

South Tees Hospitals

NHS Foundation Trust

Meeting / Committee	Council of Governors	Meeting Date	20 May 2015
----------------------------	----------------------	---------------------	-------------

Title	Financial position for the period ending 31 March 2015
--------------	--

Purpose	The purpose of this report is to advise the Council of Governors of the financial position at 31 March 2015.
----------------	--

Summary	<p>The Trusts deficit at the year-end is ahead of plan but remains in a deficit position with a £11.4m favourable variance. The Trust has had a positive financial performance this year but challenges remain for 2015/16 and the organisation must maintain the momentum in order to deliver challenging financial targets.</p> <p>The key drivers are:</p> <ul style="list-style-type: none"> • Over-delivery of CIP both recurrently and non-currently by £4.2m against plan. • Over-performance of income by £5.3m delivered at lower marginal costs delivering Trust contribution. • Continuing focus on cost control. <p>The Trust drew down £10.5m of cash through interim revolving working capital support and had a cash balance of £11.1m at the end of March.</p> <p>This report was presented to the Board of Directors on 28 April 2015.</p>
----------------	--

Prepared by	Brian Simpson Head of Financial Governance and Control Val Winders Head of Financial Planning and Performance	Presented by	Maxime Hewitt-Smith Acting Director of Finance and Performance
--------------------	--	---------------------	---

Recommendation	The Council of Governors is asked to note and comment on the financial position.
-----------------------	--

Implications	Legal	Financial	Safety & Quality	Strategic	Risk & Assurance
		X		X	X

1.0 Executive Summary

Key Issue	Year end performance	Year to date vs budget	Key updates from Month 11
EBITDA	EBITDA was £24.8m against a year end plan of £13.2m a favourable variance of £11.6m. This is an improvement of £3.2m on the month 11 forecast EBITDA value. The key driver for the plan over performance has been an over performance on income with the additional activity provided at a lower marginal cost.	G	The in month improvement in EBITDA has been driven by an increase in the forecasted income from Commissioners in Month 12. The income relates to additional contract variations, improvements in CQUIN income and additional activity.
Underlying Surplus/(Deficit)	The Trust is reporting a (£7.0m) deficit which is £11.4m ahead of the year end plan. The main drivers for the reduced deficit are: <ul style="list-style-type: none"> • An increase in the CIP programme. • An increase in income from activity delivered at lower marginal cost. • Additional contract variations agreed with Commissioners as part of year end settlements. 	G	The in month improvement in the underlying deficit against forecast by £3.1m has been driven by higher than expected income levels being provided by Commissioners.
CIP Programme	The Trust has achieved £26.0m CIP, £4.2m ahead of plan. The full year effect of the CIP savings is £22.5m, £0.7m ahead of plan.	G	Forecasted CIP values at month 11 were £25.4m, showing an improvement in month of £0.6m. Additional CIP has been driven by larger than expected CIP savings from workforce particular in relation to vacant posts across the Trust.
Cash and Liquidity	The Trust received £14.4m cash funding from the Department of Health in February, followed by a further £10.5m in the form of interim revolving working capital support in March. As a result of the additional support the level of cash held by the Trust as at 31 March stood at £11.1m which is £10.6m ahead of the Recovery Plan.	G	The Trust received the further drawn down of £10.5m and has repaid £3.0m of this in April to ensure the Trust only holds the cash it needs to maintain day to day operations. Once Monitor have fully reviewed and approved the Trust 2015/16 Recovery Plan it is anticipated that this revolving working capital facility will in part transfer to interim revenue support and interim capital support agreements. The Trust is performing both weekly and monthly cash flow forecasting to clearly identify when the funding in 2015/16 will be required. After repayment of the £3.0m the Trust has carried forward a net amount of £7.5m to assist with liquidity and has identified that the remaining funding will be required in February 2016.
Capital Expenditure	Capital expenditure as at the 31 March was £23.7m against a year end plan of £22.9m. The overspend was due to the approval in March of the Clinical Noting Scheme which was not included in the original plan.	G	The Trust has set a capital programme of £26.5m for 2015/16 and is working with Monitor to gain approval for the funding that will help deliver this programme. The programme only identifies business as usual expenditure, replacing essential equipment, lifecycle works and IT.
Continuity of Service Risk Ratings (CoSRR)	The CoSRR assesses the Capital Service Cover and Liquidity Ratio to determine a final rating. The Trust's overall CoSRR rating is 2.	G	The Trust has a rating of 1 for the capital service cover and 2 for the liquidity rating. The temporary improvement in the liquidity rating is due to the receipt of the interim revolving working capital support. This is an anomaly and will not be repeated until the Trust begins to build up cash reserves after a period of financial recovery.

EBITDA/ Surplus

G	On or better than target
A	Between 0% and 5% below target
R	Greater than 5% below target

CIP Programme

G	On or better than target
A	Between 0% and 10% below target
R	Greater than 10% below target

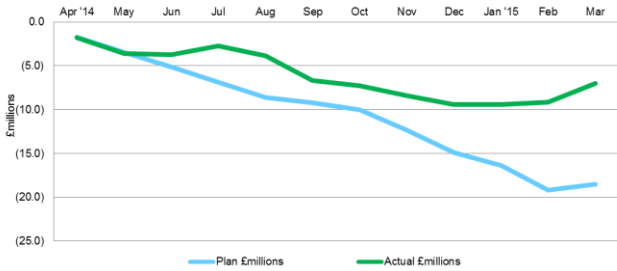
Capital Expenditure

G	Within 5% of target
A	Between 6% and 15% of target
R	Greater than 15% of target

Cash and Liquidity

G	Higher cash balance or within 10% lower than plan
A	Cash balance lower than plan by 10% up to 20%
R	Cash balance lower than plan by greater than 20%

Underlying Deficit actual v plan

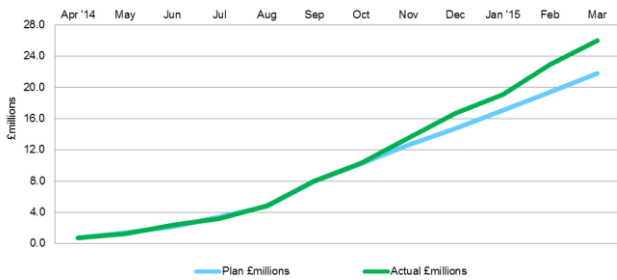


Clinical income: The Trust has over performed on clinical income by £12.1m against plan an improvement on forecast values by £3.6m. This in month increase has been driven by additional activity and contract variations. The full year variances against the annual plan reflects the additional income in the resubmitted plan to Monitor the overstating of both the income and expenditure plans has resulted in significant swings between both categories.

Pay: Pay expenditure has reported a (£0.2m) overspend against plan this increase in pay costs is driven by additional spend on nursing and support due to increased activity, for which additional income has been received.

