

Trust Performance Report – Month 9

Trust Board
6th February 2020



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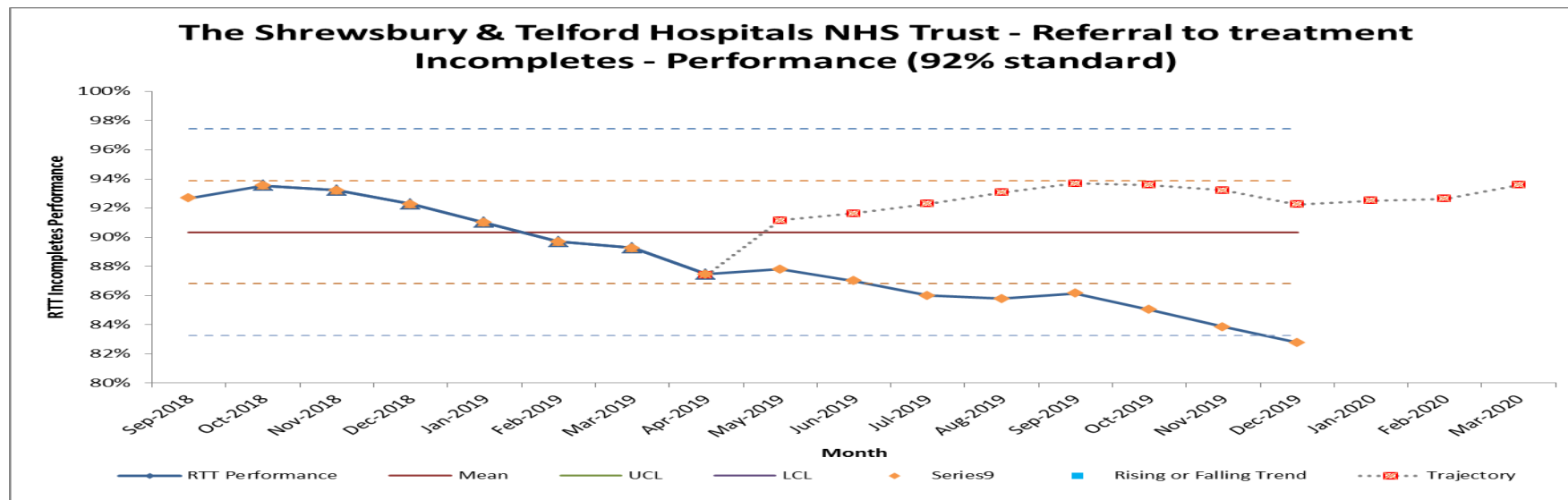
RTT



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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



Dec-19 Actual:

82.76%

Dec-19 Trajectory:

92.25%

Variance to Trajectory

-9.49%

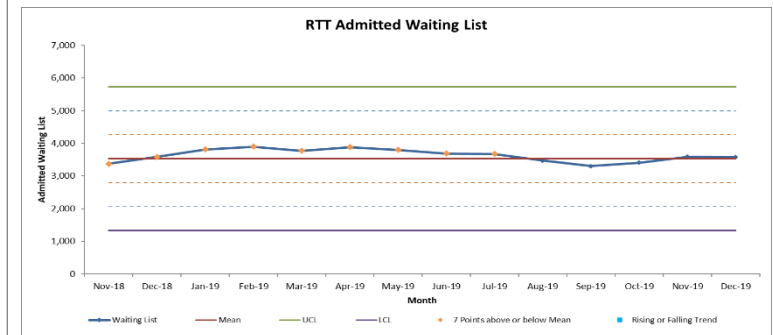
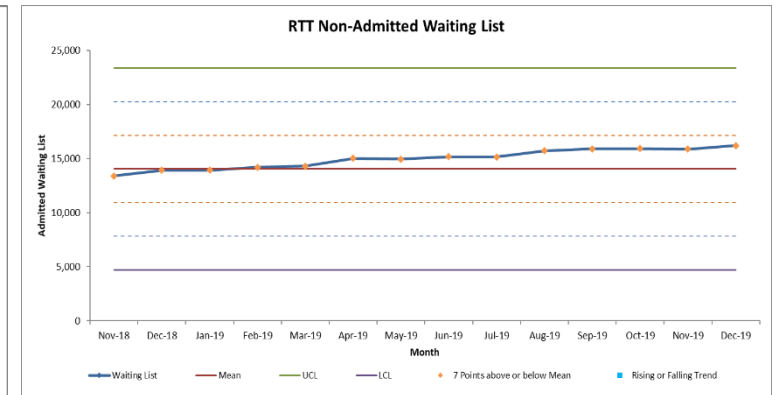
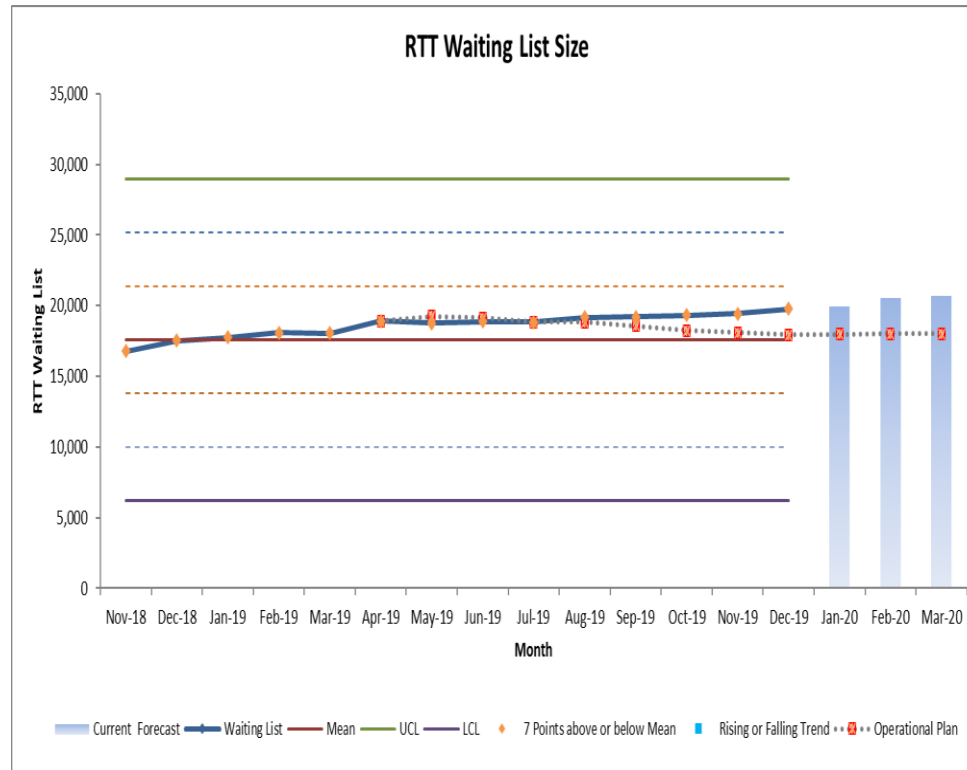
Key actions :

- Review of urgent and long waiters
- Management of list to minimise short notice cancellations
- Capacity options Quarter 4 to continue to ensure no 52 week breaches

Key risks:

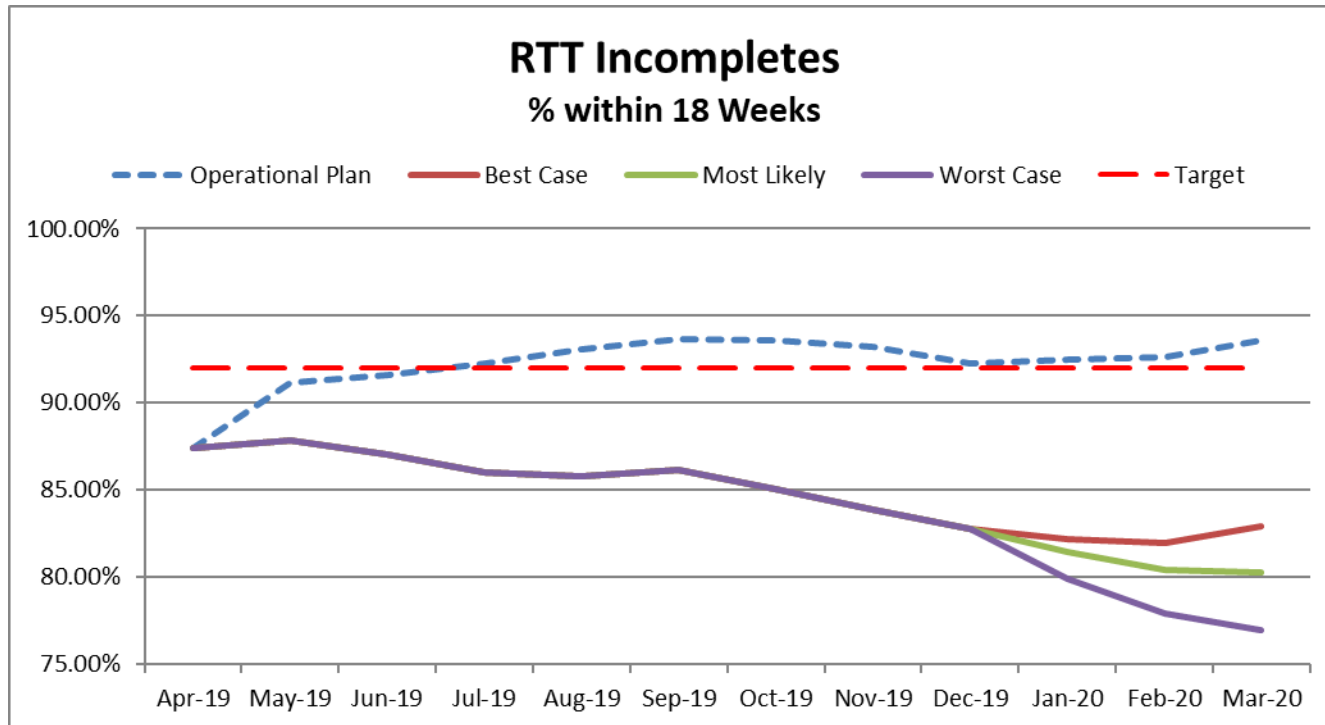
- Bed gap will impact on DSU usage if emergency demand continues.
- March 2020 waiting list size to be same as March 2019
- Staffing gaps within theatre teams and consultant anaesthetists
- 52 week waits if DSU escalation continues in Quarter4

RTT Waiting List Size Projection



The total waiting list size in December was 19759 against the operational plan trajectory at this point of 17939 . The requirement is to bring the March 2020 position back in line with the March 2019 level (18,064)
The number of 40 week waits has risen to 134 in December 2019.

RTT Best, Most and Worst case



RTT Breakdown

National Benchmarking- November 2019

Specialty	England	SaTH	UHNM	Wolverhampton	UNB'Ham	Worcester	Walsall
All	84.4%	83.9%	82.6%	83.2%	82.6%	81.9%	86.3%
General Surgery	82.8%	86.8%	78.6%	84.2%	82.9%	83.3%	85.8%
Urology	82.6%	79.6%	79.7%	77.0%	71.5%	82.1%	86.7%
T&O	81.7%	79.7%	79.5%	89.8%	82.0%	78.2%	87.9%
ENT	80.8%	83.8%	80.4%	86.2%	80.1%	92.1%	81.6%
Oral Surgery	80.4%	61.4%	76.8%	78.8%	86.0%	53.9%	80.0%
Ophthalmology	84.4%	92.6%	85.0%	71.3%	85.1%	77.9%	82.3%

	Waiting List Size			Performance		
	Dec-18	Dec-19	% Var	Dec-18	Dec-19	% Var
Ophthalmology	2814	2966	5%	94.3%	91.6%	-3%
General Surgery	2607	2765	6%	92.1%	84.7%	-9%
Ear nose & throat	2160	2547	15%	92.8%	81.5%	-14%
Oral Surgery	1171	1858	37%	85.0%	59.3%	-43%
Urology	1725	1794	4%	87.7%	78.3%	-12%
Gynaecology	1429	1506	5%	91.3%	90.0%	-1%
Gastroenterology	1357	1396	3%	98.5%	94.2%	-5%
Cardiology	759	1250	39%	92.6%	70.3%	-32%
Other	1060	1000	-6%	96.2%	86.5%	-11%
Respiratory Medicine	606	754	20%	80.9%	72.9%	-11%
Dermatology	566	668	15%	95.1%	92.4%	-3%
General Medicine	545	526	-4%	97.6%	90.9%	-7%
Trauma & Orthopaedics	422	428	1%	93.1%	86.4%	-8%
Geriatric Medicine	271	253	-7%	93.7%	94.5%	1%
Cardiothoracic Surgery	20	38	47%	100.0%	86.8%	-15%
Neurology	1	10	90%	100.0%	100.0%	0%

