

Report to the Trust Board: 7th February 2012	Agenda item: 2.1
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Title	Integrated Performance Report Month 9 – 2011/12
Sponsoring director	Anne Gibbs, Director of Operations and Strategy
Author (s)	Executive Team
Report previously considered by	Finance and Performance Committee

Executive summary
This paper provides an integrated view of Trust Performance for December 2011.

Trust Objectives	
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Risk & Assurance	This report provides assurance on finance and quality performance.
Related assurance framework entries	<ol style="list-style-type: none"> 1. Improved Health Outcomes, Clinical Effectiveness, Patient Experience & Safety 2. To deliver financial and strategic sustainability 3. To ensure we have a highly skilled, motivated and productive workforce
Legal implications/regulatory requirements	Implications for CQC, DH and Commissioner Regulatory requirements.
Consultation pathway	None

Action required by the Trust Board	For noting.
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Scorecard for December 2011

Ref	Indicator	Units	10-11 Out-turn	Sep-11	Oct-11	Nov-11	Dec-11	Target (see notes)	11-12 YTD	Notes
1.01	Trust HSMR	Ratio	82	101.4	101.6	-	-	<90	97.0	N; ye
1.02	Never Events	Cases	1	0	0	0	0	<=0	0	N; ye
1.03	Serious Incidents	Cases	47	8	8	16	2	<=45	66	T; ye
1.04	MRSA (Trust Apportioned)	Cases	5	0	0	0	0	<1	2	N; q (ye=3)
1.05	Cdiff (Trust Apportioned)	Cases	27	1	1	3	1	<5	23	N; q (ye=23)
1.06	Single Sex Accommodation breaches	count	282	0	0	0	0	<=0	0	N; ye
2.01	Monitor Service Performance Score	Score	-	1.0	-	-	0.0	<1	-	N; q
2.02	NHS Performance Framework score	Score	-	2.45	-	-	2.45	>2.40	-	N; q
2.03	A&E 4-hour target	%	97.8	97.10	97.47	98.58	97.34	>98	97.87	LS; ye
2.04	Indicator 2 - reattend within 7 days	%	9.7	8.0	8.3	8.0	8.6	<=5	8.9	N; ye
2.05	Indicator 3 - Admitted episode length (mins)	95th P	-	358.0	361.0	240.0	353.0	<=240	-	N; ye
2.06	Indicator 3 - Non Admitted episode length (mins)	95th P	-	231.0	228.0	230.0	233.0	<=240	-	N; ye
2.07	Indicator 4 - left without being seen	%	3.4	2.6	2.7	3.4	2.5	<=5	2.5	N; ye
2.08	Indicator 6 - Time to initial assessment	95th P	-	11.0	10.0	14.0	16.0	<=15	-	N; ye
2.09	Indicator 7 - Time to treatment	Median	-	64.0	62.0	67.0	60.0	<=60	-	N; ye
2.1	High risk TIA patients treated within 24 hours	%	80.2	87.5	90.0	100.0	72.7	>=90	86.8	L; ye
2.11	Inpatient stroke unit standard	%	85.5	95.0	94.4	100.0	100.0	>=95	93.5	L; ye
2.12	Cancer 2 wk standards	%	95.6	95.6	97.4	95.9	94.9	>=93	95.6	N; ye
2.13	Cancer 31 day standards	%	99.8	100.0	100.0	97.4	100.0	>=93	99.7	N; ye
2.14a	Cancer Plan 62 Day Standard (Tumour)	%	93.9	94.3	82.5	100.0	93.3	>=85	91.5	N; ye
2.14b	CRS 62 Day Screening Standard (Tumour)	%	89.8	71.4	-	100.0	66.7	>=90	81.1	N; ye
2.14c	CRS 62 Day Upgrade Standard (Tumour)	%	100.0	100.0	100.0	100.0	100.0	-	100.0	N; ye
2.15	Outpatient DNA rate	%	11.3	12.1	11.8	11.6	12.4	<=10	11.4	T; m (ye =)
2.16	Trust Cancelled outpatient appointments	%	10.9	9.2	9.1	10.1	11.1	<=10	10.8	T; m (ye =)
2.17	Outpatient new:follow-up (2011/12)	Ratio	-	2.0	1.9	2.0	1.8	<1.7	2.0	L
2.18	Day case rate	%	79.0	81.9	82.1	79.4	85.8	>=82.5	81.8	T; ye
2.19	Theatres - Elective utilisation	%	-	81.3	79.1	80.9	79.6	>=80	-	T; ye
2.20	Cancelled operations	Cases	73	3	0	8	3	<=5	28	N; ye
2.21	Adult ALOS (less stays >20 days)	Days	2.7	2.6	2.6	2.5	2.6	<=2.45	2.5	T; m (ye =)
2.22	Adult stays >20 days - % of all beddays	%	20.2	16.8	16.0	17.4	19.0		17.6	T; m (ye =)
2.23	RTT Admitted Median	value	-	11.6	12.3	10.6	9.5	<11.1	-	N; ye
2.24	RTT Non-Admitted Median	value	-	5.7	5.5	5.3	6.1	<6.6	-	N; ye
2.25	Readmissions - elective	count		26	25	23	33	26	214	N; m
2.26	Readmissions - non-elective	count		178	180	172	137	211	1562	N; m
3.01	Appraisals completed in the last 12 months	%	80.0	76.6	77.8	76.5	77.3	>=90	77.3	T; ye
3.02	Sickness & Absence	%	2.7	2.5	2.6	4.1	-	<=2.5	2.7	T; ye
3.03	Mandatory training completed in last 12 mths	%	78.7	79.7	78.7	77.7		83.6		T; ye
3.04	Staff numbers v plan	WTE*	59	-32	16	16	-23	<=0	32	T; ye
4.01	Monitor Risk Rating	-	2	2	2	2	2	2	2	N; ye
4.02	I&E	£'000	214	221	67	242	-11	1,400	1,099	T; m (ye =)
4.03	CIP	£'000	9,400	983	1,191	1,283	1,291	12,200	8,408	T; m (ye =)
4.04	Pay	£'000	91,056	7,098	7,164	7,221	7,402	85,885	65,433	T; m (ye =)
4.05	Non-Pay	£'000	58,265	4,879	4,833	4,930	4,922	57,426	43,429	T; m (ye =)
4.06	Cash	£'000	708	3,318	6,199	4,830	6,057	1,200	6,057	T; m (ye =)

Notes: Target type - N= national; L = local; T = Trust; S = stretch. Target profile - m = monthly; q = quarterly; ye = year end. For monthly/quarterly targets, the eventual year end is shown in brackets i.e. (ye = 90)

Quality of Care

Indicator	Units	10-11 Out-turn	Sep-11	Oct-11	Nov-11	Dec-11	Target (see notes)	11-12 YTD
Trust HSMR	Ratio	82	101.4	101.6	-	-	<90	97.0
Never Events	Cases	1	0	0	0	0	<=0	0
Serious Incidents	Cases	47	8	8	16	2	<=45	66
MRSA (Trust Apportioned)	Cases	5	0	0	0	0	<1	2
Cdiff (Trust Apportioned)	Cases	27	1	1	3	1	<5	23
Single Sex Accommodation breaches	count	282	0	0	0	0	<=0	0

Trust HSMR

The HSMR is near average at 101.6 in October; revision of some codes for palliative care patients is expected to bring the HSMR down for both September and October.

Never Events

There have been no Never Events in December, and the YTD remains zero.

Serious Incidents

Two serious incidents (SIs) were reported in December. These were: 1 unexpected maternal admission to ITU and 1 patient fall, they are currently under investigation in line with the SI policy. In addition we reported 4 community acquired pressure ulcers which have all been de-escalated in month. This means that WMUH reports the serious incident initially and then, when another organisation accepts responsibility and reports the incident themselves, it is de-escalated as it is no longer attributed to WMUH.

The SI reporting format has been reviewed. A re-validation exercise was undertaken looking at all SIs reported from the 1st April 2011. A standardised reporting format has now been agreed and the Trust scorecard amended to reflect this. All de-escalated incidents will be removed from any future reporting. A breakdown of SI data will be reviewed monthly analysing trends/areas of concern and reported bi monthly to the Trust Board.

MRSA Bacteraemia (Trust-apportioned)

There were no cases of hospital-apportioned MRSA bacteraemia in December 2011. There were two cases earlier in the year (one in April and one in June)

and there have been 237 days since the last case. The upper limit for the year is 3 cases.

C. difficile (Trust-apportioned)

There was one case of hospital-apportioned *C. difficile* in December 2011. The total for the year to date is 23, the upper limit for the year. We are at risk of breaching the upper limit of 23. Work continues to mitigate the risk:

- Key areas identified for improvement action are taking personal responsibility for maintaining good IPC practice, completion of the IPC Risk Assessment form for admissions and transfers, completion of the checklist for bed cleans, and following the new algorithm for detection and management of *C. difficile* patients. Medical staff are to review antibiotics, laxatives and proton pump inhibitor prescriptions daily.
- Weekly multi-disciplinary *C. difficile* meetings continue, where all known cases are discussed and reviewed. The process has been strengthened to review all new cases as soon as possible (Clinical Consultant, Ward Manager, Consultant Microbiologist and Infection Prevention and Control Nurse). This meeting is to assess risk factors, identify concerns, give feedback on hand hygiene and other audits, and promote engagement of medical staff.
- Maintaining a high level of awareness will be essential to sustain compliance with good practice.

Single Sex Accommodation Breaches

There have been no single sex accommodation breaches year to date.