Non pay: The Trust has underspent on non-pay by £6.4m, as reported above for income this underspend is due to the alignments in the resubmitted Monitor plan.

CIP programme savings

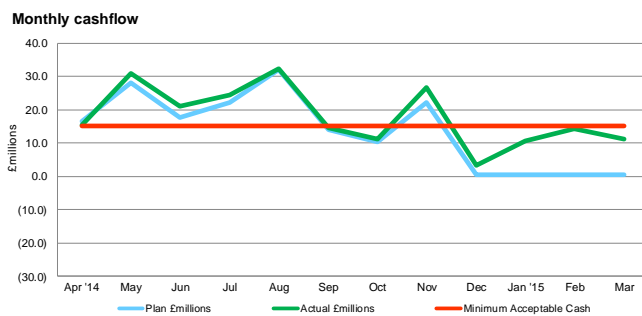


Year-end CIP performance is ahead of plan by £4.2m, 119% of plan. The full year effect of reported 2014/15 CIP savings is £22.5m, £0.7m ahead of plan.

Improved productivity, recurrent savings from staff vacancies have contributed towards the savings. A reduction in depreciation charges and PDC payments are also contributing to the CIP delivery.

The Trust has pulled forward workforce reduction schemes to overachieve the CIP in 2014/15.

12 month forecast cash flow requirement

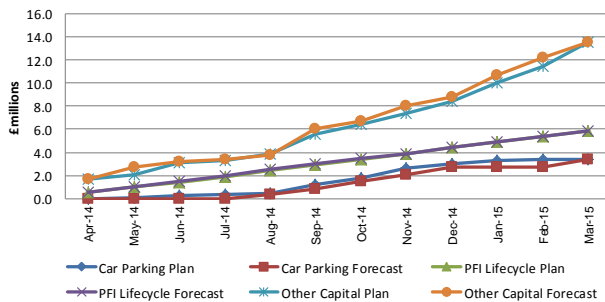


Cash and liquidity

External funding of £14.4m has been provided to the Trust in the form of interim revenue (£7.2m) and interim capital (£7.2m) support through the Department of Health. A further £10.5m was received in March in the form of interim revolving working capital support which resulted in the Trusts cash balance being £10.6m ahead of the Recovery Plan at year-end. The Trust has repaid £3.0m of this in April to ensure the Trust only holds the cash it needs.

The Trust has entered into discussions with Commissioners and has negotiated the rephasing of contract payments starting from May 2015 which will delay the use of interim capital/revenue support until February 2016.

Capital expenditure / plan v forecast



Capital expenditure

Projects	Capex Plan £000s	Spend in Month £000s	Outturn spend £000s	Variance to Plan £000s
PFI Lifecycle	5,845	334	5,692	(153)
Car Parking	3,350	584	2,961	(389)
Other	13,710	4,691	15,054	1,344
Total	22,905	5,609	23,707	802

The Trust overspent by £0.8m at the year-end due to the Clinical Noting scheme being fully approved and externally funded.

Continuity of service shadow risk ratings

Risk Rating	As at 28 February 2015	As at 31 March 2015
Capital Service Cover Rating	1	1
Liquidity Rating	1	2
Continuity of Service Risk Rating (CoSRR)	1	2

Metric				February Actual	March Actual
4	3	2	1	Capital Service Cover	
2.5	1.75	1.25	<1.25	0.85	0.93
Metric				Liquidity	
4	3	2	1	-15.00	-11.49
0	-7	-14	<-14		

The continuity of service risk rating comprises two financial metrics:

- Liquidity:** this ratio indicates whether the provider can meet its operational cash obligations. It is measured as days of operating costs held in cash or cash equivalent form; and
- Capital servicing capacity:** this ratio indicates whether the provider can meet its financial obligations i.e. the degree to which the organisations generated income covers its financial obligations (including PDC dividends, interest and debt repayment and Private Finance Initiative Capital and interest payments).

Overall the CoSRR is at 2 at 31 March 2015 due to the receipt of £10.5m interim revolving working capital support.

2.0 Overall Financial Performance

Income & Expenditure	Year to Date			Full Year			Full Year		
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	
Clinical Income	511.3	523.4	12.1	-	519.8	3.6	511.3	-	●
Other Income	42.5	35.7	(6.8)	-	35.2	0.5	42.5	-	●
Total Income	553.8	559.1	5.3	-	555.0	4.1	553.8	-	●
Pay	(330.7)	(330.9)	(0.2)	-	(331.9)	1.0	(330.7)	-	●
Non-Pay	(183.6)	(178.0)	5.6	-	(175.5)	(2.5)	(183.6)	-	●
PFI Unitary Charge	(26.3)	(25.4)	0.9	-	(26.0)	0.6	(26.3)	-	●
Total Expenses	(540.6)	(534.3)	6.3	-	(533.4)	(0.9)	(540.6)	-	●
EBITDA	13.2	24.8	11.6	-	21.6	3.2	13.2	-	●
Depreciation and Interest	(25.1)	(24.1)	1.0	-	(24.1)	-	(25.1)	-	●
Other non-operating expenses	(6.5)	(7.7)	(1.2)	-	(7.6)	(0.1)	(6.5)	-	●
Underlying (Deficit)/Surplus	(18.4)	(7.0)	11.4	-	(10.1)	3.1	(18.4)	-	●
Restructuring Costs	(5.0)	(5.6)	(0.6)	-	(5.7)	0.1	(5.0)	-	●
Impairment	(5.7)	(4.7)	1.0	-	(18.9)	14.2	(5.7)	-	●
Retained (Deficit)/Surplus	(29.1)	(17.3)	11.8	-	(34.7)	17.4	(29.1)	-	●
Memorandum Items									
Penalties	(3.7)	(6.0)	(2.3)	-	(5.9)	(0.1)	(3.7)	-	●
CQUIN	9.5	10.7	1.2	-	10.2	0.5	9.5	-	●
CIP Programme	21.8	26.0	4.2	-	25.4	0.6	21.8	-	●

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.

The Trust is reporting an underlying deficit of (£7.0m) at the end of Month 12, which is ahead of plan by £11.4m, and ahead of the Month 11 forecasted value by £3.1m. The actual outturn has improved from the Month 11 forecasted position predominately being driven by a number of contract variations and year end settlements that have been agreed with Commissioners. The underlying improvement against plan is driven by an increased level of income delivered at a lower marginal cost providing a contribution to the Trust, along with an over achievement of CIP.

At a retained deficit level the Trust is reporting a (£17.3m) deficit against a planned value of (£29.1m). Actual outturn has improved in month against the forecasted value at Month 11 an improvement on the previous month's forecast deficit. Impairment costs have reduced against forecasted value by £14.2m due to a delay on lifecycle spend, and a re-evaluation of the impact on impairments from the asset revaluation at the start of the financial year. Restructuring costs are overspent against plan by (£0.6m). These restructuring costs include redundancy and voluntary resignation payments alongside payments to professional advisers.