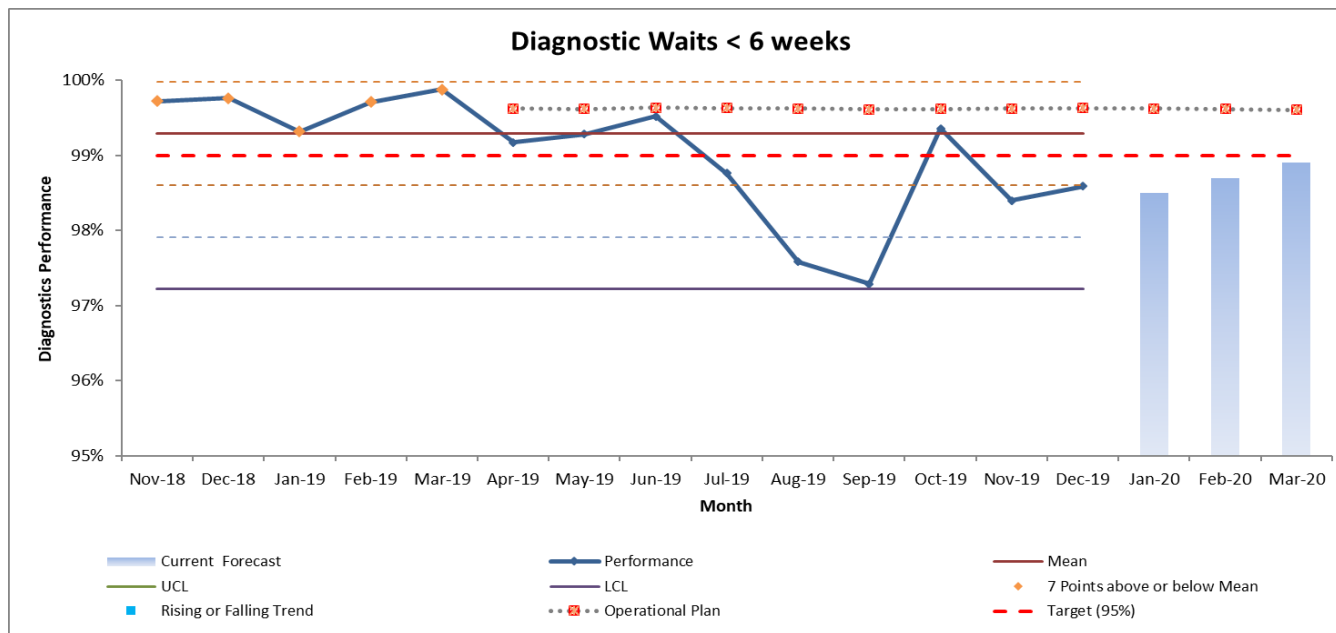
- Above table illustrates the national and peer position for the month of November 19 against SaTH.
- Urology, T&O and Oral Surgery are our key area of concern.
- Since Ophthalmology has retained its position and looks set to continue as it remains largely unaffected by bed capacity issues
- The Vanguard was put in place from mid Dec at PRH along with additional beds at RSH

Diagnostics



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Diagnostics Waiting Time



Key Actions:

- Reduce cardio respiratory backlog by undertaking additional sessions in February and March

Key Risks:

- Increase in CT scan requests on delivery of overall DM01 trajectory
- 60 hours of scanning and reporting required to manage demand.

	Sep-19			Oct-19			Nov-19			Dec-19		
	Total WL	Over 6wks	Performance	Total WL	Over 6wks	Performance	Total WL	Over 6wks	Performance	Total WL	Over 6wks	Performance
Imaging	5345	67	98.75%	6014	24	99.60%	6393	18	99.72%	6282	29	99.53%
Physiological Measurement	616	3	99.51%	336	6	98.21%	909	101	88.89%	954	76	92.03%
Endoscopy	676	110	83.73%	790	16	97.97%	833	8	99.04%	584	5	99.14%
Total	6637	180	97.29%	7140	46	99.36%	8135	127	98.44%	7820	110	98.59%

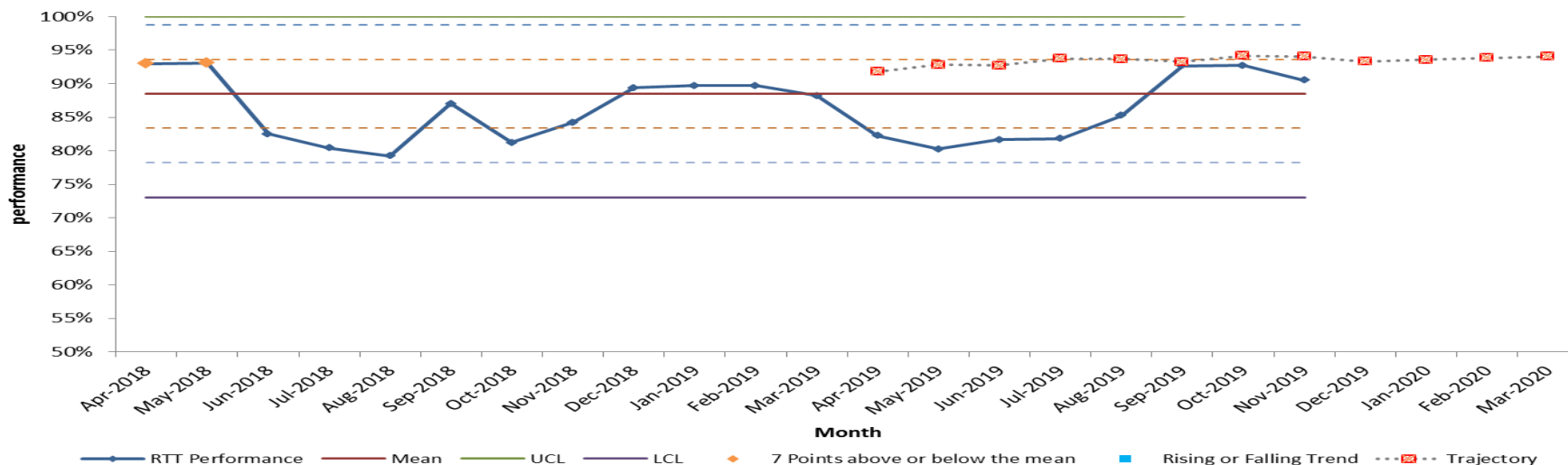
Cancer



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Cancer 2 Week Wait Trajectory 2019/20

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



December 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	1980	2083	2336	2175	2137			
Actual Total Number Seen	2317	2296	2344	2535	2322	2248	2520	2403	2342			
Actual Performance % (93% standard)	82.2%	80.3%	81.7%	81.8%	85.3%	92.7%	92.7%	90.5%	91.2%			

Key Actions January 2020

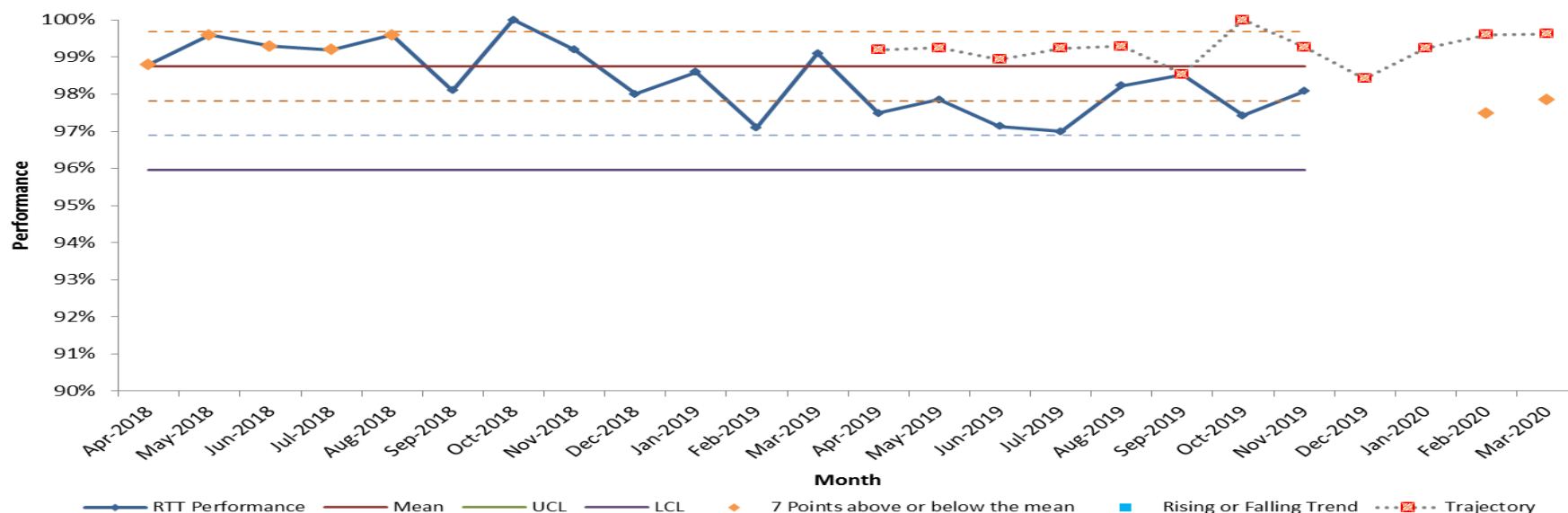
- Continue to review 2WW performance, booking within 7 days, at weekly Cancer Performance and Assurance meeting
- Monitoring of capacity for 2WW referrals in respiratory clinics (listed under risks to achievement)

Key Risks

- Reduction in capacity linked to WLI clinics

Cancer Performance 31 Day Wait Summary

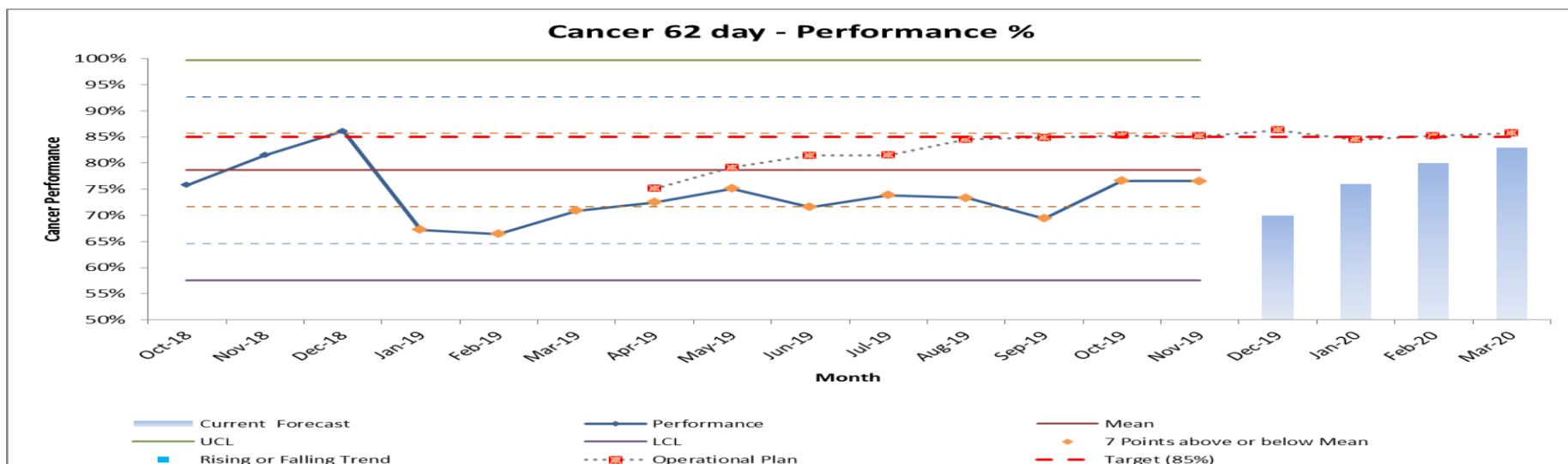
The Shrewsbury & Telford Hospitals NHS Trust - 31-Days Wait (First Treatment)



December 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	277	269	303	256	196			
Total Number Seen	279	280	244	299	282	273	311	261	203			
Performance % (96% standard)	97.5%	97.9%	97.1%	97.0%	98.2%	98.5%	97.4%	98.1%	96.6%			

