

26 November 2014 Agenda Item No 8 (c)

NHS SALFORD CLINICAL COMMISSIONING GROUP GOVERNING BODY MEETING AGENDA ITEM NO 8 (c)

Item for Discussion

26 November 2014

REPORT OF:	Chief Finance Officer
DATE OF PAPER:	11 November 2014
SUBJECT:	Finance Report – Month 7
IN CASE OF QUERY PLEASE CONTACT:	Elaine Vermeulen 0161 212 4874
STRATEGIC PRIORITIES:	Please tick which strategic priorities the paper relates to:
Quality	
Community Based Care	
Integrated Care	
In Hospital Care	
Long Term Conditions and Mental Health	
Effective Organisation	✓

PURPOSE OF PAPER:

This paper provides information on the month seven financial position and forecast outturn for 2014/15 based on available information at the end of October 2014.



26 November 2014 Agenda Item No 8 (c)

Finance Report - Month 7

1 Executive Summary

This paper provides an update on the financial position of NHS Salford Clinical Commissioning Group (CCG) at the end of October 2014. There are forecast overspends on acute contracts amounting to £2.1m but this level of overspend is covered partly by the contingency reserves set aside at the beginning of the year as part of the CCG's financial plan, partly by the release of funds set aside for GP IT now funded centrally and an underspend on continuing healthcare budgets. Therefore, based on the financial information at this stage of the year, the CCG is forecasting to meet its statutory target of achieving a planned surplus of £17m.

The CCG is also on target to achieving its statutory duties with regards to cash management and the Better Payment Practice Code.

The risks to non-delivery of the statutory financial duties are reported in section 7 of this report along with mitigations to these risks. At this stage in the financial year, it is anticipated that these mitigations and controls are sufficient to manage the risks.

2 Summary Financial Performance

- **2.1** The four financial statutory duties are:
 - Revenue delivery of the CCG's planned surplus;
 - Cash management The CCG has been allocated a maximum cash draw down limit of £335.1m. Current guidance requires the cash balance at the end of the month to be less than 1.75% of the monthly cash draw down which equates to £0.3m for month 7, although the latest guidance states that this will be reducing to 1.25% from January 2015;
 - Better Payment Practice Code (BPPC) 95% of invoices paid within the agreed terms or within 30 days if there are no specified terms;
 - Running costs manage within the CCG's running cost allocation.

The table below provides the current performance against these statutory duties.

Statutory Duty	Commentary	Year Date Rating	to	Forecast Year End rating
	Based on the financial information received to end of October 2014, the CCG is forecasting that the planned surplus of £17m will be delivered. The CCG is reporting a breakeven position	\rightarrow	·	



26 November 2014 Agenda Item No 8 (c)

	at Month 7.		
Cash – less than 1.75% of the monthly drawdown	The cash balance at the end of Month 7 was £0.3m, within the £0.3m allowance.		
Better Payment Practice Code (BPPC) - 95% of invoices paid within the agreed terms or within 30 days if there are no specified terms	NHS invoices: 99.9% by value and 99.6% by volume paid on time. Non NHS invoices: 99.5% by value and 99.1% by volume paid on time. All invoices: 99.9% by value and 99.3% by volume paid on time.		
Managing within the Running Cost Allocation	The running cost allocation for the CCG is £6.1m. The year to date position is an under spend of £104k against plan.		

- 2.1 In the above table, the direction of the arrows indicates whether the position is improving, deteriorating or unchanged compared to the previous reported position. The CCG is currently achieving all of its statutory duties.
- 2.2 The latest guidance requires the cash balance at the end of the month to be less than £294k, the balance at the end of October was £284k, and therefore the CCG's cash balance was within this allowance.
- 2.3 The BPPC performance target is being met as at the end of October. Full details of the performance to date can be seen in **Appendix Three**.

3 Year to Date Financial Position

- 3.1 The overall CCG allocation for 2014/15 is £353.6m; this has increased by £1.1m since month 5 mainly due to the receipt of waiting list funding. The overall allocation consists of a programme allocation of £347.5m and a running cost allocation of £6.1m.
- 3.2 The table below provides detail of the allocations, programme and running costs.



