

**NHS GOLDEN JUBILEE**

**SUMMARY FINANCIAL REPORT**

**Month 10**

 **at 31st January 2025**

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| **FINANCIAL POSITION 31st January 2025 (Month 10)** |
| **EXECUTIVE SUMMARY** |
| 1. **2024/25 to 2026/27 FINANCIAL PLAN**

The current savings trajectory is £0.541m above the agreed level of the 2024/25 efficiency plan of **(£9.945m).** The ’Achieving the Balance’ Programme continues to review progress across each area of savings to maximise ideas as we move into the new financial year.**DELIVERY OF 2024/25 FINANCIAL PLAN**

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

The Year to Date (YTD) core revenue position as at the end of January 2025 is an adverse variance of -£0.118m ~ (0.056%). The Board continues to forecast a Break-even position for the end of this financial year.**2025/2026 TO 2027/28 FINANCIAL PLAN**

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

The revised draft 2025/26 to 2027/28 3 year plan was submitted to SG in January 2025 following approval at ELT. This shows a savings requirement of (£8.537m) for 2025/26, rising to (£10.011m) for 2026/27 and (£11.554m) for the final year of the plan in 2027/28. Savings plans for 2025/26 and beyond are still being developed with focus on Medicines Management, workforce transformation, Agency and Waiting List Initiatives and Procurement schemes.Given the scale of the challenge as we move into a 3 year planning cycle a more robust focus on identifying and delivering recurrent savings will be required.  |
| 1. **2024/25 CORE INCOME POSITION**

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

Income is £1.932m or 0.92% above the Financial Plan at Month 10. The key areas of over-performance relates to the Non West Of Scotland Boards’ SLAs, overperformance on SPVU and SACCS as well as VAT rebates. |
| 1. **2024/25 CORE EXPENDITURE POSITION**

Core Expenditure is -£2.050m or -0.97% above the Financial Plan at Month 10.**PAY COSTS**

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

Pay costs at Month 10 are underspent by £836k or 0.60% below the YTD budget. There continues to be pressures across medical staffing areas relating to WLIs and agency incurred YTD.Further analysis is provided within the relevant section of the main report.**NON PAY COSTS**

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

Non Pay costs at Month 10 are overspent by -£2.913m equating to -4.46% above the YTD budget across a number of Board Expenditure Categories. The YTD variance now reflects the activity undertaken against YTD planned activity along with ongoing cost pressures relating to energy costs, surgical supplies and medicines.Further analysis is provided within the relevant section of the main report. |
| 1. **2024/25 EFFICIENCY REQUIREMENT**

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

The -£9.945m efficiency requirement within the Financial Plan to achieve the targeted break-even position for 2024/25 will be achieved this year, albeit with a heavy reliance on non-recurrent measures. **FULL YEAR SAVINGS PLAN**The high level efficiency plan was agreed by Workstream and is taken forward within the ‘Achieving the Balance’ Programme. To-date **£9.296m** of savings have been delivered as at the end of January, £1,360k above the YTD plan. Forecast delivery of **£10.486m** by the year end is predicted based upon the Month 10 position, an overachievement of £541k. |
| 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** |

Core Capital allocations of **£5.556m** have been allocated by the Scottish Government with a further **£12.469m** expected to be confirmed later in the year.

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|   | **Expected Allocation** |
|   | **£m** |
| Formula Core Capital | 2.691 |
| 23/24 carried forward | 1.265 |
| Lifts | 0.705 |
| Academy Revenue to Capital | 0.228 |
| CT Scanner | 2 |
| Additional Core Funding | 2.7 |
| Energy Efficiency | 0.895 |
| **Total Core Allocation** | **10.484** |
|   |   |
| Phase 2 | 6.781 |
| Phase 2 Equipment | 0.344 |
| **Total Other Allocation** | **7.125** |
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| Asset Sales | 0.011 |
| Unutilised accruals | 0.221 |
| **Total Other Funding** | **0.232** |
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| **Total CRL** | **17.841** |
| Leases revenue to capital transfer | 0.416 |
| **Total CRL (including leases)** | **18.257** |