Cancer 62 Day GP Referral



December 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
Ongoing Forecast - Number Treated < 62 Days	106	122	132	115	142	87	94	123	118	123	103	111
Total Number Seen	141	154	162	141	168	129	133	162	153	161	129	133
Performance % (85% standard)	75.1%	79.2%	81.4%	81.5%	84.5%	67.7%	70.9%	76.2%	77.1%	76.4%	80.2%	83.5%
Number Treated < 62 Days	114.5	122	109.5	125.5	103	100	136	114	91			
Total Number Seen	158	162.5	153	170	140.5	144	177.5	149	120			
Performance % (85% standard)	72.5%	75.1%	71.6%	73.8%	73.3%	69.4%	76.6%	76.5%	75.8%			

Key Actions

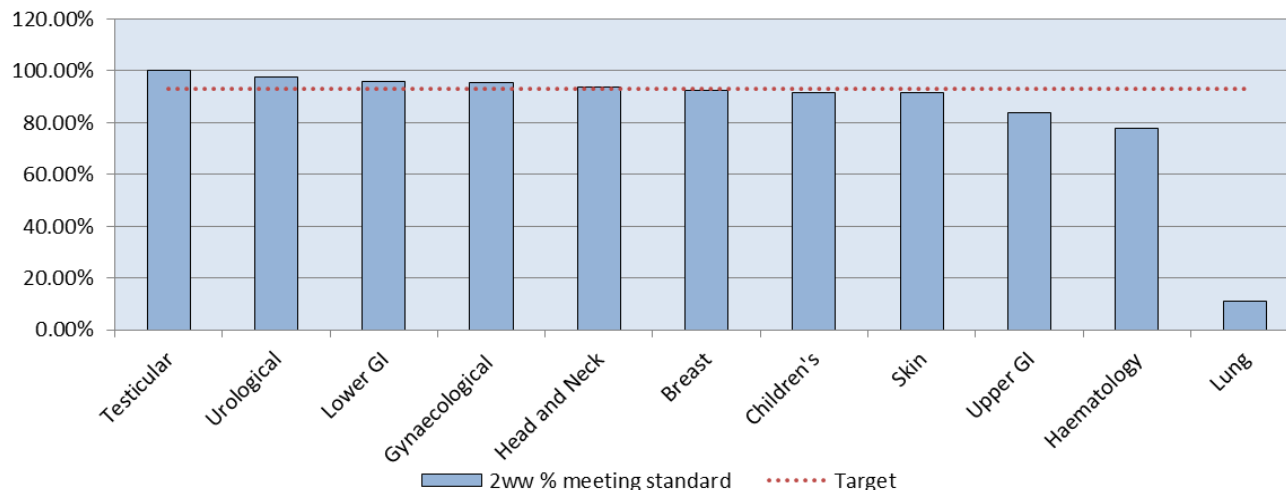
- COO to COO communication to improve processes between organisations.
- Additional UGI clinics (Sundays) introduced to cope with increasing demand (it is believed this is as a result of changes to testing which have made for a more “user friendly” investigation that patients are accepting).
- Harm reviews to be completed for urology patients waiting for robotic surgery at UHNM.
- Shadow monitoring of 28 day faster diagnostic target

Key Risks

- Urology capacity due to workforce gaps .
- Impact of 2ww lung capacity on 62 day performance.
- Pathway redesign work is delayed due to winter pressures
- Diagnostic capacity within Radiology

Cancer Performance By Tumour – November 19

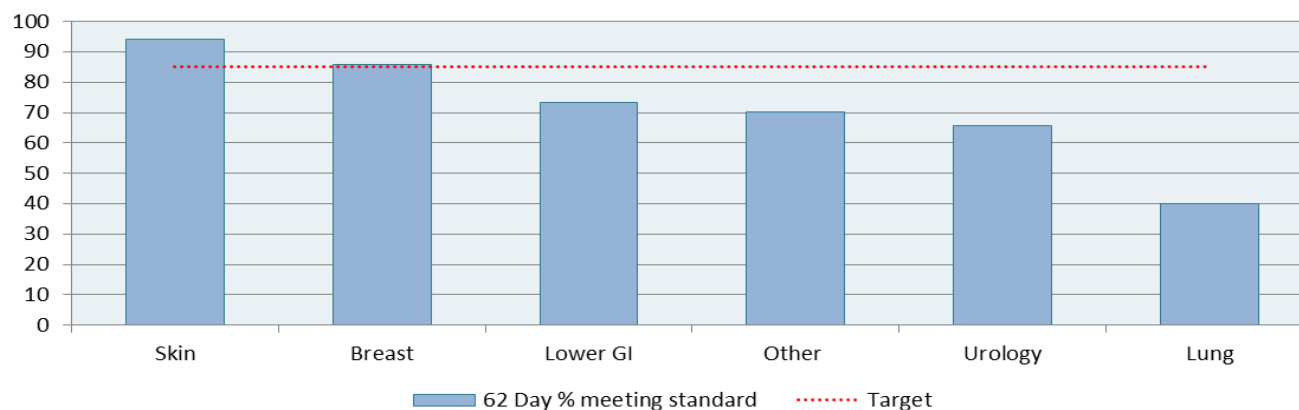
2 Week Wait % Meeting National Standard



2 Week Wait:

There are currently significant delays for Oncology appointments for certain specialties (up to 3 weeks or more) as a result of capacity issues.

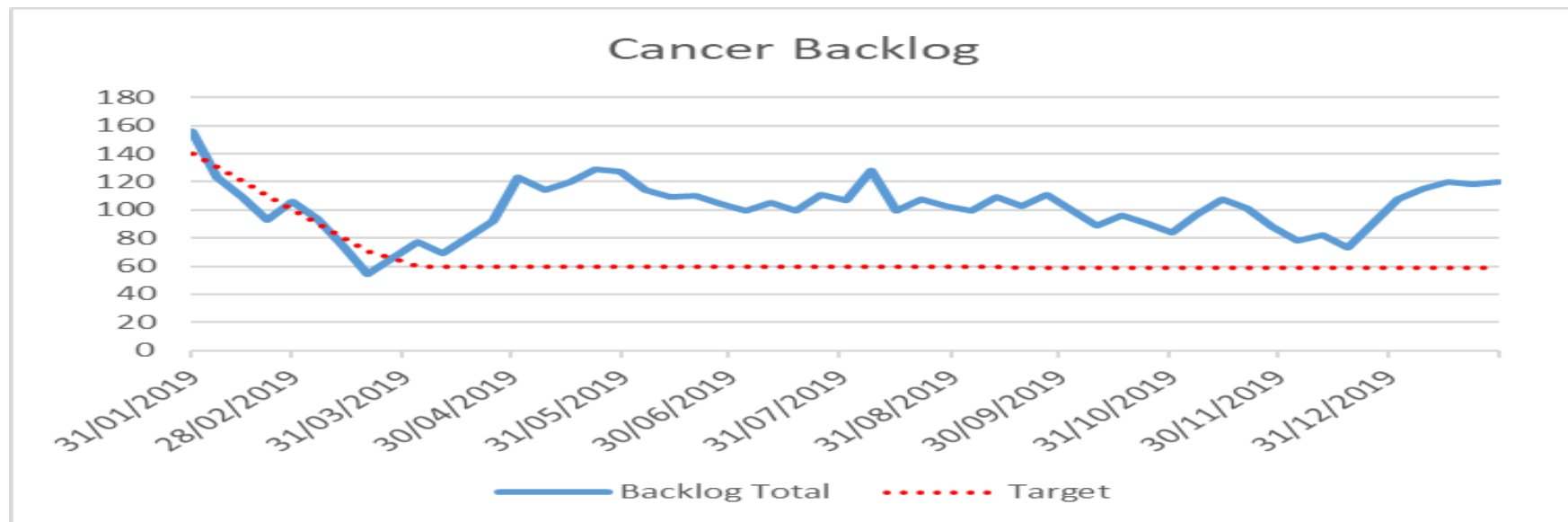
62 Day % Meeting National Standard



62 Day:

Current prediction for December 2019 is at 75.52%. The reduction in performance is as a result of clearing the backlog of patients waiting over 62 days.

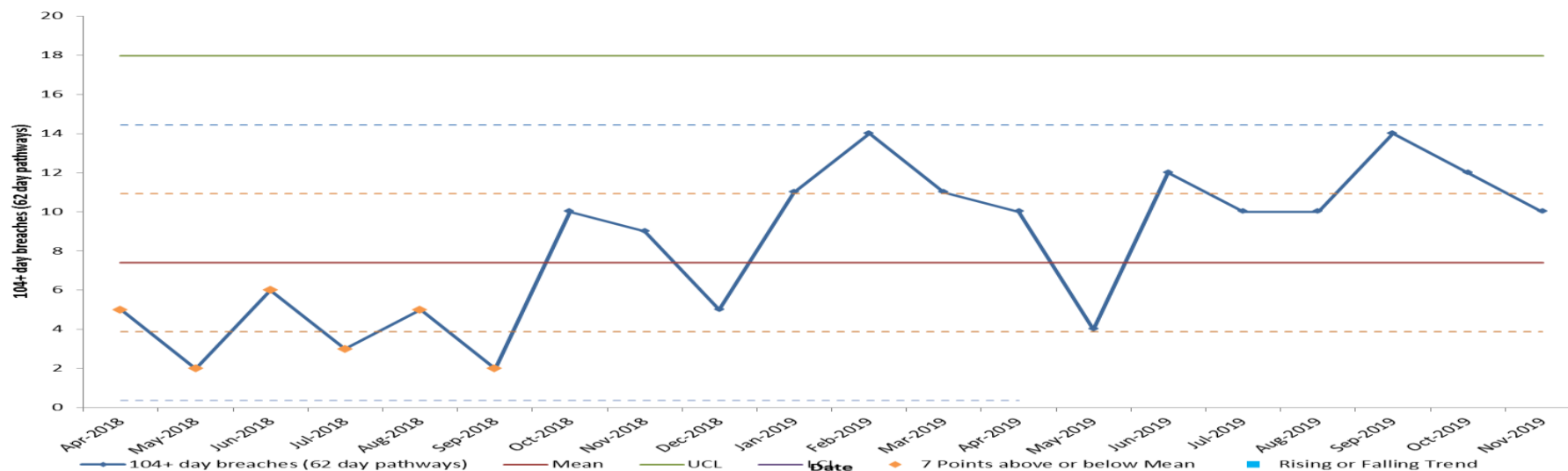
Cancer Backlog by Tumour site



Tumor Site	Gynae	Paediatrics	Lung	Skin	Brain/CNS	CUP	Sarcoma	Breast	Colorectal	Head & Neck	Haematology	Upper GI	Urology	Backlog Total
As at the end 30/01/2020	5	0	18	2	0	0	2	2	11	16	1	12	51	120

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 November 2019 (the target for referral to treatment being 62 days):-

1 x Colorectal (110 days) - Patient choice - patient cancelled, postponed, declined appointments and investigations throughout pathway.

1 x Gynaecology (104 days) - Delays following tertiary referral.

1 x Lung (135 days) - Complex diagnostic pathway.

1 x UGI (106 days) - Complex diagnostic pathway / delay for diagnostics.

1 x UGI (264 days) - Complex diagnostic pathway / medical delays.

1 x Urology (120 days) - Elective capacity inadequate / delay for diagnostics.

1 x Urology (121 days) - Delay for diagnostics & Insufficient capacity for follow-up OPA.

1 x Urology (104 days) - Delay for diagnostics / late tertiary referral

1 x Urology (150 days) - Diagnostic delays / patient choice / out-patient capacity.

1 x Urology (113 days) - Patient choice / late tertiary referral.

