

# Finance Performance Report 2018/19

## April 2018

Director of Finance and Performance Management  
Philip Cave



# Contents and Appendices

Month 01 (April) 2018/19

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# Executive Summary

## Month 01 (April) 2018/19

### Executive Summary

The Trust has generated a consolidated deficit year to date of £5m which is £0.3m better plan. The variance is driven by:-

- low pass through income and costs
- slow starts to some income and expenditure CIPs
- under performance of complex elective activity driving low income, clinical supplies costs and drugs.
- high agency spend driven by U&LTC

As the Trust is in FSM it is measured against its performance excluding technical adjustments. After these are removed the Trust's I&E deficit in April (month 1) was £4.9m (consolidated position including Spencer Wing and after technical adjustments) against a planned deficit of £5.3m.

A reconciliation of the various adjustments is presented below.

£'000	This Month			Year to Date			Annual		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Forecast	Variance
EKHUFT Income (inc PSF)	45,747	45,019	(728)	45,747	45,019	(728)	583,617	583,617	0
EKHUFT Pay	(30,418)	(30,898)	(480)	(30,418)	(30,898)	(480)	(365,552)	(365,552)	0
EKHUFT Non-Pay	(20,709)	(19,170)	1,539	(20,709)	(19,170)	1,539	(249,052)	(249,052)	0
<b>EKHUFT Financial Position (inc PSF)</b>	<b>(5,380)</b>	<b>(5,049)</b>	<b>331</b>	<b>(5,380)</b>	<b>(5,049)</b>	<b>331</b>	<b>(30,987)</b>	<b>(30,987)</b>	<b>0</b>
Spencer Unit Financial Position	10	18	8	10	18	8	132	132	0
<b>Consolidated I&amp;E Position (inc PSF)</b>	<b>(5,370)</b>	<b>(5,031)</b>	<b>339</b>	<b>(5,370)</b>	<b>(5,031)</b>	<b>339</b>	<b>(30,855)</b>	<b>(30,855)</b>	<b>0</b>
Impairments Adjustment	85	88	3	85	88	3	1,025	1,025	0
PSF Funding	0	0	0	0	0	0	0	0	0
<b>Consolidated I&amp;E Position (exc PSF)</b>	<b>(5,285)</b>	<b>(4,943)</b>	<b>342</b>	<b>(5,285)</b>	<b>(4,943)</b>	<b>342</b>	<b>(29,830)</b>	<b>(29,830)</b>	<b>0</b>

Trust unconsolidated pay costs in the month of £30.4m were £0.5m less than March largely due to a reduction in the use of bank staff but were £0.5m worse than plan. Permanent staff costs (including Overtime) were £0.1m higher than March. Bank usage decreased by £0.4m and agency/locum staff decreased £0.2m as the level of A&E pressure began to ease a little post winter. All temporary staff (agency, bank, locum, overtime) reduced by £0.5m to £4.8m in month. Waiting list payments are £0.3m in month and are slightly above plan. The main driver for the pay overspend against plan in month is driven in U&LTC where emergency flow is still requiring more agency nursing support than anticipated.

Clinical income was behind plan £0.6m in month. This is driven by low rechargeable costs and related income and lower than planned income CIP's. Elective income was behind plan, despite activity being over plan, as the activity was driven mainly by high levels of regular day attenders which produce a much lower tariff than average elective episodes. Other income is £0.1m worse than plan in month driven by lower than expected PAS IT spend and matching income.

Against the full year £30m CIPS target, including income, £1.2m is reported for Month 1 against a target of £1.5m, £0.3m behind plan. Of the reported position 50% is non recurrent.

The cash balance as at the end of March was £16.3m, £0.7m above plan. The Trust's total cash borrowing is now £48.5m and is expected to reach £73.7m by the end of the financial year.

The Trust has identified £9.5m of risk to the year end position in relation to expert determination on income, CIP delivery and activity related costs. The Trust will seek to mitigate these risks as we move through the year.

### Income and Expenditure

G

In April the Trust reported a consolidated I&E deficit of £5m (before any adjustments) compared to a planned £5.4m deficit. Lower than planned income is driven by lower rechargeable costs and lower than planned income CIPS. In addition a major driver is the under recovery of elective income. The elective activity is higher than plan but this is driven by regular day attenders. The income for these episodes is much lower than the average elective tariff which is driving a case mix variance in Month 1. These under recoveries are offset by higher than planned non elective and A&E income. Other income is £0.1m lower than plan as SACP costs and associated income are slower than expected.

Pay is over plan by £0.5m driven principally by flow issues in A&E still requiring higher than planned levels of Agency support.

Non pay spend is significantly underspent in Month1 driven by the pass through elements and SACP spend identified for income variances. In addition clinical supplies are under spent, particularly in relation to prosthesis not required for elective surgery.

### Cash

G

The Trust's cash balance at the end of April was £16.3m which was £0.7m above plan the main driver for which is the over recovery of VAT in month

The Trust borrowed a further £2.2m in month bringing total borrowings to £48.5m. The Trust does not expect to need to borrow further funds until August.

### Capital Programme

G

The Trust has spent £0.8m on capital in April (slightly above plan) the main spends being on IT and medical equipment. The Capital plan for the year is £16m.

### Cost Improvement Programme

A

Net CIPs in month were £0.3m behind plan due largely to slow starts to CIP programmes within Divisions. Non recurrent Agency CIPS were delivered to partially make up for underperformance in areas such as income. CIP delivery was split equally between recurrent and non recurrent schemes.

Risks to the full year plan remain in relation to finalising all delivery plans and significant risks remain in relation to Subco (2SS), the ability to release planned agency savings for U&LTC and the delivery of further bed reductions. £9m of CIP plans still remain red or amber at this stage.

# Income and Expenditure Summary

## Month 01 (April) 2018/19

Unconsolidated	Annual	Year to Date	This Month				
£000	Plan	Plan	Actual	Var.	Plan	Actual	Var.
<b>Income</b>							
Electives	100,573	8,027	6,756	(1,271)	8,027	6,756	(1,271)
Non-Electives	161,862	13,492	13,696	204	13,492	13,696	204
Accident and Emergency	26,226	2,152	2,311	159	2,152	2,311	159
Outpatients	81,677	5,355	5,856	501	5,355	5,856	501
High Cost Drugs	55,662	4,575	4,264	(311)	4,575	4,264	(311)
Private Patients	497	42	22	(19)	42	22	(19)
Other NHS Clinical Income	111,216	8,361	8,476	115	8,361	8,476	115
Other Clinical Income	1,777	148	162	14	148	162	14
<b>Total Corporate and SLA Income</b>	<b>539,490</b>	<b>42,151</b>	<b>41,543</b>	<b>(609)</b>	<b>42,151</b>	<b>41,543</b>	<b>(609)</b>
All Other Income	44,127	3,596	3,476	(119)	3,596	3,476	(119)
<b>Total Income</b>	<b>583,617</b>	<b>45,747</b>	<b>45,019</b>	<b>(728)</b>	<b>45,747</b>	<b>45,019</b>	<b>(728)</b>
<b>Expenditure</b>							
Permanent Staff	(326,479)	(27,154)	(25,805)	1,349	(27,154)	(25,805)	1,349
Overtime			(575)	(575)		(575)	(575)
Waiting List Payments	(2,723)	(226)	(252)	(26)	(226)	(252)	(26)
Medical Locums/Short Sessions	(3,766)	(313)	(191)	123	(313)	(191)	123
Bank	(13,411)	(1,132)	(1,080)	52	(1,132)	(1,080)	52
Agency	(15,883)	(1,301)	(2,864)	(1,562)	(1,301)	(2,864)	(1,562)
Direct Engagement	(3,548)	(291)	(132)	159	(291)	(132)	159
<b>Total Pay</b>	<b>(365,810)</b>	<b>(30,418)</b>	<b>(30,898)</b>	<b>(480)</b>	<b>(30,418)</b>	<b>(30,898)</b>	<b>(480)</b>
Non Pay	(222,146)	(18,504)	(17,070)	1,434	(18,504)	(17,070)	1,434
<b>Total Expenditure</b>	<b>(587,956)</b>	<b>(48,922)</b>	<b>(47,969)</b>	<b>953</b>	<b>(48,922)</b>	<b>(47,969)</b>	<b>953</b>
Non-Operating Expenses	(26,648)	(2,205)	(2,100)	105	(2,205)	(2,100)	105
<b>Income and Expenditure Surplus/(Deficit)</b>	<b>(30,987)</b>	<b>(5,380)</b>	<b>(5,049)</b>	<b>331</b>	<b>(5,380)</b>	<b>(5,049)</b>	<b>331</b>

Consolidated	Annual	Year to Date	This Month				
£000	Plan	Plan	Actual	Var.	Plan	Actual	Var.
<b>Income</b>							
Clinical Income	547,857	42,848	42,369	(479)	42,848	42,369	(479)
Non Clinical Income	42,682	3,475	3,329	(146)	3,475	3,329	(146)
<b>Total Income</b>	<b>590,539</b>	<b>46,323</b>	<b>45,698</b>	<b>(625)</b>	<b>46,323</b>	<b>45,698</b>	<b>(625)</b>
<b>Expenditure</b>							
Pay	(370,054)	(30,772)	(31,253)	(481)	(30,772)	(31,253)	(481)
Non Pay	(224,416)	(18,735)	(17,358)	1,377	(18,735)	(17,358)	1,377
<b>Total Expenditure</b>	<b>(594,470)</b>	<b>(49,507)</b>	<b>(48,611)</b>	<b>896</b>	<b>(49,507)</b>	<b>(48,611)</b>	<b>896</b>
Non-Operating Expenses	(26,924)	(2,186)	(2,118)	68	(2,186)	(2,118)	68
<b>Income and Expenditure Surplus/(Deficit)</b>	<b>(30,855)</b>	<b>(5,370)</b>	<b>(5,031)</b>	<b>339</b>	<b>(5,370)</b>	<b>(5,031)</b>	<b>339</b>

### Corporate and SLA Income

East Kent CCGs income over performed against plan by £677k in month, with South Kent being the only under performing contract. The majority of this favourable position is contained within non-Elective care and Outpatients. A richer than planned case mix in Non-Electives is largely responsible for this over performance. The elective activity is higher than plan but this is driven by regular day attenders. The income for these episodes is much lower than the average elective tariff which is driving a case mix variance in Month 1 income.

There remains some uncertainty around the financial impact of 2017-18 Expert Determination challenges on 2018-19 baseline as both commissioners and the Trust work through the implications of the way some of our activity is recorded. The Trust is holding a provision against this risk of £3.9m for the year.

NHSE Contracts are below plan in month by £322k. Rechargeable expenditure such as high cost drugs, devices and haemophilia blood products under performed by £277k in month across all contracts.

The Trust contract with NHSE includes £4.1m of QIPP expectation with the Trust agreeing to work with NHSE to implement cost savings where possible, however, the risk against non achievement sits with the commissioner.

### Other Income and Expenditure

Non clinical income is adverse to plan in April by 0.1m (3.3%).

Underperformance against plan on non clinical NHS income of £0.2m relating mainly to slippage on SaCP project income is offset by a favourable performance against plan on education and training income of £0.1m.

Total expenditure is £1.0m favourable to plan with an overspend on pay of £0.5m offsetting an underspend on non pay headings of £1.4m. The main pressures in pay spend are nursing and HCA staff which are overspent against plan by £0.6m, mainly relating to agency staff in UC&LTC and particularly Emergency Departments. Most areas of non pay spend are favourable to plan in April, particularly pass-through drugs (offset by adverse clinical income), clinical supplies and non clinical supplies including slippage on the SaCP project of £0.1m offset by adverse non clinical income.

The expenditure run rate has reduced by £5.1m in April when compared to March, with reduced spend seen in most headings. Pay spend has reduced by £0.5m, however it is unchanged once the one off March adjustments for the consultant job planning arrears costing and the recognition of a further risk associated for bank and agency shifts are excluded. Non pay expenditure has reduced by £4.6m, mainly relating to drugs, clinical supplies, non clinical supplies and independent sector, which account for £4.3m of the reduction. The reduction in drugs and clinical supplies correlates with reduced clinical income, as well as the clinical supplies being inflated in March by an adverse stock adjustment. Non clinical supplies included £1.1m of SaCP expenditure March with no expenditure in April.

## Key Highlights

### Month 01 (April) 2018/19

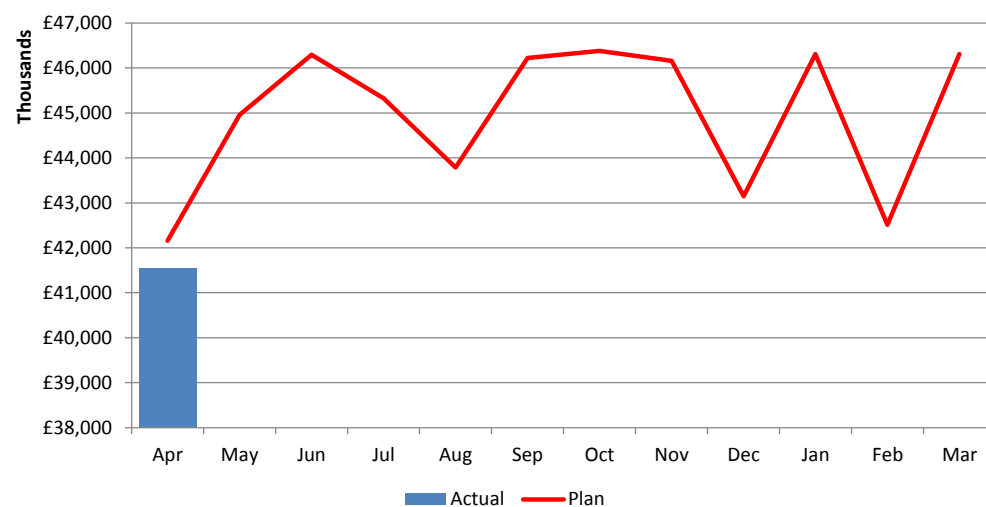
#### CLINICAL INCOME

Clinical income is under plan in April by £609k. Trends have continued from last year where Elective income remains behind planned levels by £1.281m while Non-Elective (189k) and Outpatients (£526k) are ahead of plan. The main area under plan is Electives where high levels of regular day attenders have been seen which generate a case mix issues leading to lower average tariffs. There have also been high vacancy levels and changes in our ability to meet planned levels over an extended winter period including difficulties delivering CIP income. Elective activity is expected to return to normal levels from April as cancellations due to winter pressures are reduced. Non-Elective income remains high with increased casemix due to the increased complexity of patients presenting in our ED departments. The main Specialties ahead of plan are T&O, Healthcare of the Elderly, Cardiology, Respiratory and Gastroenterology.

#### ACTIVITY

A&E demand is ahead of plan by 0.7%. This over performance goes against last years trend which was driven by the temporary transfer of some ED specialties from KCH to WHH and QEQM. Non-elective activity continues to perform below plan in month and after the KCH site moves, activity has been up to 6% below plan. However, richer casemix has meant that income is over plan. The commissioners have increased the provision of care packages with a view to returning patients home more quickly and as part of their QIPP schemes are investing in preventing patients with Pneumonia from coming to the hospital where they can be treated at home. Outpatient activity and income in month is considerably ahead of plan.

TOTAL CORPORATE AND SLA INCOME: Plan v. Actual



#### COMMISSIONER ANALYSIS

Activity plans reflected CCG QIPP schemes to the value of £343k YTD. Any new commissioner QIPP schemes will be added to the contracts via a contract variation once the Trust is satisfied that the schemes are achievable in the timeframes set out. GP referrals were 10.8% over plan in April. Many of our outpatient services are now listing at 13 weeks and beyond and 52 week waits are high.

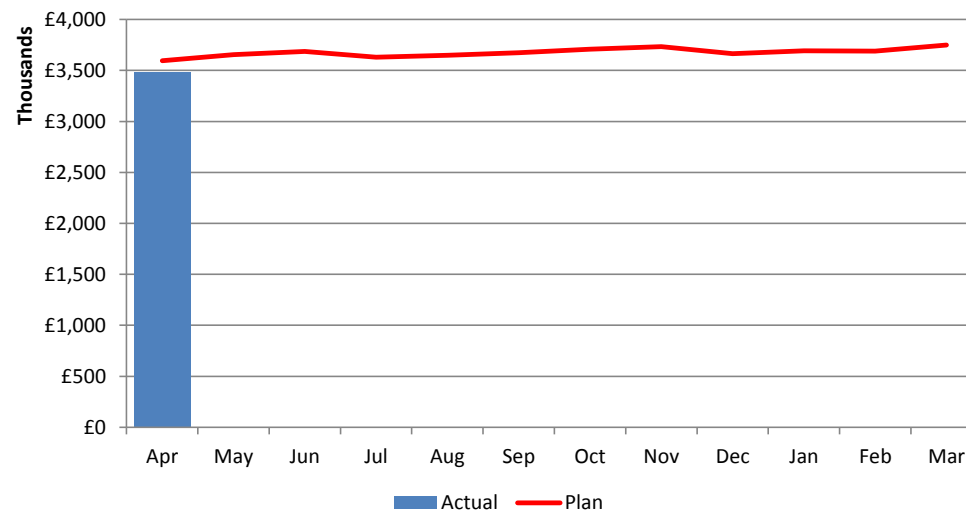
### OTHER INCOME

Non clinical income is adverse to plan in April by 0.1m (3.3%). Underperformance against plan on non clinical NHS income of £0.2m (predominantly slippage on SaCP project income) is offset by a favourable performance against plan on education and training income of £0.1m.

