

Finance Report Month 01 (April) 2012/13

Key Financial Indicators

	2012/13 (Month 1)		Page
Financial Performance	Actual deficit (£503k) in line with the plan	R	2
Monitor Financial Risk Rating	2 (YTD)	R	9
CIP performance	£156k – G3 @ M1	R	3
Liquidity (Net Current Liabilities)	(£0.497m)	G	7

Commentary

The Trust had a deficit of £0.5m as at the end of Month 1. This is in line with the plan which reflected the historically lower level of activity in April, and anticipated less that a 1/12 of the savings target being achieved. This position has to be improved quickly.

Income from patient activity in month, showed a favourable variance of £0.5m against plan. This was mainly due to increases in both emergency and elective activity; the latter relating to the achievement of 18 week targets. Upon conclusion of contract negotiations with NHS Hertfordshire, the annual plan for 2012/13 increased to £234.5m; £0.5m higher than reported to the March Board.

Operating expenses showed an unfavourable variance of £0.4m in month; driving this position were unidentified/red savings schemes phased into Month 1. There were only £156K of 'Green' savings schemes finalised in April. Due to changes in processes relating to the new Getting Better approach there have been some delays in the completion of Gateway forms. This is being addressed and an update, including a revised savings trajectory will be shown in the Month 2 report.

The cash balance as of 30th April 2012 was £15.2m, and represents 22 days of operating expenses. Note that once the £7m relating to Watford Hospital Link Road is excluded the cash balance is reduced to £8.2m; which is equivalent to 12 days of operating expenses.

The Monitor Financial Risk Rating (FRR) was an overall rating of "2" in April and the minimum level required to achieve Foundation Trust (FT) is a "3". The Trust had a rating of 1 for the I&E surplus margin, and a lower than planned EBITDA due primarily to the low level of savings in April, this is the key financial challenge to be addressed over the next few weeks.