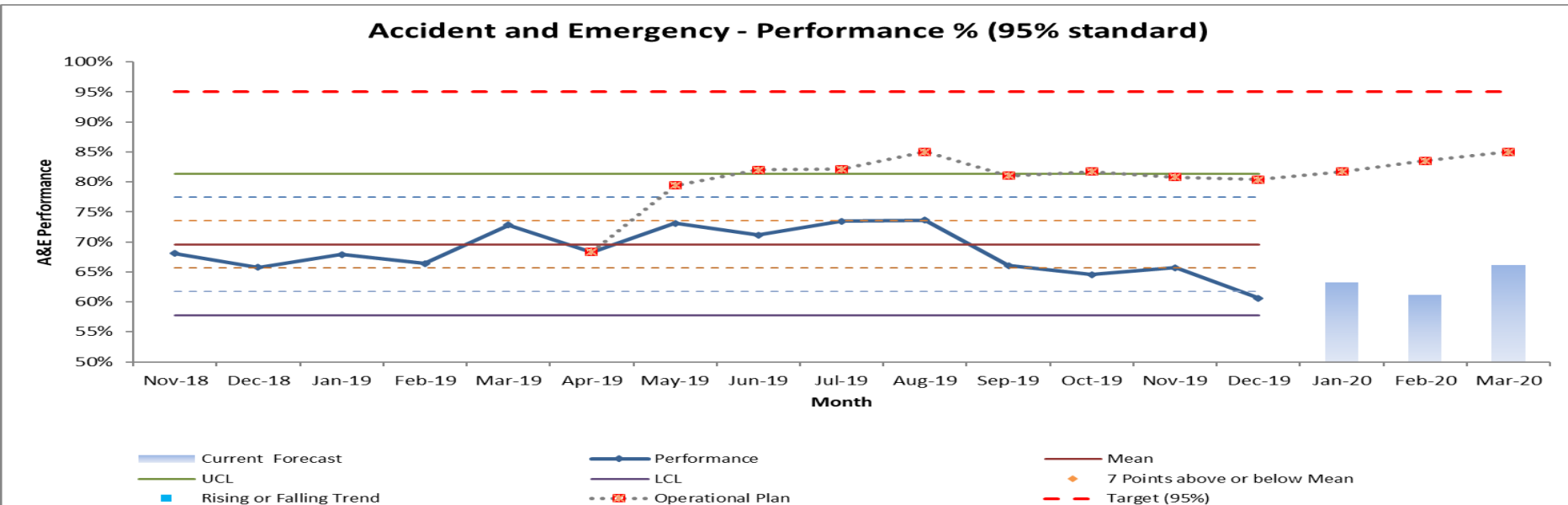
Urgent Care Update



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A&E Performance – (excluding MIU)

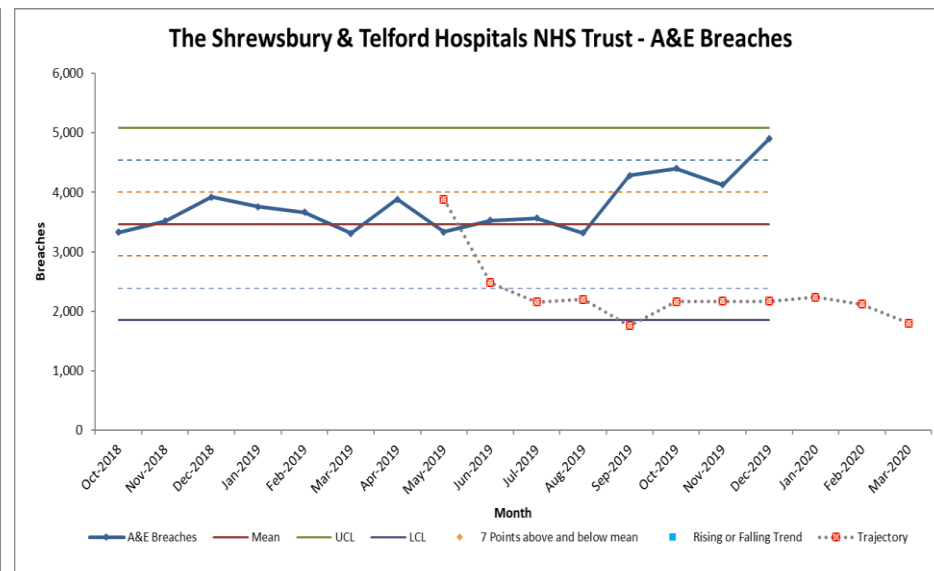
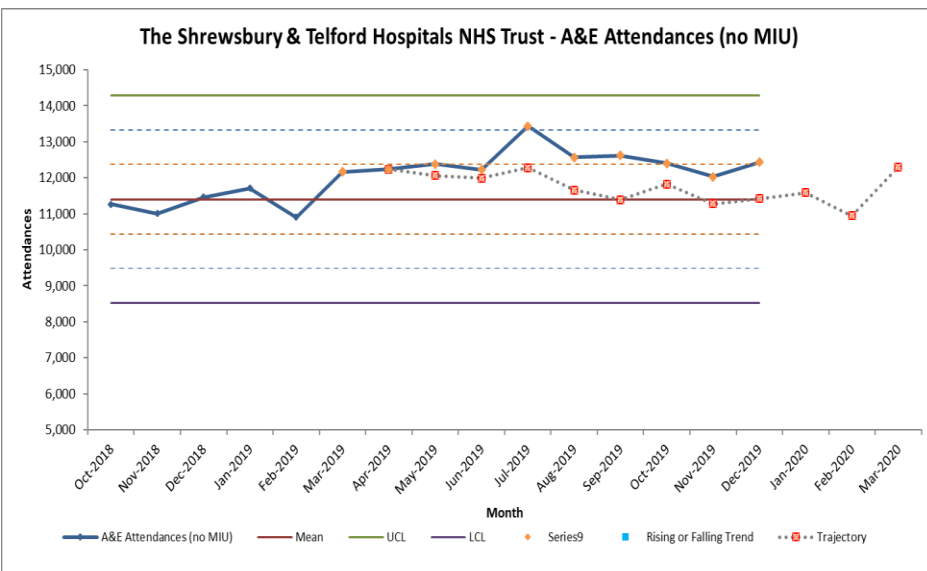
Please note the SPC graph has been calculated using 24 point, however only 14 points are illustrated



	Actual	Trajectory										
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
Trajectory 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	13441	12574	12623	12399	12030	12434			
Actual A&E - >4 hour wait	3881	3332	3528	3566	3375	4282	4400	4129	4901			
Actual A&E - Performance % (95% standard)	68.3%	73.1%	71.1%	73.5%	73.2%	66.1%	64.5%	65.7%	60.6%			

A&E Attendances (excluding MIU)

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



Dec-19 Actual:	12,434
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Dec-19 Trajectory:	11,424
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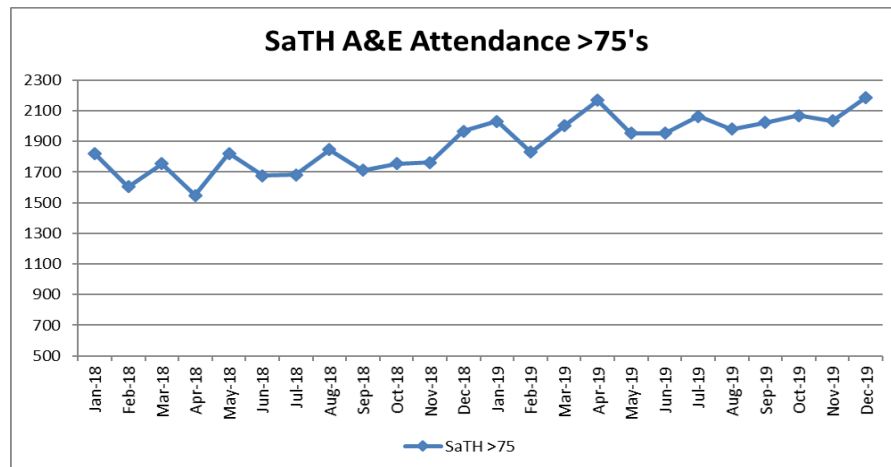
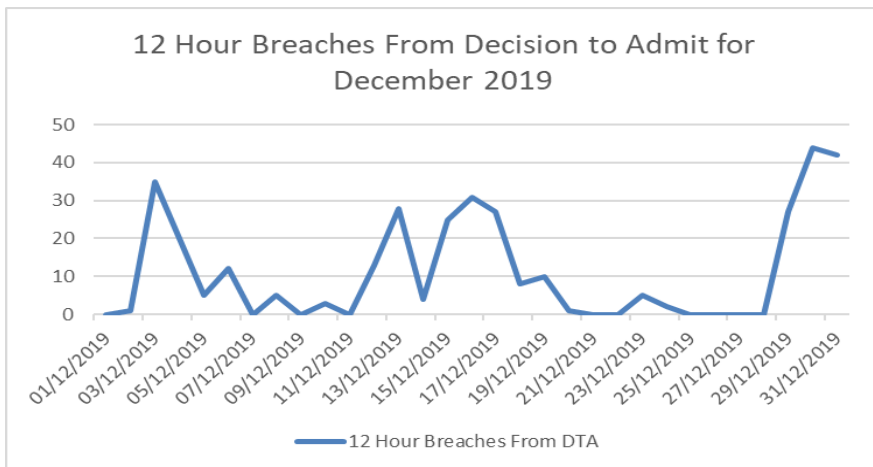
Variance to Trajectory	1,010
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Dec-19 Actual:	4,901
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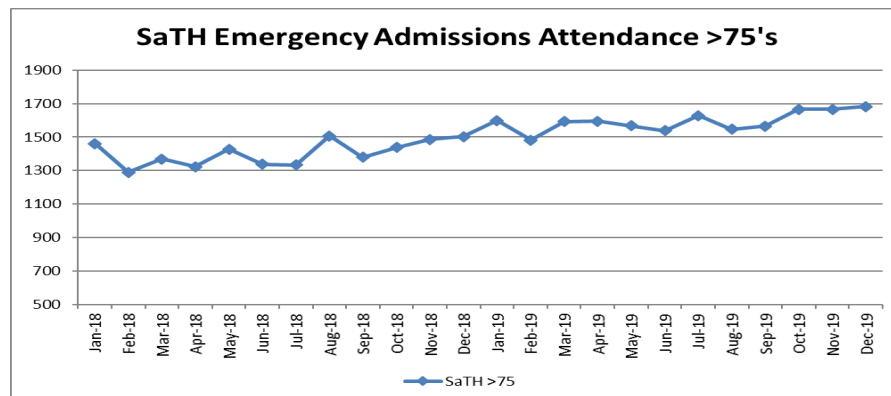
Dec-19 Trajectory:	2,482
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Variance to Trajectory	2,419
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12 Hour Breaches

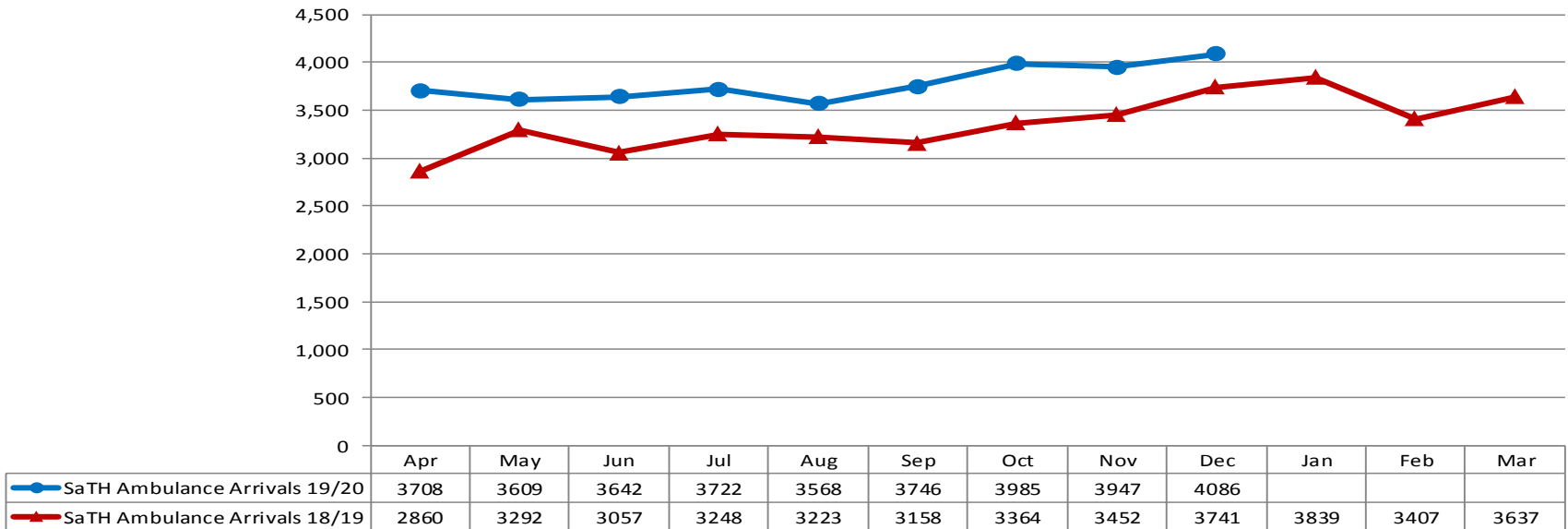


Continued pressures in A&E are reflected in the 12 hour delays from decision to admit, with the Trust experiencing a significant number in breaches. The elderly patient admissions and attendances has seen a rise, a factor in the increase in the breaches (A&E Attendances and Emergency Admission have both risen by 11% when comparing Dec 18 to Dec 19)