Clinical income is ahead of plan by £12.1m, £3.6m ahead of forecasted values at Month 11. The additional in month income is due to higher than expected year end settlements with Commissioners.

Pay is overspent against the full year plan by (£0.2m) an improvement against forecasted values by £1.0m. The in month variance is due to an overspend on nursing that is being offset by the other underspends and driven by increased activity particularly over the winter months, for which additional contract variation income has been received from Commissioners. The underlying overspend is driven by a continued underspend on Medical and Dental staff along with Agency and Management and Admin.

Non-pay is underspent YTD by £5.6m due to underspends in non-clinical supplies. This relates to the non-pay and income plans being overstated in the revised Monitor plan. Increased activity levels are being achieved at a lower cost than estimated and this efficiency on non-pay is contributing to the underspend position, reflecting the offset position on other income.

Other non-operating is behind plan by (£1.2m) driven by delays in the sale of Trust assets. Depreciation and Interest are ahead of plan by £1.0m, in line with the Month 11 forecasted value, continuing the current year to date trend.

The Trust has over achieved its CIP plan for the year and has achieved £26.0m of CIP against a plan of £21.8m. A key driver for the over achievement of CIP has been the management of vacancies across the Trust, with a number of these savings being converted to recurring savings in the final month of the year, along with gains in productivity across the organisation.

3.0 Income

3.1 Summary Clinical Income by POD

The table below shows the plan resubmission to Monitor. This plan includes the previously reported over performance.

Income by POD	Year to Date			Full Year			Full Year		
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	
Elective	67.1	65.1	(2.0)	-	64.7	0.4	67.1	-	●
Day Cases	38.5	38.1	(0.4)	-	37.9	0.2	38.5	-	●
Non-Elective	96.5	104.0	7.5	-	104.3	(0.3)	96.5	-	●
Outpatient	75.2	74.6	(0.6)	-	74.8	(0.2)	75.2	-	●
A&E	13.9	13.4	(0.5)	-	13.4	-	13.9	-	●
Maternity	17.7	17.4	(0.3)	-	17.4	-	17.7	-	●
Critical Care Services	34.8	33.3	(1.5)	-	33.7	(0.4)	34.8	-	●
Excluded Drugs & Devices	46.8	48.5	1.7	-	48.9	(0.4)	46.8	-	●
Community Services	50.0	50.5	0.5	-	50.4	0.1	50.0	-	●
Other NHS	65.0	73.8	8.8	-	70.0	3.8	65.0	-	●
Total Clinical Income	505.5	518.7	13.2	-	515.5	3.2	505.5	-	●
Emergency Marginal Tariff	(0.6)	(1.5)	(0.9)	-	(1.4)	(0.1)	(0.6)	-	●
Emergency Readmissions	(3.1)	(3.0)	0.1	-	(3.0)	-	(3.1)	-	●
Operational Penalties	-	(1.5)	(1.5)	-	(1.5)	-	-	-	●
Total Penalties	(3.7)	(6.0)	(2.3)	-	(5.9)	(0.1)	(3.7)	-	●
CQUIN	9.5	10.7	1.2	-	10.2	0.5	9.5	-	●
Total Clinical Income	511.3	523.4	12.1	-	519.8	3.6	511.3	-	●

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.

Against the revised Monitor plan the Trust is reporting an over performance of £12.1m. The key areas of performance against the revised plan are:

- Elective income has underperformed by (£2.0m) against a forecast year-end under performance of (£2.4m). Cardiothoracic, Neurosurgery and General Surgery continue to be the over performing specialties while Trauma and Orthopaedics are the main driver for the under performance.
- Non-Elective has over performed of £7.5m against a forecast over performance of £7.8m. This is driven by the revised plan reflecting an expected drop in activity which didn't materialise.
- Outpatients have underperformed by (£0.6m) against a forecast of (£0.4m) last month.
- Day cases have outturn at (£0.4m) behind plan which is an improvement from last month's forecast outturn of (£0.6m).
- Critical care under performance of (£1.5m) is due to the revised Monitor plan being based on April and May actuals which are significantly higher than the year to date average. The Trust would have achieved the original planned critical care income.
- Within Other NHS the Trust has recognised contract variations of £4.8m and adjustments have been made within this line for agreed outturn positions with Commissioners.

The Trust has reported penalties greater than planned of (£2.3m) against a forecast outturn last month of (£2.2m). The key penalties the Trust has incurred are:

- The Emergency Marginal tariff outturn was (£0.9m) against a forecast to be (£0.8m).
- Emergency re-admissions outturn was £0.1m better than planned. The Trust is expecting to complete a readmissions audit in 2015-16.
- Operational penalties of (£1.6m), include RTT of (£0.3m), ambulance handover (£0.6m), CDIFF (£0.3m) and others (£0.4m) including; diagnostics and MRSA. Outpatient New to Review penalty with Hambleton, Richmondshire and Whitby CCG's has remained at 1:1.95 against a target of 1:1.9 generating (£0.1m) penalty YTD.

The Trust has achieved all the CQUIN targets on all NHS England contracts for the Year and has provided for non-achievement of specific schemes against NHS South Tees CCG's and NHS Hambleton, Richmondshire & Whitby

CCG's relating to Friends and Family Test – Increase Response Rate (£0.1m), Discharge Checklist (£0.2m) & Ambulance Handovers (£0.1m)

3.2 Summary of Income by Commissioner

Income by Commissioner	Year to Date-Contract		Year to Date-Actual*		Year to Date-Variance		Full Year	
	Activity	Value £m	Activity	Value £m	Activity	Value £m	Annual Plan £m	Forecast Variance £m
NHS South Tees (ST) CCG								
Acute	517,422	170.6	562,068	181.0	44,646	10.4	170.6	-
Community	72,103	32.7	69,155	32.8	(2,948)	0.1	32.7	-
Associate of NHS ST CCG								
Acute	174,679	52.8	180,210	53.1	5,531	0.3	52.8	-
Community	1,197	0.3	1,460	0.4	263	0.1	0.3	-
NHS Hambleton et al **								
Acute	217,256	69.8	230,011	73.3	12,755	3.5	69.8	-
Community	-	9.2	2,762	9.2	2,762	-	9.2	-
Specialised								
Acute	264,203	139.7	279,866	146.0	15,663	6.3	139.7	-
Other								
Acute	50,578	15.1	51,765	16.7	1,187	1.6	15.1	-
Community	-	8.9	1,025	9.2	1,025	0.3	8.9	-
Other		12.2		1.7		(10.5)	12.2	-
Total Clinical Income	1,297,438	511.3	1,378,322	523.4	80,884	12.1	511.3	-