West Hertfordshire Hospitals NHS Trust

M01 I&E - April 2012/13

			Year to Da	te		Income and Spend Variances	Performance by Contract		
Full Year		Budget to	Actuals to	/ariance ³	Variance		-		
Budget		Date	Date				[
£'000		£'000	£'000	£'000	%	SLA Income - At month 1, the Trust is reporting a value of £511k above		YTD Actuals	
	NHS Acute Activity Revenue					the year-to-date plan. Of this, £243k relates to non-elective activity,		£'000	£'000
45,833	Elective revenue (long and short stay)	3,525	3,827	302	8.6	reflecting the increased emergency pressures being reported towards the end of 2011/12 and continuing into this financial year. Elective activity		045	(00)
80,791	Non-Elective revenue	6,320	6,564	243	3.8	is £302k above plan, which appears to relate to a catching up on 18 week	NHS Harrow	215	(63) 848
53,495	Outpatient A&E	4,217	4,082	(135)	(3.2)	wait work, combined with QIPP reductions not achieved in month 1.	NHS Hertfordshire (incl specialist commissioning) NHS Hillingdon	17,435 390	848 (48)
9,431 44,987	A&E Other NHS	777 3.487	823 3.543	46 55	5.9 1.6	Outpatient work is £135k below plan; this is being investigated further.	Other Primary Care Trusts	578	(40)
234,537	NHS Clinical Revenue. Total	18,327	18,838	511	2.8	A&E income is over-performing by 6%, reflecting ongoing emergency	Non-Contract Activity	221	(164)
234,337	Non NHS Clinical Revenue	10,327	10,030	511	2.0	pressures.	Non-Contract Activity	18.838	511
2,404	Non NHS Clinical Revenue	200	125	(75)	(37.6)	F		10,000	511
2,404		200	120	(10)	(07:0)	Non NHS Clinical Revenue - was below plan in April, this was mainly in			
2,404	Non NHS Clinical Revenue, Total	200	125	(75)	(37.6)	compensation recovery eg RTA Income.	SLA Income Variances by Division		
	Other Operating income								
8,635	Education and Training income	720	740	21	2.9			YTD Actuals	YTD Variance
17,444	Other Operating Income	1,447	1,414	(33)	(2.3)			£'000	£'000
26,080	Other Operating income, Total	2,167	2,154	(12)	(0.6)	Operating Expenses - Pay is £313k overspent, £353k of this is due to			
263,020	Operating Revenue and Income, Total	20,694	21,117	423	2.0	unachieved savings. Non-Pay is overspent due to unidentified savings to	Medicine	6,480	274
						date of £35K. Additional patient activity also increased costs of	Surgery	6,605	249
	Operating Expenses					outsourcing and drugs in the month.	Women's	3,773	(54)
159,038	Employee benefits expense	13,520	13,832	(313)	(2.3)		Clinical Support	885	24
14,282	Drug expense	1,190	1,215	(25)	(2.1)		Other	1,095	18
24,337	Clinical supplies	2,088	2,091	(3)	(0.1)			18,838	511
28,443	Non Clinical Supplies	2,192	2,191	1	0.0				
22,127	Other Operating expenses	1,219	1,292	(74)	(6.1)		Actual Income compared to Plan		
248,226	Operating Expenses, Total	20,208	20,621	(413)	(2.0)				
						Divisional Positions	29.0		
						Medicine - The Medical Division variance is due to a shortfall on savings	27.0 -	<u>7</u>	
	EBITDA					of £118k and no reductions in activity or expenditure relating to QIPP		/	
14,794	Surplus (Deficit) from Operations margin	485	496	10	2.1	schemes £28k. The remaining variance is due to the additional costs	25.0 -	/	
						associated with emergency activity that continues above plan and is	چ 23.0 -		
	Non-Operating expenses					offset by additional SLA income.	21.0		2011/12 Actuals
1,098	Interest	92	90	2	2.0		21.0	*	2012/13 Budget
7,596	Depreciation and Amortisation	633	633	0	0.0	Surgery - The overspend reflects the cost of over performance in the	19.0 -		2012/13 Actuals
3,300	PDC Dividend	275	275	0	0.0	month. Additional weekend lists have increased costs in medical staffing	17.0		
11,994	Non-Operating expenses, Total	1,000	997	2	0.2	and consumables.	Apr May Jun Jul Aug Sep Oct Nov	Dec Jan Feb Mar	
2,800	Surplus/(Deficit)	(514)	(503)	11					
	Impairment		0			Women & Children - Outsourcing of 22 patients in Gynaecology caused	Actual Spend compared to Plan		
	Surplus/(Deficit)	(514)	(503)	11		an adverse variance of £56k. This was offset by a favourable variance of			
						£62k in Maternity due to actual births being lower than plan.	29.0	1	
	Analysed by Division						27.0		
						Clinical Support - M1 variance is £64k adverse due to the CIP savings	27.0		
64,058	Medicine	5,508	5,722	(215)	(3.9)	target for the month not being achieved offset by under spends in	25.0 •	17	
50,743	Surgery	4,351	4,489	(138)	(3.2)	Pathology and Orthotics.	23.0 -		
28,460	Women's	2,347	2,359	(12)	(0.5)		Ę ^{23.0}		
26,899	Clinical Support	2,258	2,323	(64)	(2.8)	Estates & Hotel Services - M1 variance is £7k adverse due to CIP	21.0		2011/12 Ackush
21,189	Estate & Facilities	1,632	1,639	(7)	(0.4)	savings target not achieved offset by pay and maintenance under spends.	19.0	_	2012/13 Budget
24,084	Corporate	2,064	2,064	1	0.0		10.0		2012/13 Ackuala
238,369	Central Income	18,646	19,090	444	0.2	<u>Corporate</u> - Savings yet to be finalised are offset by favourable variances	17.0		, —
20,136	Other	1,000	997	2	0.2	across several Directorates.	Apr May Jun Jul Aug Sep Oct Nov	Dec Jan Feb Mar	
2,800		(514)	(503)	11					

