

**NHS GOLDEN JUBILEE**

**SUMMARY FINANCIAL REPORT**

**MONTH 10**

**AS AT 31 JANUARY 2024**

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| **FINANCIAL POSITION 31 January 2024 (MONTH 10)** |
| **EXECUTIVE SUMMARY** |
| 1. **2023/2024 to 2025/26 FINANCIAL PLAN**

The NHS Golden Jubilee Board in March 2023 approved a 3 year break-even Financial Plan for the period 2023/24 to 2025/26. The Month 10 forecast position is still assuming a continued break-even position, although the delivery of significant levels of savings in still required in each of the 3 years of the plan through a combination of recurring and non-recurring measures.**DELIVERY OF 2023/24 FINANCIAL PLAN**

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| **Current Risk Rating** |  | **Low** |

For 2023/24 a break-even outturn position requires the delivery of -£6.66m of in-year savings /budget reductions through a combination of recurring and non-recurring measures.The Year to Date (YTD) core revenue position as at the end of January 2024 is a favourable variance of £780k This represents a favourable % variance of 0.4%. Following the workstreams reviewing the revised SLA with HL&D NSD SLAs as well as confirmation of forecast performance across the Topslice SLAs, a significant update on both Pays and Non-pays across both Divisions has released recurring budgets to reflect the costs associated with this year’s ADP and SLA reviews.The Month 10 position shows the impact of this re-alignment of both Pays and Non-pays, resulting in the improvement in the YTD position.**2023/2024 TO 2025/26 FINANCIAL PLAN**

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| **Current Risk Rating** | **Very High** |

March 2023 Financial Plan2024/25 and 2025/26 also require the delivery of significant savings to achieve a break-even outturn position in both of the years.March 2024 Financial PlanA new 3 year draft financial plan (2024/25 to 2026/27) is currently being developed. Taking into account the significant levels of pressures across the Health System as a whole, there will be a requirement for a robust efficiency and savings plan to ensure delivery of a break-even position over the next 3 years.The revised draft 3 year plan was submitted to Scottish Government on 29 January 2024 with the final draft requiring submission by 11 March 2024. The final March 2024 draft will be subject to ELT, Committee and ultimately Board approval. |
| 1. **2023/24 CORE INCOME POSITION**

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| **Current Risk Rating** | **Low** |

Income is £1.857m or 0.10% above the Financial Plan at Month 10.  |
| 1. **2023/24 CORE EXPENDITURE POSITION**

Core Expenditure is -£1.080m or -0.58% above the Financial Plan at Month 10.**PAY COSTS**

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| **Current Risk Rating** | **Medium** |

In overall terms, Pay costs at Month 10 are underspent by £692k or 0.55% below plan, following the release of funding related to the revised NSD SLAs within HL&D.Further analysis is provided within the relevant section of the main report.**NON PAY COSTS**

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| **Current Risk Rating** | **Very High** |

In overall terms, Non Pay costs at Month 10 are overspent by -£1.771m equating to -2.95% above YTD budget across a number of Board expenditure categories. This position has been improved in Month 10 following the rebasing of SLAs across both HL&D and NES Divisions, to better reflect the baseline funding required to deliver this year’s associated ADP.Further analysis is provided within the relevant section of the main report. |
| 1. **2023/24 EFFICIENCY REQUIREMENT**

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| **Current Risk Rating** | **Medium** |

There is a -£6.66m efficiency requirement within the Financial Plan to achieve the targeted break-even position for 2023/24. **FULL YEAR SAVINGS PLAN**Savings schemes identified to-date, as part of the Month 10 review, show that the efficiency target will be met in full by the year-end. Forecast savings of £6.297m have been identified as at Month 10, leaving a remaining £0.369m still to be identified by the year end. **£4.510m of this total has been identified non-recurrently**, with **c**. **£1.787m recurrently** delivered. This leaves an on-going recurring challenge of £4.9m which will be carried forward into next year’s financial planning assumptions. |
| 1. **NON-CORE REVENUE POSITION**