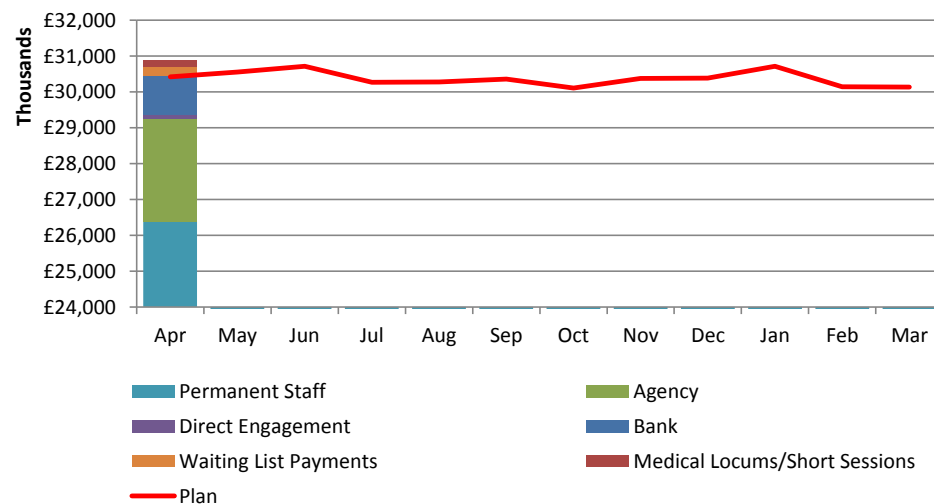
### PAY

Pay performance is adverse to plan in April by £0.5m (1.6%). Pay CIPs are adverse to plan by £0.1m. The overspend relates predominantly to qualified nurses and HCAs which are adverse to plan by a total of £0.6m, mainly relating to agency staff in UC&LTC and in particular the Emergency Departments. Actual spend in April of £30.1m shows a reduction when compared to March of £0.5m, however it is unchanged once the one off March adjustments for the consultant job planning arrears costing and the recognition of a further risk associated with bank and agency shifts are taken into account.

ALL OTHER INCOME: Plan v. Actual



Pay: Plan v Actual



## Key Highlights

### Month 01 (April) 2018/19

#### NON-PAY

Non Pay expenditure is favourable to plan in April by £1.4m (7.7%), reflecting low elective activity performance in month. Most areas of non pay spend are favourable to plan in month, predominantly drugs (mainly pass-through), clinical supplies and non clinical supplies (mainly slippage on the SaCP project offset by an adverse position on non clinical income). Underspends can also be seen in referrals to Spencer Wing, education and training expenditure and premises costs.

#### DEBT

Trade and other receivables have decreased from the 2018/19 opening position by £6.7m to £31.7m. Seven debtors owed over £1m at 30th April : South Kent Coast CCG £3.1m, Canterbury & Coastal CCG £2.8m, Ashford CCG £2.5m, NHS England £1.7m, Thanet CCG £1.6m, East Kent Medical Services £1.2m, Maidstone and Tunbridge Wells NHS Trust £1.0m.

The EK CCG outstanding debt is primarily in respect of overperformance against contract for 2017/18

#### CAPITAL

Total YTD expenditure for Mth 1 2018/19 is slightly above the NHSI plan.

#### EBITDA

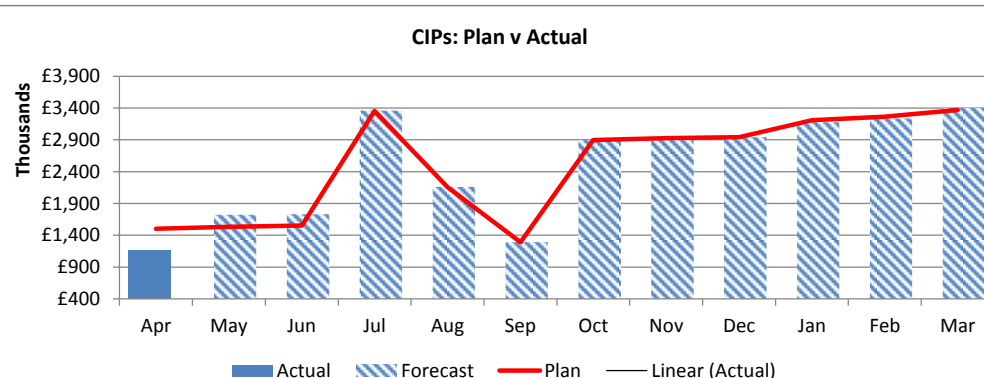
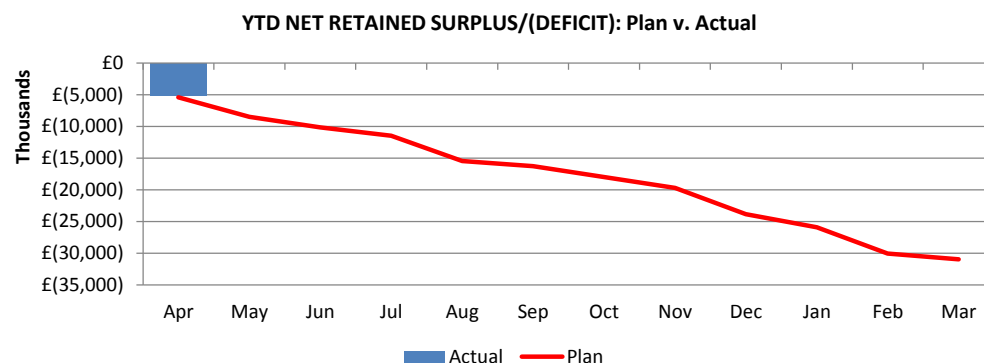
The Trust is reporting a year to date deficit EBITDA of £2.9m

#### CASH

The closing cash balance for the Trust as at 31st April was £16.3m.

#### FINANCING

£64k of interest was incurred in respect of the drawings against working capital facilities to 31st March 2018 (£46.2m) and April 2018 (£2.2m).



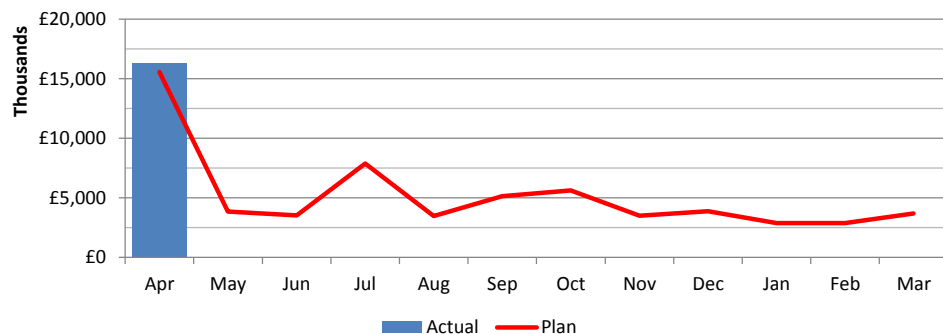
#### CIPs

The target for the year is £30m. The NHSI Improvement Director is maintaining fortnightly confirm and challenge meetings. As at the time of reporting, c.71% of schemes were 'green' rated. The major focus is on delivering 18/19 schemes and progressing 'red' and 'amber' schemes to 'green'.

# Cash Flow

## Month 01 (April) 2018/19

Cash: Plan v Actual



Unconsolidated Cash balance was £16.3m at the end of April 2018, £0.7m above plan.

Total receipts in April 2018 were £0.8m above plan

- VAT reclaim was £0.8m above plan

Total Payments in April 2018 were £0.2m above plan

- Creditor payments incl capital were £0.2m above plan

### Provider Sustainability Funding (Formerly Sustainability and Transformation Funding)

The Trust has forecast to receive £4.2m incentive Provider and Sustainability Funding relating to 2017/18 in July 2018. Receipt of the payment is not yet guaranteed and confirmation is pending following final submission of the 1718 Final Accounts.

As a result of the Trust not agreeing to a DHSC control total, the Trust is not eligible for any PSF funding in 2018/19.

### Working Capital Facility

Loan Schedule	Loan Value '£000	Facility type	Repayment date	Interest rate	Total Interest if full term £000
2016/17 Received	22,736	ISRWF	17/05/2021	3.50%	3,688
2017/18 Received	23,492	ISUCL	2020/21	3.50%	26,806
Apr' 2018 (Received)	2,234	ISUCL	2021/22	3.50%	2,469
Aug' 2018 (Plan)	3,725	ISUCL	TBA	TBA	TBA
Nov' 2018 (Plan)	5,855	ISUCL	TBA	TBA	TBA
Dec' 2018 (Plan)	4,276	ISUCL	TBA	TBA	TBA
Jan' 2019 (Plan)	2,659	ISUCL	TBA	TBA	TBA
Feb' 2019 (Plan)	2,329	ISUCL	TBA	TBA	TBA
Mar' 2019 (Plan)	6,371	ISUCL	TBA	TBA	TBA

- Planned 18/19 Loan is £27.4m in line with the plan pre technical deficit.
- Receipt of 17/18 overperformance from the East Kent CCGs has enabled the Trust to delay significant borrowing until November 2018. (£6.2m was received in April and an additional £6.5m is forecast for receipt in September 2018.)

### Creditor Management

Creditor management continued to be applied throughout April 18. The Trust is close to the limit in restricting creditor payments and still being able to receive essential goods and services. At the end of April 2018 the Trust was recording 60 creditor days (Calculated as invoiced creditors at 20th April/ Forecast non pay expenditure x 365)

### Facility Type Key

- ISRWF Single Currency Interim Revolving Working Capital Support Facility
- ISUCL Uncommitted Single Currency Interim Revenue Support - this facility replaces the ISRWF as the Trust is in Financial special measures and has a variable interest rate



# Risks and Opportunities

Month 01 (April) 2018/19

Risk/Opp	Area	Description	Narrative	Full Year (Risk)/Opp £000	Probability	Impact £,000
RISK	Clinical Income	Expert Determination	The full impact of the Expert Determination findings is currently being worked through with commissioners. There is some risk that the actual impact of the determination is higher than assumed in our 18-19 plan.	(5,000)	20%	(1,000)
Risk	CIP Delivery	Green Schemes with delivery risk	SubCo and Agency reduction plans in U&LTC currently carry an innate in year delivery risk due to the timing of commencement of schemes	(7,675)	20%	(1,535)
Risk	CIP Delivery	Red and Amber Schemes to be fully developed	Schemes which do not yet have a fully finalised plans have a higher risk of non delivery	(9,000)	50%	(4,500)
Risk	Pay and Non Pay	Costs of Additional Planned activity	The costs of additional planned activity may exceed the marginal costs for this activity allowed in the plan	(5,000)	50%	(2,500)
Total Risk						(9,535)
Total Opportunity						
NET (RISK)/OPPORTUNITY						(9,535)

Some risks have been realised and are now included in the Forecast, only remaining risks are shown in the table.

# Clinical Income

## Month 01 (April) 2018/19

£000	Annual	Year to Date				This Month			
	Plan	Plan	Actual	Variance		Plan	Actual	Variance	
Electives	100,573	8,027	6,756	(1,271)	(15.8%)	8,027	6,756	(1,271)	(15.8%)
Non-Electives	161,862	13,492	13,696	204	1.5%	13,492	13,696	204	1.5%
Accident and Emergency	26,226	2,152	2,311	159	7.4%	2,152	2,311	159	7.4%
Outpatients	81,677	5,355	5,856	501	9.4%	5,355	5,856	501	9.4%
High Cost Drugs	55,662	4,575	4,264	(311)	(6.8%)	4,575	4,264	(311)	(6.8%)
Private Patients	248	21	22	1	5.8%	21	22	1	5.8%
Other NHS Clinical	111,375	8,374	8,469	95	1.1%	8,374	8,469	95	1.1%
Other Clinical	1,935	161	176	15	9.2%	161	176	15	9.2%
Prior Month Adjustment					0.0%				0.0%
<b>Total</b>	<b>539,558</b>	<b>42,157</b>	<b>41,550</b>	<b>(607)</b>	<b>(1.4%)</b>	<b>42,157</b>	<b>41,550</b>	<b>(607)</b>	<b>(1.4%)</b>

Adverse

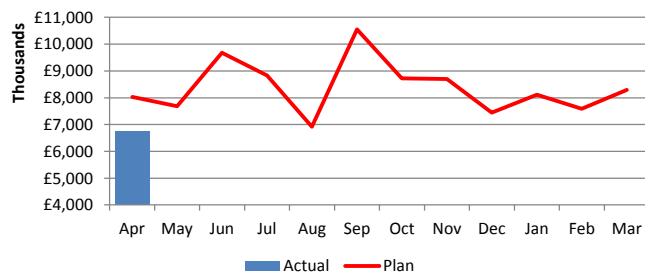
Adverse

Income has performed under plan in April, due to a continuation of the trend experienced at the end of last year as there have been widespread Elective cancellations to allow capacity for over performance in Non-Electives. T&O was particularly badly affected by the cancellations. The high levels of Non-Elective work and a high casemix have partly offset this. The main over performing areas are T&O, Healthcare of the Elderly, Cardiology, Gastroenterology and Respiratory Medicine. In addition elective CIP programmes have been slower to start than expected.

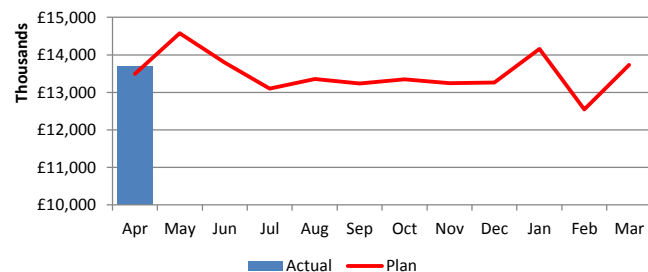
The Trust is reducing its reliance on the Independent Sector. In sourcing for Endoscopy day cases will continue to cement the work completed to gain JAG accreditation for the WHH site which was achieved last year. Future In-sourcing may be required in Ophthalmology to cope with a growing follow up backlog.

Rechargeable expenditure is under plan in month with Drugs and Devices £277k behind plan. This does not impact the bottom line as there is a corresponding decrease in expenditure.

