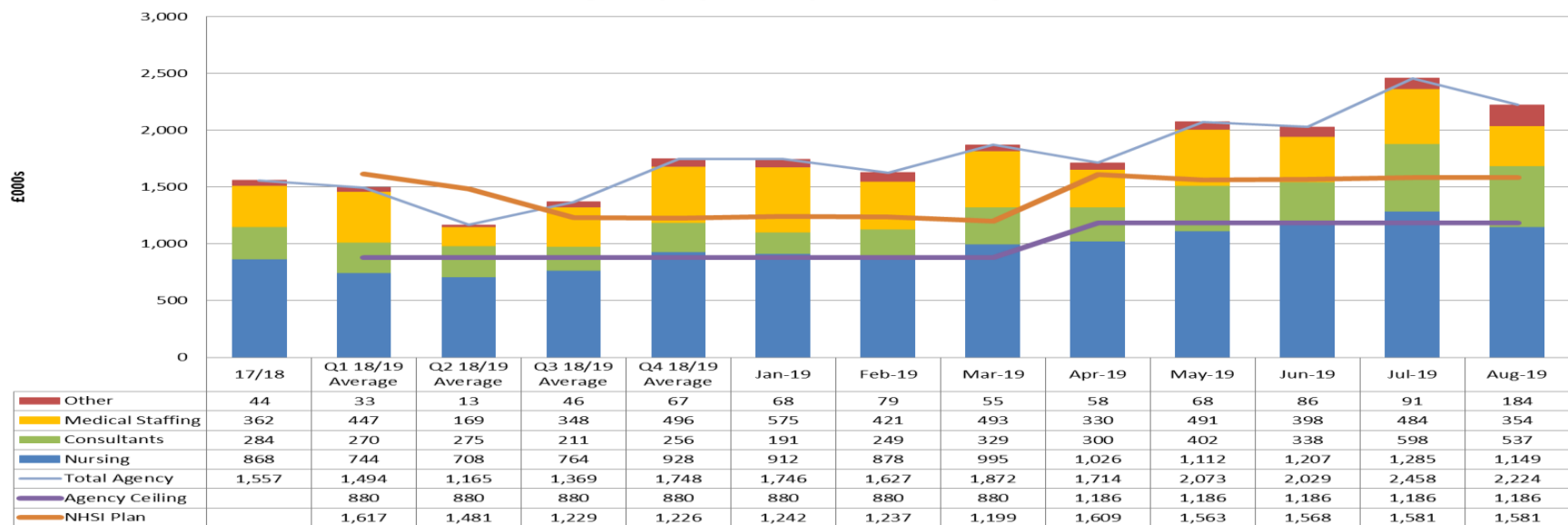


Key Messages

- At the end of August the pay budget is overspend by £3.868m as a result of an overspend on agency costs of £2.6m and non delivery of CIP of £1.9m. Substantive staff costs remain relatively stable (April pay included non-consolidated one off pay award). The operationalisation of the ED nursing business case continues to be a financial concern. The increasing reliance on agency is creating financial pressures. The Trust continues to spend on average £1m per month on agency that recorded for the previous year.
- The overall run rate for August has remained mainly constant with July in all areas of pay spend with the overall reduction of £0.1m compared to the previous month, made up of an increase in usage of bank and locum staff and a reduction in agency spend
- The Trust alongside Deloitte have weekly panels to review the key staff groups using agency to improve the review and improve recruitment and other aspects with the intention of reducing usage.