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| **Current Risk Rating** | **Low** |

Non-Core position at Month 10 is anticipated to be break-even (expenditure matched by SG Income). |
| 1. **CAPITAL INCOME AND EXPENDITURE**

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| **Current Risk Rating** | **Medium** |

Capital allocations of £4.270m have been confirmed by Scottish Government at Month 10 with ‘anticipated’ allocations expected of a further £10.042m which would result in an overall funded 2023/24 Capital Plan of £14.312m. This has been updated following the latest cost control meeting with the Board’s Phase 2 cost advisors, reducing the value of expected works carried out down significantly by the end of this financial year. The remaining balance of the Phase 2 works will be carried into the next financial year. The capital position will continue to be reviewed on a monthly basis and updated accordingly. |
| **FINANCIAL REPORT AT 31 JANUARY 2024 (Month 10)**  |

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| **SECTION 1: NHS GOLDEN JUBILEE- OVERALL POSITION**The table below provides the overall high level summary position of the Board as at the end of January 2024, at Month 10. The net position shows a £777k favourable position, with over-recovery of income of £1.857m offsetting expenditure pressures of -£1.080m.It should be noted that further 2023-24 budgets (non-recurring) has been released from NSD service level agreements for SNAFHs and SACCs into both the income and expenditure positions, reducing the income variance and improving the expenditure position.Following the completion of the ‘Deep Dive’ exercises, the recurring impact of these budget changes will be built into the new 3 year Financial Plan.**Table 1****Appendix 1** provides more detail on the overall position**.** |
| **SECTION 2: 2023/24 CORE INCOME POSITION**

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| **Current Risk Rating** | **Medium** |

Income is £1.857m or 0.97% above the Financial Plan at Month 10. **REVENUE RESOURCE LIMIT (RRL)**RRL allocations for the year at Month 10 are currently anticipated at £137.685m. At Month 10, £109.598m has been released. £27.578m of the RRL relates to the marginal SLAs undertaken within NES for other Territorial Boards, representing a total YTD value of £22.982m. **Table 2****SERVICE LEVEL AGREEMENTS (SLA INCOME)**Total SLA income is £0.357m over-recovered at Month 10.**Table 3**These variances relate to the performance across the NSD SLAs and TAVI activity over-performance. In particular, TAVIs are now £919k ahead of plan YTD, with Cardiac underperformance of -£342k as activity has been lower this year compared to last year. Thoracic and Cardiology are ahead of plan by £255k and £376k respectively due to over performance in non WoS.The revised 2024-25 Business case for SNAHFs is currently being progressed in collaboration with GJNH and NSD via CEOs. Following the submission of the updated SNAHFs business case in December to CEOs, where the paper was agreed in principle, further discussions are ongoing with NSD in regards to finalising the funding requirement for 24/25. **HOTEL AND OTHER INCOME**GJ Conference Hotel income is £483k over-recovered and all Other Income sources are ahead of budget expectations by £1.017m; the main items being a VAT rebate, CNORIS and Other Income of £487k in total plus various other sources e.g. secondments and research, over-performance in Dining Room Income £116k, Shop Income £193k. (associated expenditure is within the Divisional expenditure positions). **Table 4** |
| **SECTION 3: 2023/24 CORE EXPENDITURE POSITION**Expenditure to date of £187.819m is ahead of the year to date budget of £186.740m resulting in an adverse variance of -£1.080m overall (-0.58%).* Pay Costs underspend of £692k, 0.55%
* Non-Pay Costs -£1.771m, -2.95%