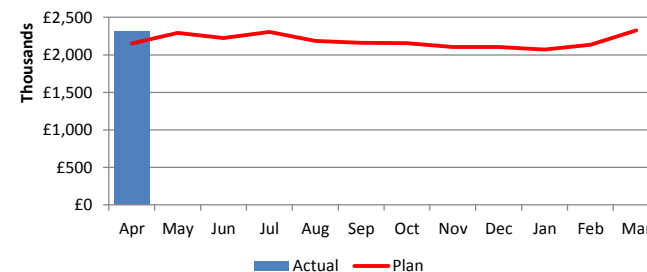
### Electives Plan v Actual



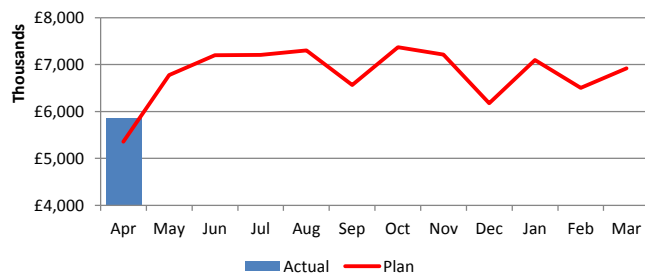
### Non-Electives: Plan v Actual



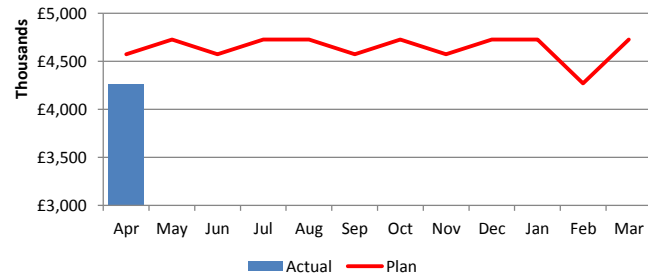
### Accident & Emergency: Plan v Actual



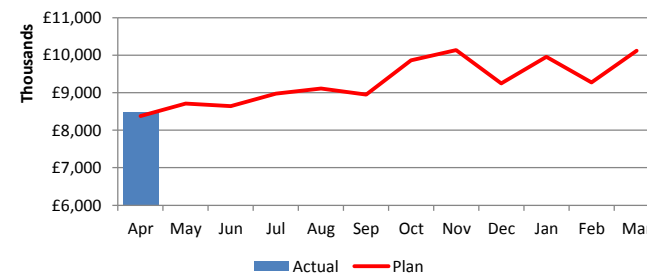
### Outpatients: Plan v Actual



### High Cost Drugs: Plan v Actual



### Other NHS Clinical: Plan v Actual



# Clinical Activity

## Month 01 (April) 2018/19

Activity Units	Annual	Year to Date				This Month			
	Plan	Plan	Actual	Variance		Plan	Actual	Variance	
Electives	97,504	7,146	7,377	231	3.2%	7,146	7,377	231	3.2%
Non-Electives	80,992	6,750	6,533	(217)	(3.2%)	6,750	6,533	(217)	(3.2%)
Accident & Emergency	211,083	17,329	17,440	111	0.6%	17,329	17,440	111	0.6%
Outpatients	802,988	50,811	58,592	7,781	15.3%	50,811	58,592	7,781	15.3%
Other NHS Clinical	5,397,176	409,922	435,122	25,200	6.1%	409,922	435,122	25,200	6.1%
<b>Total</b>	<b>1,192,567</b>	<b>82,036</b>	<b>89,942</b>	<b>7,906</b>	<b>9.6%</b>	<b>82,036</b>	<b>89,942</b>	<b>7,906</b>	<b>9.6%</b>

Favourable

Favourable

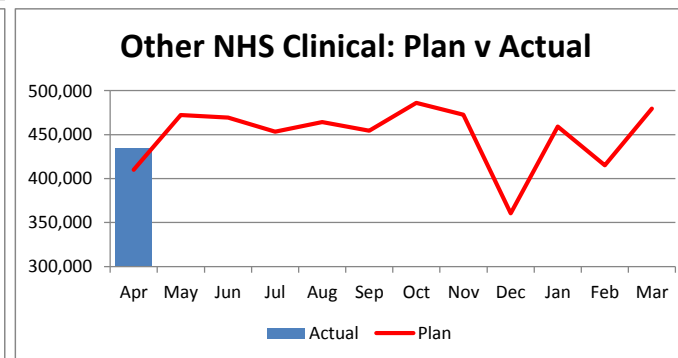
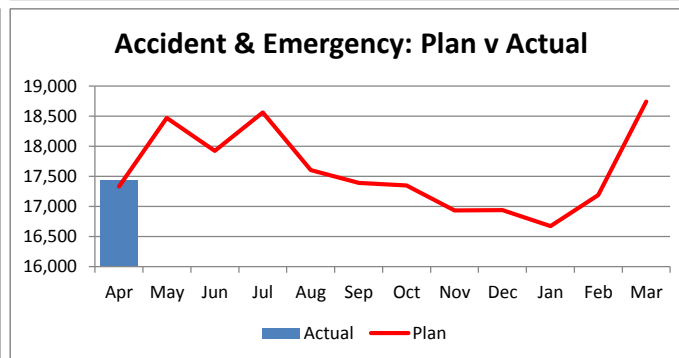
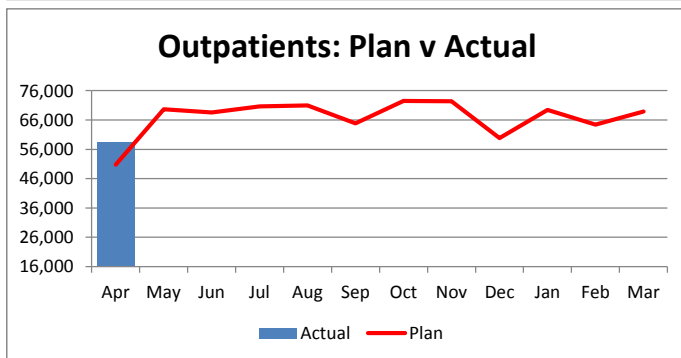
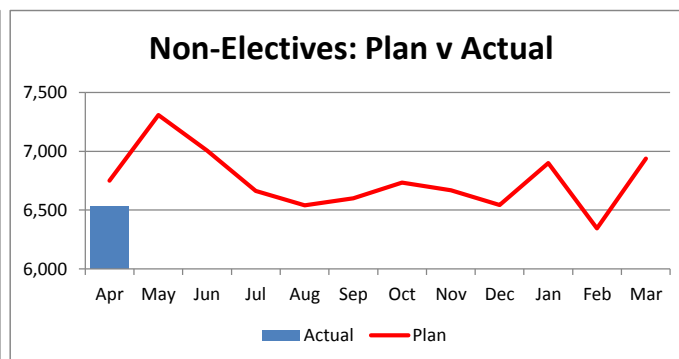
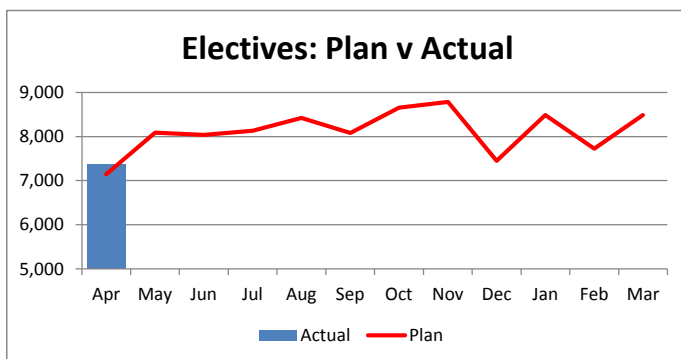
Activity under performed in month in most of our key delivery areas.

Elective Inpatient activity was 5.7% under plan largely due to T&O (by 80), Urology (by 43) and Gynaecology (by 63). Elective income also under performed in month significantly due to an £382k income CIP against which there is currently no activity allocated.

Day case activity was 0.2% under plan (T&O 158 and Ophthalmology 100, while General Medicine was over by 132).

Outpatient activity over performed in month by 15.6% across new and follow up attendances, the largest area being in Cardiology.

All divisions have signed off on their demand and capacity plans and have been funded to resource each speciality to a level that will allow income and activity to meet plans. Achievement of this will depend upon the ability to recruit to key positions in hard to recruit to areas.



# Income Other

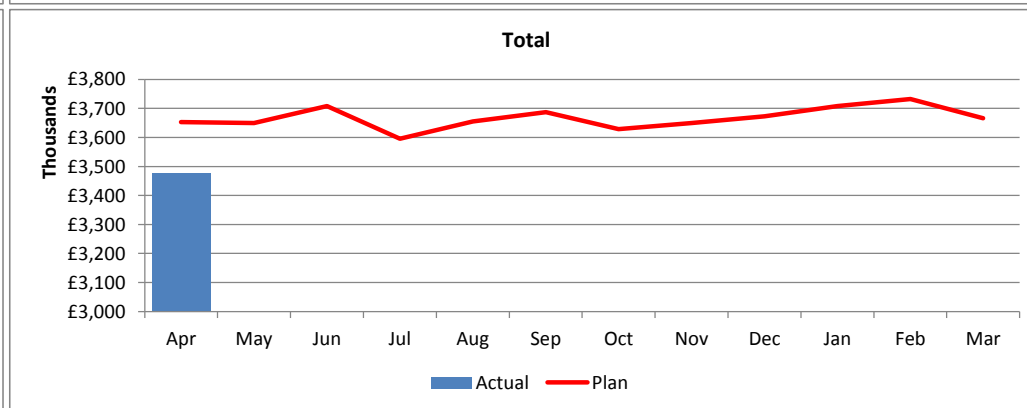
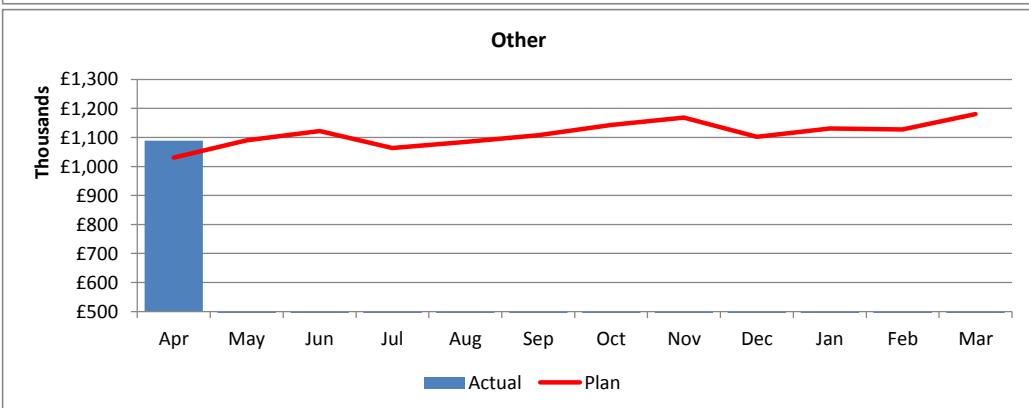
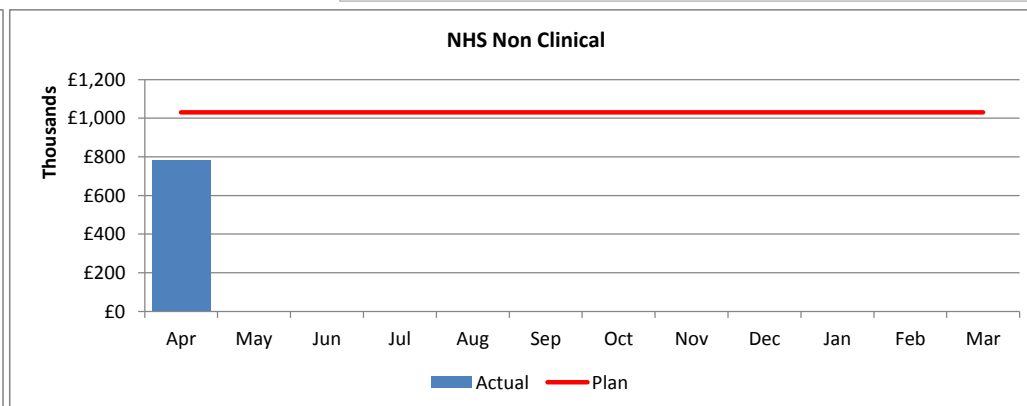
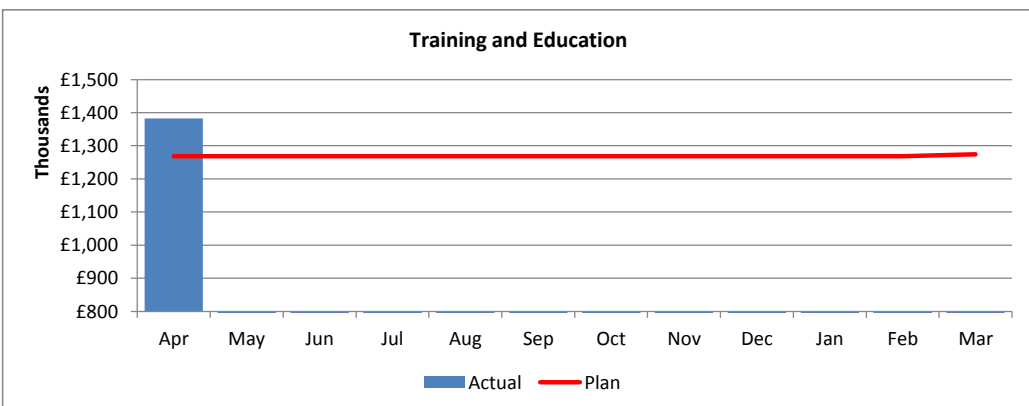
## Month 01 (April) 2018/19

### Income - Other

	Annual	Year to Date			This Month		
£000	Plan	Plan	Actual	Variance	Plan	Actual	Variance
Training and Education	15,233	1,269	1,383	114	1,269	1,383	114
Research and Development	2,673	223	221	(2)	223	221	(2)
NHS Non Clinical	12,369	1,031	784	(247)	1,031	784	(247)
Other	13,352	1,031	1,089	58	1,031	1,089	58
Donated Asset	500	42		(42)	42		(42)
<b>Total</b>	<b>44,127</b>	<b>3,596</b>	<b>3,476</b>	<b>(119)</b>	<b>3,596</b>	<b>3,476</b>	<b>(119)</b>
				-3.32%			-3.32%
				Adverse			Adverse

Non clinical income is adverse to plan in April by 0.1m (3.3%).

Underperformance against plan on non clinical NHS income of £0.2m (predominantly slippage on SaCP project income) is offset by a favourable performance against plan on education and training income of £0.1m.



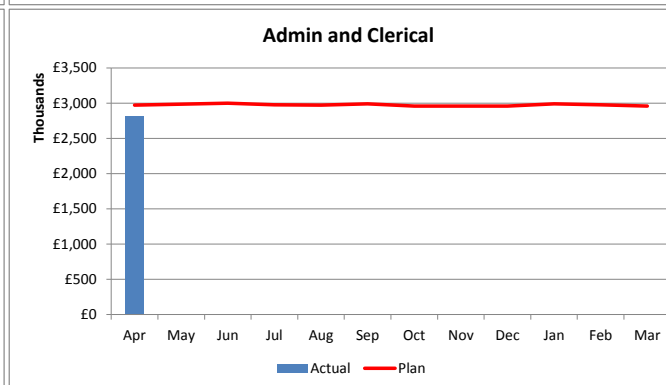
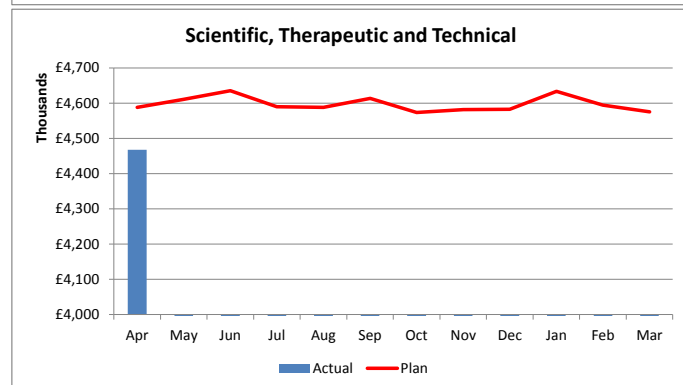
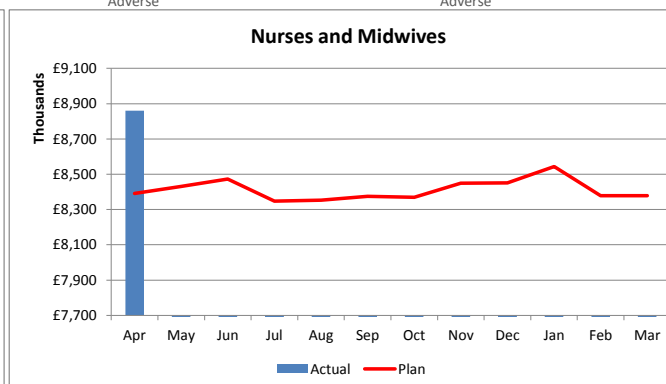
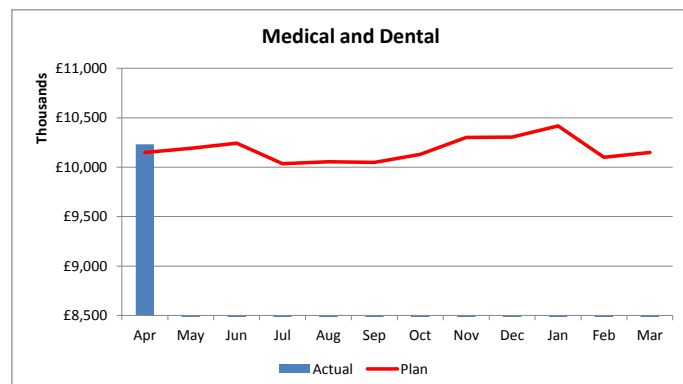
# Pay

## Month 01 (April) 2018/19

### Pay Expenditure

£000	Annual	Year to Date			This Month			Agency % of Total	
	Plan	Plan	Actual	Variance	Plan	Actual	Variance	YTD	%
Medical and Dental	(122,128)	(10,149)	(10,230)	(81)	(10,149)	(10,230)	(81)	(1,476)	14.43%
Nurses and Midwives	(100,942)	(8,392)	(8,860)	(468)	(8,392)	(8,860)	(468)	(1,002)	11.31%
Scientific, Therapeutic and Technical	(55,164)	(4,587)	(4,468)	120	(4,587)	(4,468)	120	(217)	4.86%
Admin and Clerical	(35,680)	(2,969)	(2,813)	156	(2,969)	(2,813)	156	(18)	0.65%
Other	(51,896)	(4,320)	(4,527)	(207)	(4,320)	(4,527)	(207)	(150)	3.31%
<b>Total</b>	<b>(365,810)</b>	<b>(30,418)</b>	<b>(30,898)</b>	<b>(480)</b>	<b>(30,418)</b>	<b>(30,898)</b>	<b>(480)</b>	<b>(2,864)</b>	<b>9.27%</b>

-1.58% Adverse      -1.58% Adverse



Pay performance is adverse to plan in April by £0.5m (1.6%). Pay CIPs are adverse to plan by £0.1m.