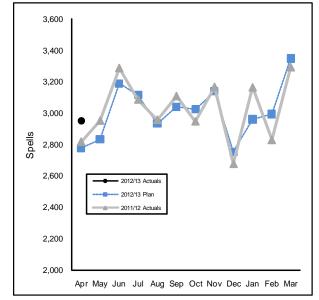
Income by Division compared to activity plan for the month ended 30 April 2012

West Hertfordshire Hospitals MHS

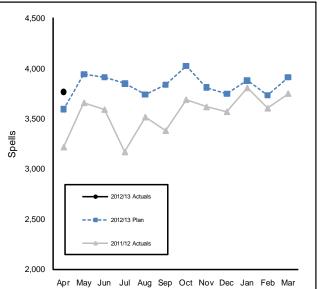
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NHS	Trust

E																NHS Trust
			Inpatie	ent			Outpa	tient			A&E			Other	Total	Medical Inpatients activity is over-performing by £282k, of which
	Division	Budget	Actuals	Variance	Variance	Budget	Actuals	Variance	Variance	Budget	Actuals	Variance	/ariance	Variance	Variance	£258k relates to non-elective activity due to ongoing emergency
		Spell	Spell	Spell	(£'000)	Attendance A	ttendance /	Attendance	(£'000)	Attendance A	ttendance A	ttendance	(£'000)	(£'000)	(£'000)	pressures. Outpatient activity is £94k below plan, in part due to
		•														late recording on PAS. The A&E over-performance of £51k
	Medicine	2,490	2,721	231	282	10,705	10,059	(646)	(94)	5,751	5,929	178	51	9	249	represents a 9% variance to the month 1 plan.
																Surgery's inpatient over-performance largely relates to elective
	Surgery	2,078	2,180	102	271	12,370	12,369	(1)	(22)	368	403	35	3	22	274	activity £229k, of which £131k is in orthopaedics. This is driven by
																the division putting on additional lists to achieve 18 week targets.
	Women's	1,803	1,819	16	(8)	9,491	9,563	72	(20)	715	715	0	(8)	(18)	(54)	The complexity of the work on these additional lists has increased
		,	,		()	,	,		. ,				()	()	. ,	income within this specialty, despite an elective activity variance
	Clinical Support													24	24	of 17 spells below plan.
	•••.••••••••••••••••••••••••••••••															Women & Children's - Variances at specialty level reveal
	High Cost Drugs													(13)	(13)	obstetrics and midwifery inpatients to be £77k below plan due to a
	riigh ooot Drugo													(10)	(10)	lower than predicted number of births in April. This may be in part
	Other													31	31	due to the removal of the non-Hertfordshire cap not as yet
	Other													51	51	impacting on patients from North West London. Neo-natal critical
-																care is £18k below plan, which is being investigated by the
	Tatal	0.074	c 700	240	EAE	20 500	24 004	(575)	(4.25)	0.004	7 0 4 7	242	40		511	division.
	Total	6,371	6,720	349	545	32,566	31,991	(575)	(135)	6,834	7,047	213	46	55	511	
L																

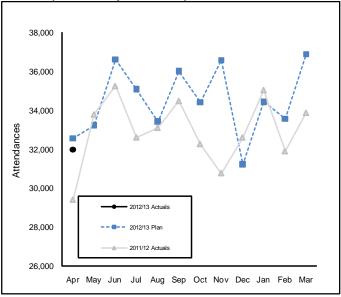
2012/13 Elective Activity Actuals Compared to Plan