**PAY COSTS AT MONTH 10****Table 5 – Pay Costs****MEDICAL PAY COSTS** The overspend in the Medical staff category is -£268k – as reported last month this overspend has continued to decrease due to budget being released from Medical Service Planning and General Surgery Review funding as well as increased funding for posts from the revised NSD SLAs. The main areas of overspends, are detailed further within the Divisional narratives. The key underlying position is due to both short and long term sickness absence and vacancies within both Consultant and Junior rotas over both HL&D and NES divisions. Divisions continue to use Agency staff and increased levels of WLIs to cover service gaps and maintain planned levels of activity. As part of the efficiency programme a workstream has been created to review the historic use of medical agency and WLIs in covering vacancies and recovering the activity position across both Divisions, to provide further clarity on the decisions made in incurring these significant increased costs.The key pressures within medical pay relates to medical agency costs and Waiting List initiative payment in the following areas:**Table 6 – Medical staff key expenditure pressures**

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| **Pressure** | **HLD** | **NES** | **Total** |
| **Agency:-** |  |  |  |
| Radiology | -£151k |  | -£151k |
| Cardiac Registrars | -£111k |  | -£111k |
| Ophthalmology |  | -£273k | -£273k |
| General Anaesthetics Registrars |  | -£20k | -£20k |
| Orthopaedics |  | -£16k | -£16k |
|  | **-£262k** | **-£309k** | **-£571k** |
| **Waiting List Initiatives:-** |  |  |  |
| Cardiac  | -£168k |  | -£168k |
| CT Anaesthetics | -£528k |  | -£528k |
| General Anaesthetics  |  | -£415k | -£415k |
| Orthopaedics |  | -£159k | -£159k |
|  | **-£696k** | **-£574k** | **-£1,270k** |
| **Grand Total of Medical Pressures** | **-£958k** | **-£883k** | **-£1,841k** |