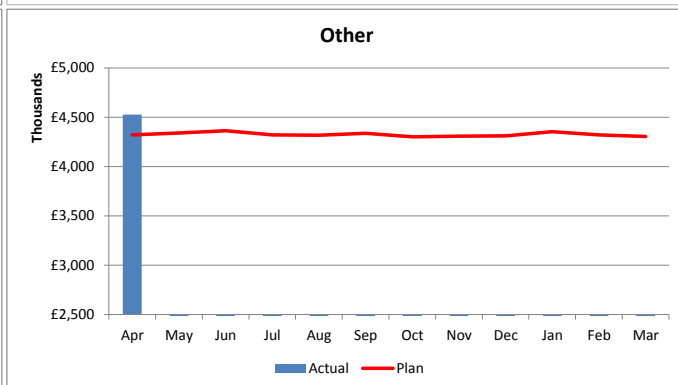
Expenditure on qualified nursing staff is adverse to plan by £0.5m in April. Agency nurses account for all of this overspend with Emergency Departments showing an overspend on agency nurses of £0.4m in month.

Overspends on HCAs account for the majority of the overspend on other staffing groups and are £0.2m adverse to plan in April. The UC&LTC Division is showing most pressure in this area and is £0.3m overspent on HCAs (substantive, bank and agency).

Medical staff are adverse to plan by less than £0.1m in April although spend on agency staff is adverse to plan by £0.7m, again mainly in UC&LTC. This is offset by underspends on all other medical staffing headings (bank, direct engagement, locum sessions and substantive staff) except waiting list payments which are marginally adverse to plan.

These overspends are offset by underspends on scientific, therapeutic and technical staff and A&C staff totalling £0.3m

Total expenditure on pay in April was £30.1m, £0.5m lower than March, mainly in bank and Direct Engagement costs.



# Non-Pay

## Month 01 (April) 2018/19

£000	Annual	Year to Date	This Month				
	Plan	Plan	Actual	Var.	Plan	Actual	Var.
Drugs	(67,802)	(5,597)	(5,174)	423	(5,597)	(5,174)	423
Clinical Supplies	(66,188)	(5,350)	(5,074)	276	(5,350)	(5,074)	276
Non-Clinical Supplies	(15,270)	(1,103)	(917)	186	(1,103)	(917)	186
Facilities Management	(15,950)	(1,468)	(1,451)	17	(1,468)	(1,451)	17
NHS Supplies and Services	(2,386)	(202)	(216)	(14)	(202)	(216)	(14)
Cost of Secondary Commissioning of mandatory Services	(9,138)	(762)	(640)	122	(762)	(640)	122
Education & Training	(2,951)	(246)	(138)	108	(246)	(138)	108
Consultancy	(848)	(71)	(42)	29	(71)	(42)	29
Premises	(10,636)	(977)	(847)	130	(977)	(847)	130
Clinical Negligence	(21,336)	(1,859)	(1,857)	2	(1,859)	(1,857)	2
Printing and Stationary	(1,354)	(133)	(84)	49	(133)	(84)	49
Postage	(1,239)	(103)	(87)	17	(103)	(87)	17
Telephones	(726)	(61)	(57)	3	(61)	(57)	3
Staff Travel	(1,336)	(107)	(126)	(19)	(107)	(126)	(19)
Transport Hire/Lease	(1,114)	(98)	(48)	49	(98)	(48)	49
Cleaning Materials	(352)	(29)	(19)	10	(29)	(19)	10
Office Equipment and Consumables	(146)	(11)	(11)	()	(11)	(11)	()
Misc Other Operating Expenses	(3,373)	(327)	(282)	45	(327)	(282)	45
<b>Total Non-Pay Expenditure</b>	<b>(222,146)</b>	<b>(18,504)</b>	<b>(17,070)</b>	<b>1,434</b>	<b>(18,504)</b>	<b>(17,070)</b>	<b>1,434</b>
Depreciation & Amortisation-Owned Assets	(18,201)	(1,517)	(1,542)	(26)	(1,517)	(1,542)	(26)
Impairment Losses	(500)	(42)		42	(42)		42
Profit/Loss on Asset Disposals	(120)	(10)		10	(10)		10
PDC Dividend	(6,013)	(501)	(501)		(501)	(501)	
Interest Receivable	110	9	8	(2)	9	8	(2)
Interest Payable	(1,917)	(144)	(64)	80	(144)	(64)	80
Other Non-Operating Expenses	(7)	(1)	1		(1)		1
<b>Total Non-Operating Expenditure</b>	<b>(26,648)</b>	<b>(2,205)</b>	<b>(2,100)</b>	<b>105</b>	<b>(2,205)</b>	<b>(2,100)</b>	<b>105</b>
<b>Total Expenditure</b>	<b>(248,794)</b>	<b>(20,709)</b>	<b>(19,170)</b>	<b>1,539</b>	<b>(20,709)</b>	<b>(19,170)</b>	<b>1,539</b>

Non Pay expenditure is favourable to plan in April by £1.4m (7.7%).

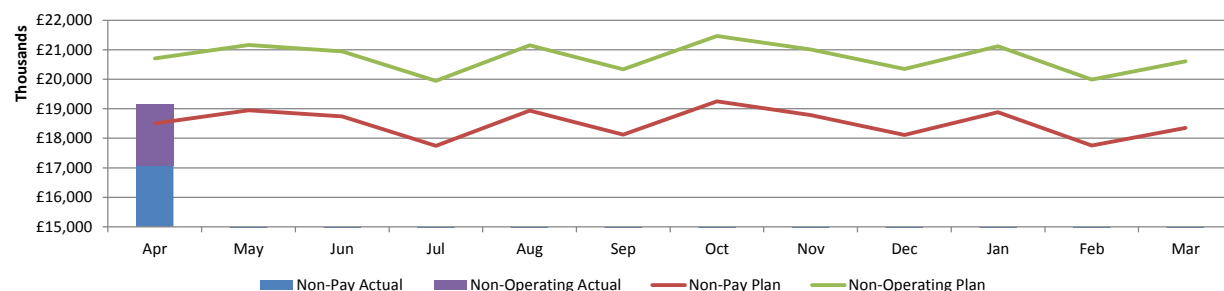
Drug expenditure is favourable to plan by £0.4m. Pass-through drugs are favourable to plan by £0.3m, offset by an adverse position on clinical income. All other drugs are favourable to plan by £0.1m.

Clinical supplies and services are favourable against plan in April by £0.3m. Underspends can be seen on medical equipment and disposables in all clinical areas, particularly Surgical Services which is £0.4m favourable to plan, predominantly on T&O prostheses and reflects the impact of low elective activity in month. These underspends are offset by an underperformance on CIP schemes of £0.2m.

Expenditure on non clinical supplies is favourable to plan by £0.2m, mainly relating to underspends on IT equipment, software and support for the SaCP project which is offset by an adverse position on non clinical income.

Other areas of underspend are referrals to the independent sector (mainly Spencer Wing), expenditure on education and training and premises costs (predominantly utilities), totalling £0.4m.

**Non-Pay: Plan v Actual**



Non Operating Expenditure YTD is on plan. The Trust incurred £64k interest charges in respect of the £46.2m facility utilised in 2016/17 and 2017/18 with a further £2.2m drawn in April 2018.

# Cost Improvement Summary

Month 01 (April) 2018/19

## Delivery Summary

Programme Themes £000	Year to Date			This Month			Forecast	
	Plan	Actual	Variance	Plan	Actual	Variance	Outturn	Variance
Patient Flow/LOS	-	-	-	-	-	-	1,000	-
Agency	544	627	83	544	627	83	6,179	43
Workforce *	2	22	20	2	22	20	189	20
Procurement	109	54	(55)	109	54	(55)	2,638	(55)
Medicines Value	30	42	12	30	42	12	874	3
Division Schemes **	818	310	(508)	818	310	(508)	16,045	(111)
<b>Sub-total</b>	<b>1,502</b>	<b>1,055</b>	<b>(448)</b>	<b>1,502</b>	<b>1,055</b>	<b>(448)</b>	<b>26,925</b>	<b>(100)</b>
Central	-	100	100	-	100	100	3,075	100
<b>Grand Total</b>	<b>1,502</b>	<b>1,155</b>	<b>(348)</b>	<b>1,502</b>	<b>1,155</b>	<b>(348)</b>	<b>30,000</b>	<b>-</b>

\*\* Smaller divisional schemes not allocated to a work stream

## Delivered £000

Month	Target	Actual
April	1,502	1,155
May	1,533	
June	1,552	
July	3,357	
August	2,156	
September	1,289	
October	2,895	
November	2,927	
December	2,944	
January	3,208	
February	3,267	
March	3,370	
<b>*excl Income Completeness</b>	<b>30,000</b>	<b>1,155</b>
		3.8%

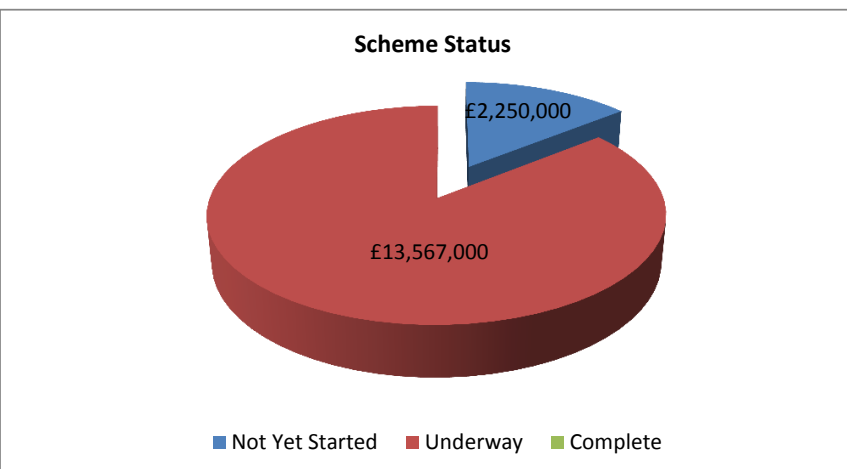
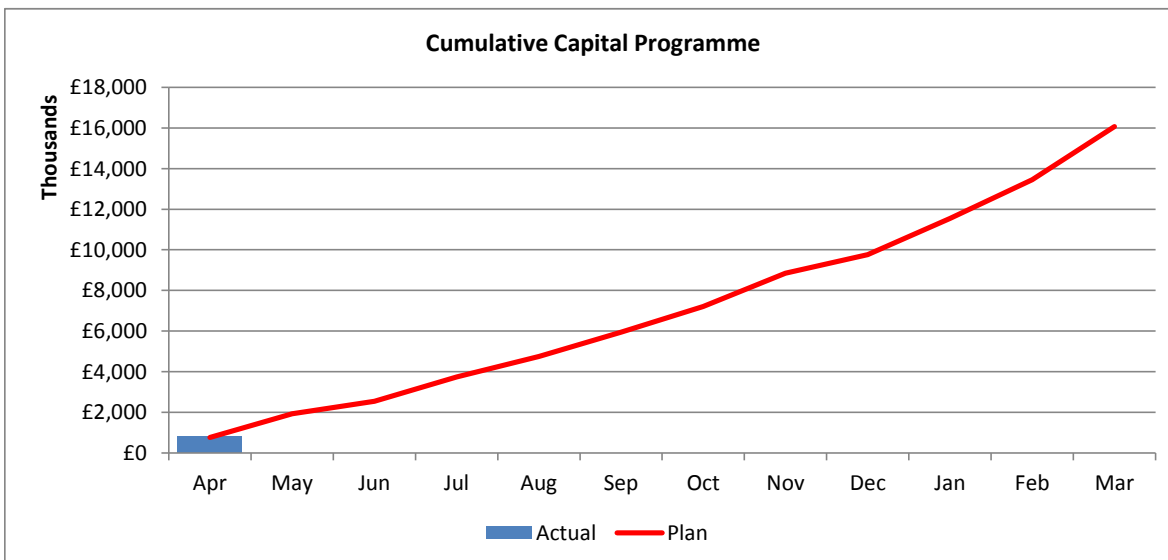
## CIPs

The CIPs Plan of £30.0m is net of the cost of delivery. CIPs achieved in M01 were £1.2m against a plan of £1.5m. Medicines Value and Agency over performed. Divisions underperformed as £0.3m Non-recurrent savings were reported as Agency and under performance of Income schemes. CIPs in April amounted to £0.6m recurrent and £0.6m on a non-recurrent basis.

## Capital Expenditure Month 01 (April) 2018/19

Capital Programme	Annual	To Date			Annual
£000	Plan	Plan	Actual	Variance	Forecast
Replacement Medical Equipment	3,000	20	76	(56)	3,000
CT/CT SPECT Replacement	2,921		16	(16)	2,921
Other IT Schemes	2,281	582	531	51	2,281
PEIC/H & S/CQC	2,100		36	(36)	2,100
All Other	2,100		4	(4)	2,100
IDG	2,000	60	47	13	2,000
Other Building Schemes	1,065	25	31	(6)	1,065
Prior Year Scheme	250	50	50	0	250
Clinical Strategy Plans	200	20	12	8	200
Invest To Save Schemes	150		1	(1)	150
WHH Orthopaedic Outpatients			1	(1)	
Electronic Health Records			11	(11)	
CCU Move to Arundel Unit			1	(1)	
<b>Total</b>	<b>16,067</b>	<b>757</b>	<b>816</b>	<b>(59)</b>	<b>16,067</b>

- Total expenditure for Mth 1 2018/19 is 8% above the NHSI plan.
- The largest scheme at £2.9m , the replacement of gamma cameras/CT at K&C, is marginally over profile in Mth 1 by £16k due to earlier than planned design fees.
- The standing committees supporting equipment/ IT replacement and backlog maintenance are over profile in Mth 1, but will be back within profile in May 2018.
- There is £2m of capital yet to be allocated - a prioritisation process is underway with recommendations being made by the Strategic Investment Group in June after a full evaluation of all the clinical service priorities.
- The capital forecast outturn position for 2018/19 is to meet plan.





# Statement of Financial Position

Month 01 (April) 2018/19

£000	Opening	To Date	Movement
<b>Non-Current Assets</b>	<b>270,767</b>	<b>270,116</b>	<b>(650) ▼</b>
<b>Current Assets</b>			
Inventories	8,949	9,039	90 ▲
Trade and Other Receivables	38,366	31,715	(6,651) ▼
Assets Held For Sale			-
Cash and Cash Equivalents	7,157	16,287	9,130 ▲
<b>Total Current Assets</b>	<b>54,472</b>	<b>59,610</b>	<b>5,139 ▲</b>
<b>Current Liabilities</b>			
Payables	(39,536)	(41,720)	(2,184) ▲
Accruals and Deferred Income	(26,715)	(29,266)	(2,551) ▲
Provisions	(884)	(919)	(36) ▲
<b>Net Current Assets</b>	<b>(12,664)</b>	<b>(14,496)</b>	<b>(1,832) ▼</b>
<b>Non Current Liabilities</b>			
Provisions	(3,203)	(3,167)	36 ▼
Long Term Debt	(46,228)	(48,462)	(2,234) ▲
<b>Total Assets Employed</b>	<b>208,672</b>	<b>198,942</b>	<b>(9,730) ▼</b>
<b>Financed by Taxpayers Equity</b>			
Public Dividend Capital	191,687	191,687	-
Retained Earnings	(42,537)	(47,587)	(5,049) ▼
Revaluation Reserve	59,523	59,523	-
<b>Total Taxpayers' Equity</b>	<b>208,672</b>	<b>198,574</b>	<b>(10,099) ▼</b>

Non Current asset values reflect in year additions of £0.8m (including donated assets) less depreciation charges of £1.5m. The balance of movements relates to fluctuations in the level of RTA income recognised for new claims

Trust closing cash balances for April was £16.3m, £0.7m above the revised plan. See cash report for further details.

Trade and other receivables have decreased from the 2018/19 opening position by £6.7m. Invoiced debtors have decreased from the opening position of £28.5m by £7.6m to £20.9m at the end of April.

Accruals and Deferred Income have increased by £2.5m since the opening position. Of the £29.3m balance, £19.9m relates to Accruals and £9.4m is Deferred Income.

The long term debt entry reflects drawings against working capital facilities. The Trust drew £22.7m in 16/17, £23.5m in 17/18 and £2.2m in April.

Retained earnings reflects the year to date deficit.