CQUINs

	Units	Q1	Q2	Oct-11	Nov-11	Dec-11	Q3	Target	11-12 YTD
CQUIN 1 VTE % assessment	%	90.3	91.0	86.0	89.5	79.8	85.1	90.0	88.8
CQUIN 2 Patient Experience		-	-	-	-	-	-	-	-
CQUIN 3 Pressure Ulcers (grades 2-4)	count	44	34	11	11	13	35	35	113
CQUIN 4 End of Life Care		-	-	-	-	-	-	-	-
CQUIN 5 Maternity		48.2	61.3	63.0	66.6	-	64.8	51.2	57.2
CQUIN 6 ERP TOTAL (% seen on day of admission)	%	95.5	94.4	96.2	100.0	100.0	98.9	80.0	96.1
CQUIN 6 ERP TOTAL (reducing LOS)	days	4.0	4.0	3.0	4.0	4.0	4.0	4.0	4.0
CQUIN 7 Assessment by Consultant TOTAL		25.0	69.5	71.5	73.2	63.4	70.0	55.0	69.8
CQUIN 7 Assessment by Consultant Surgery		-	38.7	63.0	54.8	25.0	57.3	55.0	48.9
CQUIN 7 Assessment by Consultant Medicine		-	83.0	75.1	79.3	65.2	73.5	55.0	76.8
CQUIN 8 Fractured Neck of Femur (operated within 24 hours)	%	37.8	78.0	81.3	73.9	94.4	86.7	70.0	83.5

Whilst the Trust has achieved the VTE assessment CQUINs indicator for Q2, performance in Q3 has been below the expected target of 90%. The Trust achieved a Q3 score of 85.1% with the full year to date position of 88.8%. The following plans are in place to address this, the surgical division will ensure VTE assessments are completed on admission and also confirm in theatres if the assessment is not complete. In addition there will be a continued focus at bed meetings and a daily listing to consultants and operational teams on all patients requiring assessment.

The assessment within 12 hours of admission by the surgical consultant has slipped this month to 25.0% from 54.8% in November. Plans are in place to review the assessment by consultant on a more frequent basis in Q4. All the other CQUIN indicators remain compliant.

All CQUINs for Q3 with the exception of VTE remain compliant. As we enter Q4 CQUIN 2 – Patient Experience and CQUIN 4 – End of Life Care, both have tentative assumptions regarding compliance.

End of Life Care continues to require negotiation with Commissioners and Patient Experience is subject to external survey results.

Operational Performance

Unscheduled Care

Indicator	Units	10-11 Out-turn	Sep-11	Oct-11	Nov-11	Dec-11	Target (see notes)	11-12 YTD
A&E 4-hour target	%	97.8	97.10	97.47	98.58	97.34	>98	97.87
Indicator 2 - reattend within 7 days	%	9.7	8.0	8.3	8.0	8.6	<=5	8.9
Indicator 3 - Admitted episode length (mins)	95th P	-	358.0	361.0	240.0	353.0	<=240	-
Indicator 3 - Non Admitted episode length (mins)	95th P	-	231.0	228.0	230.0	233.0	<=240	-
Indicator 4 - left without being seen	%	3.4	2.6	2.7	3.4	2.5	<=5	2.5
Indicator 6 - Time to initial assessment	95th P	-	11.0	10.0	14.0	16.0	<=15	-
Indicator 7 - Time to treatment	Median	-	64.0	62.0	67.0	60.0	<=60	-
High risk TIA patients treated within 24 hours	%	80.2	87.5	90.0	100.0	72.7	>=90	86.8
Inpatient stroke unit standard	%	85.5	95.0	94.4	100.0	100.0	>=95	93.5

The Trust continues to perform well in relation to the 95% target of all patients being seen, treated and discharged from the Emergency Department within 4 hours. Performance in December was however slightly below the 98% London target. As planned, additional beds were used at times of peak activity during December as part of the local health economy winter surge plan. The Trust successfully managed the Christmas and New Year holiday period working closely with colleagues in primary care, community care and social services.

Works on the development of the Urgent Care Centre continue with building completion expected mid February and a 'go live' date of the 20th March. The Trust will then be jointly reporting with Hounslow and Richmond Community Healthcare the site performance in relation to the A&E Quality Indicators 8 patients were treated on the high risk TIA pathway during December. 3 patients chose to request their appointment outside of this timeframe. The Stroke Team continue to work proactively with patients and GPs to ensure access within 24 hours for an appointment.

Scheduled Care

Indicator	Units	10-11 Out-turn	Sep-11	Oct-11	Nov-11	Dec-11	Target (see notes)	11-12 YTD
Cancer 2 wk standards	%	95.6	95.6	97.4	95.9	94.9	>=93	95.6
Cancer 31 day standards	%	99.8	100.0	100.0	97.4	100.0	>=93	99.7
Cancer Plan 62 Day Standard (Tumour)	%	93.9	94.3	82.5	100.0	93.3	>=85	91.5
CRS 62 Day Screening Standard (Tumour)	%	89.8	71.4	-	100.0	66.7	>=90	81.1
CRS 62 Day Upgrade Standard (Tumour)	%	100.0	100.0	100.0	100.0	100.0	-	100.0
RTT Admitted Median	value	-	10.1	11.6	12.3	10.6	<11.1	-
RTT Non-Admitted Median	value	-	5.0	5.7	5.5	5.3	<6.6	-

Cancer targets continue to be met with the exception of the 62 day screening standard. In month, there was one breach of this standard. The NWL Cancer Network is leading a re-design of the patient pathway across the cancer centre and cancer units in order to improve performance.

The Trust continues to meet referral to treatment times for both admitted and non admitted pathways. The final quarter of this year will see an increase in elective work as part of the Access Initiative monies received from the Department of Health.

Performance Improvement

Outpatient DNA rate and Trust cancelled outpatient appointments have shown a slight increase in December. Detailed analysis by specialty is underway.

Similarly, a detailed analysis regarding length of stay is underway. Although average length of stay for patients has increased slightly, it remains less than 2010-11 outturn as does the % of all bed days where a patient's length of stay is over 20 days. This year there have been a number of changes made to the management of the bed base and to the community services provided. It is therefore important to understand the drivers of changes in length of stay to inform health economy as well as internal planning for 2012-13.

Readmissions for elective patients increased in December. A clinical audit of the notes is underway and a verbal update will be provided.

Indicator	Units	10-11 Out-turn	Sep-11	Oct-11	Nov-11	Dec-11	Target (see notes)	11-12 YTD
Outpatient DNA rate	%	11.3	12.1	11.8	11.6	12.4	<=10	11.4
Trust Cancelled outpatient appointments	%	10.9	9.2	9.1	10.1	11.1	<=10	10.8
Outpatient new:follow-up (2011/12)	Ratio	-	2.0	1.9	2.0	1.8	<1.7	2.0
Day case rate	%	79.0	81.9	82.1	79.4	85.8	>=82.5	81.8
Theatres - Elective utilisation	%	-	81.3	79.1	80.9	79.6	>=80	-
Cancelled operations	Cases	73	3	0	8	3	<=5	28
Adult ALOS (less stays >20 days)	Days	2.7	2.6	2.6	2.5	2.6	<=2.45	2.5
Adult stays >20 days - % of all beddays	%	20.2	16.8	16.0	17.4	19.0		17.6
Readmissions - elective	count		26	25	23	33	26	214
Readmissions - non-elective	count		178	180	172	137	211	1562

Monitor Compliance Framework 2011-12

Service Performance Score

Service Performance Score		Quarter 3		
	Target	Target	Achievement	Weighting
Acute targets				
Clostridium Difficile – meeting the Clostridium Difficile objective	0	7	5	0.0
MRSA – meeting the MRSA objective	0	1	0	0.0
All cancers: 31-day wait for second or subsequent treatment, comprising either:				
<i>surgery</i>	94%		98.6%	0.0
<i>anti cancer drug treatments</i>	98%		100.0%	0.0
<i>radiotherapy</i>	94%		100.0%	0.0
All cancers: 62-day wait for first treatment, comprising either:				
<i>from urgent GP referral to treatment</i>	85%		91.6%	0.0
<i>from consultant screening service referral</i>	90%		75.0%	0.0
Referral to treatment waiting times – admitted (95th percentile)	23 w		17.9	0.0
Referral to treatment waiting times – non-admitted (95th percentile)	18.3 w		13.3	0.0
Cancer: two week wait from referral to date first seen, comprising either:				
<i>all cancers</i>	93%		95.6%	0.0
<i>for symptomatic breast patients</i>	93%		97.2%	0.0
A&E (from Q2)				
<i>Total time in A&E (≤4 hours)</i>	95%		97.79%	0.0
				0.0

The quarterly Monitor Compliance Framework Service Performance Score is shown above. The Trust is currently rated as 'Green' (score <1) an improvement from quarter 2.

Non Foundation Trusts will continue to be monitored through the NHS Performance Framework. The Service Performance Score for this is rated 'Green' with a score of 2.45 (estimated position).

Workforce

Indicator	Units	10-11 Out-turn	Sep-11	Oct-11	Nov-11	Dec-11	Target (see notes)	11-12 YTD
Appraisals completed in the last 12 months	%	80.0	76.6	77.8	76.5	77.3	>=90	77.3
Sickness & Absence	%	2.7	2.5	2.6	4.1	-	<=2.5	2.7
Mandatory training completed in last 12 mths	%	78.7	79.7	78.7	77.7		83.6	
Staff numbers v plan	WTE*	59	-32	16	16	-23	<=0	32

The appraisal rate for December 2011 increased by 0.76% to 77.26%. The best performing Clinical Division was Surgery with 84.11% of appraisals completed, closely followed by Clinical Support Division on 82.81%. Within the Corporate areas Workforce & Development had the highest percentage exceeding the target with 92.31%. All Corporate departments are expected to exceed the 90% milestone and actions have been put in place for them to support them to achieve this target. Women and Children's remains the area of concern and maternity services is the specific issue for this Division. Discussions have been progressed with this service to support them to improve performance.