26 November 2014 Agenda Item No 8 (c)

		Year to Date	(Month 7)				Annual				
	Budget	Actual (in ledger)	Variance	Adjustment	Adjusted Variance	Budget	Forecast /	Adjustment Va	riance	Last reported variance	Movement from last report
	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Allocations											
Total Programme						347,576	347,680	0	104		
Running cost						6,104	6,000	0	(104)		
Total allocation						353,680	353,680				
Declared surplus						(17,004)	(17,004)				
Net allocation						336,676	336,676				
Programme Area											
Acute	107,194	107,848	654	0	654	183,900	186,043	0	2,144	5,030	(2,887)
Mental Health	24,694	24,562	(132)	0	(132)	42,731	42,666	0	(65)	(79)	14
Community Health	17,738	17,807	70	0	70	30,426	30,501	0	75	(17)	92
Continuing Care	4,759	4,238	(522)	0	(522)	7,527	7,034	0	(493)	(635)	141
Prescribing	22,041	21,889	(152)	0	(152)	38,036	38,137	0	101	(220)	321
Other Primary Care	2,790	2,773	(17)	0	(17)	4,783	4,799	0	16	30	(14)
Other Commissioning	4,719	4,284	(435)	0		7,807	7,307	0	(500)	(64)	(436)
Committed developments	(616)	0	616	0		 15,363	14,189	0	(1,174)	(4,046)	2,872
Total Commissioning	183,320	183,401	81	0	81	330,572	330,676	0	104	(0)	104
Total running costs	3,416	3,334	(83)	0	(83)	6,104	6,000	0	(104)	0	(104)
Total costs	186,736	186,734	(2)	0	(2)	336,676	336,676	0	(0)	(0)	(0)
Allocation less costs						0	0				

4 Programme Expenditure – Variance Analysis

4.1 Acute Services

The year-end forecast variance for acute contracts of £2.1m is based on six months' data. The forecast has moved favourably by £2.9m since the last report to the Governing Body due to the receipt of Referral to Treatment (RTT) funding and favourable movements on Pennine Acute Hospitals NHS Trust and Oaklands Hospital. The table at **Appendix One** provides an analysis of the main secondary care providers and identifies that the majority of this overspend is against Salford Royal NHS Foundation Trust (SRFT) at £1.9m, Oaklands Hospital at £0.8m although some of this over performance is offset by other providers that are under performing. However, this is largely offset by the contingency set aside at the beginning of the year that is within the CCG's reserves and a forecast underspend on continuing healthcare budgets.

4.2 Salford Royal NHS Foundation Trust (SRFT)

SRFT is experiencing pressures in a number of areas primarily non elective care and outpatients.

- 4.3 In the last report to Governing Body, several areas of outpatients were flagged where activity has increased more than expected, and the following issues were investigated:
 - ENT and General Surgery referrals are still being directed to the Acute Trust whilst the CATS contract is being underutilised, although the CCG has to pay 85% of the contract value regardless of utilisation. The overall level of referrals has been constant year on year, although more activity is going to SRFT instead of the CATS provider.
 - Rheumatology is experiencing increased GP referrals since October 2013 according to data received from SRFT. Checks are currently being made with GP practices to see if the increase in referrals is explained by the implementation of NICE guidance



26 November 2014 Agenda Item No 8 (c)

regarding the management of rheumatoid arthritis, and if so, this is a positive improvement for patients.

- Gastroenterology is experiencing increased referrals according to information from SRFT, but it is possible that the new liver clinic may account for this increase in activity. Another possible explanation is the recent NICE guidance regarding the use of anti-Tumour Necrosis Factor (TNF) drugs for ulcerative colitis and inflammatory bowel disease, which may be driving additional referrals. The activity doubled in this specialty in month 6 SLAM data and this has been challenged back to the Trust and the CCG is awaiting a response.
- The Trust has had some serious operational issues regarding the management of Trauma and Orthopaedics. National funds of £0.7m have been received and added to the position since the last report to the Governing Body for the rectification of Referral to Treatment (RTT) targets, and the CCG added a further £0.5m to reduce the Trauma and Orthopaedics backlog. SRFT have given assurance that the admitted target for RTT will be met from December 2014 onwards.

4.5 Oaklands Hospital

Oaklands Hospital is an Independent Sector Provider who experienced increasing levels of activity last year which has continued into this year. Although the CCG planned on the 2013-14 outturn activity being maintained, activity levels have increased beyond this. All activity provided at this provider is referral based.

- **4.6** Although a significant over performance was forecast in earlier months based on referrals to date, the increase in referrals has levelled off recently.
- **4.7** A detailed breakdown of each contract by point of delivery is supplied in **Appendix One** to this report.

4.8 Other Acute

The position on other acute contracts has improved due to a revised forecast for IS CATS which is based on up to date performance reports, and a full review of Non Contracted Activity which revealed an over provision of £0.2m at 2013/14 year end.

4.9 Other Programme Areas

In Prescribing there has been notification from NHS England regarding generic medicine [Category M] price increases from October, this has been added to the forecast outturn position creating an adverse movement of £0.36m.

4.10 In August the CCG received detailed financial and utilisation information regarding community based properties. Meetings have since been held with partner organisations to encourage better utilisation of this resource. This, together with the fact that NHS Property and Community Health Partnerships (CHP) are now invoicing on actual costs rather than historical allocations has created a favourable movement in the position of £0.48m. Further savings are likely and will enable the CCG to invest strategically in the estate.