# Working Capital

## Month 01 (April) 2018/19

### Creditors

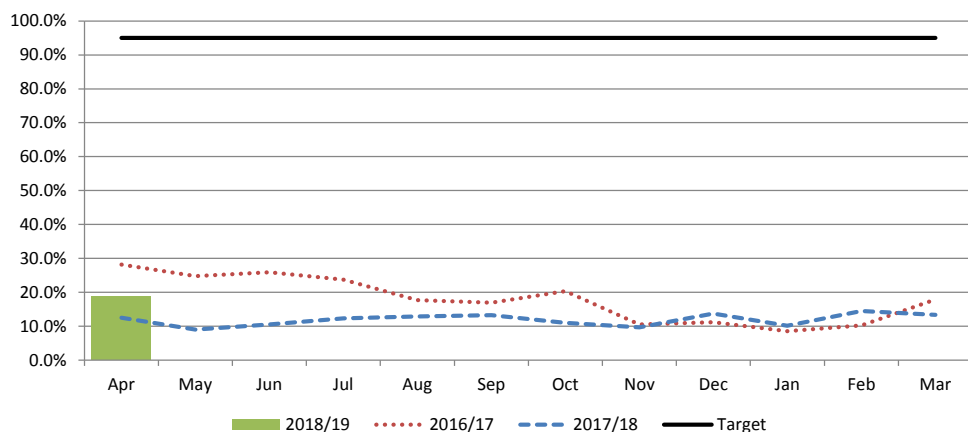
Invoiced creditors have decreased by £3.1m from the opening position to £36.8m. 59% relates to current invoices with 8% or £3m over 90 days.

Over 90 days NHS creditors increased by £40k in the month

- Maidstone & Tunbridge Wells NHS Trust - £5k
- Medway NHS Foundation Trust - £26k
- Kent Community Health NHS Foundation Trust - £11k

Better Payment Practice Code	Year to Date		This Month	
	Non NHS Creditor Invoices	NHS Creditor Invoices	Non NHS Creditor Invoices	NHS Creditor Invoices
By Value £000				
0 - 30 days	(12,374)	(2,315)	(12,374)	(2,315)
30+ days	(15,480)	(529)	(15,480)	(529)
By Volume				
0 - 30 days	1,542	19	1,542	19
30+ days	6,620	130	6,620	130
% by Value £	44.4%	81.4%	44.4%	81.4%
% by Volume	18.9%	12.8%	18.9%	12.8%
Target	95.0%	95.0%	95.0%	95.0%

Percentage paid within 30 days (By Volume)



### Debtors

Total invoiced debtors have decreased from the opening position £28.5m by £7.6m to £20.9m.

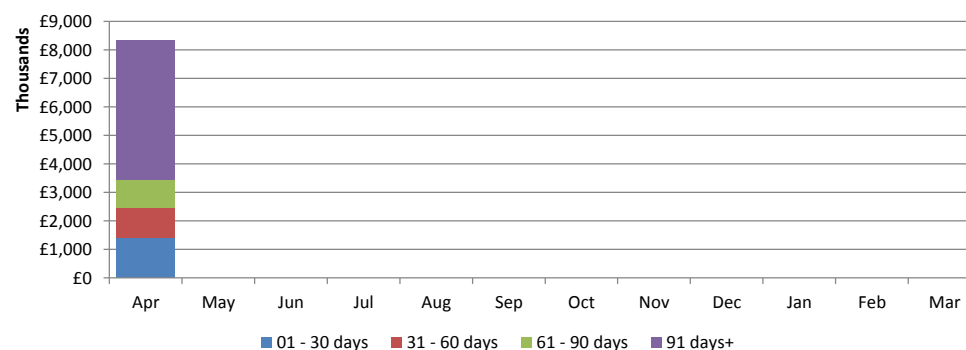
At 30th April there were 7 debtors owing over £1m. South Kent Coast CCG £3.1m, Canterbury & Coastal CCG £2.8m, Ashford CCG £2.5m, NHS England £1.7m, Thanet CCG £1.6m, East Kent Medical Services £1.2m, Maidstone and Tunbridge Wells NHS Trust £1.0m.

The debtors team are focussing on collection of all other debt to support the Trust cash position.

### Aged Debt

£000	Current	01 - 30 days	31 - 60 days	61 - 90 days	91 days+	Total
Apr	12,651	1,397	1,073	974	4,911	8,354
May	0	0	0	0	0	0
Jun	0	0	0	0	0	0
Jul	0	0	0	0	0	0
Aug	0	0	0	0	0	0
Sep	0	0	0	0	0	0
Oct	0	0	0	0	0	0
Nov	0	0	0	0	0	0
Dec	0	0	0	0	0	0
Jan	0	0	0	0	0	0
Feb	0	0	0	0	0	0
Mar	0	0	0	0	0	0
		17%	13%	12%	59%	

Aged Debt



# Divisional Performance

Month 01 (April) 2018/19

Year to Date Actual £000	Electives	Non-Electives	Accident & Emergency	Outpatients	High Cost Drugs	Private Patients	Other Clinical	All Other Income	Pay	Non Pay	Net Position
Urgent Care and Long Term Conditions	1,713	7,575	2,311	1,574	347	6	1,235	59	(9,062)	(2,183)	3,574
Surgical Services	3,919	3,404	0	2,414	490	7	1,345	174	(7,992)	(2,826)	935
Clinical Support Services	24	0	0	314	1,248	7	2,757	386	(4,930)	(3,603)	(3,798)
Specialist Services	1,101	2,618	0	1,554	2,149	2	3,878	152	(5,520)	(3,096)	2,837
<b>Clinical Divisions Total</b>	<b>6,756</b>	<b>13,596</b>	<b>2,311</b>	<b>5,856</b>	<b>4,234</b>	<b>22</b>	<b>9,215</b>	<b>771</b>	<b>(27,505)</b>	<b>(11,708)</b>	<b>3,548</b>
Strategic Development and Capital Planning	0	0	0	0	0	0	0	739	(1,080)	(2,820)	(3,160)
Corporate	0	0	0	0	0	0	0	1,543	(1,827)	(2,474)	(2,757)
<b>Divisional Total</b>	<b>6,756</b>	<b>13,596</b>	<b>2,311</b>	<b>5,856</b>	<b>4,234</b>	<b>22</b>	<b>9,215</b>	<b>3,053</b>	<b>(30,411)</b>	<b>(17,001)</b>	<b>(2,370)</b>
Central		100	0	0	30	( )	(570)	424	(487)	(69)	(573)
<b>EBITDA</b>											<b>(2,943)</b>
<b>Capital Charges and Interest</b>										(2,100)	(2,100)
<b>Income and Expenditure Surplus/(Deficit)</b>											(5,042)

Year to Date Variance to Plan £000	Electives	Non-Electives	Accident & Emergency	Outpatients	High Cost Drugs	Private Patients	Other Clinical	All Other Income	Pay	Non Pay	Net Position
Urgent Care and Long Term Conditions	245	137	153	122	(95)	(1)	(27)	1	(820)	222	(65)
Surgical Services	(1,002)	270	0	143	(141)	4	302	7	(322)	651	(88)
Clinical Support Services	(7)	(1)	0	74	(42)	( )	66	(88)	(141)	(64)	(203)
Specialist Services	(14)	(249)	0	228	(99)	(2)	(88)	(24)	(166)	83	(329)
<b>Clinical Divisions Total</b>	<b>(778)</b>	<b>156</b>	<b>153</b>	<b>567</b>				<b>(104)</b>	<b>(1,450)</b>	<b>893</b>	<b>(685)</b>
Strategic Development and Capital Planning	0	0	0	0	0	0	0	(117)	21	285	189
Corporate	0	0	0	0	0	0	0	(26)	98	6	78
<b>Divisional Total</b>	<b>(778)</b>	<b>156</b>	<b>153</b>	<b>567</b>				<b>(247)</b>	<b>(1,330)</b>	<b>1,183</b>	<b>(418)</b>
Central	(493)	48	6	(66)	66	( )	(143)	128	850	250	645
<b>EBITDA</b>											<b>227</b>
<b>Capital Charges and Interest</b>										105	105
<b>Income and Expenditure Surplus/(Deficit)</b>											332

# Urgent Care and Long Term Conditions

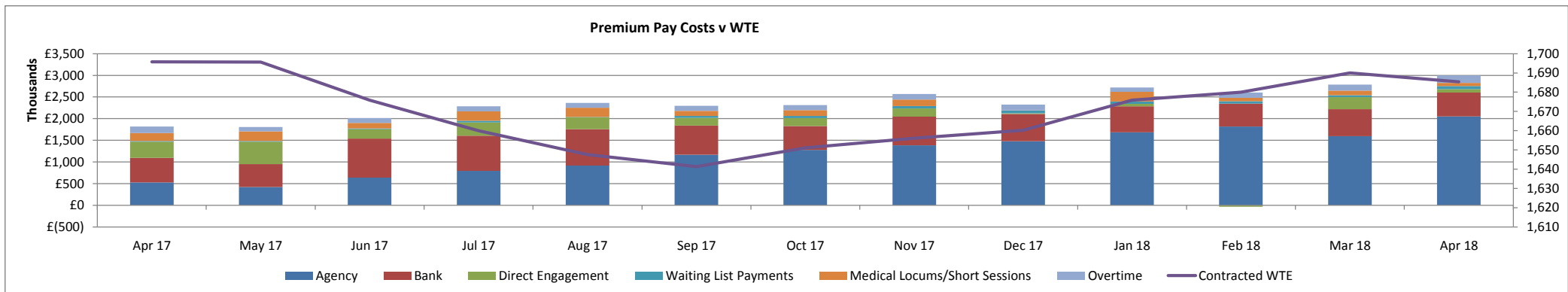
Month 01 (April) 2018/19

Statement of Comprehensive Income £000	Year to Date			This Month		
	Plan	Actual	Var.	Plan	Actual	Var.
<b>Income</b>						
Electives	1,468	1,713	245	1,468	1,713	245
Non-Electives	7,438	7,575	137	7,438	7,575	137
Accident & Emergency	2,158	2,311	153	2,158	2,311	153
Outpatients	1,452	1,574	122	1,452	1,574	122
High Cost Drugs	442	347	(95)	442	347	(95)
Private Patients	7	6	(1)	7	6	(1)
Other NHS Clinical	1,136	1,079	(57)	1,136	1,079	(57)
Other Clinical	126	156	30	126	156	30
Prior Month Adjustment	0	0	0	0	0	0
<b>Total Corporate and SLA Income</b>	<b>14,227</b>	<b>14,760</b>	<b>533</b>	<b>14,227</b>	<b>14,760</b>	<b>533</b>
All Other Income	58	59	1	58	59	1
<b>Total Income</b>	<b>14,285</b>	<b>14,819</b>	<b>534</b>	<b>14,285</b>	<b>14,819</b>	<b>534</b>
<b>Expenditure</b>						
Permanent Staff	(6,661)	(6,068)	594	(6,661)	(6,068)	594
Overtime	0	(170)	(170)	0	(170)	(170)
Waiting List Payments	(16)	(69)	(54)	(16)	(69)	(54)
Medical Locums/Short Sessions	(151)	(75)	76	(151)	(75)	76
Bank	(570)	(550)	20	(570)	(550)	20
Agency	(680)	(2,051)	(1,370)	(680)	(2,051)	(1,370)
Direct Engagement	(163)	(79)	84	(163)	(79)	84
<b>Total Pay</b>	<b>(8,242)</b>	<b>(9,062)</b>	<b>(820)</b>	<b>(8,242)</b>	<b>(9,062)</b>	<b>(820)</b>
Non Pay	(2,405)	(2,183)	222	(2,405)	(2,183)	222
<b>Total Expenditure</b>	<b>(10,647)</b>	<b>(11,245)</b>	<b>(599)</b>	<b>(10,647)</b>	<b>(11,245)</b>	<b>(599)</b>
<b>Contribution</b>	<b>3,638</b>	<b>3,574</b>	<b>(65)</b>	<b>3,638</b>	<b>3,574</b>	<b>(65)</b>

Activity performance this month is favourable to plan in all areas with the exception of Elective Inpatients (underperformance particularly in Cardiology, although this is more than compensated for in additional income for Outpatients and Daycases within the Speciality). Production plans are being updated for all Specialities to ensure continued delivery of plan in all areas. Other NHS Clinical income includes under-performance on rechargeable devices which is offset to a non-pay underspend.

The Divisional pay run rate reduced by £0.1m compared to Mth 12; RMO costs of £0.2m have been re-classified as pay in this financial year therefore the underlying run rate reduction is £0.3m. This is due in the majority to Mth 12 spend including £0.2m accruals for Consultant PAs. The Divisional pay position includes £0.3m cost which is currently unfunded in relation to Business Cases for ED and Wards, which are going through the approvals process but have been given temporary approval to continue following the winter. Agency spend is £2m across all staff groups., an increase of £0.1m at Junior/Middle Grade doctor level; ED Middle Grade usage at WHH is under review as there are no longer any vacancies. Nursing Agency costs (including TFS escalated rates) remain at £0.9m, of which usage in ED, Quex Ward and Cambridge J will reduce as the Business Cases are approved and subsequently posts will be recruited into. A rate reduction has recently been agreed for TFS.

The pay run rate fell by £0.8m compared to Mth 12, partly due to the change in classification or RMOs. Rechargeable drugs and devices underspent by £0.2m, clinical consumables were underspent in all areas. H&SCV and Endoscopy 18 weeks contract budgets have been rebased, eliminating overspends that were present in 17/18.



# Surgical Services

## Month 01 (April) 2018/19

### Statement of Comprehensive Income

£000	Year to Date			This Month		
	Plan	Actual	Var.	Plan	Actual	Var.
<b>Income</b>						
Electives	4,922	3,919	(1,002)	4,922	3,919	(1,002)
Non-Electives	3,134	3,404	270	3,134	3,404	270
Accident & Emergency	0	0	0	0	0	0
Outpatients	2,271	2,414	143	2,271	2,414	143
High Cost Drugs	631	490	(141)	631	490	(141)
Private Patients	3	7	4	3	7	4
Other NHS Clinical	1,031	1,334	303	1,031	1,334	303
Other Clinical	12	11	(1)	12	11	(1)
Prior Month Adjustment	0	0	0	0	0	0
<b>Total Corporate and SLA Income</b>	<b>12,003</b>	<b>11,579</b>	<b>(424)</b>	<b>12,003</b>	<b>11,579</b>	<b>(424)</b>
All Other Income	167	174	7	167	174	7
<b>Total Income</b>	<b>12,170</b>	<b>11,753</b>	<b>(417)</b>	<b>12,170</b>	<b>11,753</b>	<b>(417)</b>
<b>Expenditure</b>						
Permanent Staff	(6,834)	(6,800)	33	(6,834)	(6,800)	33
Overtime	0	(179)	(179)	0	(179)	(179)
Waiting List Payments	(126)	(176)	(50)	(126)	(176)	(50)
Medical Locums/Short Sessions	(84)	(70)	14	(84)	(70)	14
Bank	(223)	(300)	(77)	(223)	(300)	(77)
Agency	(351)	(471)	(120)	(351)	(471)	(120)
Direct Engagement	(53)	4	56	(53)	4	56
<b>Total Pay</b>	<b>(7,670)</b>	<b>(7,992)</b>	<b>(322)</b>	<b>(7,670)</b>	<b>(7,992)</b>	<b>(322)</b>
Non Pay	(3,477)	(2,826)	651	(3,477)	(2,826)	651
<b>Total Expenditure</b>	<b>(11,147)</b>	<b>(10,818)</b>	<b>329</b>	<b>(11,147)</b>	<b>(10,818)</b>	<b>329</b>
<b>Contribution</b>	<b>1,023</b>	<b>935</b>	<b>(88)</b>	<b>1,023</b>	<b>935</b>	<b>(88)</b>

Below plan elective income (£1m) is mostly due to underperformance in Orthopaedics (£646k), and Urology (£133k). Although Kings C2 returned back to an orthopaedic elective ward in the first week of April, Bishopstone ward continued to have non elective outliers into the second week and thereby significantly reduced orthopaedic elective surgery at QEQM due to patient cross infection risks. Urology was under plan as a two week period of high non elective patients restricted ability to admit electives.

Non-Elective income is above plan (£270k) with high levels of Trauma , Maxillo Facial & General Surgery activity.

Outpatients performance is favourable (£143k) with all specialities over performing against plan.

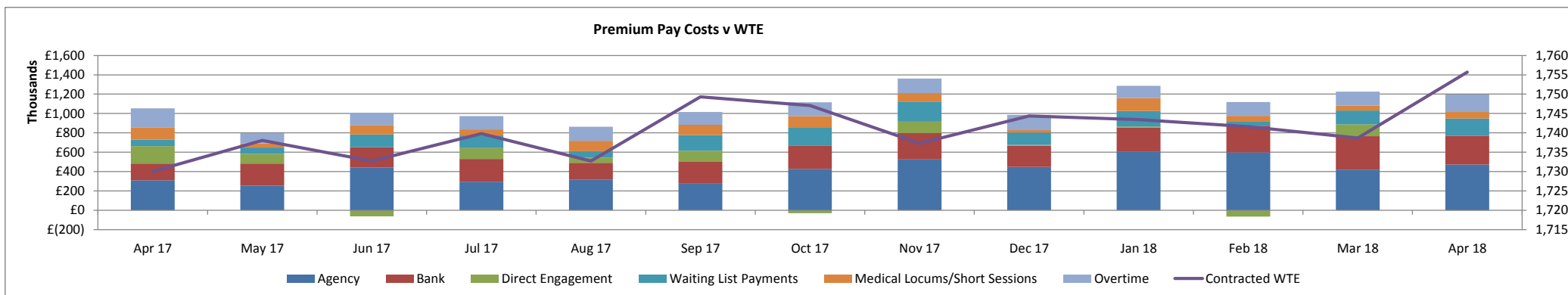
High Cost Drugs under performance (£141k) is solely in relation to Ophthalmology AMD patients, and is offset with an underspend in expenditure.