2012/13 Emergency & Non-Elective Actuals Compared to Plan



2012/13 Outpatient Activity Actuals Compared to Plan





Workforce spend and Average Whole Time Equivalents for the period April 2012

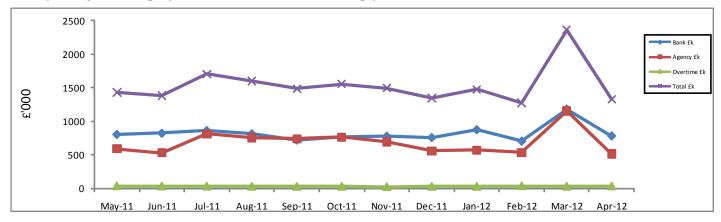
Total % Variance	12,534	784	514	13,832	13,872	40 <i>0</i> .3	3,842.9	3,752.4	90.5 2.4
Corporate	1,426	23	50	1,498	1,503	5	467.7	436.0	31.6
Estates	232	(0)	2	233	255	22	85.0	78.5	6.5
Clinical Supp.	2,034	13	66	2,112	2,105	(7)	593.4	559.3	34.1
Women's	1,918	194	115	2,227	2,297	70	573.9	559.1	14.8
Surgery	3,119	151	88	3,358	3,368	10	854.3	839.7	14.6
Medicine	3,806	405	193	4,404	4,344	(60)	1,268.7	1,279.8	(11.1)
	£'000	£'000	£'000	£'000	£'000	£'000	WTE	WTE	WTE
Division	Permanent Staff	Bank	Agency	Total Staff Costs	Budget	Variance	Budget	Actuals Worked	Variance

Analysis of Variances

Whole Time Equivalent actuals include estimated WTE for agency staff. Average WTE worked remains lower than budgeted due to vacancies across the Trust.

An increase in WTE and cost in Agency/Bank was reported in March 2012 due to additional annual leave and maternity cover. The trend on spend has now come back in line to the months prior to March 2012.

Temporary staffing spend on a 12 month rolling period

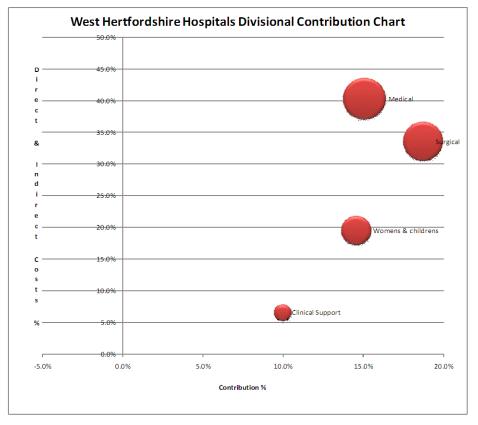


West Hertfordshire Hospitals

Service Line Reporting to 29 February 2012

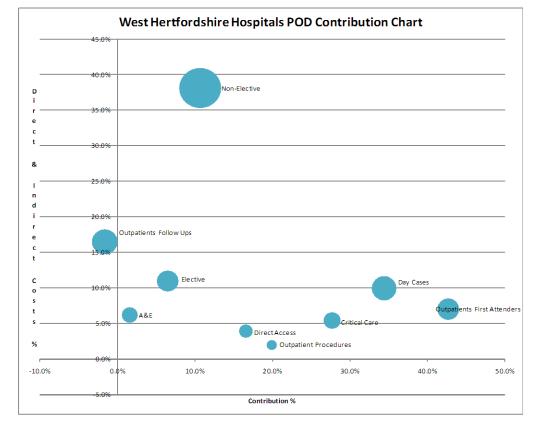
Division	Income	Direct Cost	Indirect Costs	Contribution	Overheads	Surplus/(Deficit)	Contribution	Suplus/(Deficit)
	£'000	£'000	£'000	£'000	£000	£'000	%	%
Medicine	86,631	70,458	3,130	13,043	14,485	(1,442)	15.1%	-1.7%
Surgery	75,413	53,692	7,612	14,110	10,770	3,339	18.7%	4.4%
Womens & Children	41,724	35,643	10	6,071	6,102	(31)	14.6%	-0.1%
Clinical Support	13,326	8,366	3,631	1,329	1,935	(605)	10.0%	-4.5%
Total	217.095	168,158	14,384	34,554	33,292	1,261	15.9%	0.6%