Agency Expenditure 2019/20

Agency Spend by Staff Group

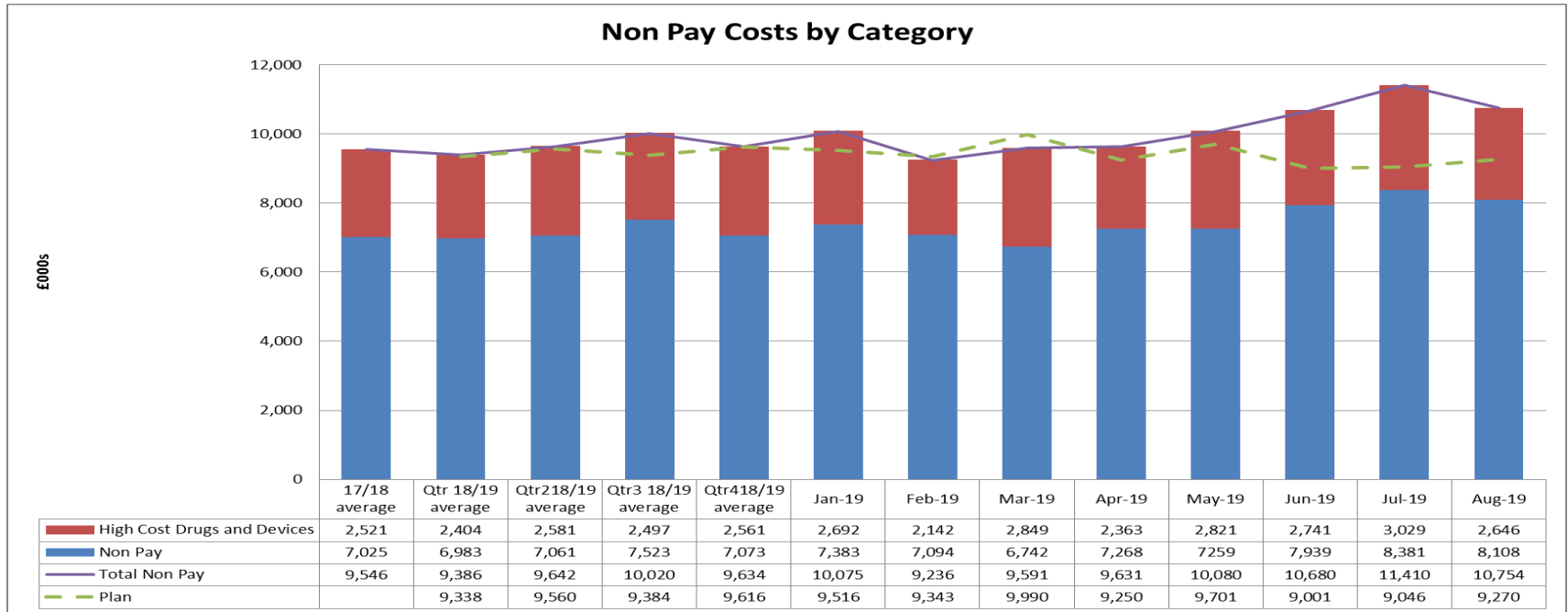


Annual		YTD					In Month		
Agency Ceiling	NHSI Agency Plan	Agency Ceiling Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/ (Over) Agency Ceiling	Variance Under/ (Over) Agency NHSI Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/ (Over) Agency NHSI Plan
£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
14,232	19,153	5,930	7,902	10,498	(4,568)	(2,596)	1,581	2,224	(643)

Key Messages

- Agency expenditure has exceeded budget by £0.643m per month, £2.596m year to date. associated with unavailability and capacity issues.
- Expenditure in August is £0.8m more in the month than the average for 2018/19.
- Annual plan for agency is £19.2m with an nationally set agency ceiling of £14.2m.

Non Pay



Key Messages

- Month 5 non pay spend excluding high costs drugs and devices amounted to £8.108m and £38.954m year to date.
- Non pay expenditure run rates remain high in comparison to previous year's average with an increased run rate of circa £1m per month. The months of July and August have been the highest levels of spend over the last 3 years, and rates have been increasing consistently since the start of the financial year.