Other NHS Clinical Income is favourable mostly due to ITU (£238k).

Pay is adverse with the continuation of high medical agency costs for middle grade vacancies in General Surgery, Urology, Vascular and also additional support for the ED's. Interviews and appointments have been made, but there continues to be delays on VISAs for foreign nationals. Nursing agency has reduced but is still high at WHH for ITU and bedding of patients overnight in the Day Surgery Unit.

Non Pay is favourable (£651k) with underspends on Clinical Supplies (£331k), High Cost Drugs (£141k) and Independent Sector usage (£90k) for Orthopaedic & Ophthalmology services.

Included in the above expenditure is approximately £175k for medical patient outliers with no additional income. This has equated to the loss on average of 24 Surgical beds per day in April. Also incurred is £57k supporting the Winter/ED plan.



# Clinical Support

## Month 01 (April) 2018/19

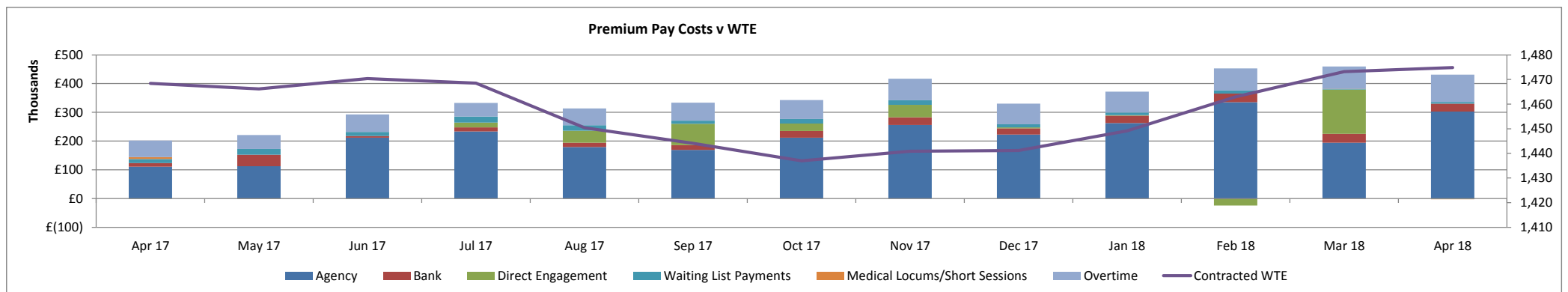
Statement of Comprehensive Income £000	Year to Date			This Month		
	Plan	Actual	Var.	Plan	Actual	Var.
<b>Income</b>						
Electives	30	24	(7)	30	24	(7)
Non-Electives	1	0	(1)	1	0	(1)
Accident & Emergency	0	0	0	0	0	0
Outpatients	239	314	74	239	314	74
High Cost Drugs	1,290	1,248	(42)	1,290	1,248	(42)
Private Patients	8	7	(1)	8	7	(1)
Other NHS Clinical	2,690	2,757	66	2,690	2,757	66
Other Clinical	0	0	0	0	0	0
Prior Month Adjustment	0	0	0	0	0	0
<b>Total Corporate and SLA Income</b>	<b>4,259</b>	<b>4,349</b>	<b>90</b>	<b>4,259</b>	<b>4,349</b>	<b>90</b>
All Other Income	474	386	(88)	474	386	(88)
<b>Total Income</b>	<b>4,733</b>	<b>4,735</b>	<b>2</b>	<b>4,733</b>	<b>4,735</b>	<b>2</b>
<b>Expenditure</b>						
Permanent Staff	(4,601)	(4,501)	100	(4,601)	(4,501)	100
Overtime	0	(95)	(95)	0	(95)	(95)
Waiting List Payments	(27)	(6)	22	(27)	(6)	22
Medical Locums/Short Sessions	(5)	5	5	(5)	5	5
Bank	(23)	(27)	(4)	(23)	(27)	(4)
Agency	(100)	(303)	(203)	(100)	(303)	(203)
Direct Engagement	(32)	2	34	(32)	2	34
<b>Total Pay</b>	<b>(4,789)</b>	<b>(4,930)</b>	<b>(141)</b>	<b>(4,789)</b>	<b>(4,930)</b>	<b>(141)</b>
Non Pay	(3,539)	(3,603)	(64)	(3,539)	(3,603)	(64)
<b>Total Expenditure</b>	<b>(8,328)</b>	<b>(8,533)</b>	<b>(205)</b>	<b>(8,328)</b>	<b>(8,533)</b>	<b>(205)</b>
<b>Contribution</b>	<b>(3,595)</b>	<b>(3,798)</b>	<b>(203)</b>	<b>(3,595)</b>	<b>(3,798)</b>	<b>(203)</b>

Main & SLA income to the Division was above plan this month, this was offset by 'Other Income' not meeting the plan.

Pathology, Radiology and Therapies all met or exceeded their activity based plans with the main commissioners. Within Pathology all disciplines met the Direct access plan. Within Radiology Direct access and unbundled OP activity, CT met plan, whilst MRI was above plan, Interventional Radiology and Nuclear Medicine were slightly below plan. Within Therapies Physiotherapy outpatient attendances were above plan and increased in comparison to March activity levels. Occupational Therapy first attendances were below plan by 23% and follow up were above plan 27%, the overall income impact being adverse to plan (10%). Pharmacy Homecare drugs were below plan £0.045m.

Pay was adverse to plan predominantly due to unmet savings target now devolved to the Division. Although the Division has some pay CIP schemes, there is a gap of £0.09m in April. All departments are overspent on their pay costs in April, reflecting the higher staff in post WTE than average outturn last year. Pay in Radiology in particular has increased on this time last year by £0.2m. £0.1m of which is agency cost which continues to be a cost pressure in the Division. There has been an heightened interest in substantive consultant posts in recent months which will enable a reduction.

The adverse non-pay position in April was related to overspends on maintenance contracts and outsourced Radiology reporting as well as the unmet CIP target within the Division. Many of the maintenance contracts were renewed from 1st April subject to inflationary increases, confirmation of the value and subsequent budget adjustment is pending. With the exception of Radiology, all the other Departments in the Division are within there pay budgets as at month 1.



# Specialist Services

## Month 01 (April) 2018/19

Statement of Comprehensive Income	Year to Date			This Month		
	Plan	Actual	Var.	Plan	Actual	Var.
<b>£000</b>						
<b>Income</b>						
Electives	1,114	1,101	(14)	1,114	1,101	(14)
Non-Electives	2,867	2,618	(249)	2,867	2,618	(249)
Accident & Emergency	0	0	0	0	0	0
Outpatients	1,326	1,554	228	1,326	1,554	228
High Cost Drugs	2,248	2,149	(99)	2,248	2,149	(99)
Private Patients	3	2	(2)	3	2	(2)
Other NHS Clinical	3,948	3,877	(71)	3,948	3,877	(71)
Other Clinical	18	2	(17)	18	2	(17)
Prior Month Adjustment	0	0	0	0	0	0
<b>Total Corporate and SLA Income</b>	<b>11,525</b>	<b>11,302</b>	<b>(223)</b>	<b>11,525</b>	<b>11,302</b>	<b>(223)</b>
All Other Income	176	152	(24)	176	152	(24)
<b>Total Income</b>	<b>11,700</b>	<b>11,453</b>	<b>(247)</b>	<b>11,700</b>	<b>11,453</b>	<b>(247)</b>
<b>Expenditure</b>						
Permanent Staff	(5,039)	(5,108)	(69)	(5,039)	(5,108)	(69)
Overtime	0	(91)	(91)	0	(91)	(91)
Waiting List Payments	0	0	0	0	0	0
Medical Locums/Short Sessions	(52)	(44)	9	(52)	(44)	9
Bank	(158)	(122)	35	(158)	(122)	35
Agency	(95)	(93)	2	(95)	(93)	2
Direct Engagement	(9)	(61)	(52)	(9)	(61)	(52)
<b>Total Pay</b>	<b>(5,354)</b>	<b>(5,520)</b>	<b>(166)</b>	<b>(5,354)</b>	<b>(5,520)</b>	<b>(166)</b>
Non Pay	(3,180)	(3,096)	83	(3,180)	(3,096)	83
<b>Total Expenditure</b>	<b>(8,534)</b>	<b>(8,616)</b>	<b>(83)</b>	<b>(8,534)</b>	<b>(8,616)</b>	<b>(83)</b>
<b>Contribution</b>	<b>3,167</b>	<b>2,837</b>	<b>(329)</b>	<b>3,167</b>	<b>2,837</b>	<b>(329)</b>

Corporate and SLA income was £223k below plan in month. This is primarily due to underperformance in the Women's Health Specialty- Inpatients and Daycases were £160k below plan, non elective admissions including births were £150k below plan and Maternity Pathway income was £70k below plan. Birth and maternity pathway income is subject to variation and it is expected that performance will 'even out' over the course of the year. The inpatient and daycase issue reflects a shortfall in capacity that will need to be addressed through additional investment. A Business Case is being compiled in order to bid for funds..

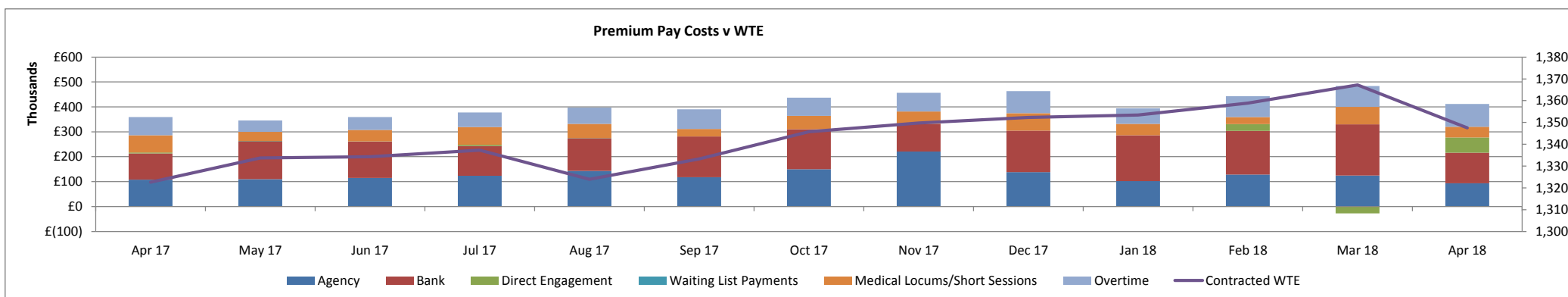
NICU/SCBU was below plan by £90k and paediatric non-elective income by £60k. Again, it is expected that NICU/SCBU income will recover over the course of the year. Work is being undertaken to investigate the reduction in paediatric non-elective income- it may be that improved consultant presence in the evenings has stemmed inappropriate admissions.

Cancer Services income was above plan by £225k and Renal income by £70k. This offset some of the issues highlighted in the Women's Health and Child Health Specialties.

Overall pay costs were overspent by £166k in April. The monthly pay savings target (£200k for the month) is a key driver to the overspend. Another factor is the 'exit run rate'. The Division's pay run rate was, on average, £200k higher in the second half of 17/18 than in the first half and, in April, pay has continued at a rate similar to that seen at the end of 17/18. This rate is higher than funded outturn.

Non-Pay was £83k below plan in month-£50k is due to rechargeable high cost drugs. The Team is investigating some discrepancies between renal rechargeable drugs income and expenditure because income is below plan by £20k, yet expenditure is overspent by £10k (if income is below plan, then expenditure should be underspent). The rest of the underspend is primarily due to consumables and disposables underspends and FP10s. Expenditure does fluctuate in these areas from month-to-month and it is anticipated to increase next month to average levels as stocks run low.

Overall, the monthly I&E contribution run in April was £400k lower than the average for 2017/18.



# Strategic Development and Capital Planning

Month 01 (April) 2018/19

Statement of Comprehensive Income £000	Year to Date			This Month		
	Plan	Actual	Var.	Plan	Actual	Var.
<b>Income</b>						
Electives	0	0	0	0	0	0
Non-Electives	0	0	0	0	0	0
Accident & Emergency	0	0	0	0	0	0
Outpatients	0	0	0	0	0	0
High Cost Drugs	0	0	0	0	0	0
Private Patients	0	0	0	0	0	0
Other NHS Clinical	0	0	0	0	0	0
Other Clinical	0	0	0	0	0	0
Prior Month Adjustment	0	0	0	0	0	0
<b>Total Corporate and SLA Income</b>						
All Other Income	856	739	(117)	856	739	(117)
<b>Total Income</b>	<b>856</b>	<b>739</b>	<b>(117)</b>	<b>856</b>	<b>739</b>	<b>(117)</b>
<b>Expenditure</b>						
Permanent Staff	(1,057)	(959)	98	(1,057)	(959)	98
Overtime	0	(19)	(19)	0	(19)	(19)
Waiting List Payments	0	0	0	0	0	0
Medical Locums/Short Sessions	0	0	0	0	0	0
Bank	(30)	(64)	(34)	(30)	(64)	(34)
Agency	(14)	(38)	(24)	(14)	(38)	(24)
Direct Engagement	0	0	0	0	0	0
<b>Total Pay</b>	<b>(1,101)</b>	<b>(1,080)</b>	<b>21</b>	<b>(1,101)</b>	<b>(1,080)</b>	<b>21</b>
Non Pay	(3,104)	(2,820)	285	(3,104)	(2,820)	285
<b>Total Expenditure</b>	<b>(4,205)</b>	<b>(3,900)</b>	<b>305</b>	<b>(4,205)</b>	<b>(3,900)</b>	<b>305</b>
<b>Contribution</b>	<b>(3,349)</b>	<b>(3,160)</b>	<b>189</b>	<b>(3,349)</b>	<b>(3,160)</b>	<b>189</b>

The position as at month 1 is £189k favourable. The income/expenditure positions are showing variances due to the SaCP project being behind original plan, which net off. Income performance (excluding SaCP) is breakeven. Pay £21k favourable and Non Pay (excluding SaCP) £151k Favourable.

Income is breakeven as at month 1.

Pay is favourable £21k YTD. The Division currently has a vacancy rate (comparing contracted/budgeted WTE) of just under 14%, which is slightly lower compared to previous months. Agency & Bank staff expenditure is mostly within EKLS, Procurement both of these areas of expenditure are supported by increased income/delivery of the Trust's savings plan, there is also support for the vacant Deputy Director of Estates and projects around the future of service delivery.

Non Pay is favourable as at Mth 1 (excluding SaCP) £150k. This can be broken down as follows:

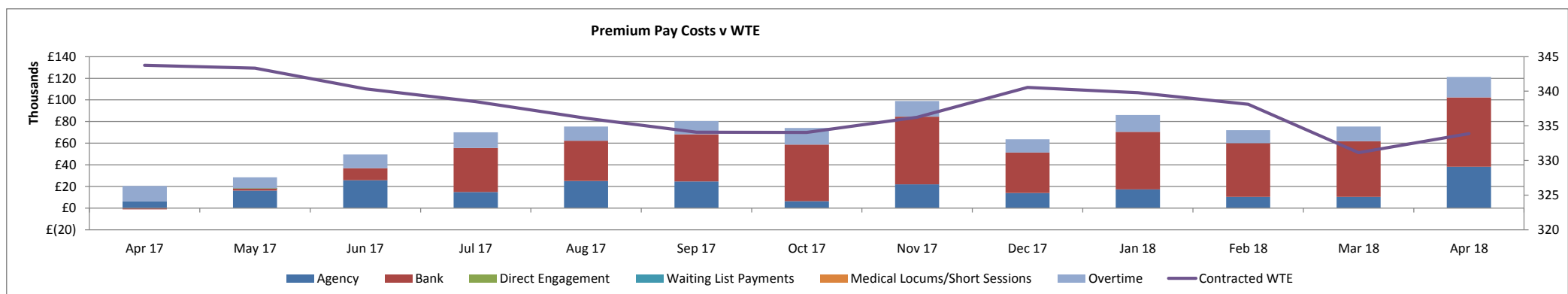
Estates day to day budgets are favourable £30k,

Utilities £120k favourable YTD, this is primarily made up of underspend on Gas and a benefit from a stock adjustment in mth, these are currently being validated.