26 November 2014 Agenda Item No 8 (c)

5 Committed Developments - Reserves

- 5.1 At the start of the year the annual budget for Committed Developments was £20.6m. Since then, some amounts have been transferred out of reserves to cover budget setting adjustments and amendments to final contract values.
- 5.2 The current level of monies in committed developments at the end of October 2014 is £15.3m with an additional £0.7m anticipated taking the total reserves to £16m. The table below shows a high level analysis of the committed developments that have not yet been spent, and details of the current forecast commitments. To date, £1.2m of slippage has been identified from reserves to fund the overspend on secondary care. More detail is provided in **Appendix Two**.

	Planned	Forecast	Variance
	£000	£000	£000
Investment Plan Developments 2014/15	3,997	1,200	2,797
Contingencies	3,325	-175	3,500
Committed Expenditure	4,081	5,890	-1,809
Greater Manchester Commitments	3,960	3,646	314
CURRENT COMMITTED DEVELOPMENTS	15,363	10,561	4,802
Anticipated Allocations	700	0	700
ANTICIPATED COMMITTED DEVELOPMENTS	16,063	10,561	5,502

- 5.3 A mid-year review of the implementation of investments has been undertaken and is reflected in the forecast of reserves. This review shows that there is £5.5m of slippage and £1.2m of this required to cover contract overspends. Therefore there is £4.3m non recurrent funding available that is uncommitted for the remainder of this financial year.
- **5.4** The main reasons for the movement in the CCG's financial position are:
 - The funds set aside for GP IT of £1m no longer required as these costs were covered by additional allocations.
 - Expenditure estimated for 2013/14 at year end is now £0.4m less than required, increasing contingencies.
 - Investments of £4m were previously forecast as fully committed but this has now been reduced to £1.2m. Over the past two months, a number of business cases have been produced and reviewed so investment expenditure for 2014/15 can now be forecast with more certainty. The Long Term Conditions business case is forecasting expenditure of £0.7m for 2014/15 against a full year cost of £2.5m, and the uptake of extended access funding from primary care is not likely to exceed £0.2m this year.
- 5.5 Additional non recurrent expenditure will therefore be required to ensure that the CCG delivers the target surplus of £17m, as there is no guarantee that any increase in surplus will be returned to the CCG in 2015/16.



26 November 2014 Agenda Item No 8 (c)

The 2015/16 component of the current five year financial plan assumes that there will be investment funds of £9.7m available, of which £3m is for innovation projects and £6.7m for primary care quality and community based care developments. The full year effect of approved business cases, plus an estimate of £2m for the primary care extended access bids would indicate a commitment of £5.5m against the primary care quality and community based care development funds next year. This is a sizeable investment and it is anticipated that there should be a lower risk of slippage in 2015/16. However, a refresh of the 2015/16 financial plan is currently underway and the overall position will be reassessed in the light of current forecasts and any new revisions to planning guidance.

6 Running Cost – Variance Analysis

- 6.1 The year to date variance in the table below shows a favourable variance of £83k on running costs to date and a favourable variance of £104k is forecast for the year. Whilst this has previously been forecast to breakeven, it is now evident that the full admin reserve will not be required. This places the CCG in a good position in respect of the 10% reduction in running costs that will be implemented from 2015/16.
- **6.2** The CCG is confident it will achieve its statutory duty on running costs.

Running Costs	Year to	Date (mont	h 7)		Annual		1 4 4 - 4	Movement
		Actual (in					Last reported variance	from last
	Budget	ledger)	Variance	Budget	Forecast	Variance	variance	report
	£000	£000	£000	£000	£000	£000	£000	£000
Pay								
CCG Staff Costs	1,672	1,534	(138)	2,894	2,933	39		39
Non Pay								
CSU Re-charge	1,004	1,015	11	1,699	1,726	27) 27
NHS Property Services Recharge	193	193	0	331	331	0		0
Misc Income-Oth Operatg Rev Non NHS	0	(2)	(2)	0	0	0	(0
Admin Reserve	0	0	(0)	249	61	(188)	70	(258)
Other Non Pay	547	592	46	931	948	18	(70)	88
Total running costs	3,416	3,334	(83)	6,104	6,000	(104)	((104)

Risks

7.1 A number of risks have been identified which could prevent the CCG achieving its financial duties. These are summarised in the table below. An estimation of the potential size of the financial risk is given (where possible) and either actions or additional financial resource has been identified to mitigate the risks.