A&E Ambulance arrivals and handover delays

SaTH Ambulance Arrivals



**Attendance % Comparison
Dec-19 Vs. Dec-18**

9.2%

**Attendance No. Comparison
Dec-19 Vs. Dec-18**

345

**YTD Attendance %
Comparison**

15.7%

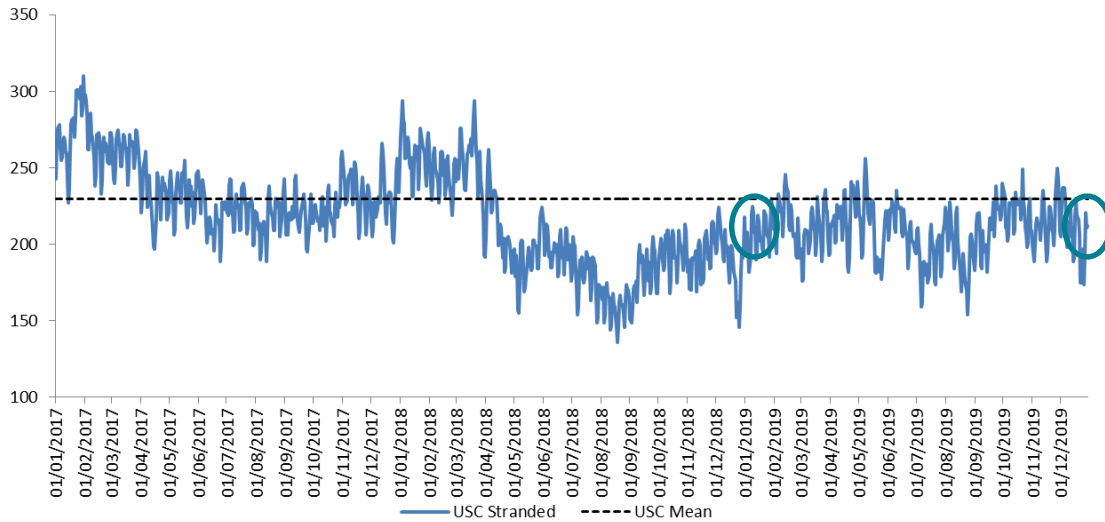
	Trajectory		
	15-30 mins	30-60 mins	>60mins
Dec-19	2641	800	170

Actual		
15-30 mins	30-60 mins	>60mins
1512	1142	621

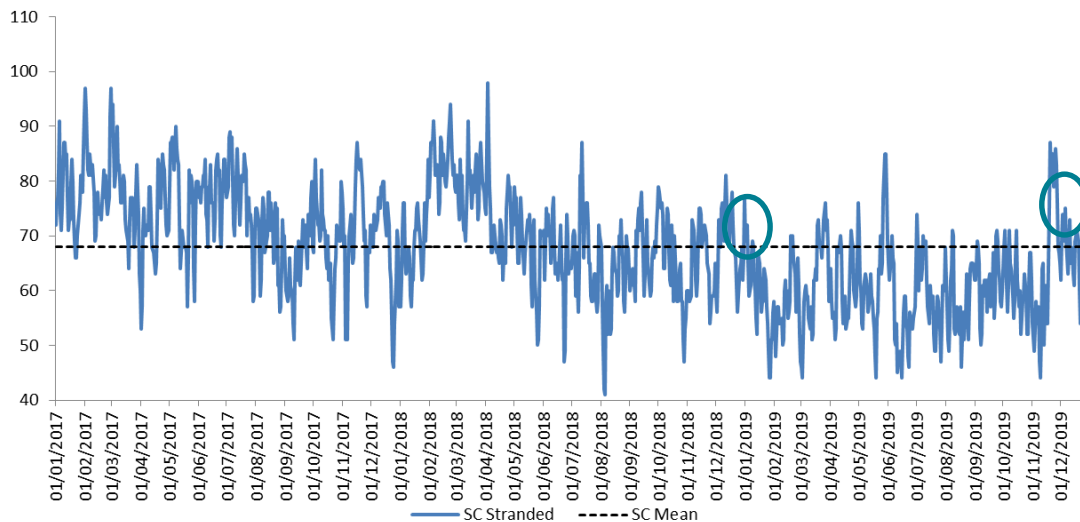
% Variance Trajectory vs Actual		
15-30 mins	30-60 mins	>60mins
-42.75%	42.75%	265.29%

Stranded patient metric - Care group position >6 days

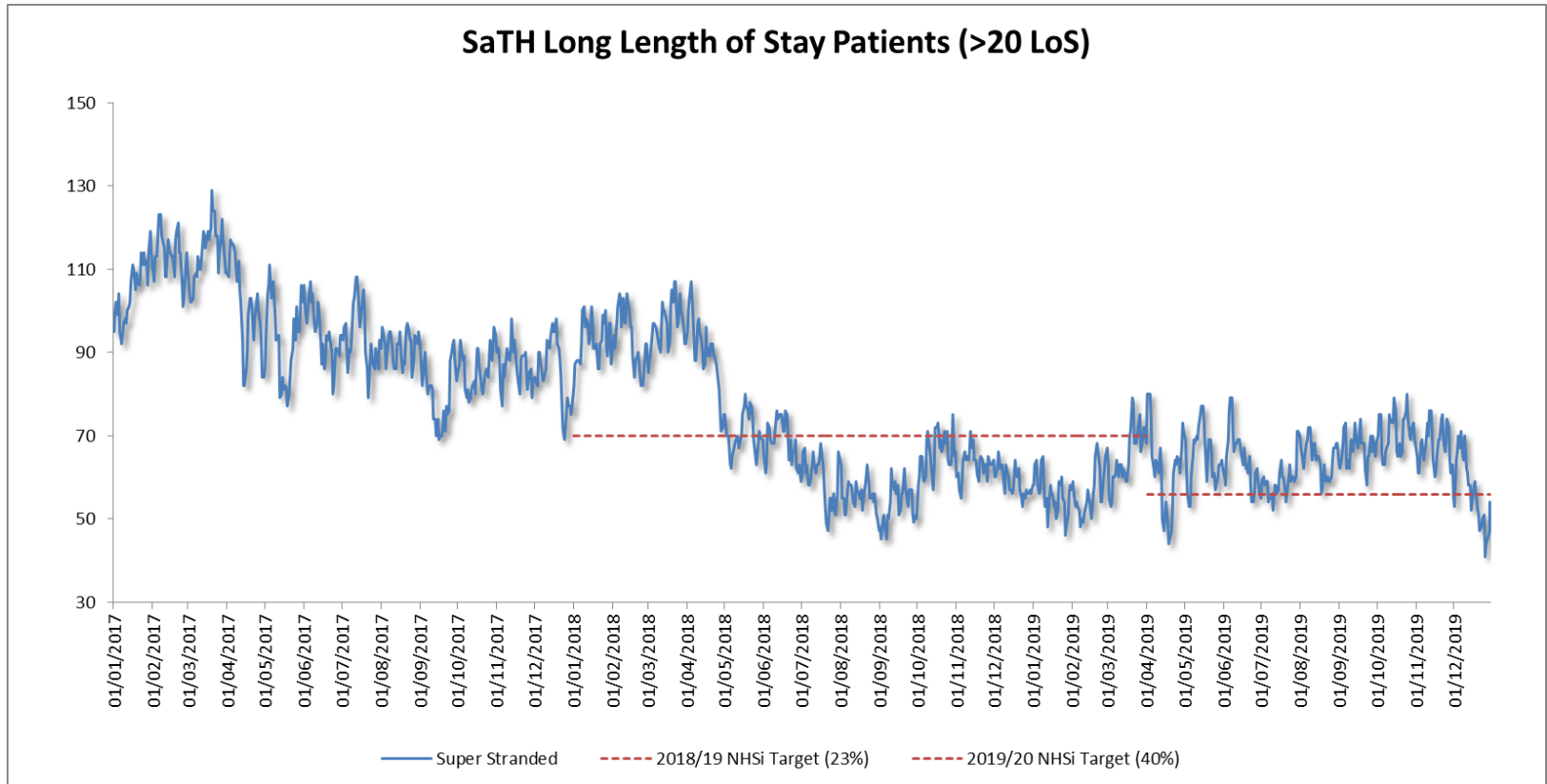
USC Stranded Patients



SC Stranded Patients

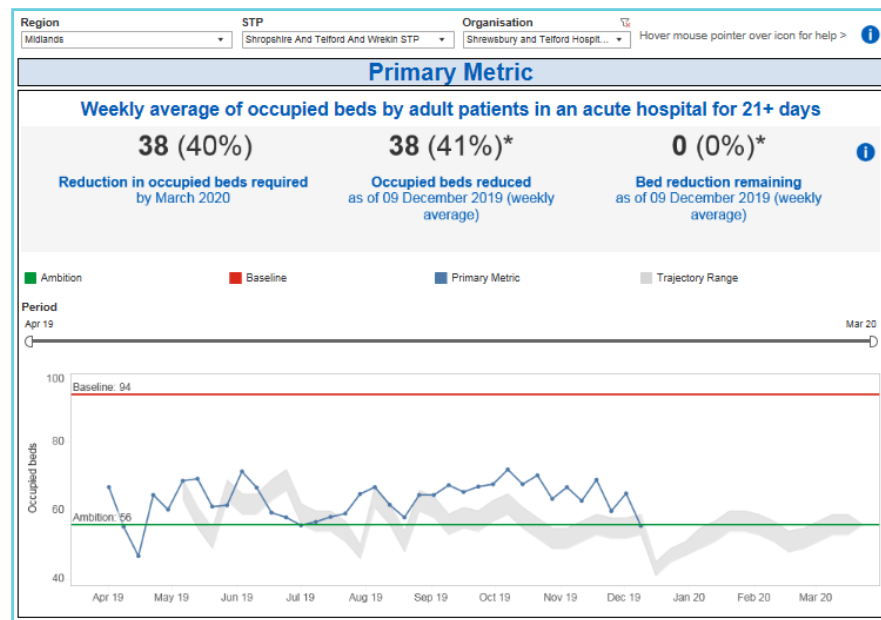
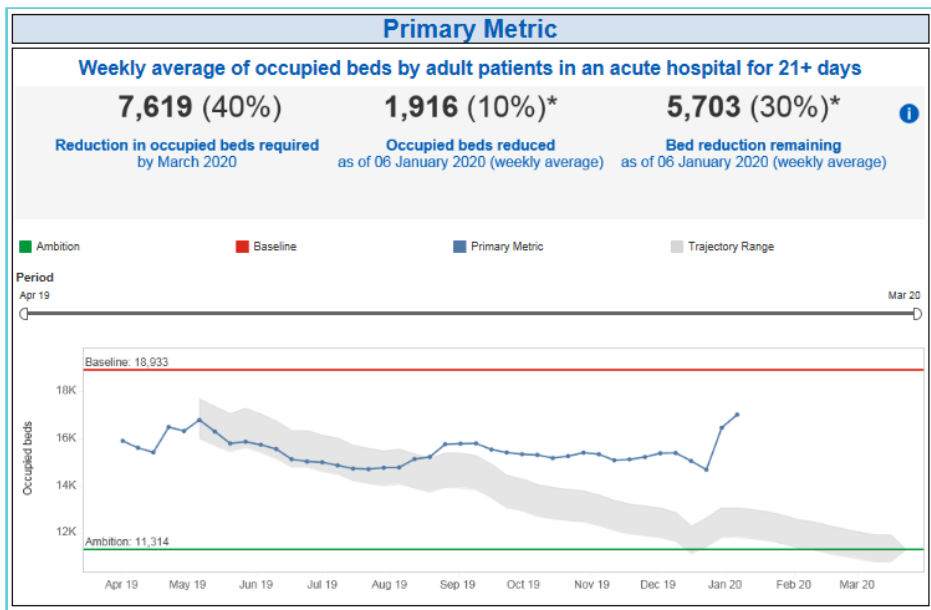


Super Stranded position



- Despite challenges in demand and an increase in complexity of patients on the wards (higher levels of complex discharges by 12% compared to December last year) improvement has continued and SaTH remain on target to achieve the required 40% reduction target set by NHSi for March – this is not in line with the national picture

Long Stay Dashboard – National Picture



The above table indicates SaTH's position against the national picture.