Care Group Expenditure Position

Care Group	Income/ Pay/ Non-Pay	M5 YTD Control Total £,000	M5 YTD Actual £,000	M5 YTD Variance £,000
Scheduled	Income	54,385	54,591	206
	Pay	(37,225)	(38,842)	(1,616)
	Non-Pay	(9,607)	(10,322)	(715)
	Total	7,553	5,428	(2,125)
Unscheduled	Income	53,905	55,646	1,741
	Pay	(29,134)	(30,877)	(1,743)
	Non-Pay	(6,137)	(6,197)	(60)
	Total	18,634	18,572	(62)
Womens and Childrens	Income	20,494	20,935	442
	Pay	(14,753)	(15,151)	(398)
	Non-Pay	(2,217)	(2,402)	(184)
	Total	3,523	3,382	(141)
Support Services	Income	8,954	8,869	(85)
	Pay	(13,685)	(14,145)	(460)
	Non-Pay	(3,770)	(4,032)	(261)
	Total	(8,501)	(9,307)	(807)
Corporate Services	Income	8,347	9,380	1,033
	Pay	(16,280)	(16,665)	(385)
	Non-Pay	(13,861)	(16,002)	(2,141)
	Total	(21,795)	(23,288)	(1,493)
Total		(585)	(5,213)	(4,628)
Balance Sheet			1,200	1200
EBITDA		(585)	(4,013)	(3,428)
Finance Costs		(5,672)	(5,544)	128
Surplus / (Deficit)		(6,257)	(9,557)	(3,300)
PSF/FRF/MRET		5,553	5,553	0
Surplus Deficit against Control Total		(704)	(4,004)	(3,300)

Scheduled Care

Pay – Under achievement CIP £1m, Consultants – agency usage/waiting list costs due to sickness/vacancies £464k.

Non Pay - Four Eyes (£91k) – Your World (Gastro Capacity)(£158k) Digital Hearing Aids (£25k), Blood Products (£83k) Other Clinical Supplies (£190k).

Unscheduled Care

Pay - A&E - RN/HCA over-establishment verses the business case plus RN agency escalated rates continuing £800k; non-delivery of CIP £1m.

Women and Children's

Pay - £423k shortfall on CIP, increased Gynaecology medical agency £201k plus increased levels of Gynaecology nursing £52k, offset increased vacancies Neonates and Paediatrics £150k.

Support

Pay - Non-delivery of CIP £453k and increased agency use in Therapies £64k offset by increased vacancies in Pathology and Pharmacy £140k

Non-Pay - Radiology Outsourcing cost increasing above plan £256k.

Corporate

Estates Non-pay - £1m overspending due to waste £350k, undelivered CIP £200k increased energy and variable nature of maintenance costs linked to the aging sites £350k.

Facilities Non-Pay - Undelivered CIP, Postage and Laundry £200k.

Corporate Services non-pay - Consultancy £550k, recruitment fees £200k, legal fees £200k.