*Year to Date-Actual includes 1 month forecast







**NHS Hambleton, Richmondshire and Whitby CCG and Associates

Contract performance

- In February the acute contract over performance by £0.6m (1.7%). The year to date over performance is now £14.4m (3.5%).
- The community contract under performance in February by £0.1m (3.1%) giving a year to date under performance of £0.3m (0.7%). £0.6m of this under performance is from South Tees community hospitals bed days. We have an agreement that we will receive at least the planned contract level for this activity so when this adjustment is made the actual position is an over performance of £0.2m (0.5%)
- The combined over performance, including the bed days adjustment, is £14.6m (3.2%) with an outturn of £15.6m (3.1%). This is £1.4m lower than the forecast last month.
- £2.2m of the over performance is from pass-through items.
- GP/GDP referrals were 0.2% lower in February than in February last year giving a year to date position 0.7% higher than last year. Consultant referrals were the 4.2% lower in February with a year to date position 7.0% up on last year.
- The outpatient waiting list rose by 81 cases to 15,675, 184 cases higher than at the end of March.
- The inpatient waiting fell 204 to 4,835, 237 cases lower than at the end of March.
- Other income is below plan and includes an adjustment to align the total planned clinical income to the revised Monitor plan that was submitted in quarter two.

4.0 Expenditure







4.1 Pay Expenditure

Expenditure - Pay	Year to Date			Full Year			Full Year		
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	
Management And Admin	(44.2)	(43.2)	1.0	-	(43.3)	0.1	(44.2)	-	
Medical And Dental	(90.7)	(88.7)	2.0	-	(89.2)	0.5	(90.7)	-	
Nursing And Support	(138.8)	(142.2)	(3.4)	-	(142.9)	0.7	(138.8)	-	
Scientific, Therapies & Tech	(46.8)	(46.8)	-	-	(46.8)	-	(46.8)	-	
Agency Staff External	(10.2)	(10.0)	0.2	-	(9.7)	(0.3)	(10.2)	-	
Total Pay Expenditure	(330.7)	(330.9)	(0.2)	-	(331.9)	1.0	(330.7)	-	

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.

- Pay expenditure YTD is (£0.2m) behind plan and the variance has slightly worsened in March, the outturn position is £1.0m ahead of the forecast position in March, this is due to lower than expected staffing costs in the last month of the financial year.
- Medical and Dental is less than plan by £2.0m. This is due to lower levels of premium payments than anticipated, tight cost control and increased productivity.
- Nursing and Support are (£3.4m) overspent this is partially due to increased activity and winter pressures. This additional cost is offset against additional income received for the increased activity and winter pressures funding.
- Agency Staff External is underspent by £0.2m, this is due to the use of less medical locums than anticipated and continuing cost control across the Trust.

4.2 Non-Pay Expenditure

Expenditure - Non-Pay	Year to Date			Full Year			Full Year		
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	
Clinical Services And Supplies	(51.7)	(52.6)	(0.9)	-	(51.4)	(1.2)	(51.7)	-	
Drugs	(14.0)	(14.0)	-	-	(14.6)	0.6	(14.0)	-	
Excluded Drugs And Devices	(46.9)	(48.7)	(1.8)	-	(47.8)	(0.9)	(46.9)	-	
Independent Sector	(7.4)	(7.0)	0.4	-	(7.1)	0.1	(7.4)	-	
Non Clinical Supplies	(63.6)	(55.7)	7.9	-	(54.6)	(1.1)	(63.6)	-	
Total Non-Pay Expenditure	(183.6)	(178.0)	5.6	-	(175.5)	(2.5)	(183.6)	-	

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.

- Non pay expenditure is £5.6m underspent with the outturn position £2.5m worse than forecast at Month 11. This worsening from forecast is driven by an increase in non clinical supplies due to an increase in activity particularly over winter that has continued into March.
- The underspent relates to non clinical supplies. Due to high levels of income and expenditure in quarter 1 the revised plan overstated the non-pay and income plans. This has led to large compensating variances in income and expenditure, particularly due to winter pressures.
- Increased activity levels are being achieved at a lower cost than estimated and this efficiency is contributing to the underspend position, and over achievement of planned CIP.
- Independent sector spend is ahead of plan by £0.4m a slight worsening in month. This is due to an increase of the use of the independent sector specifically in relation to orthopaedics and the drive by the Trust and Commissioners to meet patient waiting time requirements with this being delivered at a lower marginal cost.
- Drugs has achieved an outturn position in line with plan, the year to date actual includes additional expenditure over the winter months (off-set by additional activity based income).

4.3 Technical Items

- The Trust has spent £5.6m on restructuring costs at outturn, this expenditure was planned and includes professional fees, redundancy payments and voluntary resignation payments. It forms part of the Trust's commitment to deliver additional CIP through 'Continuing the Journey' and the upfront investment required to ensure savings are identified for future years.
- Other non-operating costs include contingent rent on the PFI and profit/loss on disposal of assets.

4.4 Capital Expenditure











Capital Programme	Year to Date			Full Year			Full Year		
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Change	Annual Plan	Variance	
	£m	£m	£m	£m	£m	£m	£m	£m	
PFI Lifecycle Investment	(5.8)	(5.7)	0.1	-	(5.8)	0.1	(5.8)	-	●
Nursing Technology Fund	(1.3)	(1.1)	0.2	-	(1.1)	-	(1.3)	-	●
Site Reconfiguration	(2.0)	(2.5)	(0.5)	-	(2.5)	-	(2.0)	-	●
Information Technology	(1.7)	(2.6)	(0.9)	-	(2.3)	(0.3)	(1.7)	-	●
Rolling/Replacement programme	(3.3)	(3.7)	(0.4)	-	(4.1)	0.4	(3.3)	-	●
Car Parking	(3.4)	(3.0)	0.4	-	(3.0)	-	(3.4)	-	●
Decontamination SSD	(1.0)	(0.6)	0.4	-	(0.7)	0.1	(1.0)	-	●
Haematology Day Unit and Inpatient Ward	(0.7)	(0.5)	0.2	-	(0.5)	-	(0.7)	-	●
Additional Theatre	(0.7)	(0.5)	0.2	-	(0.5)	-	(0.7)	-	●
Block Allocations (Estates, ch.exec emergency, X-ray tubes)	(1.5)	(1.4)	0.1	-	(1.4)	-	(1.5)	-	●
Other Schemes	(1.5)	(2.1)	(0.6)	-	(1.7)	(0.4)	(1.5)	-	●
Total Capital Programme Expenditure	(22.9)	(23.7)	(0.8)	-	(23.6)	(0.1)	(22.9)	-	

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.

- The capital programme is £0.8m overspent with an outturn of £23.7m, £0.7m of the overspend relates to Clinical Noting for which external funding has been received.
- The remaining overspend relates to the replacement of medical equipment which are fully covered by underspends in other areas.