Long Stay Dashboard - SaTH

July 2019

Number of patients by reason (Internal & External) - Waiting time 21+ days

Rank	Delay Reason	
1	Ongoing treatment NEWS 4 or less	35 (57.4%)
2	Medically optimised and not yet a reportable DTOC as timeline for DTOC not complete.	8 (13.1%)
3	NEWS 5 and above and/or care required can only be provided in an acute hospital or infectious	5 (8.2%)
4	Long term placement NH/RH	3 (4.9%)
	Long term POC	3 (4.9%)
	Reablement/Rehab/Intermediate Care (e.g.D2A Pathways 1,2,3)	3 (4.9%)
7	CHC processes and placements	2 (3.3%)
8	No clear plan which should include EDD and clinical and functional criteria for discharge	1 (1.6%)
	Waiting for tests, specialist opinion, investigations etc	1 (1.6%)

January 2020

Number of patients by reason (Internal & External) - Waiting time 21+ days

Rank	Delay Reason	
1	Ongoing treatment NEWS 4 or less	12 (32.4%)
2	NEWS 5 and above and/or care required can only be provided in an acute hospital or infectious	8 (21.6%)
3	Long term placement NH/RH	6 (16.2%)
4	Reablement/Rehab/Intermediate Care (e.g.D2A Pathways 1,2,3)	5 (13.5%)
5	Waiting for tests, specialist opinion, investigations etc	4 (10.8%)
6	Long term POC	2 (5.4%)

Finance Report Month 9



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Finance Overview Month 9 – In month

	Annual	In Month		
	NHSI Plan	Plan	Actual	Variance
	£000s	£000s	£000s	£000s
Income	345,477	26,451	27,802	1,351
<i>Income for pass through costs (Excluded medicines and devices)</i>	33,382	2,789	2,568	(221)
Pay	(273,760)	(23,367)	(24,330)	(963)
Non-Pay & General Reserves	(76,109)	(6,492)	(8,549)	(2,057)
<i>Non-pay pass through costs</i>	(33,382)	(2,789)	(2,568)	221
Reserves	1,200			0
Total expenditure	(382,051)	(32,648)	(35,447)	(2,799)
EBITDA	(3,192)	(3,408)	(5,077)	(1,670)
Finance Costs	(14,159)	(1,141)	(1,106)	35
Surplus/(deficit) against Control Total pre Support	(17,351)	(4,549)	(6,183)	(1,634)
<i>Provider Support</i>	17,351	1,656	(2,122)	(3,778)
Surplus/(deficit) against Control Total post PSF	0	(2,893)	(8,305)	(5,412)

Key Message

- In month the Trust has an adverse variance to plan, and therefore control total, of £5.4m. Key points of note include:

Income – £2.6m below plan, inclusive of support funding

	Variance £m
Trust Income	1.4
Income for pass through items	(0.2)
Adjusted provider support	(3.8)
Total variance to plan	(2.6)

- Generally, income continues to over-deliver against plan predominately within non-electives, with under-performance in Outpatients and Other Services
- Provider support has been adjusted in light of the Trust's current forecast outturn, and is the main driver for the adverse variance in income

Pay – £1.0m above plan

- Non-delivery of CIP, £0.3m
- Agency usage, £0.6m above plan

Non Pay – £2m above plan

- Non-delivery of CIP, £0.1m
- Diagnostic reporting and send away tests, £0.2m
- Clinical supplies, £0.3m
- Consultancy fees, £0.4m
- Maintenance contracts, £0.1m
- Overseas Nursing Recruitment Fees, £0.2m

Finance Overview Month 9 – Year to Date

	Annual	YTD		
	NHSI Plan	Plan	Actual	Variance
	£000s	£000s	£000s	£000s
Income	345,477	257,679	269,311	11,632
<i>Income for pass through costs (Excluded medicines and devices)</i>	33,382	25,163	24,716	(447)
Pay	(273,760)	(204,048)	(211,416)	(7,368)
Non-Pay & General Reserves	(76,109)	(58,345)	(71,061)	(12,716)
<i>Non-pay pass through costs</i>	(33,382)	(25,163)	(24,716)	447
Reserves	1,200	800	1,200	400
Total expenditure	(382,051)	(286,756)	(305,993)	(19,237)
EBITDA	(3,192)	(3,914)	(11,966)	(8,052)
Finance Costs	(14,159)	(10,229)	(9,953)	276
Surplus/(deficit) against Control Total pre Support	(17,351)	(14,143)	(21,919)	(7,776)
<i>Provider Support</i>	17,351	11,756	7,978	(3,778)
Surplus/(deficit) against Control Total post PSF	0	(2,387)	(13,941)	(11,554)

Income & Expenditure Position Month 9, Year to Date

The Trust has a planned deficit, pre support funding, of £14.1m for the period April – December 2019. The actual deficit reported for the same period is £21.9m, being £7.8m adverse to plan.
(Full-year Plan £17.4m deficit, pre support funding).

Income – £7.4m favourable variance, inclusive of support funding

- Non elective activity £3.1m (3%) above plan.
- A&E activity £0.9m (6%) above plan.
- Non Elective Other (Maternity) £1.0m
- Additional £0.3m for posts funded externally including Health Education England.
- Deferred Income and Education income release £0.4m
- Assumed Readmission income of £1.5m
- FIT Monies of £0.6m

The overall income position includes a £3.8m reduction in provider support, £1.3m for month 9 and £2.5m relating to months 7 & 8, in light of the Trust's forecast outturn position.

Pay – £7.4m adverse variance, as a result of an overspend on agency costs of £5.5m and non delivery of CIP of £2.0m.

Non Pay (excl. pass through) – £12.7m adverse variance, main drivers:

- Additional senior appointments and organisational change payments £1.0m; diagnostic reporting £1.4m; non delivery of CIP of £4m; additional costs of clinical waste, estate costs and facilities costs £2.0m; Clinical supplies £1.1m; RN recruitment £0.4m.

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

Forecast Outturn. As previously reported, following a detailed review of the Trust's financial position, run rates and CIP delivery at Month 8, the most likely end of year position was forecast to be a £34.4m deficit. At Month 9 there has been no change to this forecast.

The forecast position recognises the maximum amount of central support funding that can be received.

Income Analysis by Activity Type

	YTD Budget	YTD Actual	Variance	Variance %	YTD Budget	YTD Actual	Financial Variance
	Activity	Activity	Activity		£000s	£000s	£000s
Accident and Emergency (Attendances)	96,289	100,352	4,065	4.1%	14,544	15,454	910
Outpatient Appts (Attendances)	323,865	317,986	(5,879)	(1.8%)	38,986	38,840	(146)
Elective Day Cases	38,824	38,350	(474)	(1.2%)	24,566	24,010	(556)
Elective Inpatient (Spells)	3,887	4,184	297	7.1%	11,841	13,741	1,899
Non Elective (Spells)	44,771	45,569	798	1.8%	91,811	96,326	4,516
Non Elective Other	4,037	4,724	685	14.5%	8,435	9,876	1,441
Others (Inc Reserves)					92,660	95,779	3,119
Total	511,672	511,165	(507)	(0.1%)	282,843	294,027	11,185
Provider Sustainability Funding (PSF)					11,756	7,978	(3,778)
Total after PSF	511,672	511,165	(507)	(0.1%)	294,599	302,005	7,407

Key Messages

- Income over performance of £7.4m year to date. Non elective activity above plan by 1.8%, and circa 10% higher than activity levels in 18/19
- Readmissions income received from both CCG's of £1.5m.
- The Trust has now agreed a full-year settlement with its two main commissioners.

Other Points of note:

- Accident and Emergency attendances are above planned levels by 4.1%, creating a positive variance to plan of £0.9m.
- Outpatient attendances are under planned levels by 1.8%
- Elective Inpatient spells are above planned levels by 297 spells, with a positive financial variance of £1.9m
- Non Elective activity is 798 spells, 1.8%, higher than the planned levels; this includes the clinical decisions unit (CDU) at the PRH site
- Blended tariff adjustment – the contract adjustment to income values for non elective and Accident & Emergency activity amounted to £5.3m
- Other income includes readmissions income of £1.5m and FIT monies of £0.6m

CIP Delivery

CIP Programme	Year to Date			Forecast Outturn		
	Plan £000s	Actual £000s	Variance £000s	Plan £000s	Actual £000s	Variance £000s
Internal Core CIP Plan	9,429	3,474	(5,955)	12,901	5,250	(7,651)
Breakeven Schemes	4,578	4,619	42	5,988	5,908	(80)
Total	14,007	8,094	(5,913)	18,889	11,157	(7,732)

The Trust has delivered £8.09M CIP as at Month 9. This is made up of:

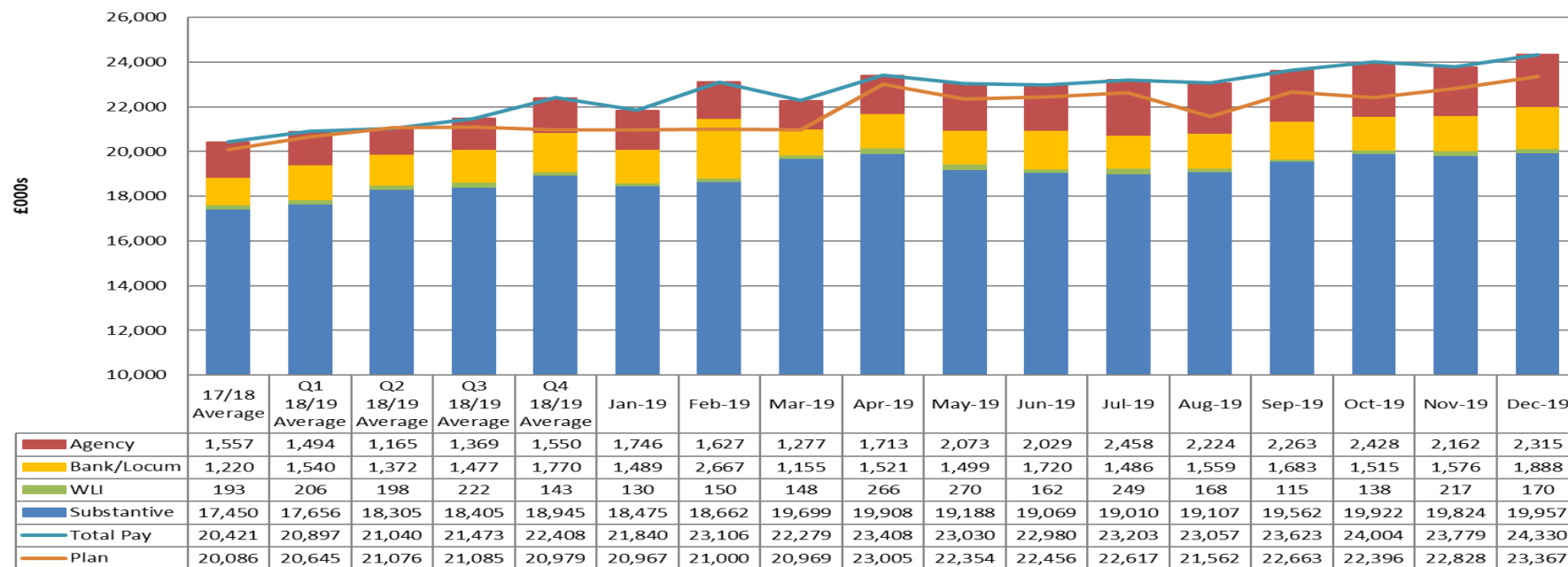
- Core CIPs – £3.47m delivered, year to date, against the NHSI submitted plan of £9.43M (36%).
- Break-even schemes have delivered £4.62M YTD against a plan of £4.58M (101%).
- As a result, the overall YTD CIP position is £8.09M delivered against an overall YTD Plan (Core + Breakeven) of £14.01M (57% of YTD delivery).

Forecast outturn for CIP delivery, within the 'most likely' scenario, is £5.25m for core schemes, and 99% (£5.91m) delivery of the breakeven schemes.