As at 31st January 2025, actual capital spend totalled £6.310m. This is regularly reviewed to ensure that projects are completed within the financial year. At this time we are forecasting that we will meet the forecast CRL by the end of March, with any small balances being carried forward into 25/26 with SG approval. The Strategic Capital programme Group approved a 5 year plan in October. This will continue to be reviewed and updated through the year. |
| **FINANCIAL REPORT AT 31st January 2025 (Month 10)**  |
| **SECTION 1: NHS GOLDEN JUBILEE- OVERALL POSITION**The table below provides the high level summary position of the Board as at the end of January 2025, at Month 10. The net position shows a **-£118k** adverse position, with over-recovery of income of **£1.932m** offsetting expenditure pressures of **-£2.050m**.**Table 1****Appendix 1** provides more detail on the overall position**.** |
| **SECTION 2: 2024/25 CORE INCOME POSITION** Income is **£1.932m** or 0.92% above the Financial Plan at Month 10. **REVENUE RESOURCE LIMIT (RRL)**RRL allocations for the year at Month 10 are currently anticipated at **£174.254m**. At Month 10, **£129.406m** has been released into the position. **£31.251m** of the annual RRL relates to the marginal SLAs undertaken within NES for other Territorial Boards. **Table 2****SERVICE LEVEL AGREEMENTS (SLA INCOME)**Total SLA income is **£1.022m** over-recovered at Month 10.**Table 3**Cardiac activity is above plan by **£333k** this relates to £557k NSD and £67k ACT and Junior Doctors in Month 10 offsetting the underperformance in NWoS.Thoracic activity is above plan by **£85k** but there has been a reduction in NWoS.Cardiology activity is above plan across NWOS by **£439k** relates to over performance of £52k SACCs and the underperformance in NWoS of £82k.SPVU is over performing by £166k in activity. **Table 4****HOTEL AND OTHER INCOME**GJ Conference Hotel income is -**£229k** under-recovered YTD. The main driver is the reduction in sales of food and beverages at **-£240k** and Health Club **-£24k** YTD but rooms including patient rooms are £29k over performed.Other Income sources that are over performing at **£1.139m** include R&D, Catering and Staff Secondment Invoicing to various health boards. |
| **SECTION 3: 2024/25 CORE EXPENDITURE POSITION**Total expenditure to date of £212.428m is ahead of the year to date budget of £210.378m resulting in an adverse variance of -£2.050m overall (-0.97%).* Pay Costs underspend of £964k,0.60%
* Non-Pay Costs -£2.913m, -4.46%

**PAY COSTS AT MONTH 10****Table 5 – Pay Costs****MEDICAL PAY COSTS** **Please note that the Medical Pay Award has been agreed and has been paid this month – Consultants 10.5% and Other Doctors 8.3% from April – September 2024 and a further 2.3% added from October – March 2025.**The overspend within Medical staff category is **-£728k** – the main drivers are within NES division with a high rate of WLI being paid but staff have now been recruited to some posts and the costs are showing a reduction. HL&D division are now showing a £326k underspend YTD the main driver of this is the vacancies within Cardiology but there has been recruitment to some vacancies this month.  The main areas of overspends are detailed further within the Divisional narratives. Efficiency savings of **£372k** have been factored into the YTD position relating to the WLI and Agency workstream for Medical staffing – they have underachieved by **-£143k** YTD. The key pressures within medical pay relates to medical agency costs and Waiting List initiative payments in the following areas:**Table 6 – Medical staff key expenditure pressures**