5.0 Clinical Centre Performance

5.1 Summary Centre Performance

Clinical Centre	Year to Date			Full Year			Full Year		
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m	
Integrated Medical Care	17.8	19.9	2.1	-	20.5	(0.6)	17.8	-	
Clinical & Diagnostic	(25.8)	(24.7)	1.1	-	(24.9)	0.2	(25.8)	-	
Trauma, Theatres & Anaes.	(0.6)	(4.1)	(3.5)	-	(3.5)	(0.6)	(0.6)	-	
Tertiary	16.3	17.0	0.7	-	17.8	(0.8)	16.3	-	
Surgical	34.9	36.9	2.0	-	37.1	(0.2)	34.9	-	
Women & Children	18.6	19.4	0.8	-	19.9	(0.5)	18.6	-	
Specialty Medicine	25.0	25.3	0.3	-	25.6	(0.3)	25.0	-	
Corporate	(73.0)	(64.9)	8.1	-	(70.9)	6.0	(73.0)	-	
Non Operating	(31.6)	(31.8)	(0.2)	-	(31.7)	(0.1)	(31.6)	-	
Underlying (Deficit)/Surplus	(18.4)	(7.0)	11.4	-	(10.1)	3.1	(18.4)	-	

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.










In month the performance of Trauma, Theatres & Anaesthetics has worsened in month and has now outturned the year behind plan by (£3.5m), all other centres have finished the year ahead of the revised plan position.

Non Operating is behind plan at the year end by (£0.2m), due to reductions in depreciation and the delayed sale of surplus Trust property.

The Corporate centre includes all other operating expenditure not directly part of the seven clinical centres and the centre also includes all re-profiling of budgets to reconcile the internal plan to the resubmitted plan to Monitor. This includes additional clinical income and the additional CIP's relating to "Continuing the Journey" not allocated to the clinical centres.

In 2015/16 all CIP and income will be attributed to Centres as part of the Trusts on-going improvement in management information.

5.2 Integrated Medical Care

Integrated Medical Care	Year to Date			Full Year			Full Year		
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m	
Clinical Income	98.9	100.0	1.1	-	100.9	(0.9)	98.9	-	
Other Income	2.4	2.5	0.1	-	2.5	(0.0)	2.4	-	
Total Income	101.3	102.5	1.2	-	103.4	(0.9)	101.3	-	
Pay	(62.1)	(60.6)	1.5	-	(60.7)	0.1	(62.1)	-	
Non-Pay	(21.4)	(22.0)	(0.6)	-	(22.2)	0.2	(21.4)	-	
Total Expenses	(83.5)	(82.6)	0.9	-	(82.9)	0.3	(83.5)	-	
Other						-			
Underlying (Deficit)/Surplus	17.8	19.9	2.1	-	20.5	(0.6)	17.8	-	
Memorandum Items									
CIP Programme	2.2	3.5	1.3		3.3	0.2	2.2	-	

The centre has finished the year £2.1m ahead of plan, a slight worsening on the forecast position by (£0.6m). The in month worsening is due to lower income levels from elective activity, particularly in relation to critical care.

The centre performance is being achieved through income over performance and a pay underspend. Income over performance relates to non-elective and critical care.

The centre has overspent on non-pay by (£0.6m) due in part to the centres activity over performance. A reported pay underspend of £1.5m is driven from savings incurred in nursing pay expenditure from the in year closure of a number of beds in key wards and Community Hospitals.

The CIP programme has finished the year £1.3m ahead of plan a slight improvement on the previously reported forecast position, due to higher savings begin delivered from vacancies within the centre.

5.3 Clinical and Diagnostic

Clinical & Diagnostic	Year to Date			Full Year			Full Year		
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m	
Clinical Income	33.8	34.1	0.3	-	34.0	0.1	33.8	-	●
Other Income	3.5	3.0	(0.5)	-	3.1	(0.1)	3.5	-	●
Total Income	37.3	37.1	(0.2)	-	37.1	-	37.3	-	●
Pay	(48.0)	(46.2)	1.8	-	(46.2)	-	(48.0)	-	●
Non-Pay	(15.1)	(15.6)	(0.5)	-	(15.8)	0.2	(15.1)	-	●
Total Expenses	(63.1)	(61.8)	1.3	-	(62.0)	0.2	(63.1)	-	●
Other						-		-	●
Underlying (Deficit)/Surplus	(25.8)	(24.7)	1.1	-	(24.9)	0.2	(25.8)	-	●
Memorandum Items									
CIP Programme	1.5	3.0	1.5		2.8	0.2	1.5	-	●

The centre has reported a £1.1m underspend against plan, ahead of the Month 11 forecast value of £0.9m the underspend is driven by savings in pay expenditure across the centre along with increased income.

The centre has reported an underspend on pay against plan of £1.8m, this has been driven by significant vacancies across Scientific, Therapies Technical and pay underspends are offset by an overall income underperformance. Clinical income is slightly ahead of plan by £0.3m driven by and over performance on Radiology Direct Access activity and Radiology Unbundled Diagnostic Imaging.

Other income is behind plan due to a historic Pathology income target which has not been achieved by the year end. Overall income is (£0.2m) behind plan at the year end, driven by the reduction in other income against plan.

The CIP programme is ahead of plan by £1.5m an improvement in month on forecast values by £0.2m.

5.4 Trauma, Theatres and Anaesthetics

Trauma, Theatres & Anaes.	Year to Date			Full Year			Full Year		
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m	
Clinical Income	66.5	64.2	(2.3)	-	64.2	0.0	66.5	-	●
Other Income	2.1	2.7	0.6	-	2.6	0.1	2.1	-	●
Total Income	68.6	66.9	(1.7)	-	66.8	0.1	68.6	-	●
Pay	(52.4)	(52.3)	0.1	-	(52.0)	(0.3)	(52.4)	-	●
Non-Pay	(16.8)	(18.7)	(1.9)	-	(18.3)	(0.4)	(16.8)	-	●
Total Expenses	(69.2)	(71.0)	(1.8)	-	(70.3)	(0.7)	(69.2)	-	●
Other						-		-	●
Underlying (Deficit)/Surplus	(0.6)	(4.1)	(3.5)	-	(3.5)	(0.6)	(0.6)	-	●
Memorandum Items									
CIP Programme	1.0	1.0	-		1.0	-	1.0	-	●

The centre has overspent against plan by (£3.5m), a worsening in March against a previously forecast overspend by (£0.6m). The main driver for the overspend is an increase in the use of the independent sector for Orthopaedics, driving up the overspend on non pay expenditure.

Income is behind plan by (£1.7m) and non-pay is overspent by (£1.9m), an increase in March. This mainly relates to elective income in Orthopaedics and clinical supplies in Orthopaedics and Theatres.

The centre has reported a number of contract variations and specific funding for winter pressures that are shown within Clinical Income in the centre.