These pressures are partially offset with the level of vacancy underspends across both Divisions, demonstrating the current recruitment challenges faced by the Board.**NURSING PAY COSTS**Nursing pay costs are underspent by £1.138m at Month 10. This figure is after reduction of £1.864m funding non-recurrently to Efficiency Savings YTD, reflecting the on-going level of vacancies across the system. Whilst this is supporting the current efficiency position, Divisions continue to work with finance and performance colleagues to identify recurring transformational savings plans.**CLINCIAL PAY COSTS**Clinical pay costs underspend increased significantly to £119k at Month 10 this relates to non-recurring budget being released into Radiology from Scottish Government for the additional ultrasound project, NSD funds received for MRI and CT additional activity there has also been recruitment to vacancies across NES which has seen a reduced spend in Agency. **SUPPORT PAY COSTS** Support pay costs are overspent by -£233k with approximately -£190k relating to the Hotel activity which is offset with associated increased income. The other pressures are mostly within Portering and Housekeeping due to the continued additional hours worked to maintain services related to the high levels of vacancies and sickness absence over the past few months. **ADMIN PAY COSTS**Admin pay costs are now in a favourable -£64k position at Month 10, the key factor being a backdated upgrade in HL&D -£59k and NES are -£112k over spent with the main driver related to interpreters increasing use, Directorate Admin use of agency to cover vacancies and bank use within Reception to cover sick leave.A favourable position from both Corporate £49k – Hotel £50k – has helped to reduce the over spend.**NON PAY COSTS AT MONTH 10**Total Non-Pay costs are overspent at Month 10 by -£1.771m. This is an improvement in the month of £707k, associated with the revised income SLAs now being finalised for 2023/24 and the associated funding reviews on clinical supplies.All Board categories, apart from ‘PPE’ are showing overspends YTD. Whilst a significant amount of work has been undertaken to increase non-pay budgets in line with the current SLA updates, there remains ongoing pressures across the system that require further work to ensure they are built into the on-going financial plan assumptions. This will ensure the recurring baseline non-pay budgets for 2024-25 reflect the funding required to deliver the activity levels within the 2024/25 ADP.The most significant pressure within non-pay continues to relate to the overspend on Utilities, reflecting the significant increase in cost per unit of both gas and electricity this year compared to planned estimates within the Financial Plan.**Table 7 – Non-Pay Summary****PHARMACY SUPPLIES -£162K (3.03% of Annual Budget)**The key drivers associated with this level of overspend will form part of a paper to focus on options available to change prescribing practices moving forwards. Some of these options may change current prescribing practice to ensure costs reflect the level of funding available.The Director of Pharmacy and the Assistant Director of Finance for Efficiency and Sustainability have been reviewing the key pressures across the Divisions, associated with higher costs drugs and high cost patients now being treated, particularly when they are in critical care.**SURGICAL SUPPLIES** **-£393k (1.21% of Annual Budget)**Surgical Supplies overspend across all Division’s has increased this month, most significantly within HL&D as a result of the activity increase in TAVI, Mitraclip and PFO -£191k. Further work is required to finalise these reviews, which will now form part of the 3 year Financial Plan process. This relates to the finalisation of the NSD SLAs, combined with the ongoing release of funding for NES increased activity via the topslice mechanism. This is a complex area for the Board and better data, systems and analysis are required to allow a fuller ability to understand the baseline budget but this release will help alleviate the associated current pressures. The work required to ensure this area is addressed will be considered as part of the ‘deep dives’ and the Sustainability and Value work programmes now being developed to inform the 3 year Financial Plan. The other areas of significant overspend in this area, as detailed further within the Divisional narratives, relate to theatre supplies within NES and expenditure across Cath labs in HLD, (some of which off-set with corresponding over-performance on SLA income).**LAB/RADIOLOGY SUPPLIES -£55k (2.88% of Annual Budget)**Total Labs and Radiology supplies are overspent. NES are showing an overspend of -£39k YTD. This in the main is due to increased costs within Anaesthetics Theatres at a total overspend of -£45k relating to Lab Costs Type 2 and disposable issues based upon the case-mix now YTD. These changes will be taken into account when reviewing the revised ADP for 24/25.HL&D are now showing a breakeven position, this relates to the additional NSD funding being released from the revised SLA reviews.**PPE** **£29k (0.28% of Annual Budget)**The variance for PPE has kept a favourable £29k position YTD. Corporate is now showing an underspend position in month due to the release of budget to cover contract charges within eHealth and Maintenance. NES is showing an over spend -£99k key factor of this is the Theatres spend over all areas. HL&D is also showing an over spend but this has reduced to -£37k after funding was released in previous month.**FM** **-£1.095m (10.08% of Annual Budget)**The key driver within FM continues to be the pressures on Utilities and clinical waste within the Corporate Division, with the YTD overspend now totalling -£364k.This is a combination of increase in volume as well as increasing unit costs for energy above the estimates agreed in the financial plan. These pressures will be built into the revised Financial Plan inflationary assumptions.The other areas of pressure within the Corporate Divisions relate to Catering and Shop expenditure of -£153k, which is offset with an over-recovery on catering income of £193k.NES is overspent by -£90k – Transport being the main overspend of -£60k in Hospital Ambulance service charges. The Division is currently reviewing the transport service to consider whether provision has to be reviewed in line with the funding available.HL&D overspend has reduced to -£63k – the main pressure of; disposables, laundry and cleaning materials. Budget was also released to cover the Organ Care System for staff transport due to retrieval travel to sites.The Hotel is overspent by -£419k YTD with the main drivers being Utilities -£154k, Laundry costs at -£76k, Food items -£118k and net all other budgets at -£71k. Whilst Laundry items and food costs are offset with increased income, the other pressures reflect the increasing unit costs experienced across this sector.**CS&R&S -£95k (0.52% of Annual Budget)**The over spend has reduced in month due to budget being released to offset non-recurring costs associated with International recruitment costs. Of the pressures within this area, NES is -£123k YTD - this mainly relates to the increase in Postage & Franking costs, driven by patient activity numbers, which is the main driver at -£105k YTD.  |
| **SECTION 4: NHS GOLDEN JUBILEE- DIVISIONAL PERFORMANCE** At Month 10, NHS Golden Jubilee has a Pay underspend of £462k and a Non-Pay overspend of -£1.384m. The following Table provides details of these variances for both Pay and Non-Pay together with an analysis over each of the 8 Divisions (with full analysis on the relevant Appendices).**Table 8 – Pay and Non-pay Variances by Division**

