


MEETING DATE:	12 July 2012	 North Lincolnshire Clinical Commissioning Group REPORT TO THE CLINICAL COMMISSIONING GROUP COMMITTEE
AGENDA ITEM NUMBER:	Item 7.1	
AUTHOR:	Therese Paskell	
JOB TITLE:	Chief Financial Officer	
DEPARTMENT:	Finance	

FINANCE REPORT MONTH 2

PURPOSE/ACTION REQUIRED:	To Receive & Note
CONSULTATION AND/OR INVOLVEMENT PROCESS:	CCG Engine Room
FREEDOM OF INFORMATION:	Public

1. PURPOSE OF THE REPORT:							
To receive and note the financial performance for the period up-to 31 st May 2012, and the full year forecast out-turn position for 2012/13, including risks and mitigations.							
2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT: <i>(will be populated following agreement with Council of Members)</i>							
3. IMPACT ON RISK ASSURANCE FRAMEWORK:							
			<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Yes</td> <td style="padding: 2px; text-align: center;">x</td> <td style="padding: 2px;">No</td> <td style="width: 20px;"></td> </tr> </table>	Yes	x	No	
Yes	x	No					
Financial risks and mitigations highlighted within the report are captured within the current risk framework. Information relating to the organisation's financial performance and its ability to achieve financial targets, whilst managing any associate risks - will form part of the Trust's Legacy documentation.							
4. IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:							
			<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Yes</td> <td style="padding: 2px; text-align: center;">X</td> <td style="padding: 2px;">No</td> <td style="width: 20px;"></td> </tr> </table>	Yes	X	No	
Yes	X	No					
The report highlights where investment is proposed to meet our policies e.g. capital.							

5. LEGAL IMPLICATIONS:

Yes	X	No	
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It provides assurance to the Committee of the organisation's current and year end forecast ability to meet its statutory financial duties and progress re transfers of payroll and property.

6. RESOURCE IMPLICATIONS:

Yes	x	No	
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This report monitors the organisations resource current and forecast year-end resource utilisation.

7. EQUALITY IMPACT ASSESSMENT:

Yes		No	X
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Not applicable – the report is a summary monitoring report.

8. PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATIONS:

Yes	x	No	
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This report is used to communicate summary details of the organisation's financial performance to the public.

9. RECOMMENDATIONS:

The CCG is asked to:

- Receive and note the financial performance for the period up-to 31st May 2012, and the full year forecast out-turn position for 2012/13 as well as the associated risks and mitigations.

**NHS NORTH LINCOLNSHIRE FINANCE REPORT.
FINANCIAL YEAR 2012/13: PERIOD 2 (MAY 2012)**

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1) SUMMARY MAIN FINANCE TARGET PERFORMANCE

OVERVIEW - ALL KEY TARGETS

	MONTH 2 MAY 2012	YEAR TO DATE	FORECAST YEAR END	MAIN CHANGES TO LAST MONTH	COMMENTS
1 Revenue Break-Even is Achieved.	G	G	G	➡	
2 Revenue Expenditure = or less than the Resource Limit	G	G	G	➡	
3 Capital Spend = or less than the Capital Resource Limit	G	G	G	➡	The Capital Resource Limit is still to be confirmed by the SHA.
4 Cash Expenditure is less than the Cash Limit	G	G	G	➡	
5 95% of NHS Invoices by Value are Paid within 30 Days	G	G	G	➡	Based on Month 1 figures as Month 2 data has not been received
6 95% of NHS Invoices by Number are Paid within 30 Days	G	G	G	➡	Based on Month 1 figures as Month 2 data has not been received
7 95% of Non NHS Invoices by Value are Paid within 30 Days	A	A	G	➡	Based on Month 1 figures as Month 2 data has not been received
8 95% of Non NHS Invoices by Number are Paid within 30 Days	A	A	G	➡	Based on Month 1 figures as Month 2 data has not been received
9 Period End Cash Balances are less than £ 500 K	G	G	G	➡	

KEY:	↑ = Improvement in performance
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➡ = No change in performance