The Trust's sickness absence percentage for the month of December 2011 was 3.90%, which was 0.88% above the same time period last year. The cumulative sickness rate for the period of April to December 2011 is 2.83%. The Trust currently has 8 wards on the monthly e-rostering system, with a further 2 going through in January 2011. The Trust should significantly benefit from improved and timely absence reporting/monitoring. Overall, the trust continues to have excellent performance outcomes in managing sickness absence and is 1st out of 36 organisations in the small acute hospitals category and 39th out 425 organisations when all types of organisations are included. This is based on NHS Information Centre information for the financial year so far.

The Infection Control rate for the Trust has remained, slightly under the target rate for the past 3 months and currently stands at 82.05% for December 2011. Surgical Division continues to have the highest compliance with 88.77%, with

Clinical Support the lowest at 70%. Fire Training compliance has decreased for the third month running to 70.81%. Women's & Children's Division has the highest compliance rate of the Clinical Division with 79.2%. Within the Corporate Services Dept of Nursing & Midwifery, as well as Workforce & Development both had compliance above 90%. All Divisions have been asked to refocus their training efforts on mandatory training and within this to aim for 100% compliance with infection control training.

Summary financial Position

The planned out turn position for 2011/12 is an in-year surplus of £1.4m and the Trust remains on-track to achieve this.

The cumulative position to month 9 (December) is a surplus of £1,099k with a £4k favourable variance against budget.

For December, the Trust is showing a £10k deficit, and a £20k adverse variance against budget. There was £416k of over performance on income in the month mainly on emergency activity. However, there has been in-month over spending on expenditure budgets of £436k.

The Cost Improvement Programme of £12.2m for the year is central to the achievement of the Trust's financial plans. At the end of December £8.4m of savings have been realised, which is on-target at £6k more than the planned figure.

Capital projects are broadly on-target for the year-to-date, although the cash out flow associated with the programme is £0.3m behind plan. This relates to the timing of purchases only and it is expected that the forecast £5.1m plan will be achieved on the approved capital schemes.

The cash balance at month end was £6.0m, which is £3.2m more than in the plan. This is mainly because £1.2m over paid by NHS Hounslow that is due to be repaid. Expenditure on capital has also been lower than projected (as noted above) with the cash outlay to date being £1.4m less than planned for. The Public Sector Payment Policy (PSPP) was 94% in December, which is only slightly lower than the National target of 95%.

Trust Financial Dashboard

		Annual	In Month			Year to Date			Year end
		Plan	Plan	Actual	Variance	Plan	Actual	Variance	Forecast
Income	£'000	146,549	11,897	12,314	416	109,141	109,961	820	147,459
Pay	£'000	(87,862)	(7,229)	(7,402)	(174)	(65,438)	(65,433)	5	(87,812)
Non-pay	£'000	(57,286)	(4,659)	(4,922)	(262)	(42,607)	(43,429)	(821)	(58,246)
I&E Surplus / (Deficit)	£'000	1,400	9	(10)	(20)	1,096	1,099	4	1,400
EBITDA	%	9.0%	8.4%	7.9%	-0.5%	9.1%	9.1%	-0.1%	9.0%
Monitor Risk Rating		2		2			2		2
CIP	£'000	12,200	1,290	1,290	0	8,402	8,408	6	12,201
Capital	£'000	5,160	416	126	290	3,942	3,386	556	5,160
Cash Balance	£'000	(51)				2,793	6,057	3,264	0
Cash Movement	£'000	(50)	593	1,227	634	1,743	5,006	3,264	(50)
PSPP	%	95%	95%	94%	(1%)	95%	91%	(4%)	91%

Highlights

- I&E position £10k deficit in-month
- Cash balance of £6m
- Capital commitments £0.1m in November
- PSPP of 94% in the month

Monitor Risk Rating

Financial Criteria	Weight (%)	Metric to be scored	Plan		Year-to-Date		Year End Position	
			Plan	Rating	YTD	Rating	Forecast	Rating
Achievement of Plan	10	EBITDA achieved (% of plan)	100%	5	100%	5	100%	5
Underlying Performance	25	EBITDA margin (%)	9.11%	4	9.07%	4	9.08%	4
Financial Efficiency	20	Return on Assets - excluding dividend (%)	6.35%	5	11.87%	5	6.35%	5
	20	I&E surplus margin net of dividend (%)	0.97%	2	1.00%	2	0.96%	2
Liquidity	25	Liquidity Ratio (days)	10	2	11	2	13	2
Overall Score				2		2		2

Note: If financial efficiency score is one, then the overall rating is automatically one also.

Financial Criteria	Metric to be scored	Rating Categories				
		5	4	3	2	1
Achievement of Plan	EBITDA achieved (% of plan)	100	85	70	50	<50
Underlying Performance	EBITDA margin (%)	11	9	5	1	<1
Financial Efficiency	Return on Assets (excluding dividend %)	6	5	3	(2)	<(2)
	I&E surplus margin net of dividend (%)	3	2	1	(2)	<(2)
Liquidity	Liquidity Ratio (days)	35	25	15	10	<10

Finance Risk Rating	Rating 5	Lowest Risk - no regulatory concerns
	Rating 4	No regulatory concerns
	Rating 3	Regulatory concerns in one or more components.
	Rating 2	Significant Risk
	Rating 1	Highest Risk

Scorecard

This scorecard has been designed by Monitor to assess financial governance risk from four key indicators to give a consistent basis of measurement across Foundation Trusts. The calculation therefore indicates to the Trust that areas where there are financial risks.

The overall score of 2 represents a significant risk, which in Foundation Trust terms, would prompt a high level of monitoring and potential intervention. Based on the calculation criteria the fact that the Trust has scored 2 on one indicators means that this is the maximum score that can be achieved.

Achievement of Plan

The financial plan is to achieve a £1.4m surplus and is achieving against this target for the year-to-date, hence the maximum score of 5, against this criterion.

Underlying Performance

The in-year score of 4 reflects the Income & Expenditure surplus for the year to date.

Financial Efficiency

The EBITDA (Earnings before interest, tax, depreciation and amortisation) is performing well so the score is 5 as expected.

The score indicator of 2 for the I&E net of dividend calculation reflects the Trust's high level of finance charges. These include annual interest on the PFI (£3.4m) and the Department of Health loan (£0.8m).

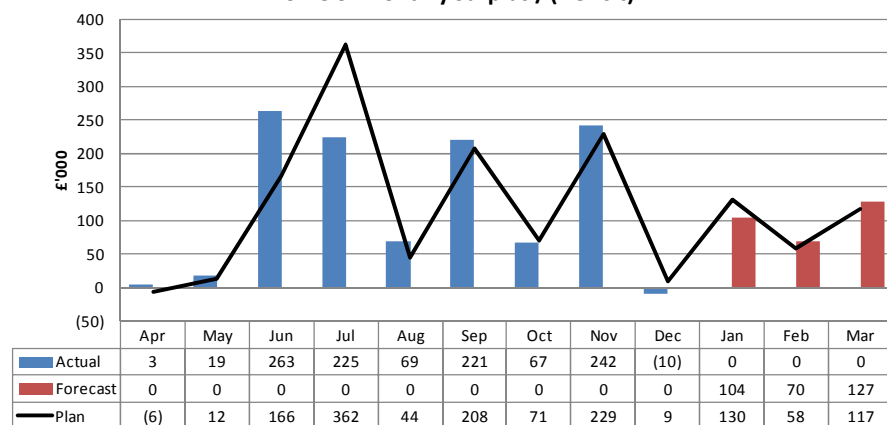
Liquidity Ratio

The score of 2 reflects our working capital loan.

Income and Expenditure Performance in Month

	Plan £000s	Actual £000s	Variance £000s	Last Month Actual £000s
Operating Revenue				
NHS Clinical Income	10,745	11,164	418	11,200
Other Income	1,151	1,149	(2)	1,192
Total Operating Revenue	11,896	12,312	416	12,392
Operating Expenses				
Pay	(7,229)	(7,402)	(174)	(7,221)
Non-Pay	(3,669)	(3,931)	(263)	(3,949)
Total Operating Expenses	(10,897)	(11,333)	(436)	(11,171)
EBITDA	999	979	(21)	1,221
Depreciation	(438)	(437)	0	(438)
PDC Dividend	(150)	(150)	0	(150)
Interest Payable	(68)	(68)	0	(68)
Interest Payable on PFI	(335)	(335)	0	(324)
Interest Receivable	1	2	1	1
Surplus / (Deficit)	9	(10)	(20)	242

Profile of Monthly Surplus / (Deficit)



I&E in-month

The in-month position for December is a £10k I&E deficit, which reflects a £20k adverse variance against budget. This is due to a favourable variance of £416k on income but a £436k adverse variance on expenditure.

Income

The over recovery against plan this month reflects the same pattern as previous months on A&E, non elective spells and day case activity.

Pay

There is a £174k over spend on pay budgets this month. There are two continuing areas of cost pressure – clinical administration as the new structure is being embedded and in Midwifery, where temporary staffing usage is high to manage high activity levels in the Unit. A&E budgets were also over spent this month on nursing and medical staffing.