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|  | **Pay Costs** | **Non Pay Costs** | **Variance** |
| NES | 426,953  | -417,394  | 9,559  |
| HLD | 489,565  | -466,861  | 22,703  |
| Corporate | -122,997  | -466,108  | -589,106  |
| Hotel | -140,384  | -476,348  | -616,731  |
| CfSD | 0  | 0  | 0  |
| NHSSA | 0  | 0  | 0  |
| GJResearch | 60,799  | -48,554  | 12246 |
| Reserves/Others | -22,088 | 103,798  | 81,701  |
| **Total Pay** | **691,839**  | **-1,771,467**  | **-1,079,628**  |

* Appendix 1-Summary Finance Position (overall)
* Appendix 2-National Elective Services (NES)
* Appendix 3-Heart, Lung and Diagnostics (HLD)
* Appendix 4-Corporate (Corporate)
* Appendix 5-Golden Jubilee Conference Hotel (Hotel) (includes Income)
* Appendix 6-Centre for Sustainable Delivery (CfSD)
* Appendix 7-NHS Scotland Academy (NHSSA)
* Appendix 8-Golden Jubilee Research Institute (GJRI)
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| **SECTION 5: 2023/24 RRL ALLOCATIONS AND ANTICIPATED ALLOCATIONS****Table 9 – Current RRL allocations as at end January 2024**Whilst ongoing discussions with Policy teams have indicated allocations have been agreed, not all of these allocations have been received in the allocation letters to-date. Most notably 2023/24 Phase 1 and 2 pay funding as well as 2023/24 Pay award funding relating to ring-fenced allocations are yet to be finalised. A further meeting is planned with SG colleagues to finalise the 23/24 funding requirement for both expansive phases. |
| **SECTION 6: 2023/24 EFFICIENCY REQUIREMENT** There is a -£6.66m efficiency requirement within the Financial Plan to achieve the targeted break even position for 2023/24. **Full Year Non-Recurring Savings Plan**At Month 10 total savings of £6.297m have been identified (on a full year basis) with a remaining requirement of £369k still to be identified. The table below provides a summary of the work streams identified to-date.**Table 10**

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| **Work stream** | **YTD £m** | **Full Year £m** | **Recurring £m** | **Non-recurring £m** |
| Medical Recovery funding | £0.5m | £0.6m | £0.6m |  |
| Other Recovery funding | £1.0m | £1.2m | £1.2m |  |
| Nursing Initiatives (vacancies) | £2.09m | £2.3m |  | £2.3m |
| Medical Service plans | £0.3m | £0.3m |  | £0.3m |
| Other staffing (vacancies) | £1.5m | £1.7m |  | £1.7m |
| Savings in Labs contracts | £0.1m | £0.1m |  | £0.1m |
| Review of Mini BC Application | £0.08m | £0.08m |  | £0.08m |
| Review of Clinical Users & IFRS Leases | £0.07m | £0.07m |  | £0.07m |
|  |  |  |  |  |
| **Total Identified** | **£5.62M** | **£6.3m** | **£1.8m** | **£4.5m** |
| **Remaining Gap** |  | **£0.4m** | **£4.9m** |  |