IT and Comms non Pay £25k Favourable.

Consultation funds phased incorrectly, therefore showing a favourable variance of £25k

Savings are £90k adverse against plan mainly due to the PAS savings having slipped due to go live delay, and additional income from Tenants data not yet having been received / validated. It is anticipated that with the exception of the PAS savings, these schemes will be validated and released in full asap. with no detrimental impact on the full year effect. All of the schemes are continually being monitored working alongside the PMO, and where adverse is slippage against plan is identified new schemes will be identified to make good against the full year plan.





# Corporate

## Month 01 (April) 2018/19

Statement of Comprehensive Income	Year to Date			This Month		
	Plan	Actual	Var.	Plan	Actual	Var.
<b>£000</b>						
<b>Income</b>						
Electives	0	0	0	0	0	0
Non-Electives	0	0	0	0	0	0
Accident & Emergency	0	0	0	0	0	0
Outpatients	0	0	0	0	0	0
High Cost Drugs	0	0	0	0	0	0
Private Patients	0	0	0	0	0	0
Other NHS Clinical	0	0	0	0	0	0
Other Clinical	0	0	0	0	0	0
Prior Month Adjustment	0	0	0	0	0	0
<b>Total Corporate and SLA Income</b>						
All Other Income	1,569	1,543	(26)	1,569	1,543	(26)
<b>Total Income</b>	<b>1,569</b>	<b>1,543</b>	<b>(26)</b>	<b>1,569</b>	<b>1,543</b>	<b>(26)</b>
<b>Expenditure</b>						
Permanent Staff	(1,914)	(1,765)	149	(1,914)	(1,765)	149
Overtime	0	(17)	(17)	0	(17)	(17)
Waiting List Payments	0	0	0	0	0	0
Medical Locums/Short Sessions	0	(2)	(2)	0	(2)	(2)
Bank	(6)	(32)	(26)	(6)	(32)	(26)
Agency	(5)	(10)	(5)	(5)	(10)	(5)
Direct Engagement	0	0	0	0	0	0
<b>Total Pay</b>	<b>(1,925)</b>	<b>(1,827)</b>	<b>98</b>	<b>(1,925)</b>	<b>(1,827)</b>	<b>98</b>
Non Pay	(2,480)	(2,474)	6	(2,480)	(2,474)	6
<b>Total Expenditure</b>	<b>(4,405)</b>	<b>(4,300)</b>	<b>104</b>	<b>(4,405)</b>	<b>(4,300)</b>	<b>104</b>
<b>Contribution</b>	<b>(2,835)</b>	<b>(2,757)</b>	<b>78</b>	<b>(2,835)</b>	<b>(2,757)</b>	<b>78</b>

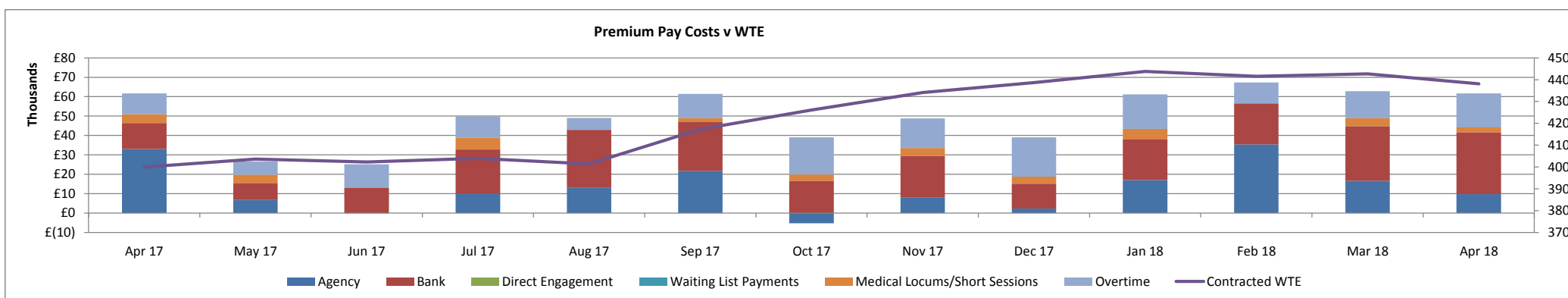
The position is £78k favourable as at month 1.

Income is adverse £(26)k YTD. This is mainly due to training income not being received in period 1 in HR, this is to be validated with the department for month 2.

Pay is £98k favourable position YTD due to vacancies approx 44 WTE. The percentage vacancy rates, budgeted against contracted, are on average under 9% in each CQ&PS, HR and Finance.

The premium pay costs shown below are attributable to the high level of vacancies and this is being kept to a minimum and below the contracted establishment in each area being incurred. Recruitment plans are being reviewed as part of expenditure control plans in conjunction with ensuring operational delivery of the finance and workforce plan.

Non pay is £6k favourable as at month 1, there some minor variances which offset each other which will be validated for month 2



## A. Year on Year Analysis

### Month 01 (April) 2018/19

	Year to Date	Prior Year to Date	Year on Year	
	Actual	Actual	Variance	Variance %
<b>Income</b>				
Electives	6,756	6,424	332	4.9%
Non-Electives	13,696	12,862	834	6.1%
Accident and Emergency	2,311	2,094	217	9.4%
Outpatients	5,856	5,474	382	6.5%
High Cost Drugs	4,264	4,255	9	0.2%
Private Patients	22	41	(18)	(81.7%)
Other NHS Clinical Income	8,476	9,057	(581)	(6.9%)
Other Clinical Income	162	124	38	23.5%
<b>Total Corporate and SLA Income</b>	<b>41,543</b>	<b>40,330</b>	<b>1,212</b>	<b>2.9%</b>
Other Income	3,476	4,194	(718)	(20.7%)
<b>Total Income</b>	<b>45,019</b>	<b>44,525</b>	<b>494</b>	<b>1.1%</b>
<b>Expenditure</b>				
Permanent Staff	(25,805)	(24,695)	(1,111)	(4.3%)
Overtime	(575)	(507)	(68)	(11.8%)
Waiting List Payments	(252)	(100)	(152)	(60.4%)
Medical Locums/Short Sessions	(191)	(368)	178	93.2%
Bank	(1,080)	(866)	(214)	(19.8%)
Agency	(2,864)	(966)	(1,898)	(66.3%)
Direct Engagement	(132)	(555)	424	322.1%
<b>Total Pay</b>	<b>(30,898)</b>	<b>(28,057)</b>	<b>(2,842)</b>	<b>(9.2%)</b>
<b>Non-Pay</b>				
Drugs	(5,174)	(5,493)	319	6.2%
Clinical Supplies	(5,074)	(5,481)	407	8.0%
Non-Clinical Supplies	(917)	(444)	(473)	(51.5%)
Facilities Management	(1,451)	(1,437)	(14)	(0.9%)
NHS Supplies and Services	(216)	(187)	(29)	(13.6%)
Cost of Secondary Commissioning of mandatory Services	(640)	(504)	(136)	(21.3%)
Education & Training	(138)	(95)	(42)	(30.7%)
Consultancy	(42)	(38)	(4)	(8.9%)
Premises	(847)	(855)	8	0.9%
Clinical Negligence	(1,857)	(1,803)	(54)	(2.9%)
Printing and Stationary	(84)	(66)	(18)	(21.5%)
Postage	(87)	(66)	(20)	(23.5%)
Telephones	(57)	(62)	5	8.7%
Staff Travel	(126)	(158)	32	25.3%
Transport Hire/Lease	(48)	(36)	(12)	(25.6%)
Cleaning Materials	(19)	(22)	3	16.5%
Office Equipment and Consumables	(11)	(7)	(3)	(31.5%)
Misc Other Operating Expenses	(282)	(245)	(37)	(13.0%)
<b>Total Non-Pay</b>	<b>(17,070)</b>	<b>(17,002)</b>	<b>(69)</b>	<b>(0.4%)</b>
<b>Total Expenditure</b>	<b>(47,969)</b>	<b>(45,059)</b>	<b>(2,910)</b>	<b>(6.1%)</b>
<b>EBITDA</b>	<b>(2,950)</b>	<b>(534)</b>	<b>(2,416)</b>	<b>(81.9%)</b>
Non-Operating Expenses	(2,100)	(2,243)	143	6.8%
<b>Income and Expenditure Surplus/(Deficit)</b>	<b>(5,049)</b>	<b>(2,777)</b>	<b>(2,273)</b>	<b>(45.0%)</b>

#### Other Income

- No STF income 2018-19 but £0.7m in 17-18

#### Pay

- Pay inflation 2.1%.
- Consultant Job Plan and Junior Doctors roll out.
- No RMO usage in this period 17-18.
- No Oak leaf costs in this period 17-18.
- No A&E Improvement costs in this period 17-18.
- Divisional run rate increases to support activity and operational requirements.

#### Non Pay

- Drugs - Due to lower expenditure on rechargeable between years.
- Clinical Supplies - Low elective activity performance in month 18-19.
- Non clinical Supplies - Movement mainly driven by Estates Non Pay profiles.

## B. Cash Flow

### Month 01 (April) 2018/19

Year to Date		This Month			Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Actual		Plan	Actual	Variance	Actual	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast	Forecast
<b>7,157</b>	<b>Opening Bank Balance</b>	7,157	7,157		7,157	16,287	4,609	4,278	8,478	3,470	5,153	5,617	3,493	3,879	2,890	2,890
7,445	Ashford CCG	7,445	7,445		7,445	5,494	6,764	5,919	5,919	5,919	5,919	5,919	5,919	5,919	5,919	5,919
10,918	C4G	10,918	10,918		10,918	9,344	10,844	9,844	9,844	9,844	9,844	9,844	9,844	9,844	9,844	9,844
12,809	South Kent Coast CCG	12,809	12,809		12,809	10,528	12,260	11,105	11,105	11,105	11,105	11,105	11,105	11,105	11,105	11,105
8,180	Thanet CCG	8,180	8,180		8,180	7,821	8,504	8,048	8,048	8,048	8,048	8,048	8,048	8,048	8,048	8,048
	Additional Income									6,495						
38	Dartford, Gravesham & Swanley CCG	38	38		38	38	38	38	38	38	38	38	38	38	38	38
263	Medway CCG	263	263		263	164	164	164	164	164	164	164	164	164	164	164
306	Swale CCG	306	306		306	306	306	306	306	306	306	306	306	306	306	306
377	West Kent CCG	377	377		377	377	594	449	449	449	449	449	449	449	449	449
8,082	NHS England	8,082	8,082		8,082	7,829	8,519	8,059	8,059	9,531	8,059	8,059	8,059	8,059	8,059	8,059
5,317	All Other NHS Organisations	5,224	5,317	93	5,317	1,144	1,160	5,107	960	1,160	5,107	960	1,160	5,107	960	1,160
0	Capital Receipts															
2,664	All Other Receipts	1,941	2,664	723	2,664	1,637	2,279	1,820	1,783	2,242	1,857	1,783	1,710	1,783	1,710	1,746
	Provider Sustainability Fund							4,233								
2,234	Working Capital Facility	2,234	2,234		2,234				3,725			5,855	4,276	2,659	2,329	6,371
	Working Capital Facility Repaid															
	Permanent Loan															
<b>58,633</b>	<b>Total Receipts</b>	<b>57,817</b>	<b>58,633</b>	<b>816</b>	<b>58,633</b>	<b>44,684</b>	<b>51,432</b>	<b>55,093</b>	<b>50,401</b>	<b>55,302</b>	<b>50,897</b>	<b>52,531</b>	<b>51,078</b>	<b>53,482</b>	<b>48,931</b>	<b>53,210</b>
<b>Payments</b>																
(26,379)	Monthly Payroll inc NI & Super	(26,408)	(26,379)	29	(26,379)	(26,764)	(28,734)	(28,798)	(27,846)	(27,937)	(27,839)	(27,708)	(27,710)	(27,885)	(27,931)	(27,780)
(21,603)	Creditor Payment Run	(21,960)	(21,603)	356	(21,603)	(27,542)	(21,325)	(21,486)	(26,301)	(21,318)	(21,341)	(25,682)	(21,310)	(25,682)	(19,100)	(19,107)
(1,503)	Capital Payments	(1,005)	(1,503)	(498)	(1,503)	(2,056)	(1,670)	(609)	(1,206)	(1,012)	(1,195)	(1,265)	(1,642)	(904)	(1,787)	(1,809)
	PDC Dividend Payment									(2,634)						(3,007)
(18)	Interest Payments	(18)	(18)		(18)		(34)		(55)	(719)	(57)		(30)		(114)	(704)
<b>(49,503)</b>	<b>Total Payments</b>	<b>(49,391)</b>	<b>(49,503)</b>	<b>(112)</b>	<b>(49,503)</b>	<b>(56,362)</b>	<b>(51,764)</b>	<b>(50,893)</b>	<b>(55,409)</b>	<b>(53,619)</b>	<b>(50,432)</b>	<b>(54,655)</b>	<b>(50,692)</b>	<b>(54,471)</b>	<b>(48,931)</b>	<b>(52,407)</b>
<b>9,130</b>	<b>Total Movement In Bank Balance</b>	<b>8,426</b>	<b>9,130</b>	<b>704</b>	<b>9,130</b>	<b>(11,678)</b>	<b>(331)</b>	<b>4,200</b>	<b>(5,008)</b>	<b>1,683</b>	<b>464</b>	<b>(2,125)</b>	<b>386</b>	<b>(989)</b>	<b>()</b>	<b>803</b>
<b>16,287</b>	<b>Closing Bank Balance</b>	<b>15,584</b>	<b>16,287</b>	<b>704</b>	<b>16,287</b>	<b>4,609</b>	<b>4,278</b>	<b>8,478</b>	<b>3,470</b>	<b>5,153</b>	<b>5,617</b>	<b>3,493</b>	<b>3,879</b>	<b>2,890</b>	<b>2,890</b>	<b>3,693</b>
<b>Plan</b>					15,584	3,861	3,529	7,882	3,470	5,153	5,618	3,493	3,879	2,890	2,890	3,693
<b>Variance</b>					704	749	749	596	()	()	()	()	()	()	()	()

## C. Clinical Income - by Commissioner

Month 01 (April) 2018/19

Commissioner	Annual £000	Year to Date £000			This Month £000		
	Plan	Plan	Actual	Variance	Plan	Actual	Variance
NHS Ashford CCG	71,025	5,316	5,721	405	5,316	5,721	405
NHS Canterbury & Coastal CCG	118,136	9,256	9,478	222	9,256	9,478	222
NHS South Kent Coast CCG	133,267	10,527	10,343	(183)	10,527	10,343	(183)
NHS Thanet CCG	96,582	7,498	7,730	233	7,498	7,730	233
East Kent CCGs	419,010	32,597	33,273	677	32,597	33,273	677
NCA - England	4,685	401	478	78	401	478	78
NHS England - Armed Forces	159	15	18	3	15	18	3
NHS England - Specialised Services	79,165	6,508	6,206	(302)	6,508	6,206	(302)
NHS England - Health In Justice	116	10	7	(3)	10	7	(3)
NHS England - Secondary Dentistry	6,429	480	559	79	480	559	79
NHS England - Public Health	7,811	651	552	(99)	651	552	(99)
Kings	264	22	20	(2)	22	20	(2)
NCA - Wales	142	12	7	(5)	12	7	(5)
NCA - Northern Ireland	5						
NCA - Scotland	22	2	1	(1)	2	1	(1)
Other Trusts	1,793	149	197	48	149	197	48
East Kent Overseas	( )	1	47	46	1	47	46
NHS Dartford, Gravesham & Swanley CCG	455	57	39	(18)	57	39	(18)
NHS Medway CCG	2,075	150	151	1	150	151	1
NHS Swale CCG	3,643	302	236	(66)	302	236	(66)
NHS West Kent CCG	5,122	380	462	82	380	462	82
Other Organisations	5,652	170	(955)	(1,125)	170	(955)	(1,125)
Cancer Drugs Fund	3,007	251	296	45	251	296	45
Prior year Income			(44)	(44)		(44)	(44)
Total	539,558	42,157	41,550	(606)	42,157	41,550	(606)

Clinical income is £607k behind plan. East Kent Commissioner contracts are over performing YTD with the exception of South Kent CCG. NSHE Specialised Services is also behind plan in April. The Cancer Drugs Fund and West Kent CCG are ahead of plan, while the North Kent CCG's are behind plan. Other Organisations include provisions for risk.

There are no material contracting issues with any of our other Commissioners.