Risk	Potential Size of Risk	Mitigating actions and/or source of additional financial resource	Current Risk rating
Over spend	The total value of the	Contract performance is reviewed monthly	High
on Acute	acute contracts is	through the Commissioned Services	
Contracts	£181m. Therefore if the	Quality Group (CSQG). There are also	



26 November 2014 Agenda Item No 8 (c)

	contracts over spend by 1% there will be a financial pressure of £1.8m.	monthly meetings with Salford Royal Foundation Trust to review the performance of the contract. Included in the Committed Developments is contingency funding of £2.9m, shown in section 5. Of this contingency funding £1.8m has been identified for general pressures and has now been fully utilised against the forecast outturn.	
Prescribing over or under spend	The annual budget for prescribing is £38m. If this over performs by 1% there would be a pressure of £0.4m.	This level of financial pressure is not significant and would be managed through the existing contingencies, under spend on other budgets or by slippage on the 2014/15 investments.	Low
Investment Plan – potential under spend	£4m has been identified for investment in new services in 2014/15, and a further £9.1m in other committed developments. If these investments slip by 3 months there would be an under spend of £3.3m.	A review of spend against investment plans is in progress and early indications are that a number of investment plans have slipped. It may be necessary to look at establishing a non-recurrent funding programme. There will be no opportunity to increase the planned surplus for 2014/15.	High
Operation of the new integrated care pooled funds	The CCG's forecast position assumes full utilisation of available pooled funds and no over commitment. It is possible that there could be underlying under or over performance issues which may not be reported until later in the year.	Reporting arrangements are being finalised with Salford City Council. Where it is not possible to bring expenditure back in line with budget, deferral or acceleration of the investment plans may be required in order to manage the overall position.	Medium

7.2 In addition to the risks outlined above, there are also other operational issues which may have financial risks, such as the co-commissioning agenda with NHS England.

8 Recommendations

8.1 The NHS Salford Clinical Commissioning Governing Body is asked to note the contents of this report, in particular the risks identified in section seven to the delivery of statutory financial duties.



26 November 2014 Agenda Item No 8 (c)

8.2 The Chief Finance Officer will report to the next Governing Body on the utilisation of £4.3m of slippage.

Steve Dixon Chief Finance Officer



26 November 2014 Agenda Item No 8 (c)

Appendix 1a: Breakdown of Acute Contract Performance by Point of Delivery

				Reported C	ontract Positi	on to Month	6				
		A c+	vity.		Finance						
	Activity				Budget	Actual	Adjustment	Revised V	ariance		
Point of Delivery	Plan	Actual	Variance	%	£000s	£000s	£000s	£000s	%		
A&E	50,689	53,699	3,010	6%	£6,164	£6,461	(£146)	£151	2%		
All other (PbR excluded, non activity services)					£13,219	£13,127	(£369)	(£462)	(3%)		
Elective: inpatients and day cases	13,304	14,042	738	6%	£16,116	£16,342	£90	£317	2%		
Non-elective admissions	18,048	19,532	1,485	8%	£29,406	£30,238	(£158)	£674	2%		
Outpatients	104,406	108,948	4,542	4%	£12,303	£12,808	£0	£505	4%		
Excess bed days	6,174	7,217	1,043	17%	£1,426	£1,651	£0	£224	16%		
TOTAL ACTIVITY BASED SECONDARY CARE CONTRACTS	-	-	-	-	£78,634	£80,627	(£583)	£1,410	2%		
Total Other Acute	-	-	-	-	£12,829	£12,199	£0	£0	0%		
Total Acute	-	-	-	-	£91,464	£92,826	(£583)	£1,410	2%		

	Annual										
	Forecast										
Budget	Forecast	Adjustment	Vari	ance							
£000	£000	£000s	£000	%							
£12,488	£12,778	(£1)	£289	2%							
£26,612	£25,632	£149	(£830)	(3%)							
£32,429	£32,922	£0	£493	2%							
£59,428	£60,761	£2	£1,335	2%							
£24,804	£25,709	(£1)	£905	4%							
£2,859	£3,078	(£1)	£218	8%							
£158,620	£160,880	£149	£2,408	2%							
£25,280	£25,000	£0	(£280)	-1%							
£183,900	£185,880	£149	£2,128	1%							

	Reporte	d Month 5
	Variance	Movement
	£000s	£000s
,	£877	(£588)
	(£725)	(£105)
,	£1,145	(£652)
,	£2,248	(£913)
,	£968	(£63)
,	(£46)	£264
,	£4,465	(£2,057)
,	£564	(£844)
,	£5,028	(£2,901)
_		