Point Of Delivery	Income	Direct Cost	Indirect Costs	Contribution	Overheads	Surplus/(Deficit)	Contribution	Surplus/(Deficit)
(POD)	£'000	£'000	£'000	£'000	£'000	£'000	%	*
Day Case	27,704	16,074	2,098	9,532	2,657	6,875	34.4%	24.8%
Elective	21,374	14,784	5,208	1,381	2,916	(1,534)	6.5%	-7.2%
Non-Elective	77,921	61,606	7,990	8,325	9,922	(1,597)	10.7%	-2.0%
Outpatients FA	22,301	14,120	(1,337)	9,518	3,286	6,232	42.7%	27.9%
Outpatients FU	29,590	31,269	(1,195)	(485)	8,188	(8,673)	-1.6%	-29.3%
Outpatients Procedures	4,512	3,933	(319)	898	863	35	19.9%	0.8%
Critical Care	13,678	9,362	530	3,786	1,211	2,575	27.7%	18.8%
A&E	11,503	11,703	(386)	186	2,927	(2,741)	1.6%	-23.8%
Direct Access	8,513	5,306	1,795	1,412	1,322	89	16.6%	1.0%
Total	217,095	168,158	14,384	34,554	33,292	1,261	15.9%	0.6%



Key Headlines:

The cumulative Contribution figures per Division are now starting to reflect the changes in methodology introduced in month 8 for Pathology, Radiology, Theatres etc. as all the periods have been recalculated. These changes have improved Womens & Children's and Clinical Support's Contribution figures and have adversely affected the contribution for Medicine and, to a much lesser extent, Surgay. These methodology changes weight more cost towards the AAU and A&E and take cost away from GP Direct Access and Outpatient work. These changes are now thought to more accurately reflect resource use by both the providing departments and the fort-line divisions.

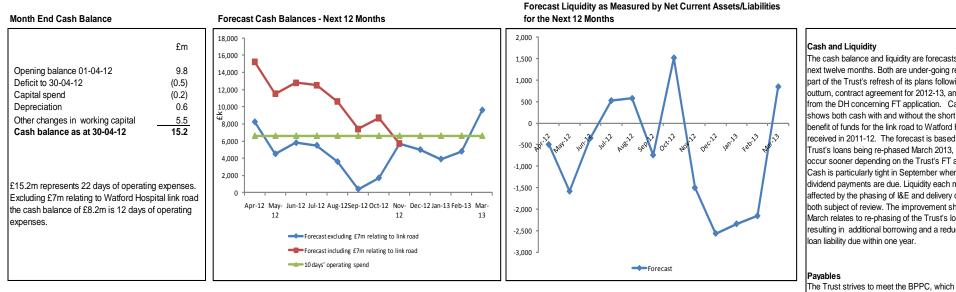


How to Interpret your 'Portfolio Matrix':

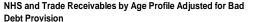
The size of each bubble shows how much income is generated by that Division or Point of Delivery'. Contribution' means the difference between income earned and the costs (direct & indirect costs) before overheads. Services should be aiming to maximise this 'contribution', by moving towards the right of the chart. The vertical axis shows each Divisions/ PoDs percentage share of overall Trust costs (direct and indirect costs).