↓ = Deterioration in performance

REVENUE BREAK-EVEN PERFORMANCE

MONTH 2 MAY 2012			YEAR TO DATE			FORECAST YEAR END		
BUDGET/ TARGET	ACTUAL	VARIANCE	BUDGET/ TARGET	ACTUAL	VARIANCE	BUDGET/ TARGET	ACTUAL	VARIANCE
£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s	£000s
23,017	22,851	-166	45,533	45,191	-342	276,544	274,544	-2,000
166	166	0	342	342	0	2,000	2,000	0

1 COMMISSIONED SERVICES

23,017	22,851	-166	45,533	45,191	-342	276,544	274,544	-2,000
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2 RUN RATE - Planned and actual surplus achievement

166	166	0	342	342	0	2,000	2,000	0
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2012/2013: NHS NORTH LINCOLNSHIRE MONTH 2 FINANCIAL COMMENTARY

EXECUTIVE SUMMARY FOR CLUSTER DOF PURPOSES

FOT: The PCT is reporting a surplus of circa £2.0m for the 2012/13 Financial Year in line with plan.

The PCT is also reporting in line with the profiled plan surplus of £342k.

QIPP: In-year savings are expected to deliver as planned. Year to date achievement is largely as a result of contract agreements. There has been some slippage in QIPP Investment spend but this has not delayed progress on those schemes.

Whilst milestones and savings overall are on track, the major risk to recurrent delivery of the QIPP programme remains the failure to change behaviours and manage activity to the level contracted with NLAG Hospitals NHS Trust.

Running Costs: The organisation is still planning to manage “Running Costs” for 2012/13 to £25 per head of weighted population for Commissioning (inclusive of double running costs), and £2.78 for Public Health. Further, more detailed, guidance is awaited for PCTs/CCGs.

Risks: Indications are that the forecast outturn will be achieved and that in reality the financial impact of any risks will be contained within the total resources of the 2012/13 financial plan and all financial targets achieved. The table below highlights the financial risk the PCT is containing to meet its control total.

Risk / £000s	Best Scenario	Likely Scenario	Worst Scenario	Comment
Secondary Care	0	1500	1,800	Based on previous years' experience and potential scenarios regarding outturn / growth
Specialised Commissioning	400	600	750	
Continuing Care	250	800	1,000	
Other (incl. QIPP slippage)	500	800	1,200	
Total Potential Risk	1,150	3,700	4,750	
Uncommitted Contingency	(4,000)	(4,000)	(4,000)	
Potential additional resource generated in year through underspend / effective budget management	(1,000)	(800)	(250)	
Potential Contingency and Risk Management Fund	(5,000)	(4,800)	(4,250)	
Unaddressed Risk / (Additional Risk Coverage)	(3,850)	(1,100)	500	

MAIN REPORT CONTENT	
Section Number	
1	Headlines and Key Messages
2	Revenue forecast and Year to date position
3	Capital
4	QIPP Delivery
5	Risk management
6	Working Balance Management
7	Other Target Delivery
8	Financial Governance

1. HEADLINES & KEY MESSAGES : MONTH 2 SUMMARY

Target / Issue	Outturn	Comments
Revenue Target <ul style="list-style-type: none"> Achieve £2.0m surplus 	On track	Surplus of £2m forecast
<ul style="list-style-type: none"> Spend 2% of Allocation on one-off items 	On track	In line with previous years, mostly pre-committed on healthcare contracts
Resource Limit	On track	
QIPP Delivery	Largely on track	<p>In-year QIPP savings slightly below profile, e.g. Mental Health but within project milestones.</p> <p>Recurrent delivery – see risk management</p>
Revenue risks outside QIPP <ul style="list-style-type: none"> Secondary Care Activity Secure Services Activity Primary Care 	Risks managed	Risks managed thorough contingency reserve
Cash Management <ul style="list-style-type: none"> Cash Balances 	Achieved	YTD cash balance of £409k is within the PCTs limits.
<ul style="list-style-type: none"> Payment Policy 	Partial	New provider and electronic systems Implemented in 12/13 should improve this after settling down period.
Capital	On track	Forecast in line with Plan. £50k capital grant to primary care is planned. Possible capital receipt in 12/13 for an asset held for sale
Governance	Yes	11/12 Accounts unqualified CCG on track so far for authorisation

2. REVENUE FORECAST AND YEAR TO DATE POSITION

Key Messages

Target	Plan £m	Achieved / Forecast
Year To Date Surplus (run rate)	0.342	Yes
Full Year Surplus	2.0	Forecast to achieve
Control Total	2.6	Forecast to achieve

Achieving the year to 31 May 2012 position required £61k of the contingency to be utilised to achieve run rate but, the entire full year contingency budget is forecast to still be available.