Non-pay

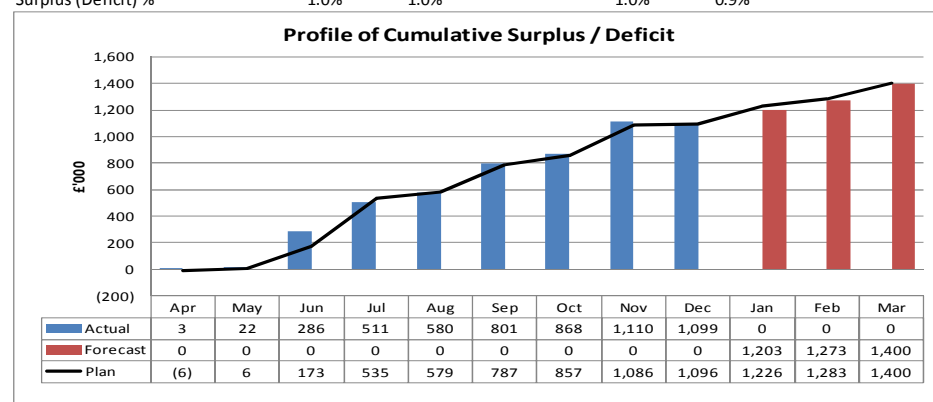
Non pay budgets are £263k overspent in December, with the main adverse variances being in the following areas:

- Clinical Supplies and Consumables (£129k in-month over spend) – Partly due to increased activity and partly due to increase in stock levels over Christmas.
- Clinical Administration (£37k in-month over spend) – non recurrent interim costs and over spending on transcribing budget.
- Drugs – the budget for the Women's and Children's division is £27k over spend this month.
- Sterile Services – the over spend was £19k this month (year-to-date £34k) due to over performance on the contract levels. This is being investigated.

Income and Expenditure Performance year-to-date

	Year-to-date			Forecast		
	Plan £000s	Actual £000s	Variance £000s	Plan £000s	Actual £000s	Variance £000s
Operating Revenue						
NHS Clinical Income	98,656	99,226	570	132,694	133,299	606
Other Income	10,476	10,725	249	13,843	14,147	304
Total Operating Revenue	109,132	109,950	819	146,536	147,446	910
Operating Expenses						
Pay	(65,438)	(65,433)	5	(87,862)	(87,812)	50
Non-Pay	(33,722)	(34,542)	(820)	(45,461)	(46,421)	(960)
Total Operating Expenses	(99,161)	(99,976)	(815)	(133,324)	(134,233)	(910)
EBITDA	9,971	9,975	4	13,213	13,213	0
Depreciation	(3,938)	(3,937)	0	(5,250)	(5,250)	0
PDC Dividend	(1,360)	(1,360)	0	(1,810)	(1,810)	0
Interest Payable	(615)	(615)	0	(820)	(820)	0
Interest Payable on PFI	(2,972)	(2,974)	(2)	(3,945)	(3,945)	0
Interest Receivable	9	11	2	12	12	0
Surplus / (Deficit)	1,096	1,099	4	1,400	1,400	0

EBITDA %	9.1%	9.1%	9.0%	9.0%
Surplus (Deficit) %	1.0%	1.0%	1.0%	0.9%



I&E Year to Date

The Income and Expenditure position for the year-to-date is a £1,099k surplus, which is £4k better than plan.

Income

There is a cumulative £819k favourable variance on income which mainly relates to over recovery on A&E, day case and non elective activity.

Pay

Pay budgets are ahead of target by £5k. Corporate divisions are under spending due to planned staffing reductions that have been implemented. However, there are a number of over spending areas including Central Administration (£179k), Queen Mary's Maternity Unit (£116k) and A&E Medical and Nursing budgets (£99k).

Non Pay

The adverse variance on non-pay is £815k cumulatively. This is comprised mainly of:

- Central Administration (£122k) – interim costs and transcribing services
- Drugs – Women's & Children's Division over spent by £201k, predominantly on high cost HIV drugs. The in-year increase is being investigated as costs have been consistently higher than planned.
- Pathology – the Medicine and Women's and Children's Divisions are over spending with £111k and £79k adverse variances respectively.

Forecast

Overall, the forecast position is the achievement of the planned £1.4m surplus.

Pay Expenditure

Staff Group	In Month						Year-to-date		
	Budget £'000	Substantive £'000	Bank £'000	Agency £'000	Total £'000	Variance £'000	Budget £'000	Actuals £'000	Variance £'000
Medical									
Consultant	1,219	1,084	105	22	1,211	8	10,141	10,165	(24)
Other	1,307	1,265	32	66	1,363	(56)	11,772	11,823	(51)
MEDICAL TOTAL	2,526	2,348	137	89	2,574	(48)	21,913	21,988	(75)
Nursing & Midwifery									
Trained	2,643	2,356	283	64	2,703	(60)	23,774	23,874	(100)
Untrained	483	339	133	0	472	10	4,127	4,108	19
NURSING & MIDWIFERY TOTAL	3,126	2,696	416	64	3,175	(49)	27,901	27,982	(80)
AHP									
Allied Health Professional	289	263	8	2	274	15	2,518	2,469	49
PTB	212	198	3	0	201	11	1,895	1,810	85
Pharmacists	104	103	0	0	103	1	914	882	32
AHP TOTAL	605	564	11	2	578	27	5,327	5,162	165
Other									
A&C, Senior Managers & Others	972	1,010	47	18	1,075	(103)	10,297	10,302	(5)
OTHER - TOTAL	972	1,010	47	18	1,075	(103)	10,297	10,302	(5)
Grand Total	7,229	6,618	612	173	7,402	(174)	65,438	65,434	5

Pay WTE

Staff Group	In Month Totals			Staffing Split in Month			
	Budget WTE	Actuals WTE	Variance WTE	Substantive WTE	Bank WTE	Agency WTE	Total WTE
Medical							
Consultant	105.54	105.17	0.37	93.22	11.45	0.50	105.17
Other	247.06	249.01	-1.95	235.53	9.51	3.97	249.01
MEDICAL TOTAL	352.60	354.18	-1.58	328.75	20.96	4.47	354.18
Nursing & Midwifery							
Trained	722.12	741.43	-19.31	638.97	90.62	11.84	741.43
Untrained	219.65	212.30	7.35	157.31	54.99	0.00	212.30
NURSING & MIDWIFERY TOTAL	941.77	953.73	-11.96	796.28	145.61	11.84	953.73
AHP							
Allied Health Professional	70.89	65.83	5.06	64.12	1.21	0.50	65.83
PTB	70.00	71.51	-1.51	71.01	0.50	0.00	71.51
Pharmacists	23.96	25.33	-1.37	25.33	0.00	0.00	25.33
AHP TOTAL	164.85	162.67	2.18	160.46	1.71	0.50	162.67
Other							
A&C, Senior Managers & Others	345.15	356.84	-11.69	324.71	15.69	16.44	356.84
OTHER - TOTAL	345.15	356.84	-11.69	324.71	15.69	16.44	356.84
Grand Total	1,804.37	1,827.42	-23.05	1,610.20	183.97	33.25	1,827.42

Pay Expenditure

There is a cumulative under spend of £5k to the end of December but there was an in-month over spend of £174k

This is due to in-month over spends in the following areas:

- Medical – over spending budgets this month include minor over spending on Anaesthetics (£13k), Care of the Elderly (£19k) and A&E (£14k) where agency usage has been needed to cover vacant posts.
- Nursing – the main area of over spend this month is on Midwifery with an adverse variance of £55k. This trend is similar to previous months as activity is higher than planned and there is agency usage where shifts cannot otherwise be filled (£18k this month for agency usage). The A&E nursing budget was £20k over spent in December.
- AHP – budgets for therapists, radiographers, pharmacists and technicians remain on-target with minimal use of agency staff.
- A&C - the Clinical Administration over spend was £47k this month, reflecting temporary staffing usage necessary to ensure that new processes are fully embedded in the Trust.

Non Pay

Non-Pay Description	Annual Plan	Budget In Month	Actual In Month	Variance In Month	Budget To-date	Actual To-date	Variance To-date	Year End Forecast
	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
Services from NHS bodies	1,871	137	127	10	1,419	1,364	55	1,819
Healthcare from non NHS bodies	243	21	9	12	178	138	40	184
Drugs	8,044	723	745	(22)	6,278	6,447	(169)	8,648
Supplies - Clinical	16,581	1,349	1,478	(129)	12,198	12,291	(93)	16,788
Non Clinical Supplies & Services	4,220	299	372	(73)	2,860	3,278	(418)	4,371
Establishment	922	77	93	(16)	692	868	(176)	1,157
Transport	247	21	26	(5)	185	191	(6)	255
Premises	8,574	700	697	3	6,271	6,225	46	8,300
CNST	3,839	320	320	0	2,879	2,879	0	3,839
Education & Training	393	13	24	(11)	280	258	22	344
Audit Fees (Internal & External)	277	23	28	(5)	208	212	(4)	283
Consultancy	293	(15)	12	(27)	274	391	(117)	434
Total Non-Pay Costs	45,504	3,668	3,931	(263)	33,722	34,542	(820)	46,421

Non Pay

The year-to-date position is an £820k over spend against plan, of which £263k relates to December.

The main points to note are:

- Drugs – £169k over spent on the year to date, particularly for HIV, ITU and Haematology. HIV costs in particular have been higher than estimated for the year and analysis is being done to understand the reasons for this.
- The MRI scans budget is £45k over spent on the year-to-date but work is underway to manage the activity down for future months to remain within the annual contract value.
- The surgical appliances budget is £53k over spent for the year to date.
- Interim costs - £90k of costs was incurred in relation to the Clinical Administration project. This will be non recurrent, and will cease as soon as the new systems are fully operational.
- Pathology costs are higher than budgeted for in Women's & Children's Division (£74k), Medicine (£110k) and Surgery (£28k). Work is on-going with Clinical leads to understand and manage the volumes of tests carried out by Quest, to minimise duplication and unnecessary activity being carried out.