Cash and Capital Management

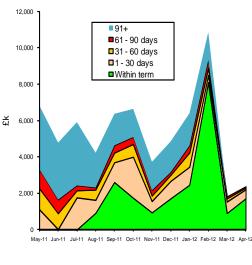


Payables: Better Practice Payment Code Performance









	Plan £m	YTD Actual £m	Balance £m
Estate Maintenance	5.11	0.10	5.00
TSSU Decontamination	1.93	0.00	1.92
Endoscopy Decontamination - Watford	1.53	0.00	1.53
Capacity Works	0.00	0.06	-0.06
Other Committed	2.44	0.00	2.43
Total Trust funded Capital Programme	11.00	0.16	10.84
PDC funding			£m
Watford Hospital Link Road			7.00
Combined Heat and Power Plant			2.90
PDC funded Capital Programme			9.90

The cash balance and liquidity are forecasts for the next twelve months. Both are under-going review as part of the Trust's refresh of its plans following 2011-12 outturn, contract agreement for 2012-13, and feedback from the DH concerning FT application. Cash balance shows both cash with and without the short term benefit of funds for the link road to Watford Hospital received in 2011-12. The forecast is based on the Trust's loans being re-phased March 2013, this may occur sooner depending on the Trust's FT application. Cash is particularly tight in September when loan and dividend payments are due. Liquidity each month is affected by the phasing of I&E and delivery of savings, both subject of review. The improvement shown in March relates to re-phasing of the Trust's loans resulting in additional borrowing and a reduction in the

The Trust strives to meet the BPPC, which targets paying at least 95% of invoices both in numbers and value within 30 days or earlier.

Receivables

The age of debts not covered by provision is shown. The Trust has increased its level of bad debt provision in March to cover all those over 90 days old. The Trust's debt collection team will however continue to pursue these. The spike in current invoices in February related to those raised with NHS Hertfordshire for transformation funds; these being paid in March.

Capital Programme

The capital plan is based on that agreed by the Board as part of budget setting. It is subject to review (see cash and liquidity above). Less than £200k capital was spent in April, however £60k of this was residual spending on 2011-12 capacity projects not budgeted for. This includes potential investment of up to £0.5m to facilitate Getting Better schemes where there is a rapid payback.

⁵Under the Better Practice Payment Code, the Trust has a duty to pay 95% of its invoices within 30 working days of receipt

West Hertfordshire Hospitals

Statement of Financial Position (Balance Sheet)

	Balance as at	Balance as at
	01 Apr 2012	30 Apr 2012
Non Current Assets		
Property Plant and Equipment	121,896	121,510
Intangible Assets	2,243	2,171
Other Financial Assets Trade and Other Receivables	0 1,187	0 1,167
Total non current assets	125,326	124,848
Total non current assets	125,520	124,040
Current assets		
Inventories	3,031	3,229
Trade and Other Receivables	3,252	4,028
Other Assets	6,126	5,358
Cash and Cash equivalents	9,851	15,244
Total current assets	22,260	27,859
Total Assets	147,586	152,707
Current liabilities (amounts due in less than one year)		
NHS Trade Payables	883	2,265
Non NHS Trade Payables	5,308	8,567
Other Liabilities	11,980	12,944
DH Working Capital Loan Principal Repayments	1,400	1,400
DH Capital Loan Principal Repayments	2,772	2,772
Provisions for Liabilities and Charges	541	408
Total current liabilities	22,884	28,356
Net current assets (liabilities)	(624)	(497)
Total assets less current liabilities	124,702	124,351
Non Current Liabilities (Due > 1 Year) DH Working Capital Loan Principal Repayments	2,800	2,800
DH Capital Loan Principal Repayments	13,851	13,851
Provisions for liabilities and charges	5,280	5,432
Total Non current liabilities	21,931	22,083
Total assets employed	102,771	102,268
Financed by Taxpayers Equity		
Public Dividend Capital	180,668	180,668
Retained Earnings	(92,434)	(92,937)
Revaluation reserve	14,537	14,537
Donated asset reserve	0	0
Total funds employed	102,771	102,268