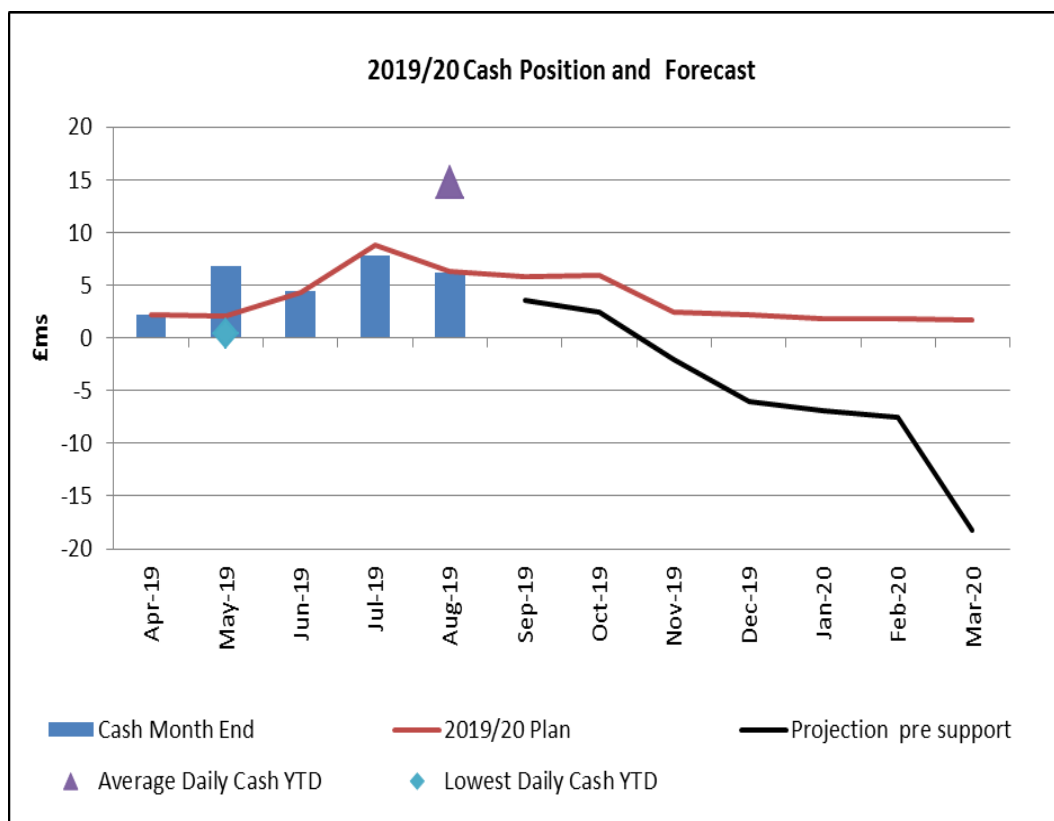
Commissioner 2019/20 Contract Update

Commissioner	Value	Agreed	Signed*	Update
Main CCG - Shropshire, Telford and Associates including CQUIN	£254,784,328	✓	✓	
NHS England – Specialised Services and Associates including CQUIN	£54,122,168	✓	✓	
Powys Teaching Health Board	£26,699,210	✗	✗	Issue of Welsh Commissioners paying English 19/20 National Tariff (less 1.25% CQUIN) has been resolved. Revised offers have been issued.
Betsi Cadwaladr University Health Board (North Wales)	£1,682,113	✗	✗	Issue of Welsh Commissioners paying English 19/20 National Tariff (less 1.25% CQUIN) has been resolved. Revised offers have been issued.
Welsh Health Specialised Services Committee (WHSSC)	£1,092,802	✗	✗	Issue of Welsh Commissioners paying English 19/20 National Tariff (less 1.25% CQUIN) has been resolved. Revised offers have been issued.
Hywel Dda	£139,318	✗	✗	Issue of Welsh Commissioners paying English 19/20 National Tariff (less 1.25% CQUIN) has been resolved. Revised offers have been issued.

If our Welsh commissioners only funded estimated activity levels at 2018/19 tariff prices (i.e. a worst case scenario) there would be a shortfall in income of circa £1.3m. The NHSE national pricing team have confirmed Sath will be paid the 1.25% CQUIN directly via NHSE and we will shortly be requesting some info to enable the national team to validate payment values. We will retain this as an income risk until the final payment is received, but the likelihood of non payment has been significantly reduced.