Year to Date position

Of the month 1 contract information received so far, Leeds Teaching Hospitals appears to be overspending by £10k mainly relating to pass through payments which are volatile. A few of the contracts with providers have non material surpluses at this stage including NLAG, Doncaster and Bassetlaw and Sheffield Children's Foundation Trusts. Information has not yet been received from United Lincolnshire and Sheffield Teaching Hospitals. Overall, the main acute contracts at month 1 are under spending by £64k.

However, Specialised Commissioning Group is reporting an overspend of £37k mainly relating to final agreed baselines for 12/13 for Tier 4 CAMHS and £96k overspend against the exclusions budget relating mainly to 4 mental health clients remaining from last year. Both budgets (and related contracts) are being reviewed to see what further action is necessary.

So far little information has been received on primary care; therefore balanced budgets have been shown for the moment. The additional investment in Continuing Care appears to be sufficient at present for the current client cohort.

The overall year to date surplus reported of £342k is in line with the plan profile.

Forecast Outturn

The forecast overall remains as planned at £2m as it is so early in the year and information is still to be received.

Plan values for contracts have been sense checked using final month 12 figures, resulting in some small adjustments. A combination of last year's outturn and contract baselines has therefore been used to inform the forecast outturn at this stage. Contract forecasts are subject to an adjustment for avoidable readmissions, following clinical reviews which are underway. This is in line with PbR guidance.

2% recurrent headroom

The 2012/13 financial plan contains provision to ensure that 2% of the recurrent financial allocation is used on a non-recurrent / one-off basis in line with guidance. The PCT is expecting to achieve this target in line with plans.

Spending 2% of recurrent budgets non recurrently, as required by the NHS over the last few years, has ensured budgets are not recurrently overcommitted, representing good financial management. This has not impacted on levels of spending on healthcare which is largely pre-committed in contracts from the PCT's budget.

Recruitment to the new CCG structure is complete, and CSS structures partially complete, but Local Area Team structures have not been agreed. A further RETS/MARS scheme may be considered by the Cluster in the autumn, although this is likely to be very small for this organisation given last year's VRS programme. As this scheme is still very uncertain, the forecast for redundancies in NHS North Lincolnshire has been reported as zero.

3. CAPITAL

As shown in Appendix 3, operational capital of £300k has been planned, similar to previous years, less a potential capital grant to primary care of £50k. The remaining £250k against the Capital Resource Limit is planned to be spent on IM&T, upgrading the estate, and clinical equipment.

In 2012/13 the PCT is still awaiting its finalised Capital Resource Limit - but advice received from the SHA is for PCTs to proceed as planned. The work programmes will continue to progress: transition, green issues, equality and diversity, health and safety, integrated working, QIPP etc. This takes into account the on-going upgrade and replacement of Transforming Community Services (TCS) assets until transfer on 1 April 2013.

So far, no capital resource has been spent this year, but draft plans are being taken to a future CCG Committee meeting. It is possible that a capital receipt will be received in year from the sale of an asset shown as a "Non-Current Asset Held for Sale" on the Statement of Financial Position. This asset is a house in Auckland Road, and confirmation has been sought from the SHA that the additional capital resources generated by this sale can be spent by the PCT in 2012/13.

From 1 April 2012, those properties not transferring to NLAG under TCS, will transfer to the new NHS Property Services ('Prop Co.')

along with the relevant / associated income and expenditure budgets. Effectively, this will tie the CCG into the use of current NHS buildings. Properties over which there is a legal charge will also transfer.

4. QIPP DELIVERY

So far, based on the SHAs own RAG rating system, there are no red rated schemes, all schemes being either green or amber at this stage.