26 November 2014 Agenda Item No 8 (c)

Appendix 1b: Breakdown of Contract Performance

		Month 6		Adjusted Month 6				Annual				
	Budget	Actual	Variance	Adjustment	Revised	l Variance	Budget	Forecast	Adjustment	Revised V	ariance	
Provider	£000s	£000s	£000s	£000s	£000s	%	£000s	£000s	£000s	£000s	%	
SALFORD ROYAL NHS FOUNDATION TRUST	£48,968	£50,513	£1,545	(£528)	£1,017	2%	£98,643	£100,399	£153	£1,909	2%	
CENTRAL MANCHESTER UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	£13,041	£12,953	(£88)	£0	(£88)	(1%)	£26,431	£26,242	£0	(£189)	(1%)	
BOLTON NHS FOUNDATION TRUST	£6,956	£6,908	(£48)	(£31)	(£79)	(1%)	£14,106	£14,009	£1	(£96)	(1%)	
PENNINE ACUTE HOSPITALS NHS TRUST	£3,623	£3,753	£130	£0	£130	4%	£7,294	£7,480	£0	£186	3%	
UNIVERSITY HOSPITAL OF SOUTH MANCHESTER NHS FOUNDATION TRUST	£1,606	£1,607	£1	£0	£1	0%	£3,252	£3,269	(£21)	(£4)	(0%)	
WRIGHTINGTON WIGAN ANDLEIGH FOUNTATION TRUST	£868	£732	(£136)	£0	(£136)	(16%)	£1,759	£1,457	£1	(£301)	(17%)	
WARRINGTON AND HALTON HOSPITALS NHS FOUNDATION TRUST	£686	£736	£50	£0	£50	7%	£1,360	£1,405	£0	£45	3%	
STOCKPORT NHS FOUNDATION TRUST	£65	£94	£30	(£24)	£6	9%	£133	£137	£14	£17	13%	
OAKLANDS	£2,821	£3,331	£511	£0	£511	18%	£5,642	£6,482	£1	£841	15%	
TOTAL ACTIVITY BASED SECONDARY CARE CONTRACTS	£78,634	£80,627	£1,993	(£583)	£1,410	2%	£158,620	£160,880	£149	£2,408	2%	
Non Contract Activity	£1,432	£1,232	(£200)	£0	£0	0%	£2,864	£2,655	£0	(£209)	(7%)	
Ambulance Services	£4,017	£4,021	£4	£0	£0	0%	£8,033	£8,010	£0	(£23)	(0%)	
Care UK - GMCATS	£1,782	£1,653	(£129)	£0	£0	0%	£3,564	£3,313	£0	(£251)	(7%)	
Total Other Acute	£5,599	£5,293	(£306)	£0	£0	0%	£10,819	£11,022	£0	£203	2%	
SUB TOTAL: Other Acute	£12,829	£12,199	(£631)	£0	£0	0%	£25,280	£25,000	£0	(£280)	(1%)	
GRAND TOTAL: ACUTE	£91,464	£92,826	£1,362	(£583)	£1,410	2%	£183,900	£185,880	£149	£2,128	1%	