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| **Pressure** | **HLD** | **NES** | **Total** |
| **Agency:-** |  |  |  |
| Radiology | -£111k |  | -£111k |
| Cardiac Registrars | -£77k |  | -£77k |
| Ophthalmology |  | -£432k | -£432k |
| General Anaesthetics Registrars |  | -£5k | -£5k |
| Orthopaedics |  |  |  |
|  | **-£188k** | **-£437k** | **-£625k** |
| **Waiting List Initiatives:-** |  |  |  |
| Cardiac  | -£281k |  | -£281k |
| Cardiology | £49k |  | £49k |
| CT Anaesthetics | -£551k |  | -£551k |
| General Anaesthetics  |  | -£495k | -£495k |
| Orthopaedics |  | -£180k | -£180k |
| Ophthalmology |   |  -£255k |  -£255k |
| General Surgery |  |  -£690k | -£690k |
|  | **-£881k** | **-£1.620m** | **-£2.501m** |
| **Grand Total of Medical Pressures** | **-£1.069m** | **-£2.057m** | **-£3.126m** |

These pressures are partially offset with the level of vacancy underspends across both Divisions, demonstrating the current recruitment challenges faced by the Board.The 24/25 Pay Award has been funded into all the AFC Staff categories this month with arrears being made next month in Month 11.**NURSING PAY COSTS**Nursing pay costs are underspent by **£915k** at Month 10. This figure is after phasing part of the Nurse vacancy efficiency saving target of **£2.810m** into the position YTD.This reflects the on-going level of vacancies across the system and the scale of the on-going recruitment challenge. 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 underspends are **£173k** at Month 10. This is after **£344k** of efficiency savings have been factored into the YTD position relating to the vacancy management workstream for Clinical staffing – breaking even YTD. **SUPPORT PAY COSTS** Support pay costs in all divisions are showing an underspend of **£406k** YTD at Month 10. Efficiency savings of **£134k** have been factored into the YTD position relating to the vacancy management workstream for Support staffing. **ADMIN PAY COSTS**Admin pay costs are underspent by **£97k** at Month 10, NES is showing an overspend of -**£170k** also Hotel **-£45k** but all the other divisions are showing underspends. Efficiency savings of **£1.084m** have been factored into the YTD position relating to the vacancy management workstream for Administrative staffing – which has underachieved by **-£94k** YTD. **NON PAY COSTS AT MONTH 10**Total Non-Pay costs are overspent at Month 10 by **-£2.913m**. **Table 7 – Non-Pay Summary****PHARMACY SUPPLIES -£239K (5.19% of YTD Budget)**The key areas of pressure across pharmacy supplies relates to HL&D **-£309k** overspend YTD and NES **-£115k** underspend YTD with Corporate and Others **-£44k** overspend YTD.Savings identified to-date relate to specific medicine switches and contract changes totalling **£226k**, with a total saving target of **£500k** for the whole year. **SURGICAL SUPPLIES** **-£1.525m (4.61% of YTD Budget)**Surgical Supplies are overspent across all Divisions reflecting the increase in costs of the consumables and devices along with the increased activity undertaken against plan YTD. NES pressures are **-£1.091m** **YTD** total overspend. The main driver of this is the consumable costs from Stryker, the difficulties in dispute are pricing, receipting, delivering one quantity and invoicing for a higher amount also no delivery notes. Some credit notes have been received and this is reflected in the total costs.HL&D pressures are -**£369k** relates mainly to phasing of TAVI devices with increased activity in this area against plan. **LAB/RADIOLOGY SUPPLIES -£353k (21.37% of YTD Budget)**HL&D are showing an overspend of -**£314k** YTD. The main driver of this relates to Tissue Typing and SACCS Cath Lab increased use of Septal Occluders. Funding has only been provided at the level of the current SLA with NSD. A successful meeting with our colleagues at NHS GGC where an agreement has taken place on the historic lab invoices – payment will take place in Month 11. Further talks will take place to agree on costs for future lab tests which have increased this year and showing a pressure. **PPE** **-£311k (3.50% of YTD Budget)**All divisions are underspent but Corporate is the main driver of **-£377k** pressures relating to maintenance and contractual works across Estates and Facilities offset with underspends on service contracts and backlog maintenance YTD.