At the year end the CIP programme has achieved the originally set plan of £1.0m

5.5 Tertiary

Tertiary	Year to Date			Full Year			Full Year	
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m
Clinical Income	78.0	80.2	2.2	-	80.6	(0.4)	78.0	-
Other Income	2.1	2.1	-	-	2.1	-	2.1	-
Total Income	80.1	82.3	2.2	-	82.7	(0.4)	80.1	-
Pay	(38.2)	(38.8)	(0.6)	-	(38.8)	-	(38.2)	-
Non-Pay	(25.6)	(26.5)	(0.9)	-	(26.1)	(0.4)	(25.6)	-
Total Expenses	(63.8)	(65.3)	(1.5)	-	(64.9)	(0.4)	(63.8)	-
Other						-		
Underlying (Deficit)/Surplus	16.3	17.0	0.7	-	17.8	(0.8)	16.3	-
Memorandum Items								
CIP Programme	1.6	2.7	1.1		2.7	-	1.6	-

The centre has reported a favourable variance of £0.7m against plan, however with a (£0.8m) variance from forecast. Key drivers for the change against forecast include lower than expected income levels for non-elective procedures in February along with a increase in non pay costs due to the year end stock take.

The position is predominantly due to income over performance, with a year end income over performance of £2.2m mainly across Cardiothoracic Surgery, Neuro Surgery and Cardiology.

Both the pay overspend (£0.6m) and non-pay overspend of (£0.9m) are due to additional activity, for which income has been received, with the activity delivered at a reduced marginal cost, contributing to the continued favourable position for the centre.

The CIP programme has reported being ahead of plan by £1.1m, in line with previous forecasted values.

5.6 Surgical

Surgical	Year to Date			Full Year			Full Year	
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m
Clinical Income	82.6	84.5	1.9	-	84.4	0.1	82.6	-
Other Income	2.7	2.6	(0.1)	-	2.6	(0.0)	2.7	-
Total Income	85.3	87.1	1.8	-	87.0	0.1	85.3	-
Pay	(34.8)	(34.0)	0.8	-	(34.2)	0.2	(34.8)	-
Non-Pay	(15.6)	(16.2)	(0.6)	-	(15.7)	(0.5)	(15.6)	-
Total Expenses	(50.4)	(50.2)	0.2	-	(49.9)	(0.3)	(50.4)	-
Other						-		
Underlying (Deficit)/Surplus	34.9	36.9	2.0	-	37.1	(0.2)	34.9	-
Memorandum Items								
CIP Programme	0.4	0.9	0.5		0.9	-	0.4	-

The centre has out turned ahead of plan by £2.0m, a worsening on forecast by £0.2m, this is as a result of additional activity to reduce RTT pressures and also as a result of increased referrals.

Non pay is (£0.6m) overspent this is mainly due to cochlear activity that is included in the income over performance of £1.8m.

Pay has underspent by £0.8m, the centre has incurred significant agency costs offset by underspends on Nursing and Medical pay.

The CIP programme has finished the year £0.5m ahead of plan, in line with the previously forecasted figure.

5.7 Women and Children

Women & Children	Year to Date			Full Year			Full Year	
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m
Clinical Income	61.5	60.9	(0.6)	-	61.4	(0.5)	61.5	-
Other Income	2.5	2.3	(0.2)	-	2.3	0.0	2.5	-
Total Income	64.0	63.2	(0.8)	-	63.7	(0.5)	64.0	-
Pay	(40.2)	(38.4)	1.8	-	(38.5)	0.1	(40.2)	-
Non-Pay	(5.2)	(5.4)	(0.2)	-	(5.3)	(0.1)	(5.2)	-
Total Expenses	(45.4)	(43.8)	1.6	-	(43.8)	-	(45.4)	-
Other						-		
Underlying (Deficit)/Surplus	18.6	19.4	0.8	-	19.9	(0.5)	18.6	-
Memorandum Items								
CIP Programme	0.9	0.9	-	-	0.9	-	0.9	-

The centre has reported an underspent against plan of £0.8m, a worsening in month against forecasted figures by (£0.5m) due to lower than expected income levels within the centre.

Income is below plan (£0.8m) due to lower than planned births and the maternity pathway reduced income. The centre is managing the centre position by maintaining a pay underspend relating to vacancies.

The CIP programme has delivered on plan at the year end at £0.9m.

5.8 Specialty Medicine

Specialty Medicine	Year to Date			Full Year			Full Year	
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m
Clinical Income	87.3	90.6	3.3	-	90.7	(0.1)	87.3	-
Other Income	1.2	0.7	(0.5)	-	0.7	0.0	1.2	-
Total Income	88.5	91.3	2.8	-	91.4	(0.1)	88.5	-
Pay	(28.4)	(29.0)	(0.6)	-	(29.0)	-	(28.4)	-
Non-Pay	(35.1)	(37.0)	(1.9)	-	(36.8)	(0.2)	(35.1)	-
Total Expenses	(63.5)	(66.0)	(2.5)	-	(65.8)	(0.2)	(63.5)	-
Other						-		
Underlying (Deficit)/Surplus	25.0	25.3	0.3	-	25.6	(0.3)	25.0	-
Memorandum Items								
CIP Programme	1.2	1.1	(0.1)	-	1.1	-	1.2	-

The centre is underspent at the year end by £0.3m a slight worsening against forecast values by (£0.3m) due to reductions in income from non elective activity and an increase in non pay costs.

Income is £2.8m ahead of plan. They key areas of over performance are outpatients in Gastroenterology, Haematology and Radiotherapy/Oncology.

The pay overspend is (£0.6m) and is mainly due to GP and nursing locums across community care. The centre has mitigated this additional expenditure by offsetting this against other underspent budgets within the centre.

The non-pay overspend is the biggest challenge to the centre and is (£1.9m) overspent. This overspend is on drugs and clinical supplies. Non clinical supplies relate to prime contracts, patient transport and rent/rates at the health centres.

The CIP programme has reported being (£0.1m) behind plan at the year end, in line with previous months forecasted values.

5.9 Corporate

Corporate	Year to Date			Full Year			Full Year	
	Plan £m	Actual £m	Variance £m	Current Forecast £m	Previous Forecast £m	Forecast Difference £m	Annual Plan £m	Forecast Variance £m
Clinical Income	2.7	8.9	6.2	-	3.5	5.4	2.7	-
Other Income	26.0	19.8	(6.2)	-	19.4	0.4	26.0	-
Total Income	28.7	28.7	-	-	22.9	5.8	28.7	-
Pay	(26.6)	(31.6)	(5.0)	-	(32.5)	0.9	(26.6)	-
Non-Pay	(75.1)	(62.0)	13.1	-	(61.3)	(0.7)	(75.1)	-
Total Expenses	(101.7)	(93.6)	8.1	-	(93.8)	0.2	(101.7)	-
Other						-		
Underlying (Deficit)/Surplus	(73.0)	(64.9)	8.1	-	(70.9)	6.0	(73.0)	-
Memorandum Items								
CIP Programme	13.0	12.9	(0.1)	-	12.7	0.2	13.0	-

The table collates all other operating expenditure in the Trust and relates to all Corporate Directorates.