26 November 2014 Agenda Item No 8 (c)

Appendix 1c: Detailed breakdown of activity based acute contracts

	Reported Contract Position to Month 6													Forecast as Reported at				
	Activity						Finance						Annual					nth 5
			Activity			Budget	Actual	Variance	Adjustm ent	Revised V	ariance	Budget	Forecast	Adjustment	Vari	lance	Variance	Movement
Point of Delivery (POD)	Annual	Plan	Actual	Variance	%	£000s	£000s	£000s	£000s	£000s	%	£000s	£000s	£000s	£000s	%	£000s	£000s
A&E	75,403	36,991	38,663	1,672	5%	£4,875	£5,013	£138	(£146)	(£8)	(0%)	£9,931	£9,902	£0	(£29)	(0%)	£531	(£560)
All other (PbR excluded, non activity services)						£9,590	£9,575	(£14)	(£338)	(£352)	(4%)	£19,217	£18,448	£150	(£619)	(3%)	(£560)	(£59)
Elective: inpatients and day cases	16,636	8,275	8,757	482	6%	£9,526	£9,340	(£186)	£90	(£96)	(1%)	£19,085	£18,916	£0	(£169)	(1%)	£418	(£587)
Non-elective a dmissions	17,525	8,690	10,241	1,551	18%	£16,730	£17,656	£927	(£134)	£793	5%	£33,798	£35,346	£2	£1,550	5%	£2,208	(£658)
Outpatients	121,062	60,206	64,802	4,596	8%	£7,176	£7,687	£512	£0	£512	7%	£14,444	£15,437	£1	£994	7%	£1,012	(£18)
Excess bed days	9,537	4,720	5,569	849	18%	£1,072	£1,241	£169	£0	£169	16%	£2,168	£2,350	£0	£182	8%	(£151)	£333
SALFORD ROYAL NHS FOUNDATION TRUST Total	240,163	118,882	128,032	9,150	8%	£48,968	£50,513	£1,545	(£528)	£1,017	2%	£98,643	£100,399	£153	£1,909	2%	£3,458	(£1,549)
A&E	9,753	4,834	5,728	894	18%	£425	£537	£112	£0	£112	26%	£857	£1,084	£0	£227	26%	£234	(£7)
All other (PbR excluded, non activity services)						£1,861	£1,844	(£17)	£0	(£17)	(1%)	£3,828	£3,835	£0	£7	0%	(£144)	£151
Elective: inpatients and day cases	3,354	1,607	1,709	102	6%	£1,796	£1,801	£5	£0	£5	0 %	£3,723	£3,725	£0	£2	0%	£20	(£18)
Non-elective a dmissions	8,134	4,074	3,824	(250)	-6%	£6,304	£6,052	(£251)	£0	(£251)	(4%)	£12,571	£12,098	£0	(£473)	(4%)	(£341)	(£132)
Outpatients	36,039	17,464	17,388	(76)	0%	£2,547	£2,549	£2	£0	£2	0 %	£5,235	£5,205	£0	(£30)	(1%)	£56	(£86)
Excess bed days	806	403	635	232	58%	£108	£169	£61	£0	£61	57%	£216	£295	£0	£79	37%	£104	(£25)
CENTRAL MANCHESTER UNIVERSITY HOSPITALS NHS FOUNDATION TRUST Total	58,086	28,382	29,284	902	3%	£13,041	£12,953	(£88)	£0	(£88)	-1%	£26,431	£26,242	£0	(£189)	-1%	(£72)	(£117)
A&E	9,601	4,882	5,141	259	5%	£490	£515	£25	£0	£25	5%	£962	£1,012	£0	£50	5%	£54	(£5)
All other (PbR excluded, non activity services)						£773	£738	(£35)	(£31)	(£66)	(9%)	£1,546	£1,466	£0	(£80)	(5%)	(£192)	£112
Elective: inpatients and day cases	2,468	1,222	1,170	(52)	-4%	£1,033	£956	(£77)	£0	(£77)	(7%)	£2,104	£1,945	£0	(£159)	(8%)	(£157)	(£2)
Non-elective a dmissions	6,769	3,248	3,316	68	2%	£3,467	£3,587	£120	£0	£120	3%	£7,164	£7,410	£1	£247	3%	£301	(£54)
Outpatients	21,730	11,037	10,918	(119)	-1%	£1,022	£962	(£60)	£0	(£60)	(6%)	£2,008	£1,891	£0	(£117)	(6%)	(£187)	£71
Excess bed days	1,351	712	630	(82)	-11%	£171	£150	(£20)	£0	(£20)	(12%)	£323	£285	£0	(£38)	(12%)	£11	(£49)
BOLTON NHS FOUNDATION TRUST Total	41,919	21,101	21,175	74	0%	£6,956	£6,908	(£48)	(£31)	(£79)	-1%	£14,106	£14,009	£1	(£96)	-1%	(£170)	£74
A&E	6,266	3,188	3,286	98	3%	£296	£308	£11	£0	£11	4%	£582	£605	£0	£23	4%	£39	(£16)
All other (PbR excluded, non activity services)						£531	£537	£6	£0	£6	1%	£1,069	£1,037	£0	(£32)	(3%)	(£16)	(£16)
Elective: inpatients and day cases	1,123	562	505	(57)	-10%	£605	£523	(£82)	£0	(£82)	(14%)	£1,207	£1,037	£0	(£170)	(14%)	(£165)	(£5)
Non-elective admissions	2,833	1,395	1,555	160	11%	£1,728	£1,898	£169	£0	£169	10%	£3,514	£3,858	£0	£344	10%	£434	(£90)
Outpatients	7,684	3,860	3,895	35	1%	£426	£431	£5	£0	£5	1%	£850	£860	£0	£10	1%	£12	(£2)
Excess bed days	316	155	231	76	49%	£36	£56	£20	£0	£20	57%	£73	£83	£0	£10	14%	£17	(£7)
PEN NIN E ACUTE HOSPITALS NHS TRUST Total	18,222	9,160	9,472	312	3%	£3,623	£3,753	£130	£0	£130	4%	£7,294	£7,480	£0	£186	3%	£322	(£136)
A&E	658	333	368	35	11%	£30	£38	£7	£0	£7	24%	£60	£74	(£3)	£11	18%	£25	(£14)
All other (PbR excluded, non activity services)						£139	£115	(£24)	£0	(£24)	(17%)	£278	£268	(£3)	(£13)	(5%)	£3	(£16)
Elective: inpatients and day cases	767	387	408	21	5%	£559	£651	£92	£0	£92	16%	£1,116	£1,291	(£4)	£171	15%	£155	£16
Non-elective a dmissions	501	244	245	1	0%	£565	£505	(£61)	£0	(£61)	(11%)	£1,172	£1,043	(£4)	(£133)	(11%)	(£99)	(£34)
Outpatients	5,839	2,939	3,012	73	2%	£286	£279	(£7)	£0	(£7)	(3%)	£573	£554	(£4)	(£23)	(4%)	(£8)	(£15)
Excess bed days	229	114	83	(31)	(27%)	£26	£19	(£7)	£0	(£7)	(25%)	£53	£39	(£3)	(£17)	(33%)	(£22)	£5
UNIVERSITY HOSPITAL OF SOUTH MANCHESTER NHS FOUNDATION TRUST Total	7,996	4,017	4,116	99	2%	£1,606	£1,607	£1	£0	£1	0%	£3,252	£3,269	(£21)	(£4)	(0%)	£54	(£58)