**Sustainability & Value**The focus continues to be on identifying recurring efficiency savings. A more structured programme management approach is being taken forward in the identification and delivery of savings in 2023/24 with recruitment to the Sustainability and Value programme. This approach is designed to achieve at least 3% on a recurring basis (as required by SG guidance). Work has progressed on the “15 box grid” agreed with CEOs. In particular a review of temporary staffing expenditure across all staff groups has identified the current level of expenditure associated with funded vacant posts, as well as costs incurred to recover the Waiting Times Targets.Reviews of Pharmacy costs with the Director of Pharmacy will be undertaken in February/March to inform discussions planned with Divisions in identifying changes in prescribing practices, more in line with available funding streams.Procurement and finance are creating a detailed analysis tool to investigate the highest areas of expenditure where there will be opportunities to review current procurement and product mix across all specialties.This work will support the revised governance arrangements associated with ‘Achieving a Balanced System’. |
| **SECTION 7: NON CORE PERFORMANCE** Non-Core position at Month 10 is anticipated to be break-even (expenditure below matched by SG Income). All Assets Under Construction (AUC) that are in use will be put on the RAM system in Month8. There is currently no change to IFRS16 Leases.The main elements of Non-Core funding are shown in the table below:**Table 11**

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| **Category** | **Annual Budget** |
| Annually Managed Expenditure (AME) | 40,000 |
| Depreciation (Donated Assets) | 10,000 |
| Depreciation (Board Capital) | 9,296,000 |
| IFRS 16 Funding | 1,377,000 |
| **Total** | **10,723,000** |

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| **SECTION 8: CAPITAL INCOME AND EXPENDITURE** Capital allocations of £4.270m have been confirmed by Scottish Government at Month 10 with ‘anticipated’ allocations expected of a further £10.187m which would result in an overall funded 2023/24 Capital Plan of £14.457m.**Table 12**

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|  | **Confirmed****Allocation** | **Anticipated****Allocation** | **Total**  |
| Formula Core Capital | £2.691m | £0 | £2.691m |
| Academy Capital | £1.272m | £0 | £1.272m |
| National Infrastructure Board Equipment | £0.162m | £0 | £0.162m |
| 2022/23 Capital Allocation ‘returned’ | £0 | £1.887m | £1.887m |
| 2023/24 agreed additional allocations (three allocations agreed with SG) | £0 | £0.800m | £0.800m |
| NHS Academy | £0 | £0.500m | £0.500m |
| Phase 2 | £0 | £6.855m | £6.855m |
| NSD funding transfer for NSD Pods | £0.145m | £0 | £0.145m |
| **Total** | **£4.270m** | **£10.042m** | **£14.312m** |

Based on the above, the following is the Capital Expenditure Plan (V2) split across the various monitoring categories. **Table 13**

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| **Category** | **Capital Plan V2** |
| 1.Estates (Inc. Hotel and Academy) | £5.665m |
| 2.Medical Equipment (Inc. Academy) | £0.669m |
| 3.Information Management & Technology (IM&T) | £0.960m |
| 4.National Infrastructure Board Projects-Medical Equipment | £0.162m |
| **Total Core Capital** | **£7.456m** |
| 6.Phase 2 Expansion (estimate) | £6.855 |
| **Total Capital**  | **£14.312m** |

In addition to the above there is an anticipated capital allocation of £1.893m associated with Phase 2 Equipment under £5,000 which will be transferred from capital to revenue to fund these items over and above the Core capital resource limit. |

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| **Decision–** **(1) Approve the Summary Financial Report as at 31 January 2024 (Month 10)** |

**Michael Breen**

**Director of Finance**

**NHS Golden Jubilee**

**APPENDIX 1 – SUMMARY FINANCE POSITION**

**INCOME**



**EXPENDITURE**



**APPENDIX 2 DIVISIONAL ANALYSIS - NATIONAL ELECTIVE SERVICE (NES)**



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| **Analysis of the Division**NES has a favourable variance of £9k between Pay and Non Pay costs with the following key variances:Medical Staffing -£244k The key pressures across the Division YTD relate to agency and WLI costs associated with the following:-General Anaesthetics - £377kOrthopaedics - £159kOrthopaedics WLI slight increase in month to cover Consultant sickness absence but Phase 2 appointments continue to be made. Admin Staffing -£112kThe main driver of this is a -£124k overspend in NES – -£85k related to Interpreters within Booking Office, -£66k Band 7 Service Manager Assistants and -£20k bank usage at Reception.Surgical Supplies -£48kPrevious funding has been released to deliver the total activity plans agreed within the ADP, further work is required to ensure a complete understanding of the historic baseline and current funding requirements are sufficient, particularly in relation to Theatre budgets within Orthopaedics. The historic Stryker stocks have now ended and this has caused an increase in month spend. |