Additionally, £0.22m has been identified for core schemes (PIDs draft/scoped), which requires further validation and delivery. If realised this would represent an upside for core CIP, increasing the forecast outturn to £5.47m

Pay 2019/20

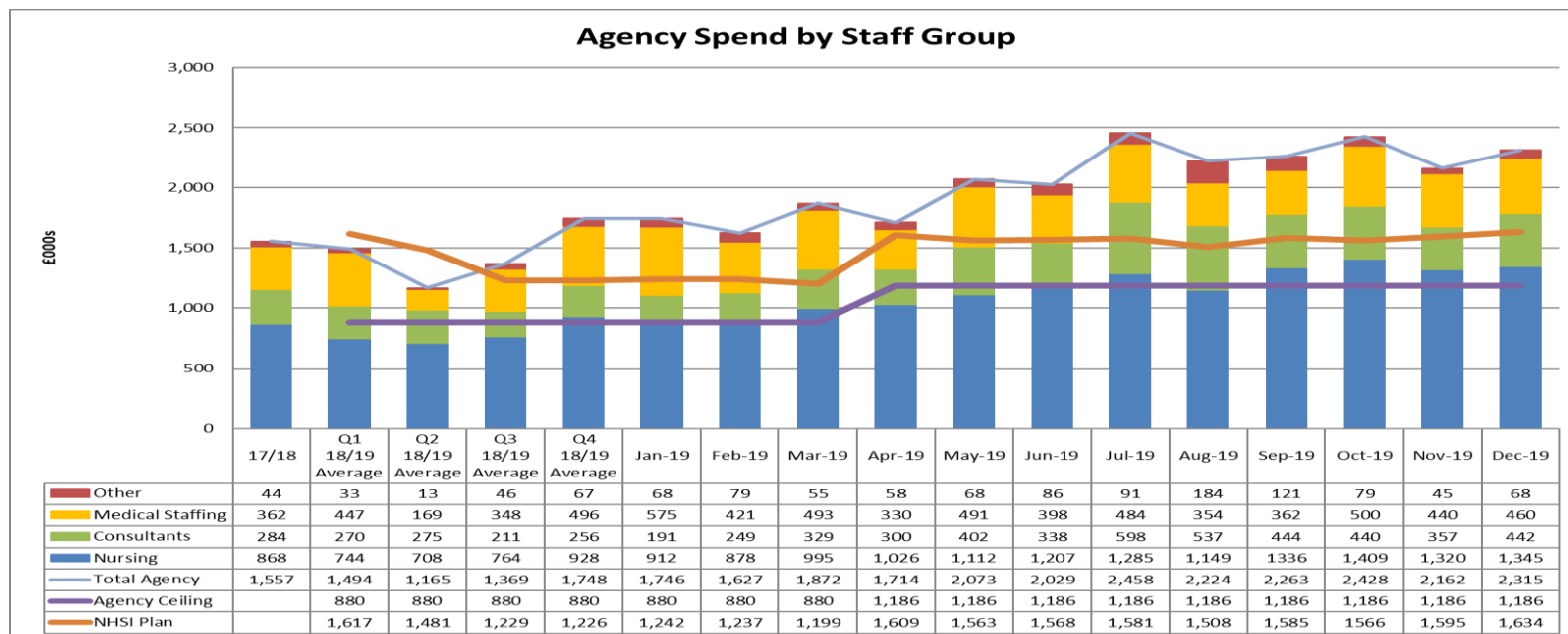
Pay Costs by Element



Key Messages

- At the end of December the pay budget is overspent by £7.4m, as a result of an overspend on agency costs (£5.5m), and non delivery of CIP (£2m).
- The overall run rate for December is £0.5m higher than November, within which Substantive staff costs have increased by £0.1m.
- The Trust continues to spend, on average, £1m per month more on agency than recorded in the previous year.
- The operationalisation of the ED nursing business case continues to be a financial concern with an increasing reliance on agency, which forms part of the Trust's increased spend compared to the previous year.
- Pay costs In December include the impact of an increase to bank rates for RNs (in ED and the existing enhanced areas) and HCAs. This will continue into January.
- The Trust, alongside Deloitte, have weekly panels to review the key staff groups using agency, with the aim of reducing this usage.

Agency Expenditure 2019/20



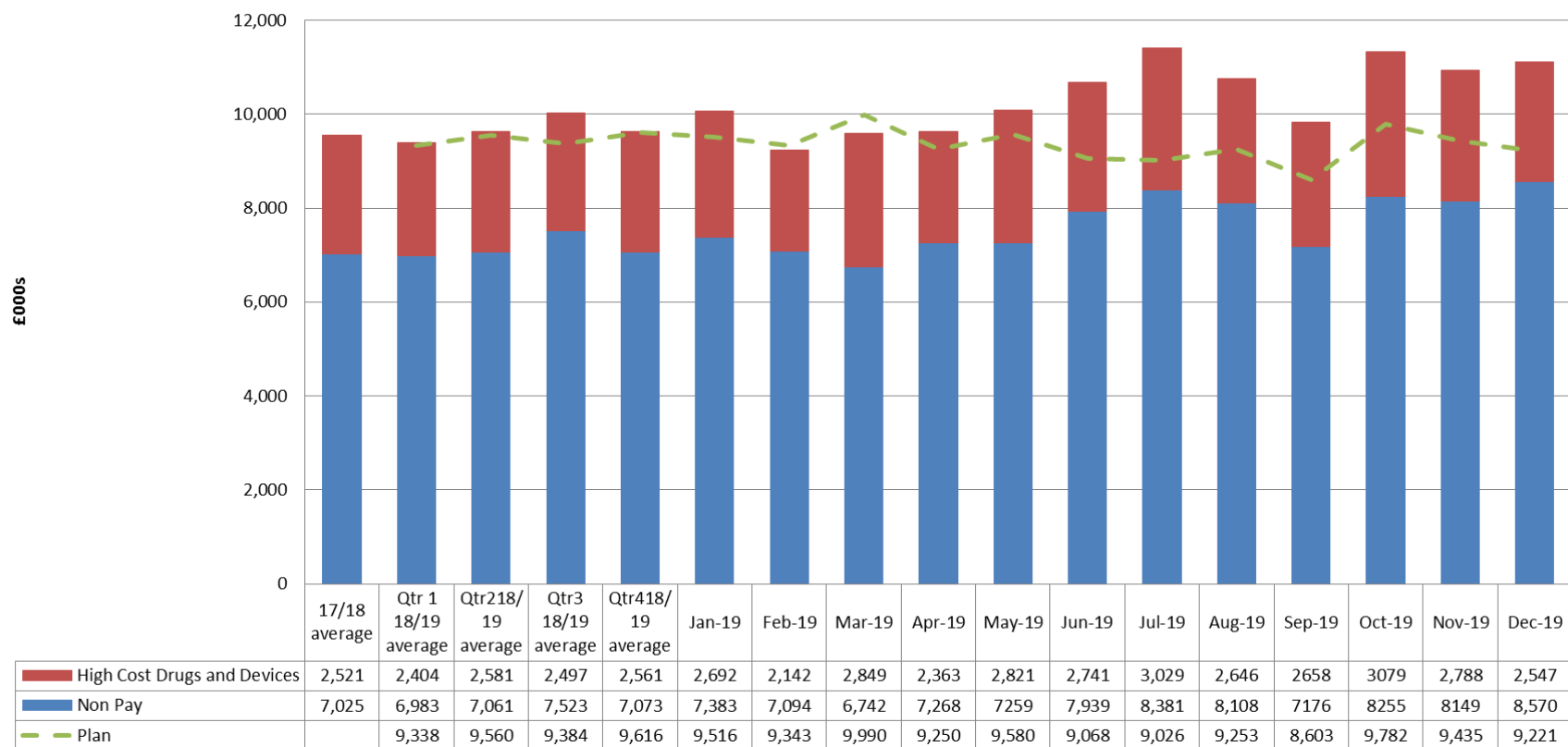
Annual		YTD					In Month		
Agency Ceiling	NHSI Agency Plan	Agency Ceiling Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/ (Over) Agency Ceiling	Variance Under/ (Over) Agency NHSI Plan	Agency NHSI Plan	Agency Expenditure Actual	Variance Under/ (Over) Agency NHSI Plan
£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
14,232	19,153	10,674	14,209	19,666	(8,992)	(5,457)	1,634	2,315	(681)

Key Messages

- Agency expenditure has exceeded budget by £0.7m in month, £5.5m year to date, associated with unavailability and capacity issues.
- Expenditure in December is £0.9m more in the month than the average for 2018/19.
- The annual plan for agency is £19.2m, with an nationally set agency ceiling of £14.2m.

Non Pay

Non Pay Costs by Category



Key Messages

- Month 9 non pay spend, excluding drugs and devices, was £8.6m in month and £71.1m for the year to date.
- Excluding pass through drugs and devices, in month non pay was overspent by £2.0m, and by £12.7m for the year to date. See Financial Overview for further details.

Forecast Outturn

The Trust undertook a detailed review of its financial position at Month 8, including expenditure run rates and forecast CIP delivery. Taken alongside the forecast for income, which included the end of year settlement reached with the Trust's two main commissioners, the forecast outturn pre support funding was assessed as a £34.4m deficit.

The forecast outturn position leads to a reduction in the amount of support funding which can be earned, with the maximum available in 2019/20 now £9.2m.

Having assessed the forecast in light of the Month 9 results, the most likely outturn position remains a deficit of £34.4m as previously reported.

When re-assessing the forecast at Month 9 a number of risks have been identified, which the Trust will need to manage. These include:

- Pathology send away tests £0.1m
- CIP – validation & delivery £0.0m - £0.2m

NB – the most likely forecast outturn position, together with risks, will continue to be assessed in light of demand, capacity and workforce issues.

Appendices

Normalised Income and Expenditure

	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Total
	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
Income (excluding PSF & Passthrough)	29,238	28,800	31,057	30,014	30,312	32,764	30,311	29,014	27,802	269,312
<i>Passthrough Income (excluded medicines and devices)</i>	2,363	2,829	2,735	3,028	2,646	2,658	3,080	2,809	2,568	24,716
Income finalisation phasing	(566)	926	105	640	(1,009)	464	(31)	(280)	(249)	0
Pay	(23,408)	(23,029)	(22,980)	(23,206)	(23,057)	(23,624)	(24,002)	(23,780)	(24,330)	(211,416)
Non-Pay (exc Passthrough)	(7,268)	(7,251)	(7,945)	(8,382)	(8,108)	(7,176)	(8,254)	(8,128)	(8,549)	(71,061)
<i>Passthrough costs</i>	(2,363)	(2,829)	(2,735)	(3,028)	(2,646)	(2,658)	(3,080)	(2,809)	(2,568)	(24,716)
Balance Sheet Write off			1,200							1,200
EBITDA	(2,004)	(554)	1,437	(934)	(1,862)	2,428	(1,976)	(3,175)	(5,326)	(11,966)
Finance Costs	(1,073)	(1,140)	(1,104)	(1,109)	(1,118)	(1,093)	(1,104)	(1,106)	(1,106)	(9,953)
Actual Deficit exc PSF	(3,077)	(1,694)	333	(2,043)	(2,980)	1,335	(3,080)	(4,280)	(6,432)	(21,918)
less Non Recurrent										0
Phased Income Adjustment			(1,600)			(1,300)	500	500	1,900	0
Release of Deferred Income						(125)				(125)
Release of HEE Deferred Income						(290)				(290)
Readmission income						(1,480)				(1,480)
Maternity Incentivisation Scheme						(512)			512	0
Cost of Organisational change							150			150
Balance Sheet accrual release			(1,200)							(1,200)
Underlying Deficit	(3,077)	(1,694)	(2,467)	(2,043)	(2,980)	(2,372)	(2,430)	(3,780)	(4,020)	(24,863)
Planned Deficit	(2,770)	(840)	(1,294)	(836)	(517)	(2,437)	(132)	(768)	(4,549)	(14,143)
Variance	(307)	(854)	(1,173)	(1,207)	(2,463)	65	(2,298)	(3,012)	529	(10,720)

Key Message

- The average underlying deficit in each of the first nine months is circa £2.8m, a cumulative position of £25m, £10.7m 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.