Income

Income by Point of Delivery

Trust-wide Income £'000

Point of Delivery Description	Full Year Plan £'000	YTD Actual £'000	YTD Variance £'000	Forecast Income £'000	Forecast Variance £'000	Last Year Outturn £000s
Accident and Emergency	8,396	7,451	847	9,911	1,515	9,773
Day Case	9,312	8,172	1,290	11,070	1,757	11,184
Elective	6,635	4,527	(654)	5,797	(838)	6,497
Elective Excess Bed Day	255	180	(11)	240	(15)	310
Non Elective	47,405	35,738	953	48,415	1,010	48,210
Non Elective Excess Bed Day	3,281	1,789	(671)	2,386	(895)	3,447
Outpatients	30,300	23,066	63	29,899	(401)	32,610
Critical Care - Adult	4,696	3,180	(349)	4,232	(465)	4,541
Critical Care - Non Adult	2,095	1,501	(71)	1,984	(111)	1,954
Rehabilitation	1,496	617	(634)	788	(707)	1,649
Drugs Exclusions	3,955	2,566	(400)	3,421	(534)	3,544
Direct Access	1,436	1,026	(51)	1,368	(68)	1,443
Other (RDA, PTS, CQUIN etc..)	6,287	5,032	112	6,347	60	7,085
Work In Progress	0	(20)	(20)	(20)	(20)	(1,239)
Other Income Clinical (including NCA)	7,145	4,401	165	7,462	317	4,451
Other Income Non-Clinical	13,854	10,736	250	14,159	305	13,976
TOTAL TRUST INCOME	146,549	109,962	821	147,459	910	149,434

Trust-wide Activity (excluding NCA)

Point of Delivery Description	Full Year Plan Activity	YTD Actual Activity	YTD Variance Activity	Forecast Activity	Forecast Variance Activity	Last Year Outturn Activity
Accident and Emergency	99,543	76,239	1,408	101,409	1,865	96,013
Day Case	8,994	7,536	892	10,209	1,214	10,043
Elective	2,636	1,704	(354)	2,182	(454)	2,671
Elective Excess Bed Day	1,027	635	(135)	847	(181)	1,172
Non Elective	28,325	22,815	2,010	31,067	2,741	28,827
Non Elective Excess Bed Day	14,396	6,491	(4,306)	8,655	(5,741)	14,705
Outpatients	237,571	178,085	(1,691)	235,229	(2,342)	250,597
Critical Care - Adult	3,983	2,444	(549)	3,252	(731)	3,622
Critical Care - Non Adult	4,510	3,241	(141)	4,277	(232)	4,334
Rehabilitation	9,311	2,821	(4,162)	3,459	(5,851)	7,859

Income

The Trust is £821k ahead of the month 9 budget. The forecast out turn is a £910k over performance against plan.

Clinical Income

Clinical Income is £570k above plan and forecasted to be £605k above plan at year-end. A&E activity was £95k higher in December than the average of the previous eight months.

Against the PCT decommissioning plan of £1.7m, the Trust has forecasted a £1.2m reduction in rehabilitation activity and a nil reduction in A&E activity. This is because the implementation of the Urgent Care Centre has been slipped to 20th March 2012, so is unlikely affect A&E activity this year.

As in previous months, day cases are a major area of over performance with a favourable YTD variance of £1.3m and a favourable forecast variance of £1.8m. Non-elective spells and A&E attendances are other areas of forecast over performance.

Similar to last month Non-Elective Excess Bed days, Critical Care and Rehabilitation are forecasted to under-recover in line with YTD performance.

Non-Clinical Income

Similar to last month, other income is expected to over perform at year end, due to over recovery of overseas income and rental income, such as C&W renting our theatres capacity.

Income by PCT (Hounslow and Richmond)

NHS Hounslow SLA				Activity			£'000
Point of Delivery Description	Income £'000			Activity			Last Year Outturn
	Full Year Plan	YTD Variance	Forecast Variance	Full Year Plan	YTD Variance	Forecast Variance	
Accident and Emergency	6,881	112	149	72,336	113	150	6,976
Day Case	5,774	580	785	5,818	411	557	6,756
Elective	4,517	(568)	(727)	1,765	(282)	(361)	4,561
Elective Excess Bed Day	163	4	5	679	(64)	(86)	231
Non Elective	33,416	108	142	20,257	976	1,325	33,595
Non Elective Excess Bed Day	1,895	(151)	(201)	8,107	(1,437)	(1,916)	2,380
Outpatients	20,153	15	17	161,661	(2,130)	(2,874)	21,892
Critical Care - Adult	3,333	(307)	(408)	2,825	(458)	(609)	3,116
Rehabilitation	1,524	(763)	(1,060)	6,968	(3,518)	(4,993)	1,319
Drugs Exclusions	2,709	(196)	(262)	0	0	0	2,443
Direct Access	685	113	150	0	0	0	789
Other (RDA, PTS, CQUIN etc..)	3,966	671	956	0	0	0	6,357
SLA Performance against Plan	85,016	(382)	(453)				90,416

NHS Richmond SLA				Activity			£'000
Point of Delivery Description	Income £'000			Activity			Last Year Outturn
	Full Year Plan	YTD Variance	Forecast Variance	Full Year Plan	YTD Variance	Forecast Variance	
Accident and Emergency	1,505	90	120	15,059	614	816	1,683
Day Case	1,848	384	520	1,867	321	435	2,490
Elective	1,346	(25)	(33)	545	(48)	(61)	1,320
Elective Excess Bed Day	44	(2)	(2)	169	(12)	(16)	61
Non Elective	9,922	576	783	5,555	706	960	10,601
Non Elective Excess Bed Day	1,056	(433)	(578)	4,195	(1,818)	(2,424)	830
Outpatients	6,313	13	20	47,865	334	455	6,872
Critical Care - Adult	861	(178)	(237)	782	(199)	(264)	916
Rehabilitation	317	(159)	(212)	1,448	(728)	(971)	189
Drugs Exclusions	880	(188)	(250)	0	0	0	777
Direct Access	583	(103)	(137)	0	0	0	563
Other (RDA, PTS, CQUIN etc..)	1,687	(114)	(247)	0	0	0	1,949
SLA Performance against Plan	26,363	(138)	(251)				28,253

NHS Hounslow SLA

Against the NHS Hounslow SLA, the Trust is £382k below plan at Month 9 and is forecasted to be £453k below plan at year end. The forecast has increased from last month, due to slippage in the implementation of the Urgent Care Centre. The adverse variance at year end is partly due to reductions in Rehabilitation which are not within NHS Hounslow contract baseline.

Day cases are an area of over performance for the NHS Hounslow SLA which is showing favourable forecast variances of £785k. The Trust is also experiencing reductions in Excess Bed days and Critical Care for NHS Hounslow patients.

NHS Richmond SLA

Against the NHS Richmond SLA, the Trust is currently £138k below plan and is expected to be £251k below plan at year end. This is because the NHS Richmond baseline does have reductions relating to Rehabilitation decommissioning.

The other main areas of underperformance are Non-Elective Excess Bed days, Adult Critical Care and Direct Access. This is similar to those observed for Trust-wide performance.

Non-elective spells are a significant area of over performance for NHS Richmond with YTD favourable variance of £576k and forecast favourable variance of £783k. It should be noted that this year's Non-Elective baseline is £700k below last year's outturn.

Income by PCTs (Other PCTs)

Remaining PCT SLAs	Income £'000			Activity			£'000
Point of Delivery Description	Full Year Plan	YTD Variance	Forecast Variance	Full Year Plan	YTD Variance	Forecast Variance	Last Year Outturn
Accident and Emergency	1,171	64	85	12,148	681	899	1,113
Day Case	1,690	327	452	1,309	160	223	1,938
Elective	772	(60)	(78)	326	(24)	(32)	616
Elective Excess Bed Day	47	(14)	(18)	179	(59)	(79)	18
Non Elective	4,066	270	384	2,513	328	456	4,013
Non Elective Excess Bed Day	330	(87)	(117)	2,094	(1,050)	(1,401)	237
Outpatients	3,834	36	37	28,045	105	78	3,763
Critical Care - Adult	502	136	180	376	107	143	509
Rehabilitation	196	18	25	895	84	112	142
Drugs Exclusions	365	(16)	(21)	0	0	0	324
Direct Access	169	(61)	(81)	0	0	0	91
Other (RDA, PTS, CQUIN etc..)	507	(49)	(77)	0	0	0	815
SLA Performance against Plan	13,649	563	769				13,652

Specialist Commissioning	Income £'000			Activity			£'000
Point of Delivery Description	Full Year Plan	YTD Variance	Forecast Variance	Full Year Plan	YTD Variance	Forecast Variance	Last Year Outturn
Community Dermatology	700	(55)	(73)	0	0	0	0
Community GUM - Block	660	0	0	0	0	0	330
Community GUM - Variable	176	251	335	0	0	0	189
Critical Care - Non Adult	2,022	(28)	(37)	4,368	(68)	(91)	1,880
HIV Specialist Commissioning	2,213	0	0	0	0	0	2,207
Total	5,771	168	225				4,606

Remaining PCT SLAs

Against the remaining PCT SLAs, the Trust is currently £563k above plan and is expected to be £769k above plan at year end. NHS Ealing SLA is the main driver for this over performance.

The main areas of over performance are Day cases and Non-Elective. This is similar to NHS Hounslow SLA and NHS Richmond SLA.