**FM** **-£1.079 (9.74% of YTD Budget)**Corporate is **-£713k** overspent YTD – Utilities have continued to have high levels of spend and the water charges are high this year compared to 2023/24.HL&D overspend is **-£51k** the main pressure relating to disposables, laundry and cleaning materials associated with YTD activity. NES is overspent by **-£224k;** Transport being the main overspend of **-£70k** in Hospital Ambulance service charges and Provisions of **-£53k**.  **CS&R&S £593k (-9.83% of YTD Budget)**HL&D **-£114k YTD** – Postage and Printing, -£16k Advertising, -£20k travel and training and -£97k associated with recruitment costs -£19k YTD. NES **-£278k YTD** – Carriage, postage and stationery costs -£120k – travel and training -£153k – driven by increased patient activity numbers. Increased recruitment costs relating to medical staffing -£40kCorporate and Others underspend of £0.986m mainly reflects review of the provision relating to bad and doubtful debts following review, underspend in patient rooms and L&OD – which offsets the overspends of the other divisions.  |
| **SECTION 4: NHS GOLDEN JUBILEE- DIVISIONAL PERFORMANCE** At Month 10, NHS Golden Jubilee has a Pay underspend of **£864k** and a Non-Pay overspend of **-£2.913m**. The following Table provides details of these variances for both Pay and Non-Pay together with an analysis over each of the Divisions (with full analysis on the relevant Appendices).**Table 8 – Pay and Non-pay Variances by Division*** Appendix 1-Summary Finance Position (overall)
* Appendix 2-National Elective Services (NES)
* Appendix 3-Heart, Lung and Diagnostics (HLD)
* Appendix 4-Golden Jubilee Conference Hotel (Hotel) (includes Income)
* Appendix 5-Corporate & Others
* Appendix 5A-Centre for Sustainable Delivery (CfSD)
* Appendix 5B-NHS Scotland Academy (NHSSA)
* Appendix 5C-Golden Jubilee Research Institute (GJRI)
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| **SECTION 5: 2024/25 RRL ALLOCATIONS AND ANTICIPATED ALLOCATIONS****Table 9 – Current RRL allocations as at end January 2025**Whilst ongoing discussions with Policy teams have indicated allocations have been agreed, they have not all been received in the allocation letter for Month 10. The expectation was to receive at least 80% of all allocations by the end of June, but to-date the GJ has only received 59% of total expected allocations. Ongoing discussions with SG will continue around the outstanding allocations still to be received. |
| **SECTION 6: 2024/25 EFFICIENCY REQUIREMENT** There is a **-£9.945m** efficiency requirement within the Financial Plan to achieve the targeted break even position for 2024/25. **Full Year Savings Plan**The proposed Workstream Programme was approved by ELT in May. This remains largely unchanged, with the key update reflecting a reduced nursing vacancy factor, now offset with an increased financial flexibility opportunity of **£2.763m** The revised saving scheme by workstream and Division is summarised below.Through the Achieving the Balance Programme we are now showing an over performance in the efficiency savings of **£541k** by year end.**Progress to-date : Year to date Savings Plan**When assessing the YTD delivery of workstreams, finance have linked with key budget holders in identifying YTD savings. Key successes to date:-* HLD have identified potential procurement savings totalling £1.3m for the year relating to high cost consumables and devices. After the deep dive that has taken place and the identified £1.448m non-recurringly YTD at Month 10 the savings total has increased for the year.
* There is also an increase in financial flexibility to £2.763m for the year relating to newly identified areas.
* Nurse vacancies - whilst this reflects the underlying level of vacancies across the system, £2.810m of budget has been identified non-recurringly to-date to offset the revised annual nurse vacancy factor of £3.02m for the year.
* Admin savings – whilst this is a challenging workstream to deliver across the Clinical Divisions, £990k of budget has now been identified non-recurringly, mainly across corporate areas.