## D. KPIs

### Month 01 (April) 2018/19

		M1	M2	M3	M4	M5	M6	M7	M8	M9	M10	M11	M12
Clinical Income Consolidated	Plan	42,848	45,649	46,985	46,015	44,480	46,915	47,069	46,849	43,841	47,000	43,204	47,002
	Actual	42,369											
	Variance	-479											
	Quarterly rolling average spend	43,089											
Other Income Consolidated	Plan	3,475	3,534	3,566	3,508	3,529	3,552	3,587	3,613	3,546	3,574	3,570	3,628
	Actual	3,329											
	Variance	-146											
	Quarterly rolling average spend	5,875											
Pay Consolidated	Plan	-30,772	-30,911	-31,066	-30,623	-30,634	-30,717	-30,686	-30,953	-30,960	-31,294	-30,721	-30,717
	Actual	-31,253											
	Variance	-481											
	Quarterly rolling average spend	-31,203											
Non Pay Operating Expenses Consolidated	Plan	-18,693	-19,143	-18,927	-17,936	-19,125	-18,308	-19,439	-18,979	-18,303	-19,074	-17,944	-18,545
	Actual	-17,358											
	Variance	1,335											
	Quarterly rolling average spend	-19,920											
Non Operating Consolidated	Plan	-2,228	-2,228	-2,228	-2,229	-2,235	-2,238	-2,236	-2,246	-2,259	-2,257	-2,260	-2,280
	Actual	-2,118											
	Variance	110											
	Quarterly rolling average spend	-1,942											
Agency Unconsolidated	Plan	-1,849	-1,702	-1,617	-1,552	-1,460	-1,450	-1,432	-1,292	-1,289	-1,278	-1,279	-1,258
	Actual	-3,186											
	Variance	-1,337											
	Quarterly rolling average spend	-3,237											
CIPS Unconsolidated	Plan	1,502	1,533	1,552	3,357	2,156	1,289	2,895	2,927	2,944	3,208	3,267	3,370
	Actual	1,155											
	Variance	-348											
Cash Unconsolidated	Plan	15,584											3,693
	Actual	16,287											
	Variance	704											

## E. Cost Improvement Summary

Month 01 (April) 2018/19

### Planned Summary

Planned Summary	2018 - 2019			Target Variance		
Programme Divisions £000	Plan	Net	RAG Adj	vs Net	vs RAG	
Clinical Support		4,159	4,156	2,887	(3)	1,556
Specialist		4,075	4,075	3,888	-	226
Surgery		7,015	7,014	4,053	(1)	886
UC&LTC		6,400	6,400	6,145	-	1,306
Corporate - Other		71	71	71	-	118
SD&CP		1,300	1,300	1,095	-	531
Procurement		2,693	2,638	2,240	(55)	529
Medicines Value		871	874	874	3	37
Sub-total		26,584	26,528	21,253	(56)	5,189
Central		3,416	3,472	4,449	56	(5,324)
Grand Total		30,000	30,000	25,702	-	(136)

### Planned Summary

Planned Summary	2018 - 2019			Target Variance	
Programme Themes £000	Plan	Net	RAG Adj	vs Net	vs RAG
Patient Flow/LOS	1,000	1,000	750	-	(250)
Agency	6,137	6,179	6,232	43	96
Workforce *	169	189	184	20	16
Procurement	2,693	2,638	2,240	(55)	(453)
Medicines Value	871	874	855	3	(16)
Division Schemes **	16,156	16,045	11,090	(111)	(5,065)
Sub-total	27,025	26,925	21,352	(100)	(5,673)
Central	2,975	3,075	4,350	100	1,375
Grand Total	30,000	30,000	25,702	-	(4,298)

## E. Cost Improvement Phasing

Month 01 (April) 2018/19

Work stream Gross £'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
Patient Flow/LOS	-	151	151	151	526	526	526	526	526	526	526	526	4,666
Agency	175	190	335	462	522	526	592	636	623	627	606	590	5,882
Workforce	396	376	390	406	408	419	432	446	461	456	454	469	5,114
Procurement	192	171	177	231	206	200	181	171	171	143	125	118	2,087
Medicine Optimisation	36	36	37	40	40	33	33	32	32	32	32	503	891
Clinical Support	(6)	205	5	61	65	81	82	82	94	94	67	68	897
Specialist	15	20	100	93	132	202	205	206	206	206	207	212	1,804
Surgery	162	162	162	335	335	335	369	364	369	373	373	342	3,679
UC&LTC	51	66	92	125	125	185	185	185	185	185	185	185	1,754
Corporate - Other	-	-	-	-	-	-	-	-	-	-	-	-	-
SD&CP	27	117	72	79	79	79	82	119	117	117	117	119	1,123
<b>Sub-total</b>	<b>1,048</b>	<b>1,494</b>	<b>1,520</b>	<b>1,984</b>	<b>2,439</b>	<b>2,588</b>	<b>2,687</b>	<b>2,767</b>	<b>2,785</b>	<b>2,759</b>	<b>2,693</b>	<b>3,133</b>	<b>27,898</b>
Central	321	(36)	365	343	(72)	(227)	773	653	534	760	631	394	4,438
<b>Grand Total</b>	<b>1,369</b>	<b>1,458</b>	<b>1,885</b>	<b>2,327</b>	<b>2,367</b>	<b>2,361</b>	<b>3,460</b>	<b>3,420</b>	<b>3,319</b>	<b>3,519</b>	<b>3,324</b>	<b>3,527</b>	<b>32,336</b>

Workstream RAG adj £'000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
Patient Flow/LOS	-	19	171	204	216	265	264	229	448	802	502	500	3,618
Agency	365	413	200	269	328	276	534	331	377	376	430	530	4,428
Workforce	551	690	583	642	680	572	537	508	588	937	734	501	7,523
Procurement	126	197	178	181	185	219	212	231	187	317	178	111	2,323
Medicine Optimisation	29	56	55	51	73	61	84	121	120	134	90	92	966
Clinical Support	38	260	53	62	82	174	124	183	144	153	220	176	1,669
Specialist	16	35	159	114	189	253	238	347	303	246	254	218	2,372
Surgery	212	212	215	353	271	305	287	260	284	254	280	371	3,304
UC&LTC	-	43	90	114	103	121	196	785	150	319	273	404	2,598
Corporate - Other	-	-	-	230	58	58	58	200	58	58	58	64	842
SD&CP	34	44	60	46	46	46	241	75	75	75	75	75	893
<b>Sub-total</b>	<b>1,371</b>	<b>1,969</b>	<b>1,764</b>	<b>2,265</b>	<b>2,231</b>	<b>2,350</b>	<b>2,774</b>	<b>3,269</b>	<b>2,733</b>	<b>3,672</b>	<b>3,093</b>	<b>3,044</b>	<b>30,535</b>
Central	238	(194)	22	22	22	22	106	577	182	167	300	201	1,666
<b>Grand Total</b>	<b>1,609</b>	<b>1,774</b>	<b>1,786</b>	<b>2,287</b>	<b>2,253</b>	<b>2,372</b>	<b>2,880</b>	<b>3,845</b>	<b>2,915</b>	<b>3,840</b>	<b>3,393</b>	<b>3,245</b>	<b>32,200</b>

## F. Debtor Balances

### Month 01 (April) 2018/19

Debtor	Top ten debtor balances outstanding as at 30/04/2018						Creditor balance as at 30/04/2018	Notes
	Current	1-30 Days	31-60 Days	61-90 Days	Over 90	Total		
62003-NHS SOUTH KENT COAST CCG	3,032,868.53	276.25	10,196.29	4,400.50	23,136.67	3,070,878.24	99,968.00	Current - Includes invoices for 17/18 overperformance
61865-NHS CANTERBURY AND COASTAL CCG	2,740,910.87	832.50	9,182.91	5,236.25	30,499.98	2,786,662.51	93,176.00	Current - Includes invoices for 17/18 overperformance
61818-NHS ASHFORD CCG	2,388,890.13	395.00	6,535.70	27,230.75	72,199.26	2,495,250.84	57,352.00	Current - Includes invoices for 17/18 overperformance
62138-NHS ENGLAND SOUTH EAST COMMISSIONING HUB (14G)	1,062,510.62	73,900.17	557,853.17	0.00	0.00	1,694,263.96		
62033-NHS THANET CCG	1,507,083.83	3,196.26	10,348.59	3,584.00	47,341.39	1,571,554.07	80,522.00	Current - Includes invoices for 17/18 overperformance
51136-EAST KENT MEDICAL SERVICES	161,030.41	168,183.08	179,681.79	105,120.28	576,502.72	1,190,518.28	1,261,130.15	Reciprocal payment arrangement in place with EKMS
50010-MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST	24,454.94	221,214.88	(139,421.55)	90,080.57	828,963.65	1,025,292.49	1,763,220.77	Reciprocal payment arrangement in place with MTW
62048-NHS WEST KENT CCG	470,620.56	23,646.95	9,972.84	1,802.50	220,757.00	726,799.85		
51708-MEDWAY NHS FOUNDATION TRUST	13,117.49	97,069.40	24,267.07	85,978.69	273,956.35	494,389.00	866,954.73	Reciprocal payment arrangement in place with Medway FT
59742-HEALTHEX	12,186.78	12,186.77	12,186.78	12,186.78	414,349.89	463,097.00	1,261,130.15	Healthex Loan Interest
Other Govn.	278,739.10	347,943.07	198,452.74	335,362.64	824,639.91	1,985,137.46		
Other Non Govn.	960,562.13	445,627.43	194,210.42	302,628.36	1,598,495.56	3,501,523.90		
	12,652,975.39	1,394,471.76	1,073,466.75	973,611.32	4,910,842.38	21,005,367.60	5,483,453.80	



## G. Creditor Balances

### Month 01 (April) 2018/19

#### Unpaid at last Payment Run

Supplier Name	Current	1-30	31-60	60-90	90 +	Total
NHS Professionals Ltd		1,316				1,316
NHS Business Services Authority Prescription Pricing Division			315		310	625
Icom Security Ltd		313				313
NHS Supply Chain 8HD71 - Stock		271				271
Bayer PLC		202				202
Qualasept Ltd		180				180
Novartis Pharmaceuticals UK Ltd		144				144
Medtronic Ltd		115				115
Corona Energy		91				91
Hospira Uk Ltd		82				82
Other Creditors		2,354				2,354
<b>Total</b>	<b>0</b>	<b>5,068</b>	<b>315</b>	<b>0</b>	<b>310</b>	<b>5,693</b>

At the last payment run of the period there was a total of £12m of invoices authorised and ready for payment.

Of the £12m, £6.3m was released leaving £5.7m unpaid due to low liquidity.

Aged Creditors now stands at £36.7m

The Accounts Payable team prioritises key suppliers and those threatening to restrict supplies.

#### Top Ten Aged Creditor

Supplier Name	Current	1-30	31-60	60-90	90 +	Total
NHS Professionals Ltd	2,722	1,709		0	14	4,446
Serco Ltd	1,799	121				1,920
Maidstone & Tunbridge Wells NHS Trust (RWF)	287	712	201	163	400	1,763
NHS Supply Chain 8HD71 - Maintenance	1,248	41	57			1,346
East Kent Medical Services Ltd T/a The Spencer Wing	125	100	180	105	752	1,261
Healthcare At Home Ltd	977					977
NHS Business Services Authority Prescription Pricing Division		248	315		310	873
Medway NHS Foundation Trust (RPA)	204	54	51	112	446	867
TFS Healthcare	860					860
Ashford Borough Council	809	2				811
Other Creditors	12,680	6,939	743	153	1,141	21,657
<b>Total</b>	<b>21,711</b>	<b>9,927</b>	<b>1,548</b>	<b>532</b>	<b>3,063</b>	<b>36,780</b>

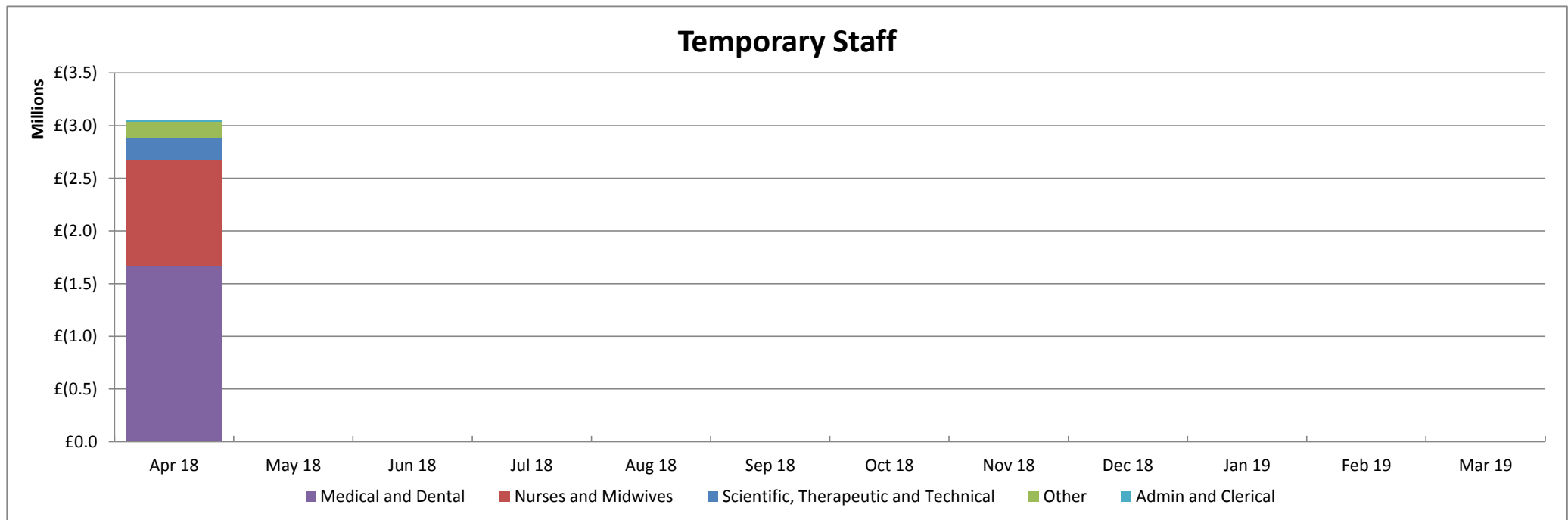
#### Aged Creditor By Reason

Reason Description	Current	1-30	31-60	60-90	90 +	Total
Current	21,711					21,711
Cash Flow		5,068	315		310	5,693
Waiting on a GRN		1,972	511	179	265	2,927
Waiting on Authorisation		1,492	191	283	108	2,074
Disputed		245	158	24	1,446	1,874
Creditor Debit Balance		100	39	102	714	954
Not Recorded		790	86	-68	10	819
Price Query		150	54	6	78	289
Purchase Order Value Exceeded		50	158	4	30	241
Waiting on Purchase Order		47	32	1	103	184
Other		12	2	0	0	14
<b>Total</b>	<b>21,711</b>	<b>9,927</b>	<b>1,548</b>	<b>532</b>	<b>3,063</b>	<b>36,780</b>

## H. Pay Analysis - Temporary Staff

Month 01 (April) 2018/19

In Month £000	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
<b>Medical and Dental</b>	<b>(1,667)</b>											
Agency	(1,476)											
Medical Locum and Short Session	(191)											
STAFFflow												
<b>Scientific, Therapeutic and Technical</b>	<b>(217)</b>											
Agency	(217)											
<b>Nurses and Midwives</b>	<b>(1,002)</b>											
Agency	(1,002)											
<b>Admin and Clerical</b>	<b>(18)</b>											
Agency	(18)											
<b>Other</b>	<b>(150)</b>											
Agency	(150)											
<b>Total</b>	<b>(3,054)</b>											



## H. Pay Analysis - Temporary Staff

Month 01 (April) 2018/19

Temporary Staff Actual £m	M & D	N & M	PAMS	A&C Other	Total	Variance v 2018/19	Variance v 2017/18
Urgent Care & LongTerm Conditions	1.07	0.81	0.03	0.11	2.02		0.52
Surgical Services	0.31	0.12	0.03		0.47		(0.08)
Clinical Support Services	0.13		0.17		0.30		0.06
Specialist Services	0.16	0.04			0.20		0.01
Strategic Development and Capital Planning				0.04	0.04		0.02
Corporate				0.01	0.01		
Central	(0.13)	0.03	(0.01)		(0.11)		(0.05)
<b>Total</b>	<b>1.54</b>	<b>1.00</b>	<b>0.22</b>	<b>0.16</b>	<b>2.92</b>		<b>0.48</b>

Variance v 2018/19 average

Variance v 2017/18 average (0.09) 0.40 0.07 0.10 0.48

Temporary Staff Year to Date £m	M & D	N & M	PAMS	A&C Other	Total	Average per Month
Urgent Care & LongTerm Conditions	1.07	0.81	0.03	0.11	2.02	2.02
Surgical Services	0.31	0.12	0.03		0.47	0.47
Clinical Support Services	0.13		0.17		0.30	0.30
Specialist Services	0.16	0.04			0.20	0.20
Strategic Development and Capital Planning				0.04	0.04	0.04
Corporate				0.01	0.01	0.01
Central	(0.13)	0.03	(0.01)		(0.11)	(0.11)
<b>Total</b>	<b>1.54</b>	<b>1.00</b>	<b>0.22</b>	<b>0.16</b>	<b>2.92</b>	<b>2.93</b>

Average per month 1.54 1.00 0.22 0.17 2.93