Specialist Commissioning

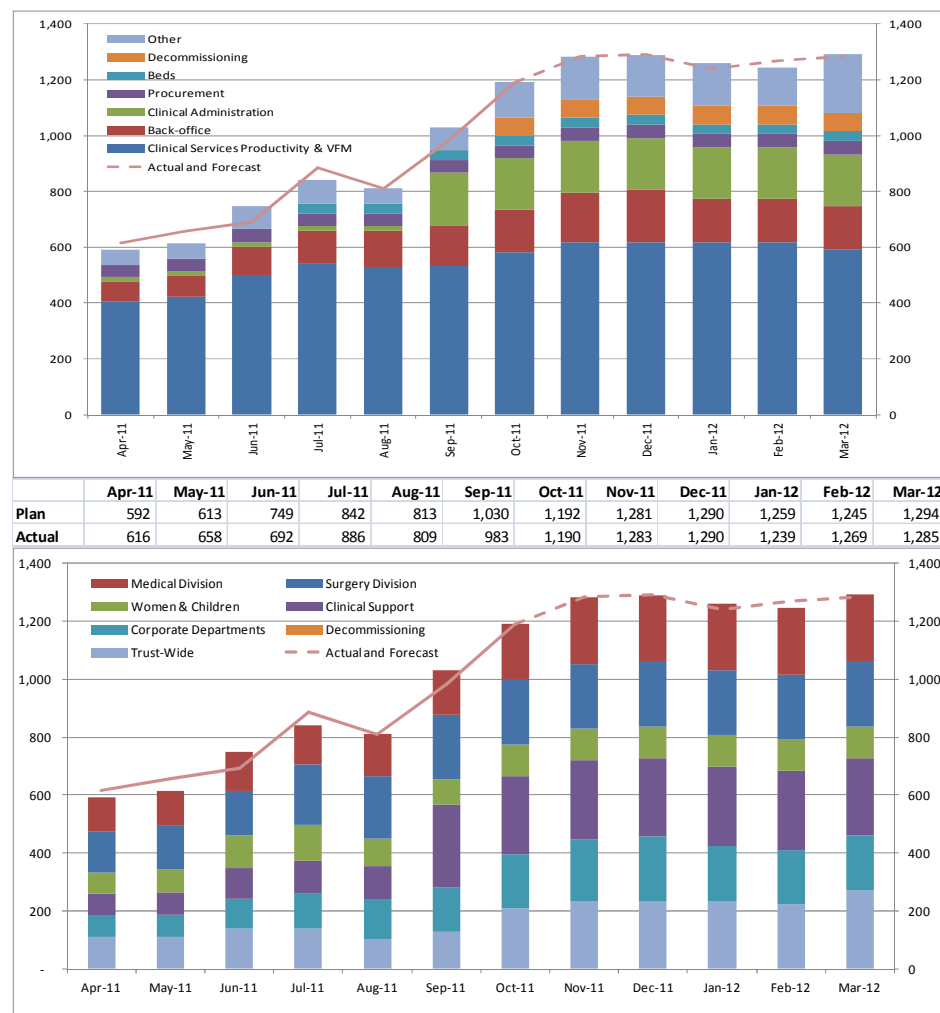
Against the Community Dermatology contract, the Trust is marginally below target, which is expected to continue until the year end.

There is currently over performance against the Community GUM contract, due to an increase in demand for the service. This is expected to continue till year end, leading to an estimated £335k of over performance.

Non-Adult Critical Care activity is underperforming by £28k, which is expected to continue until year-end.

Against the HIV consortium, the Trust is currently breaking even, which is expected to continue until year end.

Trust Cost Improvement Programme



Trust Cost Improvement Programme

The £8.4m CIP target to the end of December has been achieved.

The key areas of the Cost Improvement Plan are:

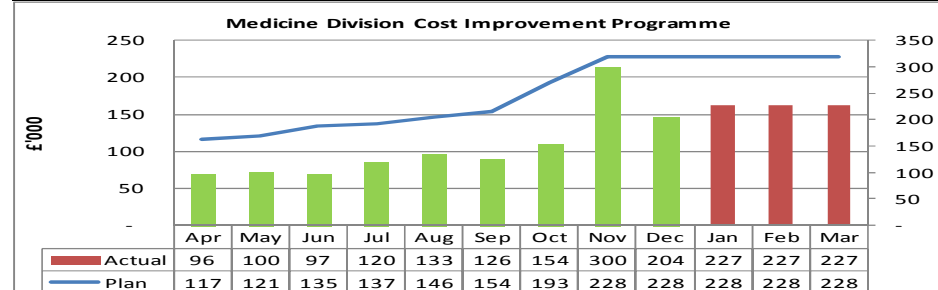
- Ward, Theatres and Maternity - £2.4m – currently on plan except for A&E and Maternity
- Back-office reductions - £1.6m – £16k ahead of plan
- Clinical Administration - £1.3m – £291k behind plan
- Procurement – £600k – currently £233k ahead of plan, mainly due to energy savings.
- Medical staffing across the Trust - £900k – currently on target.
- Pathology - £500k – currently behind plan, particularly in Women's and Children's Division.

The Divisional cost improvement plan achievement to date is as follows:

- Medicine – The year to date position for Medicine is showing a £131k under achievement – shortfalls on A&E and pathology.
- Surgery – The Division is £76k above plan for the year to date.
- Women's & Children's – The Division is cumulatively under achieving by £147k with shortfalls on pathology.
- Clinical Support Services - The Division has under achieved by £92k as there has been a short fall on the Clinical Administration project.
- Corporate departments and Trust wide savings – The year to date position is £298k ahead of target.

Medicine Division – Financial Performance

	Monthly			Year-to-date		
	Plan	Actual	Variance	Plan	Actual	Variance
	£'000	£'000	£'000	£'000	£'000	£'000
Pay	2,288	2,343	(54)	19,995	20,049	(54)
Non-pay	979	1,020	(41)	8,591	8,784	(193)
Income	(33)	(43)	10	(320)	(401)	81
Total	3,235	3,319	(85)	28,266	28,433	(167)



Medicine Division	Income £'000				Activity			
	Full Year Plan	YTD Plan	Actual	YTD Variance	Full Year Plan	YTD Plan	Actual	YTD Variance
Accident and Emergency	9,981	7,502	7,730	227	104,005	78,178	79,051	873
Community Dermatology	700	525	470	(55)	0	0	0	0
Day Case	1,715	1,266	1,243	(24)	3,232	2,387	2,290	(97)
Decommissioning Rehab	(540)	(270)	0	270	0	0	0	0
Decommissioning UCC	(1,161)	(581)	0	581	0	0	0	0
Direct Access	197	148	45	(103)	0	0	0	0
Elective	1,043	814	415	(399)	505	394	348	(46)
Elective Excess Bed Day	179	134	105	(29)	744	558	394	(164)
Non Elective	22,443	16,484	17,324	840	12,593	9,271	10,255	984
Non Elective Excess Bed Day	2,613	1,960	1,342	(618)	10,269	7,702	5,186	(2,516)
Outpatients	10,733	8,138	7,886	(252)	68,606	51,858	54,136	2,278
Rehabilitation	2,036	1,527	626	(900)	9,311	6,983	2,865	(4,118)
Regular Day Attenders	529	397	562	165	1,165	874	1,201	327
Other	322	242	165	(76)	0	0	0	0
Readmissions	(921)	(691)	(691)	0	0	0	0	0
TOTAL	49,871	37,596	37,222	(374)				

I&E

The Medicine Division is showing a £167k cumulative over spend, with £85k of this in December. Pay and non pay are £54k and £41k over spent respectively against budget this month with a £10k over recovery on local income.

The main points to note are:

- Medical staff across all specialities is showing an aggregate overspend of £36k in December (£116k year-to-date). In month, the areas of over spend are A&E Medical (£14k), Dermatology (£13k), Care of the Elderly (£19k) and AMU (£11k).
- £48k was spent on Escalation this month, but this was matched with budget.
- Pathology budgets continue to overspend with a £111k adverse variance for the year-to-date.

CIP

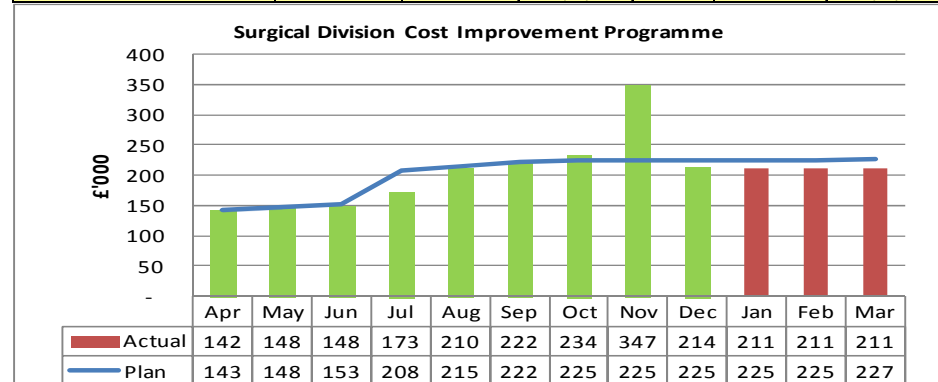
The Division has achieved £204k against a target of £228k in December. The adverse cumulative variance is £131k adverse as there have been delays in delivering pathology and medical staffing savings.

Income

The Medical division reported an adverse income position in Month 9. This is due to continued under performance in outpatients, rehabilitation, elective spells and direct access. This is partly offset by an increase in emergency admissions.