2012/13						
Plan			Forecast Full-Year Variance (£k)	Risk Assessment		
Recurrent (£k)	Non-Recurrent (£k)	In-Year (£k)		Low Risk	Medium Risk	High Risk
Shifting settings of care and urgent care	(100)	0	(100)	0	(100)	
Optimising elective care pathways	(1,180)	0	(1,180)	0	(1,180)	
Best-practice care pathways for long term conditions	(365)	0	(365)	0	(50)	(315)
Improving medicines management	(807)	(83)	(890)	0	(190)	(700)
Improving primary and community care	(433)	(300)	(733)	0	(300)	(433)
Improving mental health	(300)	0	(300)	0	(300)	
Improving Learning Disabilities	(200)	0	(200)	0	(200)	
Improving non-clinical productivity	(207)	0	(207)	0	(207)	
Other workstreams	(478)	(250)	(728)	0	(478)	(250)
TOTAL	(4,070)	(633)	(4,703)	0	(1,225)	(3,478)

Definitions:

Red: High risk – Scheme has detailed plans in place but is not delivering savings, or scheme does not have detailed plans yet in place

Amber: Medium risk – Scheme has detailed plans in place with savings forecast for the future and the scheme is on track to meet these savings forecasts

Green: Low risk – Scheme has detailed plans in place and has already started to deliver savings

Year to date achievement of £1.62m is largely as a result of contract agreements, but £41k short of the planned profile, partly due to Mental Health savings slippage. There has been some slippage in QIPP Investment spend e.g. on Public Health, Carers support and Teenage Pregnancy but this has not delayed progress on QIPP schemes. The final contract variation for Health Visitors and Family Nurse Partnerships is soon to be actioned. The overall QIPP forecast remains as planned.

5. RISK MANAGEMENT

Financial risk ranges are shown in the executive summary and largely remain as identified at plan stage being:

- Progress on the Sustainable Services Review across the health community
- Engagement of the wider GPs in: clinical commissioning, changing primary and secondary clinical behaviour, and delivering QIPP
- Non return of 'top sliced' funding
- Underlying cost/activity growth above those modelled in the plan
- During the transition, set up/double running costs and management capacity to deliver.

These risks will be mitigated through a track record of contingency resources and planning, tight financial control and in year review, good working relationships with providers, and OD work with CCG and GPs. Leading up to authorisation it will be this ownership that ensures the changes to healthcare are delivered within the Single Integrated Plan.

When guidance has been clarified around the process for accessing the threshold fund held at SHA, business cases will be submitted to support the local transformation of healthcare.

6. WORKING BALANCE MANAGEMENT

Cash flow Management

As shown in Appendix 5, at the end of month 2, cash balances totalled £409k. It is anticipated that the cash allocation will be fully utilised in year to maintain the same closing and opening balances of £2k.

Payment Policy Performance

NHS

NHS invoices paid up to the end of April by value was 99.59%. The number of NHS invoices paid at 95.87% for the same period. These are both above the target of 95% of invoices paid within 30 days of the invoice date.

Non NHS

The number of Non NHS invoices paid within target during April was 94.78% and by value paid in the same period was 94.42%, both only marginally below target. This is expected to improve over the next month or two as the new Genisys system gets embedded.

Debtor Management

As per Appendix 5, there is one outstanding debtor over £15,000 relating to Danum medical services - which is still being pursued.

The latest debtor reports indicate no requirement for a bad debt write off following a clearance of outstanding debt last year. Steps have been taken to ensure that "best practice" which is applied to resolve debtor issues with the major providers of NHS healthcare, is also applied to other budget areas with significant debtor issues - and notably, those relating to the Local Authority.

7. OTHER TARGET DELIVERY

Running Costs

The organisation is still planning "Running Costs" for 2012/13 per head of weighted population to be just over £25 for Commissioning, including double running costs, and £2.78 for Public Health. Further more detailed guidance is awaited for PCTs/CCGs on Running Costs ceilings, and to define what should and should not be included within the set ceiling.

The plan figure for Commissioning reflects the intention to spend the full indicative £25 per head for CCGs, a large proportion being with the Humber CSS, for which service specifications are being developed.

However, current spend appears to be well below plan, which if this continues throughout the year, will result in Running Costs being well below the £25 per head target.