A measured approach to enhanced vacancy management is required to ensure clinical and corporate services are not severely impacted by holding vacancies unnecessarily.The table below provides a summary of savings identified YTD and the current forecast delivery based upon current schemes identified to-date:**Table 10**Of the total **£9.945m** savings target for the year, **£7.936m** has been phased into the Month 10 YTD position, with a total of **£9.296m** of this delivered YTD (**£541k** above the phased YTD plan).Whilst a significant proportion of this is down to the release of in-year financial flexibility, there have been a number of areas as noted above that have also contributed to the YTD position – most notably, Nursing vacancies and other vacancies to-date.The review of the full phased efficiency plan has been completed and the majority of the workstreams have been factored into the Divisional budgets reflecting the level of savings to be identified by the year end. Finance will continue to work closely with all budget holders to identify other opportunities and areas for efficiency savings within their divisions.The graph below provides a high level overview of the progress made to-date against the YTD plan by each workstream:-**Graph 1****Sustainability & Value**Achieving the Balance Programme has been integrated to the Board’s reporting structure, reviewing all workstreams for progress and update on risks and recurring delivery.The revised governance arrangements in place ensure all schemes are reviewed regularly to highlight all opportunities. All areas identified within the ’15 box grid’ have been built into the workstream areas the Board is progressing. 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.This has already supported the work undertaken in HLD in identifying potential savings across many areas. Further work is required to review similar areas across NES Division.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). Depreciation and AME elements will be reviewed as the year progresses to ensure Non-Core funding is increased to match any changes in-year.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) | 11,713,000 |
| Depreciation (Leases) | 807,000 |
| Total | 12,570,000 |

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| **SECTION 8: CAPITAL INCOME AND EXPENDITURE** As previously highlighted by Scottish Government, capital funding is only being made available to all Boards based upon their Resource Formula for Capital expenditure.This places a significant level of risk on the Golden Jubilee’s replacement programme for medical equipment and infrastructure changes that have been previously highlighted in our 5 year plan.A risk workshop was undertaken in May by the Capital Delivery Group (CDG) who risk rated all proposed capital schemes which created a prioritised list of all capital requests from the highest risk to the lowest risk. This list of priorities were subsequently approved by the Strategic Capital Programme Group (SCPG) and then by ELT.The original capital plan was based on anticipated allocations of £4.637m related to core, with Phase 2 and capitalised leases to be funded at expected levels as shown in the table below as £7.541m. In January 2025, a number of additional capital allocations were made available. This increase the core allocation to £10.484m and total allocation to £18.257m.The Table below provides a summary of the anticipated Capital Resource Limit (CRL) for 2024/25:**Table 12**

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|   | **Expected Allocation** |
|   | **£m** |
| Formula Core Capital | 2.691 |
| 23/24 carried forward | 1.265 |
| Lifts | 0.705 |
| Academy Revenue to Capital | 0.228 |
| CT Scanner\* | 2 |
| Additional Core Funding | 2.7 |
| Energy Efficiency\* | 0.895 |
| **Total Core Allocation** | **10.484** |
|   |   |
| Phase 2 | 6.781 |
| Phase 2 Equipment | 0.344 |
| **Total Other Allocation** | **7.125** |
|   |   |
| Asset Sales | 0.011 |
| Unutilised accruals | 0.221 |
| **Total Other Allocation** | **0.232** |
|  |  |
| **Total CRL** | **17.841** |
| Leases revenue to capital transfer | 0.416 |
| **Total CRL (including leases)** | **18.257** |

\*Expected, but internal approvals still underway |

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| **Decision–** **(1) Approve the Summary Financial Report as at 31st January 2025 (Month 10)** |