Cash

	Actual YTD	Total Based on Revised Projection
	£000's	£000's
Balance B/fwd	1,649	1,649
I&E CASHFLOW		
Income I&E (inc Donated & Conditional Funding)	158,876	395,717
Pay I&E	(115,593)	(282,291)
Non Pay I&E	(48,351)	(122,682)
Finance Costs I&E	(173)	(3,602)
Capital Expenditure (inc Donated) re Depreciation	(1,672)	(11,618)
Total I&E Cashflow	(6,914)	(24,476)
EXTERNAL FUNDING		
Loan to cover timing of receipt of PSF/FRF/MRET	0	0
Sustainable Services - (Expenditure)	(379)	(4,674)
Sustainable Services - (Income)	0	4,674
Total External Funding Cashflow	(379)	0
Total Balance Sheet Changes	11,877	4,619
Total Cashflow	4,584	(19,857)
Balance C/fwd	6,233	(18,208)
Required Cash Support	0	19,908
Balance C/fwd after Support	0	1,700



Key Messages

- If the Trust achieves the planned breakeven position, it will be eligible for funding totalling £12.593m in respect of conditional PSF/FRF funding. It is projected that the minimum cash balance of £1.700m will be achieved.
- However if the Trust does not achieve financial plan, PSF and FRF funding will not be received for Quarters 2 to 4 resulting in shortfall in income of £10.705m.
- The above projected cashflow is based on the revised forecast projection of deficit of £24.475m, with cash benefit in 2019/20 in respect of receipt of PSF funding relating to 2018/19 (£4.567m)
- It is projected that the Trust will require external cash support of £19.908m phased from November onwards.

Capital Programme

Scheme	2019/20 Capital Budget	2019/20 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 2018/19	200	-38	31	-6	189	4	187	13
PC In House costs of delivery of schemes	780	294	463	758	22	0	780	0
PC RSH MLU/PAU - P2 FCHS	0	0	0	0	0	0	0	0
PC Fire safety Programme	291	4	0	4	287	0	291	0
PC Subway Duct - RSH (further phases following on from 2017/18 agreement)	950	0	30	30	920	0	950	0
PC Ophthalmology move into Copthorne Building - Phase 3 (additional asbestos)	50	0	0	0	50	0	50	0
PC IT Storage Solution (further phases following on from 2018/19 investment)	500	466	1	467	33	0	500	0
PC Replacement of Autoclaves in Path Lab (agreed at CPG)	202	0	5	5	197	0	202	0
PC RSH Catering Service (agreed at CPG/PC)	68	0	30	30	38	0	68	0
PC Eye Injection Automation System (agreed at CPG)	80	0	0	0	80	0	80	0
Total Delegated Contingency Funds	1,300	308	103	410	4	886	1,300	0
Corporate Contingency (In Year Allocations)	1,170	11	166	177	841	152	1,170	0
Capitalisation of Expenditure	1,200	334	245	579	621	0	1,200	0
AS Endoscopy Suite Reconfiguration	1,300	0	0	0	1,300	0	1,300	0
RF Fire Safety Copthorne Building (original balance)	359	139	70	209	150	0	359	0
Uncommitted Fund Balance	749	0	0	0	0	749	749	0
UF High Value Radiology Equipment (inc PRH CT Scanner)	400	0	347	347	53	0	400	0
UF Sustainable Services	400	0	0	0	400	0	400	0
UF Actions from CQC visit	10	7	0	7	0	3	10	0
UF Data Warehouse	441	13	441	454	0	0	454	-13
Total Internally Generated Capital Schemes	10,450	1,538	1,932	3,470	5,186	1,794	10,450	0
IGDA - A&E System - System C	900	0	0	0	900	0	900	0
NIY Sustainable Services Project	4,674	380	239	618	4,056	0	4,674	0
Total Capital Programme	16,024	1,917	2,171	4,088	10,142	1,794	16,024	0
% Internally Generated		14.71%	18.49%	33.20%	49.63%	17.17%	100.00%	
% Total Capital Programme		11.96%	13.55%	25.51%	63.29%	11.20%	100.00%	