Surgery Division – Financial Performance

	Monthly			Year-to-date		
	Plan	Actual	Variance	Plan	Actual	Variance
	£'000	£'000	£'000	£'000	£'000	£'000
Pay	1,712	1,733	(21)	15,440	15,411	29
Non-pay	549	614	(65)	5,122	5,271	(148)
Income	(16)	(19)	3	(146)	(206)	61
Total	2,245	2,328	(83)	20,416	20,475	(59)



Surgical Division	Income £'000				Activity			
	Full Year Plan	YTD Plan	YTD Actual	YTD Variance	Full Year Plan	YTD Plan	YTD Actual	YTD Variance
Critical Care - Adult	4,696	3,529	3,192	(337)	3,983	2,993	2,459	(534)
Day Case	6,361	4,704	5,943	1,240	4,321	3,194	4,037	843
Direct Access	8	6	6	0	0	0	0	0
Elective	4,877	3,806	3,588	(218)	1,728	1,348	1,087	(261)
Elective Excess Bed Day	67	51	25	(26)	251	188	92	(96)
Non Elective	9,690	7,115	6,455	(660)	3,640	2,674	2,508	(166)
Non Elective Excess Bed Day	505	379	141	(238)	1,852	1,389	531	(858)
Outpatients	9,890	7,520	6,966	(554)	70,356	53,361	49,417	(3,944)
Other	836	627	452	(175)	0	0	0	0
Regular Day Attenders	530	398	303	(95)	976	732	551	(181)
TOTAL	37,461	28,133	27,072	(1,061)				

I&E

The Division is showing an adverse variance of £59k for the year to date, with an £83k adverse variance in-month. The main variances include:

- Anaesthetics Medical Staff - The £13k overspend in the month and £37k cumulatively caused by locum cover for a specialty registrar vacancy
- Orthopaedic Medical Staff – overspend of £10k (£20k for the year-to-date) due to higher costs of agency staff to cover two registrar vacancies.
- ITU non pay - the £19k deficit in the month was due to medical and surgical equipment costs. This was partly due to stocking up for the holiday period. It is therefore expected that the January figures will be lower. This was also the main reason for the Theatres non-pay over spend of £34k in the month.
- Sterile Services - £19k over spent against budget this month as there has been higher than planned for activity against the contract.

CIP

The Surgery Division has under performed against the CIP target this month by £11k (£214k achieved against a £225k target) but there is a cumulative over recovery of £76k for the year-to-date.

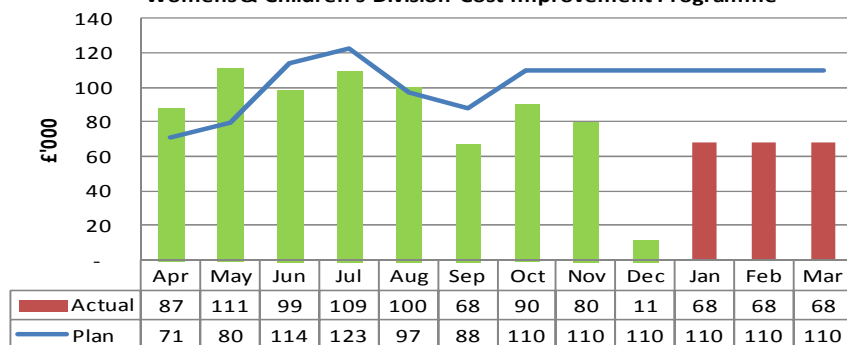
Income

The income position for the Surgery in Month 9 shows underperformance against planned levels. This is primarily due to continued underperformance in outpatients, non-elective spells and adult critical care.

Women's & Children's Division – Financial Performance

	Monthly			Year-to-date		
	Plan	Actual	Variance	Plan	Actual	Variance
	£'000	£'000	£'000	£'000	£'000	£'000
Pay	1,516	1,602	(86)	13,838	13,931	(93)
Non-pay	420	491	(71)	3,881	4,327	(446)
Income	(5)	(4)	(1)	(45)	(74)	30
Total	1,931	2,089	(158)	17,674	18,183	(509)

Womens & Children's Division Cost Improvement Programme



Women's & Children's Division	Income £'000				Activity			
	Full Year Plan	YTD Plan	YTD Actual	YTD Variance	Full Year Plan	YTD Plan	YTD Actual	YTD Variance
Community GUM	836	627	878	251	0	0	0	0
Community Midwifery	1,457	1,093	1,308	215	20,523	15,392	18,416	3,024
Critical Care - Non Adult	2,065	1,549	1,480	(69)	4,510	3,382	3,246	(136)
Day Case	1,401	1,034	1,150	116	1,565	1,155	1,318	163
Elective	806	629	555	(74)	438	342	285	(57)
Elective Excess Bed Day	9	6	50	43	33	24	149	125
HIV Contract	2,213	1,660	1,660	0	0	0	0	0
Non Elective	16,096	11,805	12,587	783	12,656	9,282	10,468	1,186
Non Elective Excess Bed Day	246	185	314	129	2,589	1,942	799	(1,143)
Other	1,385	1,039	1,009	(30)	0	0	0	0
Outpatients	10,854	8,227	8,312	85	89,041	67,342	67,612	270
Regular Day Attenders	14	11	5	(6)	30	23	10	(13)
TOTAL	37,383	27,865	29,308	1,443				

I&E

The current month shows an adverse variance of £158k taking the cumulative adverse variance against budget to £509k. The main variances are:

Expenditure

- Queen Mary's Maternity Unit over spend was high at £55k, due to temporary costs.
- Obstetrics and Gynaecology medical staff overspent in the month (£2K) due to the use of locum Staff to cover sickness.
- Ultrasound (£3k over spend) - Bank and agency staff usage to cover extended weekend service.
- Pathology Costs - £5k overspent in the month, which is in line with previous months.
- Drugs costs – £27k overspent in the month. Three specialties reflecting this deficit are Paediatrics, Obstetrics, and in particular HIV.
- QMMU - £31k overspent in the month, due to usage of medical supplies which are around 16% higher than the previous year. The reasons for this are being investigated.

CIP

The Division achieved cumulatively £755k of savings which is £147k less than the £902k target with the shortfall being mainly on pathology.

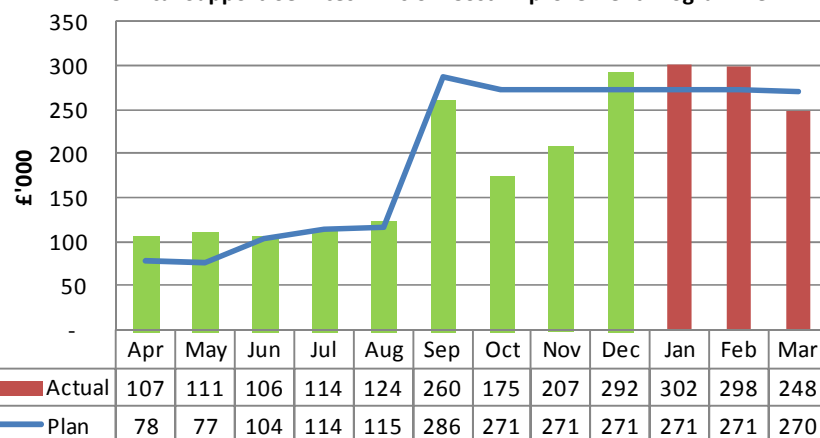
Income

The income position for the Women's and Children's in Month 9 shows an over performance against planned levels of activity and income. This is primarily due to over performance in day case, non-elective and community activities.

Clinical Support Services Division – Financial Performance

	Monthly			Year-to-date		
	Plan	Actual	Variance	Plan	Actual	Variance
	£'000	£'000	£'000	£'000	£'000	£'000
Pay	1,009	1,030	(20)	9,391	9,405	(14)
Non-pay	344	399	(55)	3,166	3,198	(32)
Income	(22)	(14)	(8)	(198)	(144)	(54)
Total	1,331	1,415	(84)	12,360	12,459	(100)

Clinical Support Services Division Cost Improvement Programme



Clinical Support Division	Income £'000				Activity			
	Full Year Plan	YTD Plan	YTD Actual	YTD Variance	Full Year Plan	YTD Plan	YTD Actual	YTD Variance
Point of Delivery Description								
Direct Access	1,231	923	977	54	0	0	0	0
Outpatients	293	221	199	(22)	12,124	9,131	9,025	(106)
Pathology Consultancy	287	216	216	0	0	0	0	0
X-Ray Reporting	25	18	18	0	0	0	0	0
Other	546	409	409	0	0	0	0	0
TOTAL	2,381	1,787	1,820	33				

I&E

The current month shows an adverse variance of £84K, taking the cumulative variance to an adverse of £100k. The main variances in the month are:

Pay

The pay overspend is due to £47k overspend in centralised clinical administration which is due to delays in implementation of the CIP. There are under spending pay budgets including Radiology Medical Staff (£12k) that have netted the pay over spend down to £20k in December.

Non Pay

- MRI Scans: This is £7k overspent in the month, due to additional activity in the month.
- Surgical Appliances: £12k overspent in the month. This is similar to previous months and the Division is working closely with the supplier to mitigate this.
- Centralised Clinical Administration is £37k over budget mainly due to Interim Support charges.

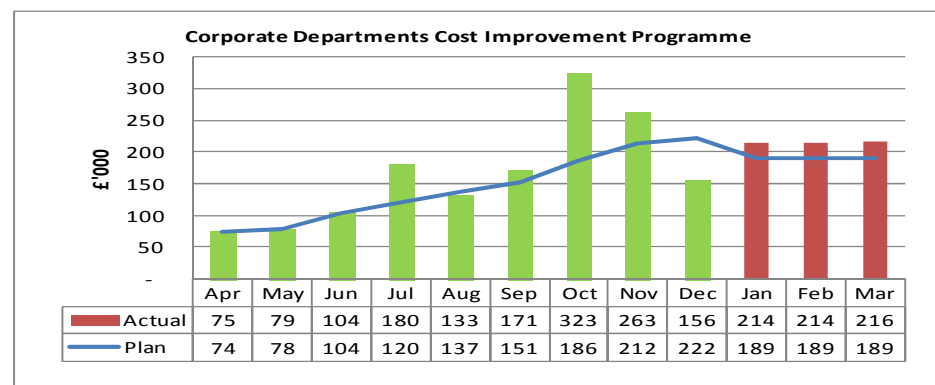
CIP

The Division has achieved £1,496k savings to date, which is a £92k under performance against the target of £1,588k. This is due to delays in the clinical administration project savings being realised.