Represents the fair value of the Trust's land, buildings and equipment. The difference between 1 April and 30 April relates to the excess of depreciation over capital investment. Intangible Assets Represents computer systems and as with PPE the level of amortisation is higher than investment resulting in a reduction in fair value. Trade and Other Receivables Represents injury cost recovery expected in more than one year. Trade and Other Receivables Represents invoices raised but not yet paid. The opening balance is lower than that at the end of April because PCTs pay as early as possible at year end in order to reduce their cash balance to a minimum. Other Assets These relate to the accrual of NHS and Non NHS income not yet invoiced. The decrease reflects March 2012 accruals now invoiced in April 2012. Cash balance The cash balance includes £7m of Public Dividend Capital (PDC) received in 2011-12 and retained to fund the proposed link road and is also higher than planned due to a lower level of creditor payments in April 2012. NHS Trade Payables These have increased from 1 April reflecting the build up of creditors to pay the loan interest and dividends. Non NHS Trade Payables

These have increased by £3.5m mainly due to March's PAYE and NI being paid early, in March 2012 rather than April 2012.

Other Liabilities

Property, Plant and Equipment

These relate to the accrual of NHS and Non NHS expenditure not yet invoiced.

Financial Risk Ratings⁶

West Hertfordshire Hospitals

Monitor

SHA

Financial Ri	sk Ratings	Month	Apr-12							Financial Ri	sk Ratings	Month	Apr-12							
Criteria	Metric	Weight	5	4	3	2	1	Risk rating ytd	Forecast rating 12/13	Criteria	Metric	Weight	5	4	3	2	1	Annual Plan 12/13	YTD Risk ratings 12/13	Forecas Risk ratings 12/13
Underlying performance	EBITDA margin %	25%	11	9	5	1	<1	2	3	Underlying performance	EBITDA margin %	25%	11	9	5	1	<1	3	2	3
Achievement of plan	EBITDA achieved %	10%	100	85	70	50	<50	5	5	Achievement of plan	EBITDA achieved %	10%	100	85	70	50	<50	5	5	5
Financial	Return on assets %	20%	6	5	3	2	<-2	4	4	Financial efficiency	Return on assets %	20%	6	5	3	2	<-2	4	4	4
efficiency	l&E surplus margin %	20%	3	2	1	-2	<-2	1	3		I&E surplus margin %	20%	3	2	1	-2	<-2	3	1	3
Liquidity	Liquid ratio days	25%	60	25	15	10	<10	4	4	Liquidity	Liquid ratio days	25%	60	25	15	10	<10	4	4	4
Average								3	3.65	Average								3.65	3.00	3.65
Overriding rules	Overriding rules							-1	-0.25	Overriding rules	Overriding rules	At least of or 2	ne criteria	on Pla	n 1			0	2	0
Overall rating	Overall rating							2	4	Overall rating	Overall rating							4	2	4

The Trust has achieved an overall rating of "2" using the Monitor Financial Risk Rating (FRR) ratios and a "2" rating based on the ratios used by the SHA Management Board to assess performance both of which are below the minimum requirement of "3" to achieve Foundation Trust status.

The I&E surplus margin ratio at the 30th April 2012 is minus 2.4% which achieves a rating of "1". This is below the acceptable level of 1% which has a Financial Risk Rating of "3". The overall rating for Monitor and the SHA is "2". Delivering the planned level of surplus by the year end will result in the overall ratio improving back to an acceptable level.

It should be noted that, in addition to Monitor liquidity requirements, the Department of Health has also indicated that it expects Trusts to have cash holdings in excess of 10 days' operating expenses which equates to cash levels of approximately £6.5m. The Trust received £7m of Public Dividend Capital in March 2012 which has contributed to the Trust holding cash in excess of 10 days' of operating expenses.

⁶ Monitor calculations for liquidity and EBITDA achieved are based on 2011/12 performance. The SHA ratings are based on 2012/13 for all ratings. Monitor also excludes the value of inventories (stocks) from the liquidity calculation.