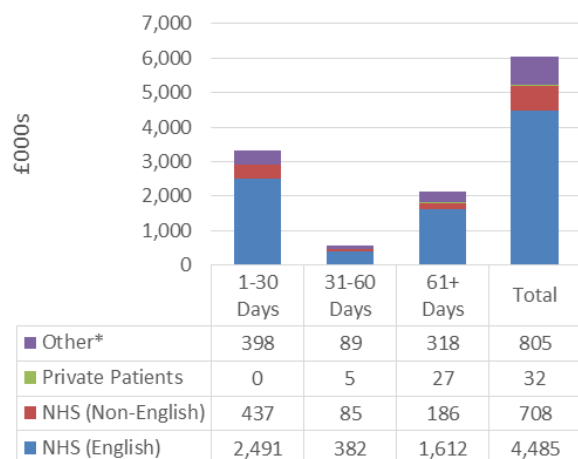
	£m	%
Expensed	1.538	14.71%
Ordered – not yet expensed	1.932	18.49%
Committed – not yet ordered	5.186	49.63%
Schemes yet to be identified	1.794	17.17%

Key Messages

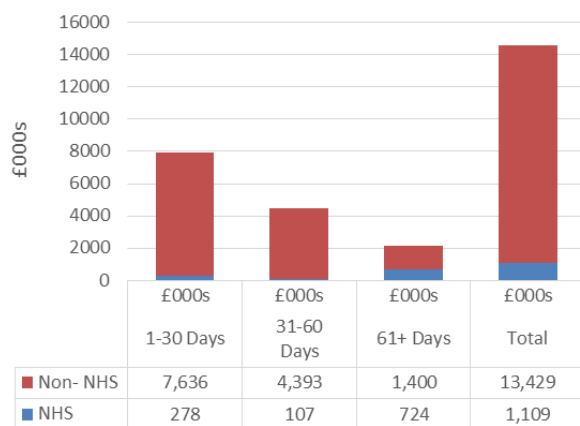
- The Internally Generated Capital Resource Limit (CRL) re Purchased Assets for 2019/20 has been agreed at £10.450m.
- At Month 05, only £1.794m remains uncommitted. £0.152m in Corporate Contingency, £0.886m within the delegated reserve fund and £0.749m within the general uncommitted reserve. There remains £0.007m yet to be committed in agreed schemes.
- £0.9m of CRL re Donated Assets has been initially allocated for the purchase of the System C Emergency Department System (“EDS”), subject to potential partial mitigation through application to HSLI for £0.8m.
- FIT bid – following successful bid, it has been agreed at Trust Board to utilise capital for purchase of equipment c£0.6m
- Progression of Mytton Oak Capital Scheme, whilst Trust awaits outcome of application for £1.6m of PDC to fund necessary Fire Safety Works in Copthorne Building.

Receivables/Payables

Accounts Receivable aged debt summary as at 31 August 2019



Accounts Payable aged summary of outstanding invoices as at 31 August 2019



The outstanding receivables balances as at 31 August 2019 over £0.100m are:

	1-30 Days £000s	31-60 Days £000s	61+ Days £000s	Total £000s
NHS England Commissioning	958	0	828	1,786
Telford & Wrekin CCG	627	118	327	1,072
Powys LHB	456	82	17	555
Health Education England	352	0	0	352
Shropshire CCG	103	71	171	345
CP Plus	248	0	0	248
RJAH NHSFT	113	28	82	223
Welsh Health Specialised Services	19	0	133	152
Shropshire Community Health Trust	40	37	28	105

The outstanding balance with NHS England Commissioning over 61 days relates to the 2018/19 interim forecast outturn. This invoice was paid on 2 September 2019.

The 1-30 days balance with NHS England Commissioning includes £642k of invoices raised in advance for Month 6 contract income to ensure these invoices are paid in September 2019.

Shropshire CCG (£30k per month) and Telford and Wrekin CCG (£108k per month) are short-falling their monthly contract payments due to contract disputes.

Powys LHB includes an invoice raised for £431k for the final contract settlement for 2018/19.

There were no credit notes raised over £0.100m in August 2019.