26 November 2014 Agenda Item No 8 (c)

	Reported Contract Position to Month 6												Forecast as Reported at						
		Reported Contract Position to Month 6 Finance										Annual						Month 5	
	Activity				Budget					Variance	Budget	get Forecast Adjustment Variance			iance	Variance	Movement		
Point of Delivery (POD)	Annual	Plan	Actual	Variance	%	£000s	£000s	£000s	£000s	£000s	%	£000s	£000s	£000s	£000s	%	£000s	£000s	
, ,	'		·	-															
A&E	162	81	94	13	16%	£8	£8	£1	£0	£1	7%	£16	£17	£0	£1	6%	£0	£1	
All other (PbR excluded, non activity services)						£182	£89	(£93)	£0	(£93)	(51%)	£384	£183	£0	(£201)	(52%)	£15	(£216)	
Elective: inpatients and day cases	392	195	212	17	9%	£406	£433	£27	£0	£27	7%	£814	£870	£1	£57	7%	£46	£11	
Non-elective admissions	132	66	35	(31)	(47%)	£190	£110	(£80)	£0	(£80)	(42%)	£380	£203	£0	(£177)	(47%)	(£133)	(£44)	
Outpatients	1,786	889	973	84	9%	£80	£91	£11	£0	£11	13%	£161	£182	£0	£21	13%	£36	(£15)	
Excess bed days	20	10	5	(5)	(50%)	£2	£1	(£1)	£0	(£1)	(50%)	£5	£2	£0	(£3)	(60%)	(£5)	£2	
WRIGHTINGTON WIGAN AND LEIGH NHS FOUNDATION TRUST Total	2,493	1,242	1,319	77	6%	£868	£732	(£136)	£0	(£136)	(16%)	£1,759	£1,457	£1	(£301)	(17%)	(£40)	(£261)	
A&E	542	276	297	21	8%	£29	£30	£1	£0	£1	3%	£57	£59	£0	£2	4%	(£1)	£3	
All other (PbR excluded, non activity services)						£71	£146	£75	£0	£75	105%	£145	£235	£0	£90	62%	£102	(£12)	
Elective: inpatients and day cases	206	101	105	4	4%	£75	£71	(£4)	£0	(£4)	(6%)	£152	£145	£0	(£7)	(5%)	£1	(£8)	
Non-elective admissions	593	300	289	(11)	(4%)	£412	£389	(£23)	£0	(£23)	(6%)	£810	£769	£0	(£41)	(5%)	(£105)	£64	
Outpatients	2,097	1,041	942	(99)	(10%)	£91	£86	(£5)	£0	(£5)	(5%)	£182	£173	£0	(£9)	(5%)	(£9)	£0	
Excess bed days	60	35	63	28	81%	£8	£14	£6	£0	£6	72%	£14	£24	£0	£10	72%	£9	£1	
WARRINGTON AND HALTON HOSPITALS NHS FOUNDATION TRUST Total	3,500	1,752	1,696	(56)	-3%	£686	£736	£50	£0	£50	7%	£1,360	£1,405	£0	£45	3%	(£4)	£49	
A&E	203	104	122	18	17%	£11	£13	£2	£0	£2	16%	£23	£25	£2	£4	18%	(£5)	£10	
All other (PbR excluded, non activity services)						£3	£1	(£2)	£0	(£2)	(76%)	£7	£2	£2	(£3)	(44%)	£43	(£46)	
Elective: inpatients and day cases	26	13	19	6	42%	£19	£25	£7	£0	£7	35%	£38	£48	£2	£12	33%	(£25)	£37	
Non-elective admissions	62	31	27	(4)	(13%)	£9	£40	£31	(£24)	£7	79%	£19	£34	£3	£18	96%	(£17)	£35	
Outpatients	242	120	110	(10)	(8%)	£18	£14	(£4)	£0	(£4)	(23%)	£39	£28	£2	(£9)	(22%)	(£26)	£17	
Excess bed days	52	26	1	(25)	(96%)	£4	£0	(£3)	£0	(£3)	(94%)	£7	£0	£2	(£5)	(71%)	(£9)	£4	
STOCKPORT NHS FOUNDATION TRUST Total	584	294	279	(15)	-5%	£65	£94	£30	(£24)	£6	9%	£133	£137	£14	£17	13%	(£39)	£56	
A&E	-	0	0	0	0%	£0	£0	£0	£0	£0	0%	£0	£0	£0	£0	0%	£0	£0	
All other (PbR excluded, non activity services)						£69	£81	£12	£0	£12	18%	£138	£158	£0	£20	0%	£23	(£3)	
Elective: inpatients and day cases	1,881	941	1,157	217	23%	£2,096	£2,542	£446	£0	£446	21%	£4,191	£4,945	£1	£754	18%	£851	(£96)	
Non-elective admissions	-	0	0	0	0%	£0	£0	£0	£0	£0	0%	£0	£0	£0	£0	0%	£0	£0	
Outpatients	13,699	6,850	6,908	59	1%	£656	£709	£52	£0	£52	8%	£1,313	£1,379	£0	£66	5%	£82	(£15)	
Excess bed days	-	0	0	0	0%	£0	£0	£0	£0	£0	0%	£0	£0	£0	£0	0%	£0	£0	
OAKLANDS	15,580	7,790	8,065	275	4%	£2,821	£3,331	£511	£0	£511	18%	£5,642	£6,482	£1	£841	15%	£956	(£114)	
A&E	102,589	50,689	53,699	3,010	6%	£6,164	£6,461	£297	(£146)	£151	2%	£12,488	£12,778	(£1)	£289	2%	£877	(£588)	
All other (PbR excluded, non activity services)						£13,219	£13,127	(£93)	(£369)	(£462)	(3%)	£26,612	£25,632	£149	(£830)	(3%)	(£725)	(£105	
Elective: inpatients and day cases	26,853	13,304	14,042	738	6%	£16,116	£16,342	£227	£90	£317	2%	£32,429	£32,922	£0	£493	2%	£1,145	(£652	
Non-elective admissions	36,550	18,048	19,532	1,485	8%	£29,406	£30,238	£832	(£158)	£674	2%	£59,428	£60,761	£2	£1,335	2%	£2,248	(£913	
Outpatients	210,179	104,406	108,948	4,542	4%	£12,303	£12,808	£505	£0	£505	4%	£24,804	£25,709	(£1)	£905	4%	£968	(£63	
Excess bed days	12,371	6,174	7,217	1,043	17%	£1,426	£1,651	£224	£0	£224	16%	£2,859	£3,078	(£1)	£218	8%	(£46)	£264	
TOTAL ACTIVITY BASED SECONDARY CARE CONTRACTS	388,542	192,620	203,438	10,818	6%	£78,634	£80,627	£1,993	(£583)	£1,410	2%	£158,620	£160,880	£149	£2,408	2%	£4,465	(£2,057)	