Income

No significant variance to report for the clinical support division. Income levels are as planned as there was no change in the expected level of direct access income and activity for the month.

Corporate Directorates – Financial Performance



Monthly			Year-to-date		
Plan	Actual	Variance	Plan	Actual	Variance
£'000	£'000	£'000	£'000	£'000	£'000

Finance & Performance	Pay	254	245	9	2,344	2,282	62
	Non-pay	2,355	2,367	(12)	21,241	21,232	9
	Income	(84)	(62)	(21)	(754)	(694)	(60)
	Total	2,525	2,550	(25)	22,831	22,820	11

Workforce & Development	Pay	161	157	4	1,674	1,626	48
	Non-pay	31	35	(3)	318	305	13
	Income	(6)	(10)	4	(58)	(102)	44
	Total	186	182	5	1,934	1,829	105

Department of Nursing & Midwifery	Pay	88	96	(9)	861	866	(5)
	Non-pay	7	4	4	66	46	20
	Income	(0)	0	(0)	(2)	(6)	3
	Total	95	100	(6)	925	906	19

Corporate Affairs	Pay	200	196	4	1,895	1,863	32
	Non-pay	(9)	(3)	(6)	216	261	(45)
	Income	(3)	(4)	1	(30)	(40)	10
	Total	187	189	(2)	2,080	2,083	(2)

I&E

The corporate areas are under spent by £133k at the end of December although there is a £28k over spend against budget in the month. The favourable variances are generally due to in-year vacancies and reduction in non essential purchases on non-pay

CIP

The corporate directorates are generally on-target and expected to meet cost improvement programme totalling £1.8m – the majority of which relate to pay. Areas of over achievement include energy savings and other facilities reductions.

	01-Apr-11	31-Dec-11	Movement	Year-End Forecast
	£000's	£000's	£000's	£000's
Plant, Property and Equipment	107,854	106,304	(1,550)	107,816
Intangible Assets	410	345	(65)	400
Trade & Other Receivables	494	494	0	463
	108,758	107,143	(1,615)	108,679
Inventories	1,419	1,157	(262)	1,602
Trade & Other Receivables	6,992	5,418	(1,574)	6,472
Cash and Cash Equivalents	708	6,057	5,349	1,000
	9,119	12,633	3,514	9,074
Trade and Other Payables	(10,801)	(12,632)	(1,831)	(11,189)
DH Working Capital Loan	(8,740)	(10,925)	(2,185)	(13,110)
Borrowings	(1,106)	(1,111)	(5)	(1,054)
Provisions for liabilities & charges	(826)	(620)	206	(157)
	(21,473)	(25,288)	(3,815)	(25,510)
	96,404	94,487	(1,917)	92,243
Borrowings	(40,166)	(39,335)	831	(39,028)
DH Working Capital Loan	(6,560)	(4,375)	2,185	(2,190)
Provisions for liabilities and charges	(494)	(494)	0	(463)
	(47,220)	(44,204)	3,016	(41,681)
	49,184	50,283	1,099	50,562
Public Dividend Capital	21,362	21,362	(0)	21,362
Retained Earnings	(17,762)	(16,663)	1,099	(16,362)
Revaluation Reserve	45,388	45,388	0	45,388
Other Reserves	196	196	(0)	174
	49,184	50,283	1,099	50,562

Balance Sheet

Non Current Assets

£5.1m of capital expenditure is planned for 2011/12 which equates broadly to the expected depreciation charge for the year. It has been assumed at this stage that there will be no revaluation adjustments for the year.

Current Assets & Liabilities

Outstanding debt mainly relates to over performance and NCA payments which are generally paid two months in arrears.

The creditor liabilities include commitments of £1.0m of tax, £1.0m of National Insurance and £1.0m for superannuation. These are paid when due, one month in arrears. The remainder relates to accruals, deferred income and provisions.

Non current liabilities

The Department of Health Working Capital loan has been split over current and long term liabilities as per the repayment schedule issued (£10.9m current and £4.4m non current).

The PFI liability is the largest finance lease commitment (£39.5m) with shorter term leases for MRI (£1.4m) and PACS (0.1m).

Taxpayers Equity

The only movement for the year-to-date is the improvement in the retained earnings in respect of the Income & Expenditure surplus.

Cash Flow

Cash Flow	Dec '11	Jan '11	Feb '12	Mar '12	Total 11-12
Cash Balance b/f	4,830	6,057	3,952	3,049	1,051
RECEIPTS:					
NHS Income	12,043	10,416	11,497	11,781	144,660
Non NHS Income	530	465	465	465	6,129
TOTAL RECEIPTS	12,573	10,881	11,962	12,246	150,789
PAYMENTS:					
Payroll Costs	(7,040)	(7,068)	(7,048)	(7,231)	(85,563)
Creditor Payments	(4,143)	(5,175)	(5,175)	(6,270)	(60,156)
Capital Payments	(162)	(743)	(643)	(793)	(5,120)
TOTAL PAYMENTS	(11,346)	(12,986)	(12,866)	(14,294)	(150,839)
Balance c/f	6,057	3,952	3,049	1,000	1,000
Plan	2,793	2,182	1,604	1,000	1,000
Variance	3,264	1,771	1,445	0	0

Capital

Description	2011/12	In-month			Cumulative to date			2011/12
	Plan £000s	Plan £000s	Actual £000s	Variance £000s	Plan £000s	Actual £000s	Variance £000s	Forecast £000s
Medical Equipment	1,438	120	97	23	959	1,342	(383)	1,438
PFI LCF - General	600	50	43	7	400	346	54	600
LCF - Non -PFI buildings	300	25	0	25	200	0	200	300
Estates & Facilities	498	42	89	(48)	332	301	31	498
ICT	1,259	105	142	(37)	839	948	(109)	1,259
Outpatient Project	287	10	16	(6)	287	335	(48)	347
Other / Contingency	778	65	0	65	519	0	519	718
Total	5,160	416	387	29	3,536	3,272	264	5,160

Cash Flow

The cash balance at the end of December was £6.0m, which was £2.7m higher than planned. £1.2m of non adult critical care funding was over paid by NHS Hounslow and this is due to be reclaimed. Capital cash out flow has been £1.4m lower than projected for the year-to-date. A payment run of £0.4m made at the end of the month, had not actually left the bank account by the 31st and so is still reflected in the position.

Capital

The capital plan of £5.1m for the year assumes that the full value of the expected depreciation will be spent. Commitments to date, at £3,272k are £264k less than planned, but this is a timing issue only. There has been expenditure on capital projects including the following:

- IT project commitments for the year to date include CaMis Hardware Refresh (£208k) and SAN backup and storage (£178k).
- Medical equipment investment for the year to date includes £313k of the Radiology intervention suite, £232k of telemetry and other AMU equipment and £130k on ultrasound machines for the Maternity Unit. £35k was spent on blood gas analysers for Maternity this month.
- Facilities expenditure to date is mainly for the PFI life cycle (£346k). There was also £73k expenditure on Sterile Services works and equipment in November
- The outpatient project covers IT, facilities and implementation costs. The costs to date have been £335k, including £157k for CaMis additional functionality. Further expenditure on this project is expected to be minimal.

Public Sector Payment Practice

	Invoices paid - Number	Value paid £'000	No. paid on time as % of total	Value paid on time as % of total
Full year 2010/11	31,474	51,877	83%	84%
Cumulative to date	21,788	37,816	91%	89%
November	2,724	5,840	95%	89%
December	2,291	4,058	94%	95%
Change from last month	(433)	(1,782)	(1%)	6%

Aged Creditors

	NHS	Trade	Total	Total last month	Change
	£'000	£'000	£'000	£'000	£'000
30 Days or less	2	645	647	709	62
31-60 days	16	93	109	37	(72)
61 - 90 days	13	8	21	8	(12)
Over 90 days	1	(7)	(6)	35	41
Total	31	739	770	789	19
Total last month	216	574	789		
(Increase) / Decrease	184	(165)	19		

Aged Debtors

	NHS	Private Patients	Overseas Visitors	Other	Total	Total last month	Change
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Not yet due					0	0	0
30 Days or less	1,769	3	0	12	1,784	149	(1,634)
31-60 days	(770)	6	0	81	(683)	261	944
61 - 90 days	(304)	2	0	21	(281)	792	1,073
Over 90 days	2,427	50	30	78	2,584	2,708	123
Total	3,122	61	30	191	3,404	3,910	506
Total last month	3,623	58	30	199	3,910		
(Increase) / Decrease	501	(3)	0	8	506		

Public Sector Payment Practice

The figures are improving as the year has progressed due to the positive actions being taken to meet this target. There was a slight dip to 94% in the number of invoices paid on time this month but in terms of value the 95% target has been achieved for the first time this year. Automated processes for approving invoices were introduced this month to ensure that this performance can be sustained in the future.

Aged Creditors

The value of trade creditors outstanding decreased to £770k this month, and longer term invoices are minimal. Remaining invoices generally relate to routine purchases from NHS Supplies and for drugs, which will be paid as required within 30 days.

Aged Debtors

Outstanding debt at the end of December has reduced by £0.5m. This generally relates to over performance and non contracted activity (NCA) invoices.

Conclusion

The Trust Board is asked to note performance in December 2011.