**Jonny Gamble**

**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**

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|  | **Annual Budget**  | **Year to Date Budget**  | **Year to Date Actual**  | **Year to Date Variance** |
| Pay Costs-Medical | -14,235,698  | -11,181,649  | -12,243,410  | -1,061,760  |
| Pay Costs-Nursing | -28,623,749  | -23,673,570  | -23,133,883  | 539,687  |
| Pay Costs-Clinical | -5,071,956  | -4,206,204  | -4,045,941  | 160,264  |
| Pay Costs-Support | -2,887,924  | -2,389,287  | -2,084,303  | 304,984  |
| Pay Costs-Admin | -6,784,988  | -5,665,105  | -5,835,299  | -170,194  |
| **Total Pay** | **-57,604,315**  | **-47,115,815**  | **-47,342,835**  | **-227,020**  |
|  |  |  |  |  |
| Pharmacy Supplies | -3,429,906  | -2,790,746  | -2,675,919  | 114,827  |
| Surgical Supplies | -17,904,115  | -14,529,996  | -15,621,005  | -1,091,009  |
| Lab/Radiology Supplies | -204,628  | -170,653  | -161,356  | 9,297  |
| PPE | -963,788  | -807,268  | -856,369  | -49,101  |
| FM | -840,192  | -701,680  | -926,147  | -224,467  |
| CS&R&S | -1,063,527  | -902,912  | -1,181,235  | -278,323  |
| **Total Non-Pay** | **-24,406,157**  | **-19,903,255**  | **-21,422,031**  | **-1,518,776**  |
|  |  |  |  |  |
| **Total Core Expenditure**  | **-82,010,472**  | **-67,019,070**  | **-68,764,866**  | **-1,745,795**  |

NES is overspent by **-£1.746m** between Pay and Non Pay costs with the following key variances:Medical Staffing -£1.053m The key pressures across the Division YTD relate to overspends associated with the following:-General Anaesthetics £324k-Pressures due to Consultants relating to WLI to cover gaps in rotasGeneral Surgery - £447k – Over performance but use of WLI/On Call to cover this Orthopaedics - £355k –Job change plans and additional WoS trainees Ophthalmology - non-recurring funding to cover the WLI being used to cover vacancies was released this month.Nursing Staffing £540kThis is showing a favourable position after £1.914m was removed to Efficiency Savings – this reflects the continued recruitment situation of vacancies. Surgical Supplies -£1.091MThe main pressure is the month overspend due to the problems with Stryker invoices that are being queried on pricing, delivery notes, in correct quantities, etc. There has been credit notes received from Stryker directly regarding the overpayments but still work to be done.CS&R&S -£278kThere are increased costs in the following areas:-Transport due to the increased activity of patients.Training Costs – this has been increasing over this financial year.Postage – again due to increase in activity – all divisional costs go through this cost centre. |

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



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| **Analysis of the Division**HL&D is overspent by -£365k between Pay and Non Pay costs the following key variances: Medical Staffing £326kContinuing to show an overall under spend but posts have been filled this month after therefore we should see a reduction in WLI and Agency costs. There continues to see Agency and WLI being used to cover sickness and vacancies at a cost of £1.069m YTD this is increasing each month.Pharmacy Supplies -£309kCath Labs are seeing a sharp increase in Omnipaque Contrast costs – NSD Pods and Critical Care are showing an over spend in drug costs.Lab/Radiology Supplies -£314k The main driver of the over spend is Perfusion and the costs of Cannulas – the budget in this area is being reviewed by finance with cost per case v activity to ensure the budget is robust.There is also an overspend within Lab Reagents as the company supplier has increased the price and we consigned to that supplier. |

**APPENDIX 4 DIVISIONAL ANALYSIS - HOTEL**





**APPENDIX 5 DIVISIONAL ANALYSIS – CORPORATE & OTHERS**

 

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| **Analysis of the Division**Corporate and Others are over by -**£403k** between Pay and Non Pay costs with the following key variances: Support Staffing - £95k Efficiency savings of **£134k** have been factored into the YTD position relating to the vacancy management workstream for Support staffing. Admin Staffing - £229kEfficiency savings of **£1.084m** have been factored into the YTD position relating to the vacancy management workstream for Admin staffing. FM -£781kCorporate is **-£713k** overspent YTD – Utilities has overspend is **-£692k**.  |

**Please note that Appendix 5 Divisional Analysis – Corporate & Others – includes the total budget and costs from Appendices 5A, 5B and 5C**