The corporate centre is ahead of plan by £8.1m. The income and expenditure position reflects the additional income and expected expenditure in the resubmitted plan to Monitor but has not been adjusted in the centre plans. The overstating of the income and expenditure plans in the resubmission to Monitor have resulted in significant variances in income and non-pay.

The other income under performance of (£6.2m) is offset by the Centres costs being behind plan by £8.1m

The CIP programme plan includes some of the "Continuing the Journey" CIP's not allocated to centres.

6.0 Statement of Financial Position (SoFP)

6.1 SoFP

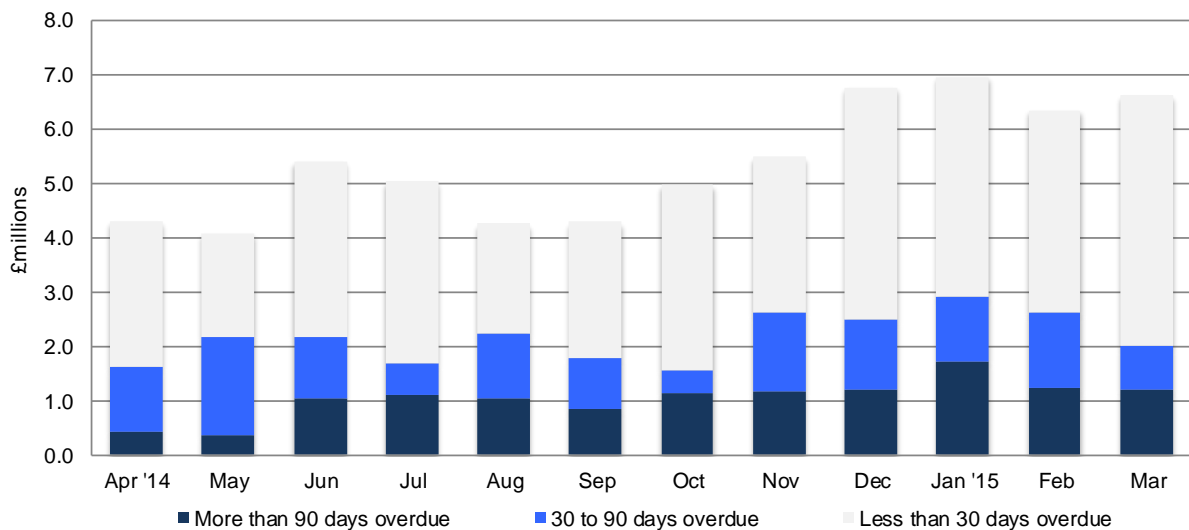
Statement of Financial Position	Year to Date			Full Year			Full Year	
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Change	Annual Plan	Variance
	£m	£m	£m	£m	£m	£m	£m	£m
Non-Current Assets								
PFI	183.4	176.4	(7.0)	-	147.6	28.8	183.4	-
Non-PFI	69.5	73.3	3.8	-	68.9	4.4	69.5	-
Trade and Other Receivables	1.8	1.8	-	-	1.8	-	1.8	-
Total Non-Current Assets	254.7	251.5	(3.2)	-	218.3	33.2	254.7	-
Current Assets								
Inventories	7.8	7.8	-	-	7.8	-	7.8	-
Trade and Other Receivables	10.9	16.1	5.2	-	10.9	5.2	10.9	-
Prepayments & Accrued Income	21.0	37.2	16.2	-	29.7	7.5	21.0	-
Cash and Cash Equivalents	0.5	11.1	10.6	-	8.0	3.1	0.5	-
Total Current Assets	40.1	72.2	32.1	-	56.4	15.8	40.1	-
Total Assets	294.8	323.7	28.8	-	274.6	49.1	294.8	-
Current Liabilities								
Trade and Other Payables	(37.2)	(41.4)	(4.2)	-	(33.6)	(7.8)	(37.2)	-
Interest Bearing Borrowings & Finance Leases	(4.4)	(15.6)	(11.2)	-	(5.0)	(10.6)	(4.4)	-
PFI Finance Leases	(3.7)	(3.7)	-	-	(3.7)	-	(3.7)	-
Other Financial Liabilities	(12.2)	(15.1)	(2.9)	-	(12.2)	(2.9)	(12.2)	-
Provisions	(0.5)	(2.7)	(2.2)	-	(0.5)	(2.2)	(0.5)	-
Total Current Liabilities	(58.0)	(78.5)	(20.5)	-	(55.0)	(23.5)	(58.0)	-
Total Assets less Current Liabilities	236.8	245.1	8.3	-	219.6	25.5	236.8	-
Non-Current Liabilities								
Trade and Other Payables	-	-	-	-	-	-	-	-
Interest Bearing Borrowings & Finance Leases	(29.5)	(44.9)	(15.4)	-	(52.6)	7.7	(29.5)	-
PFI Finance Leases	(105.5)	(105.5)	-	-	(105.5)	-	(105.5)	-
Other Financial Liabilities	-	-	-	-	-	-	-	-
Provisions	(1.7)	(1.7)	-	-	(1.7)	-	(1.7)	-
Total Non-Current Liabilities	(136.7)	(152.1)	(15.4)	-	(159.8)	7.7	(136.7)	-
Total Assets Employed	100.1	93.0	(7.1)	-	59.8	33.2	100.1	-
Financed by Taxpayers' Equity:								
Public Dividend Capital	172.9	156.2	(16.7)	-	156.1	0.1	172.9	-
Income and Expenditure Reserve	(134.0)	(120.7)	13.3	-	(139.5)	18.8	(134.0)	-
Revaluation Reserve	34.7	31.0	(3.7)	-	16.7	14.3	34.7	-
Other Reserves	26.5	26.5	-	-	26.5	-	26.5	-
Total Taxpayers' Equity	100.1	93.0	(7.1)	-	59.8	33.2	100.1	-

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.

- Non-Current Assets forecast has reduced on the basis that lifecycle works undertaken by the PFI partner were lower than originally planned (£4.1m). This reduction is partly offset by new investment in medical and prescribing equipment via finance leases (£1.8m) which has resulted in a corresponding increase in current and non-current liabilities.
- Prepayments from the February forecast have increased by £7.5m due to the delayed spend of the lifecycle provision (£4.1m) and early payment of 2015/16 rates to local authorities (£2.8m).
- Trade and Other Receivables have increased by £5.2m due to year end agreements with our Commissioners, specifically NHS England (£4.4m) which was paid on 1 April 2015.
- Public Dividend Capital has decreased due to DoH guidance issued in late March on the treatment of Interim Support which has been provided to the Trust. This funding (£14.4m) is now treated within current and non-current interest bearing borrowings. The decrease has been partially offset by the capital funding provided through the DoH (£0.7m) for the Clinical Noting project.
- Interest Bearing Borrowings includes £10.5m working capital support which will be replaced in 2015/16 by interim revenue and interim capital support.
- Cash was £10.6m above plan at outturn due to the receipt of £10.5m Interim Revolving Working Capital support from the Department of Health at the end of March, to fund PFI and creditor commitments in the first week of April.