**APPENDIX 3 DIVISIONAL ANALYSIS - HEART, LUNG AND DIAGNOSTICS (HLD)**



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| **Analysis of the Division**HL&D has a favourable variance of £23k between Pay and Non Pay costs the following key variances: Medical Staffing -£105k The previous budget released from the NSD business cases helped release the historic pressure in ongoing cost pressures primarily within Cardiac & Thoracic budget which has gaps in the junior rota has meant the need to use ongoing Agency costs across Cardiac & Thoracic and Radiology. There is a new pressure from SNAHFs Consultants who are due a total payment of £88k due to additional backdated programmed activities which is the main cause of the in month cost pressure.Also CT Anaesthetics ongoing use of WLI £533k to cover gaps within service plans due to sickness absence. Pharmacy Supplies -£131kNSD funding of £640k has been released into this area due to cost pressures that relate to supplies in transplants and also increased supplies for Haematology. This increased budget has led to a more robust in month reduction in variance which is helping to reduce the YTD over spend.Surgical Supplies -£191k Budget was released in month of £200k to cover the increased costs of NSD ECMO Supplies within Perfusion. This increased budget release has meant that there has been a significant reduction in overspend this month.  |

**APPENDIX 4 DIVISIONAL ANALYSIS - CORPORATE**



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| **Analysis of the Division**Corporate is over by -£588k between Pay and Non Pay costs with the following key variances: Support Staffing -£158k The key areas of pressure within Corporate areas relate to the following:-Catering are -£32k HR are -£88kBudget has been released non-recurring this month to help cover the growing pressure in Catering, Housekeeping and HR services. These additional costs reflect the level of additional hours being incurred to cover Vacancies.HR is experiencing pressures across most areas YTD.E-Health have recruited to vacancies and this has resulted in a favourable variance as the consultancy costs to support key projects has reduced.FM -£522kThe main driver in this area is cost pressures within Utilities -£351k YTD, budget has been released in previous months from contingency reserves to reduce these pressures, but the supply and demand issues are pushing up prices.  |

**APPENDIX 5 DIVISIONAL ANALYSIS - HOTEL**



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| **Analysis of the Division – The hotel is budgeted at a deficit of -£1.045m (variances compared to this position)**The Hotel Pay is overspent by -£140k, Non Pay -£476k and Income over performed at £482k resulting in a Month 10 cumulative overspend of -£134k and actual YTD deficit of £1.012m. The following key variances:Income £482k - Income is over recovered with the main elements being Rooms and Conferences Expenditure -£617k overspend, reflecting the pressures across Utilities, Catering and Pays in delivering the level of income YTDA deep dive of the hotel operations is expected to be started before the end of this financial year.  |

**APPENDIX 6 DIVISIONAL ANALYSIS - CfSD**



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| **Analysis of the Division**No financial issues to be reported as the Funding related to CfSD will reflect the outturn position by year-end. |

**APPENDIX 7 DIVISIONAL ANALYSIS - NHS SCOTLAND ACADEMY**



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| **Analysis of the Division**No financial issues to be reported, although work continues with the Director of the Academy to firm up the forecast funding requirement for 2023/24.  |

**APPENDIX 7 DIVISIONAL ANALYSIS - GOLDEN JUBILEE RESEARCH AND DEVELOPMENT**



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| **Analysis of the Division**No financial issues to be reported other than a vacancy currently in the process of being filled. |

**APPENDIX 8 DIVISIONAL ANALYSIS - GOLDEN JUBILEE RESERVES AND MISCELLANEOUS**



**MISCELLANEOUS**



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| **Analysis of the Division**This area includes reserves and contingency budgets agreed within the Financial Plan.No financial issues to be reported. |