Capital Programme

The Shrewsbury and Telford Hospital NHS Trust								
2019/20 Capital Programme Update as at Month 09 (December 2019)								
Scheme	2019/20 Capital Budget £000's	2019/20 Spend to date £000's	Expenditure committed - ordered £000's	Total expenditure/ committed to date £000's	Expenditure committed - to be ordered £000's	Scheme yet to be identified £000's	Forecast Outturn £000's	Variance under/ (over) spend £000's
Outstanding Commitments from 2018/19	140	-26	27	1	107	32	140	0
PC In House costs of delivery of schemes	820	589	231	820	0	0	820	0
PC RSH MLU/PAU - P2 FCHS	0	0	0	0	0	0	0	0
PC Fire safety Programme	261	9	22	31	230	0	261	0
PC Subway Duct - RSH (further phases following on from 2017/18 agreement)	250	35	112	147	103	0	250	0
PC Ophthalmology move into Copthorne Building - Phase 3 (additional asbestos)	50	5	43	48	2	0	50	0
PC IT Storage Solution (further phases following on from 2018/19 investment)	500	467	0	467	33	0	500	0
PC Replacement of Autoclaves in Path Lab (agreed at CPG)	0	0	0	0	0	0	0	0
PC RSH Catering Service (agreed at CPG/PC)	98	24	70	94	4	0	98	0
PC Eye Injection Automation System (agreed at CPG)	80	0	0	0	80	0	80	0
Total Delegated Contingency Funds	1,300	605	105	709	54	537	1,300	0
Corporate Contingency (In Year Allocations)	1,170	339	34	372	682	152	1,207	-37
Capitalisation of Expenditure	1,200	921	218	1,139	61	0	1,200	0
Additional Capitalisation of Expenditure - FIT funding	619	619	0	619	0	0	619	0
AS Endoscopy Suite Reconfiguration	1,300	0	0	0	1,300	0	1,300	0
RFFire Safety Copthorne Building (original balance)	359	275	33	309	50	0	359	0
Uncommitted Fund Balance	398	0	0	0	0	398	398	0
UF High Value Radiology Equipment (inc PRH CT Scanner)	400	237	132	369	31	0	400	0
UF Sustainable Services	400	296	104	400	0	0	400	0
UF Actions from CQC visit	10	7	0	7	0	3	10	0
UF Data Warehouse	441	74	367	441	0	0	441	0
IGDA - A&E System - System C	1,100	1	929	931	169	0	1,100	0
Rephased Capital Programme	22	0	0	0	0	22	22	0
RCP Windows 10 Rollout	350	3	6	9	341	0	350	0
RCP Additional MES funding	350	0	51	51	299	0	350	0
Total Internally Generated Capital Schemes	11,618	4,480	2,484	6,964	3,547	1,144	11,655	-37
NIY Sustainable Services Project	4,674	563	123	685	3,989	0	4,674	0
NIY - Fire Safety Copthorne Building	1,622	13	177	191	1,391	0	1,582	40
NIY - Additional Capacity - RSH/PRH	1,500	1,504	0	1,504	0	0	1,504	-4
NIY - PRH Modular Build/Refurbishment of Wrekin MLU	4,000	2,762	729	3,491	509	0	4,000	0
NIY - LED Lighting	427	0	417	417	10	0	427	0
Overcommitted	0	0	0	0	0	0	0	0
Total Capital Programme	23,841	9,322	3,930	13,251	9,445	1,144	23,840	0
% Internally Generated		38.56%	21.38%	59.94%	30.53%	9.53%	100.00%	
% Total Capital Programme		39.10%	16.48%	55.58%	39.62%	4.80%	100.00%	

	Internally Generated CRL		Total CRL	
	£m	%	£m	%
Expensed	4.480	38.56%	9.322	39.10%
Ordered – not yet expensed	2.484	21.38%	3.930	16.48%
Committed – not yet ordered or expensed	3.547	30.53%	9.445	39.62%
To be identified/ overcommitted	1.108	9.53%	1.145	4.80%
	11.618	100.00%	23.841	100.00%

Key Messages

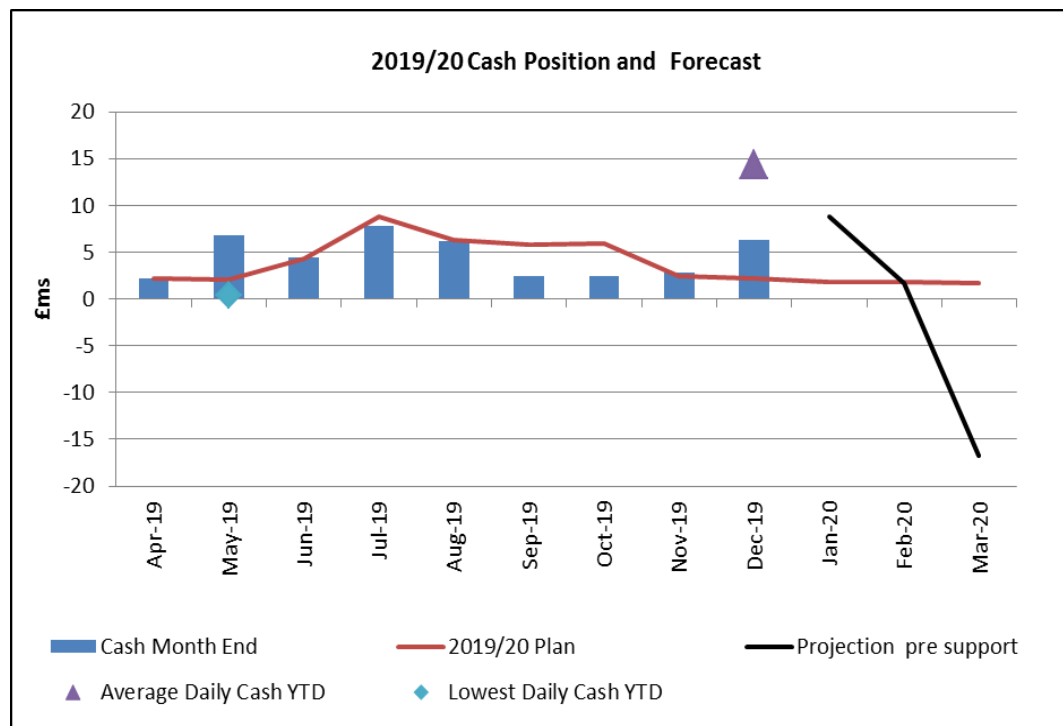
The total (purchased and donated) Internally Generated Capital Resource Limit (CRL) for 2019/20 is £11.618m. The Trust also has an additional CRL of £12.223m, giving total CRL of £23.841m.

At Month 09, only £1.144m remains uncommitted. £0.152m in Corporate Contingency, £0.537m within the delegated reserve fund and £0.398m within the general uncommitted reserve. There remains £0.035m yet to be committed in agreed schemes and £0.022m to be allocated following re-phasing of the capital programme.

Following agreement actions undertaken in Month 9 include: removed and to be reallocated in 20/21 – Cancer Transformation £0.060m; Subway Duct £0.700m; Replacement Path Lab Autoclaves - £0.202m. Re-allocated to: In House costs Estates £0.040m; A&E System £0.200m; Windows 10 £.0350m; Priority Medical Equipment £0.350m – leaving £0.22m to re-allocate.

Cash

The Shrewsbury and Telford Hospital NHS Trust	Actual	Total Based
Cashflow - 2019/20 as at M09	YTD	on Plan
	£000's	£000's
Balance B/fwd	1,649	1,649
I&E CASHFLOW		
Income I&E (inc Donated & PSF)	294,876	402,020
Pay I&E	(212,020)	(284,584)
Non Pay I&E	(90,999)	(127,782)
Finance Costs I&E	(1,706)	(3,252)
Capital Expenditure (inc Donated) re Depreciation	(1,826)	(11,617)
Total I&E Cashflow (inc donated IGC)	(11,675)	(25,215)
EXTERNAL FUNDING		
Loan to cover timing of receipt of PSF/FRF/MRET	5,203	0
Expenditure - externally funded capital schemes	(4,838)	(4,674)
Income - externally funded capital schemes	4,200	4,674
Total External Funding Cashflow	4,565	0
Total Balance Sheet Changes	11,708	6,878
Total Cashflow	4,598	(18,337)
Balance C/fwd	6,248	(16,688)
Required Cash Support	0	18,388
Balance C/fwd after Support	0	1,700

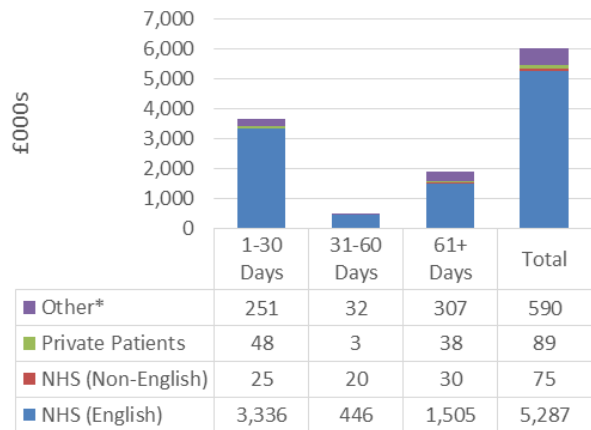


Key Messages

- If the Trust achieves the planned breakeven position it will be eligible for funding totalling £12.593m in respect of conditional PSF/FRF funding. Projections show that the minimum cash balance of £1.700m will be achieved. However, if the Trust does not achieve its financial plan, PSF and FRF funding will not be received for Quarters 3 and 4 resulting in a shortfall in income of £8.185m.
- The above cashflow is based on the forecast projection of a £34.382m deficit, before the application of support funding. Taking into account the reduced support funding (as a result of this position), £9.166m, gives a projected deficit of £25.216m. The Trust has a cash benefit in 2019/20 in respect of PSF funding relating to 2018/19 (£4.568m). After taking account of benefits of movements in working balances, £2.312m, it is projected that the Trust will require external cash support of £18.388m to meet the year end cash requirement of £1.700m.
- To date, the Trust has received cash support in lieu of conditional funding of £5.203m. Conditional funding for Q2 of £2.520m has been received and the Trust is awaiting instruction as to when repayment of the loan is required. Repayment of the remaining £2.683m (in lieu of Q3) will be required if funding is received or when I&E deficit support is received (both assumed February).
- The above cashflow assumes management of cash over the financial year in line with previous practice.

Receivables

Accounts Receivable aged debt summary as at 31 December 2019



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

	1-30 Days	31-60 Days	61+ Days	Total
	£000s	£000s	£000s	£000s
Telford & Wrekin CCG	871	108	828	1,807
Shropshire CCG	1,077	80	230	1,387
NHS England Commissioning	756	14	13	783
RJAH NHSFT	81	73	200	354
University Hospital of North Midlands NHST	53	28	88	169
Trust Development Authority	125		10	135
Royal Wolverhampton Trust	57	59	7	123
Shropshire Community Health Trust	68	10	31	109

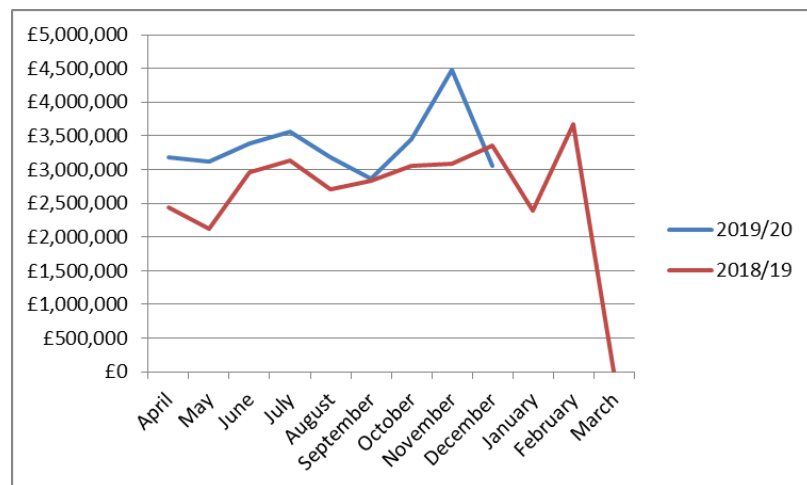
- The 1-30 days balance with NHS England Commissioning includes £580k of invoices raised in advance for Month 10 contract income, to ensure these invoices are paid in January 2020.
- Included in the 1-30 days balances for Shropshire CCG (£1,000k) and Telford & Wrekin CCG (£750k) are invoices for over-performance, which have been paid on 2 January 2020.
- Shropshire CCG (£30k per month) and Telford & Wrekin CCG (£108k per month) are short-falling their monthly contract payments due to contract disputes. Telford and Wrekin CCG paid four of these outstanding months on 2 January 2020.
- The outstanding balance with RJAH NHSFT relates to disputes with T&O contract M7-M9 (£127k), consultant recharges (£93k) and dietetic service (£63k).
- There were no credit notes raised over £0.100m in December 2019.

Payables

The Better Payment Practice code requires NHS bodies to aim to pay all valid invoices by the due date or within 30 days of receipt of valid invoice, whichever is later.

	Actual	Actual	Actual	Actual
	31/12/2019	31/12/2019	31/12/2018	31/12/2018
	YTD	YTD	YTD	YTD
	Number	£000s	Number	£000s
Total invoices paid in the year	98,840	116,448	84,790	102,664
Total invoices paid within target	26,743	42,476	28,115	41,531
Percentage of invoices paid within target	27.06%	36.48%	33.16%	40.45%

The Trust continues to manage its creditor position which includes processes which allow prioritisation of key suppliers who are paid within 30 days. The value of the monthly creditor suppression is shown below.



During December 2019 there were 271 invoices that were not paid within the Trust's 45 day payment target:

Category	Number	£000s
Agency	16	9
NHS	12	38
Other	128	713
Pharmacy	115	257
Total	271	1,016

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