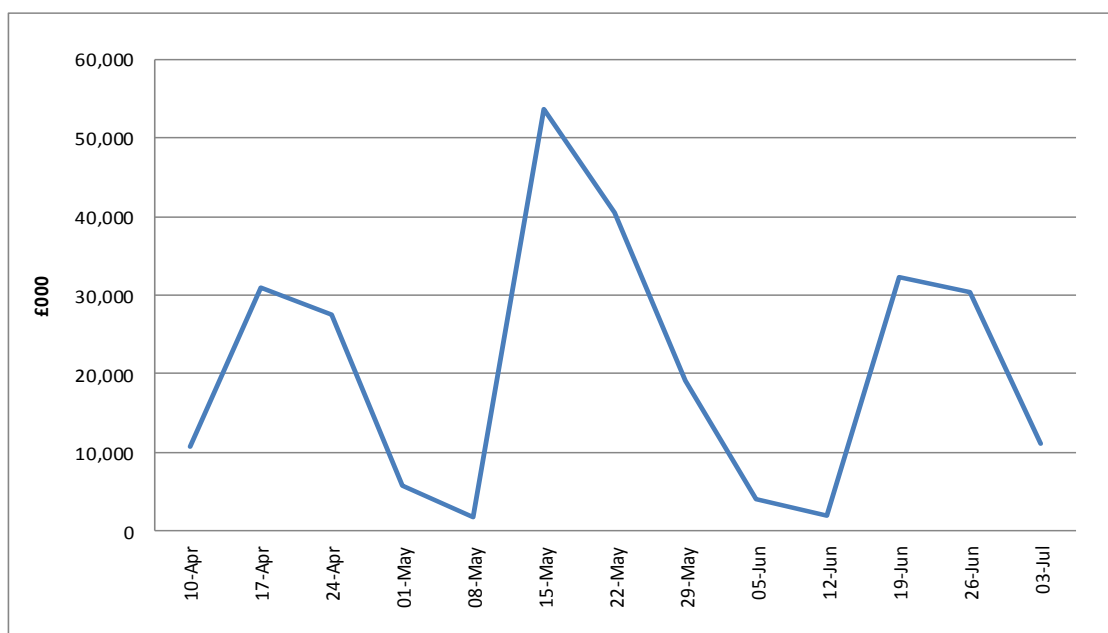
- Current provisions include £2.3m relating to redundancy and voluntary severance costs of restructuring within the Trust that will take place in 2015/16.
- The Trust's I&E reserve in-year movement is due to the improvement in the revenue position.

6.2 Aged Debt



- Aged debt represents a low risk to the Trust. Of the £1.2m over 90 days outstanding, the only significant aged debt relates to £0.2m from NHS Property Services for community based porter and admin recharges, £0.1m from County Durham and Darlington FT for consultant recharges, and £0.3m from North Tees and Hartlepool FT for maternity pathway and community dental sessions. Further work will be undertaken on aged debt throughout April to reduce the value of outstanding debt.
- Of the £0.8m of 30 to 90 days overdue, the only significant aged debts relate to £0.1m from NHS Property Services as per the 90 days overdue category and £0.1m from Endeavour PLC for the concessionaire reserve scheme.

6.3 Cashflow



- The Trust received its first drawdown of funding in February (£14.4m) in the form of interim revenue (£7.2m) and interim capital (£7.2m) support through the Department of Health with an additional drawdown in March (£10.5m) to fund PFI and creditor commitments.

- The lowest point on cash balances is the first and second week of each month. The position improves following receipt of block contract income from our Commissioners around the 15th, then reduces due to salary payments on the last working day of each month.

7.0 CIP and Transformation

Cost Improvement	Year to Date			Full Year			Full Year	
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance
	£m	£m	£m	£m	£m	£m	£m	£m
Original Schemes	11.8	12.7	0.9	-	12.6	0.1	11.8	-
Wave one workstreams	5.6	2.7	(2.9)	-	2.6	0.1	5.6	-
Further Workstreams	4.4	10.6	6.2	-	10.2	0.4	4.4	-
Total Cost improvement	21.8	26.0	4.2	-	25.4	0.6	21.8	-

The green and red icons represent either an improvement green or worsening red in the forecast position compared to the previous month.

- The CIP is £4.2m ahead of plan and has finished the year £0.6m ahead of the Month 11 forecasted position. The overachievement of CIP in this financial year has contributed to the improved Trusts year end deficit position.
- Further workstreams are ahead of plan by £6.2m and wave one workstreams are (£2.9m).

Cost Improvement	Year to Date			Full Year			Full Year	
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance
	£m	£m	£m	£m	£m	£m	£m	£m
Workforce	9.1	11.3	2.2	-	10.8	0.5	9.1	-
Business Improvement	10.4	12.0	1.6	-	11.9	0.1	10.4	-
Medicines Management	0.3	0.5	0.2	-	0.5	-	0.3	-
Procurement	2.0	2.2	0.2	-	2.2	-	2.0	-
Total Cost improvement	21.8	26.0	4.2	-	25.4	0.6	21.8	-

- Workforce is ahead of plan by £2.2m. This has been driven by managing vacancies across management and admin posts across the Trust. A number of these savings have now been converted into recurrent savings.
- Procurement is ahead of plan by £0.2m in line with previous forecasts.
- Further work streams have been developed to off-set delays in CIP delivery.

Cost Improvement	Year to Date			Full Year			Full Year	
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance
	£m	£m	£m	£m	£m	£m	£m	£m
Recurrent	18.6	18.9	0.3	-	18.9	-	18.6	-
Non Recurrent	3.2	7.1	3.9	-	6.5	0.6	3.2	-
Total Cost improvement	21.8	26.0	4.2	-	25.4	0.6	21.8	-

- £18.9m of the £26.0m savings are recurring savings in the year end position.
- A number of non recurring savings relating to vacancies across the Trust have been convert to recurring savings in the final month of the year following the finalisation of the budget setting process for all centres.
- The full year effect of the 2014/15 recurrent savings is £22.5m against a plan of £21.8m, no CIP is being carried over into the 2015/16 financial year.

Cost Improvement	Year to Date			Full Year			Full Year	
	Plan	Actual	Variance	Current Forecast	Previous Forecast	Forecast Difference	Annual Plan	Forecast Variance
	£m	£m	£m	£m	£m	£m	£m	£m
Full year effect in 2015/16	21.8	22.5	0.7	-	21.8	0.7	21.8	-
Total Cost improvement	21.8	22.5	0.7	-	21.8	0.7	21.8	-