Transition Costs

Transition costs relating to PCT closure costs, and CCG set up costs, are reported to the SHA. CCG development costs are planned, including: OD, other development and GP backfill, roughly equalling £2 per head. So far this year £18k has been spent on CCG development.

Plans are still in development as the transition is still at an early stage. Decisions around estate have not yet been made and recent guidance around NHS Property Services will need to be reviewed.

Anticipated Allocations

Appendix 6 highlights anticipated in year allocations and defunds. Announcements around funding formula and future allocations are expected in a few months time.

Indicative CCG and Practice budgets

The position against indicative CCG and Practice Budgets, in aggregate, is shown at Appendix 7. It is intended in future that Practice performance will be reported into meetings of the Council of Members, for consideration there.

8. FINANCIAL GOVERNANCE

In the PCT's 2011/12 Governance report, the PCT received an unqualified audit opinion with no identified important weaknesses in internal controls. Weaknesses in the arrangements for the use of natural resources from 2010/11 were also addressed in 2011/12, thereby gaining an unqualified audit opinion. The Annual Audit Letter is due out shortly.

Following the development of the NHS Constitution, revised governance structures were agreed at the March CCGC meeting and incorporated within the Cluster assurance document. A revised Cluster Scheme of Delegation for 2012/13 was agreed in April to reflect the NHS changes, which has been reflected in the organisations authorisation matrix. An updated CCG accountability agreement has also been sent to the Cluster.

A new Payroll system is being implemented with effect from 1 July 2012 with minimal impact on staff as the payroll was partly made ready during TCS.

Therese Paskell, Chief Financial Officer

June 2012

3) APPENDIX 1: COMMISSIONING OPERATING COST STATEMENT (OCS) POSITION

COMMISSIONED SERVICES		MONTH 2 - MAY 2012			YTD AT MAY 2012			FULL YEAR		
		LATEST BUDGET	ACTUAL	VARIANCE	LATEST BUDGET	ACTUAL	VARIANCE	LATEST BUDGET	ACTUAL	VARIANCE
		£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s
SECONDARY & TERTIARY CARE COMMISSIONED SERVICES										
1	Northern Lincolnshire & Goole Hospitals NHS FT	7,843	7,826	(17)	15,167	15,132	(35)	91,000	91,000	0
2	Hull & East Yorkshire NHS Trust	1,039	1,039	0	2,185	2,185	0	13,108	13,108	0
3	Doncaster & Bassetlaw NHS FT	266	249	(17)	521	505	(16)	3,127	3,127	0
4	Sheffield Teaching Hospitals NHS FT	148	148	0	279	279	0	1,676	1,676	0
5	Sheffield Childrens Hospital NHS FT	90	67	(23)	209	186	(23)	1,256	1,256	0
6	United Lincolnshire Hospitals NHS Trust	140	140	0	280	280	0	1,680	1,680	0
7	Leeds Teaching Hospitals NHS Trust	91	101	10	207	217	10	1,243	1,243	0
8	East Midlands Ambulance Trust	398	398	0	773	773	0	4,638	4,638	0
9	Rotherham, Doncaster & South Humberside Foundation Trust	1,112	1,112	0	2,246	2,246	0	13,640	13,640	0
10	Specialist Services Group - Acute Services	1,692	1,711	19	3,258	3,295	37	19,547	19,547	0
11	Exclusions / Non-Contract Activity	138	185	47	276	372	96	1,654	1,654	0
12	Other Secondary & Tertiary Care Services	215	215	0	430	430	0	2,578	2,578	0
		13,172	13,191	19	25,831	25,900	69	155,147	155,147	0
PRIMARY CARE COMMISSIONED SERVICES										
13	GMS / PMS Practice Budgets and Other Primary Care Expenditure	1,951	1,951	0	3,902	3,902	0	23,413	23,413	0
14	GDS / PDS and Other Dental Expenditure	454	454	0	908	908	0	5,449	5,449	0
15	Ophthalmic Services	133	133	0	267	267	0	1,602	1,602	0
16	Prescribing Costs	2,481	2,481	0	4,963	4,963	0	29,776	29,776	0
17	Pharmaceutical Services	466	466	0	933	933	0	5,596	5,596	0
		5,485	5,485	0	10,973	10,973	0	65,836	65,836	0
COMMUNITY BASED SERVICES										
18	NLAG Community Services	910	910	0	1,820	1,820	0	10,921	10,921	0
19	Drug/Alcohol Community Services	227	227	0	455	455	0	2,729	2,729	0
20	Other Community Based Services	198	198	0	396	396	0	2,374	2,374	0
		1,335	1,335	0	2,671	2,671	0	16,024	16,024	0
PRIVATE & VOLUNTARY SECTOR										
21 & 22	NHS Continuing Care & Other Care Packages	1,340	1,340	0	2,657	2,657	0	16,952	16,952	0
23	Hospices	49	49	0	98	98	0	590	590	0
24	Voluntary Sector	24	24	0	48	48	0	286	286	0
		1,413	1,413	0	2,803	2,803	0	17,828	17,828	0
POOLED BUDGETS										
25	Mental Health	23	23	0	52	52	0	312	312	0
26	Learning Disabilities	35	35	0	71	71	0	429	429	0
		58	58	0	123	123	0	741	741	0
OTHER COMMISSIONED SERVICES										
27	Other Commissioned Services	264	264	0	528	528	0	2,670	2,670	0
		264	264	0	528	528	0	2,670	2,670	0
OTHER COMMISSIONING COSTS										
28	Public Health	196	195	(1)	391	391	0	2,346	2,346	0
29	Organisational Budgets (excluding Public Health)	573	573	0	1,146	1,146	0	6,878	6,878	0
30	Technical & Provision Costs	4	0	(4)	8	0	(8)	2,697	2,697	0
31	Depreciation & Cost of Capital Charge	31	31	0	63	63	0	377	377	0
32	Profit/ Loss on Sale of Assets	0	0	0	0	0	0	0	0	0
33	Contingency Funds	320	306	(14)	654	593	(61)	4,000	4,000	0
		1,124	1,105	(19)	2,262	2,193	(69)	16,298	16,298	0
34	PLANNED SURPLUS	166	0	(166)	342	0	(342)	2,000	0	(2,000)
TOTAL COMMISSIONED SERVICES		23,017	22,851	(166)	45,533	45,191	(342)	276,544	274,544	(2,000)
MEMORANDUM ITEM - UNCAPPED CONTRACT		£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s
1	Northern Lincolnshire & Goole Hospitals NHS FT	7,843	7,826	(17)	15,167	15,132	(35)	91,000	91,000	0
2	Hull & East Yorkshire NHS Trust	1,039	1,039	0	2,185	2,185	0	13,108	13,108	0
	TARGET	8,882	8,865	(17)	17,351	17,316	(35)	104,108	104,108	0