26 November 2014 Agenda Item No 8 (c)

Appendix 2: Detail of Committed Developments as at end of October 2014

	Planned	Forecast	
	Commitments	Outturn	Variance
	£000	£000	£000
Investment Plan Developments 2014/15			
Innovation pilots mainstream	500	0	500
Primary Care Quality/Community Based Care	3,497	1,200	2,297
	3,997	1,200	2,797
Contingencies			
Contingency for activity/tariff changes	1,576	-175	1,751
Financial Planning guidance - 0.5% contingency	1,749	0	1,749
	3,325	-175	3,500
Committed Expenditure			
RADAR pilot GMW	100	67	33
IAT adjustments re corrections to responsible commissioner	71	71	0
GPIT	1,001	0	1,001
Premises Development- Swinton	1,700	900	800
Premises Development- Little Hulton	583	583	0
Long Term Conditions	150	60	90
Innovation Fund	1,455	1,309	146
Salford Lung Study	352	0	352
Winter Pressures local contribution	0	800	-800
Additional T&O waiting list at SRFT	-531	0	-531
A&E funding commitment	-800	0	-800
GP Pensions liability		100	-100
Learning Disabilities funding		500	-500
Equipment		500	-500
SRFT year end agreements		1,000	-1,000
	4,081	5,890	-1,809
Greater Manchester Commitments			
0.3% Healthier Together/GM wide	504	190	314
Winter pressures SRFT	3456	3456	0
	3,960	3,646	314
CURRENT COMMITTED DEVELOPMENTS	15,363	10,561	4,802
Anticipated Allocations:			
Quality Premium	700	0	700
ANTICIPATED COMMITTED DEVELOPMENTS	16,063	10,561	5,502



26 November 2014 Agenda Item No 8 (c)

Appendix 3: Detail of Better payment practice code performance

		Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14 Cu	umulative
NHS	Volume	100.00%	98.82%	98.91%	99.60%	99.57%	100.00%	100.00%	99.61%
	Value	100.00%	99.76%	100.00%	100.00%	100.00%	100.00%	100.00%	99.96%
Non NHS	Volume	100.00%	98.06%	99.20%	98.61%	99.44%	99.45%	100.00%	99.19%
	Value	100.00%	99.29%	99.14%	98.19%	99.95%	99.98%	100.00%	99.52%
Total	Volume	100.00%	98.28%	99.10%	98.94%	99.49%	99.68%	100.00%	99.34%
	Value	100.00%	99.71%	99.91%	99.69%	99.99%	100.00%	100.00%	99.90%