3) APPENDIX 2: STATEMENT OF FINANCIAL POSITION

	A	B	B-A
	Balance at 31 March 2012 £000s	Balance at 31 May 2012 £000s	Variance B-A £000s
NON CURRENT ASSETS			
Property Plant & Equipment	12,207	12,275	68
Intangible assets	47	44	-3
Other Financial Assets	0	0	0
Trade and Other Receivables	0	0	0
	12,254	12,319	65
CURRENT ASSETS:			
Inventories	2	1	-1
Trade and Other Receivables	3,311	1,338	-1,973
Other Financial Assets	0	0	0
Other Current Assets	0	0	0
Cash and Cash Equivalents	2	409	407
Sub Total Current Assets	3,315	1,748	-1,567
Non-Current Asset Held for Sale	120	120	0
TOTAL CURRENT ASSETS	3,435	1,868	-1,567
TOTAL ASSETS	15,689	14,187	-1,502
CURRENT LIABILITIES			
Trade and other payables	-26,211	-24,288	1,923
Other Liabilities	0	0	0
Provisions	-2,125	-1,858	267
Other Financial Liabilities	0	0	0
Total Current Liabilities	-28,336	-26,912	2,190
NET CURRENT ASSETS/(LIABILITIES)	-24,901	-25,044	-143
TOTAL ASSETS LESS CURRENT LIABILITIES	-12,647	-12,725	-78
NON CURRENT LIABILITIES			
Trade and Other Payables	0	0	0
Provisions	-766	-766	0
Other Financial Liabilities	0	0	0
Other Liabilities	0	0	0
Total Non Current Assets	-766	0	0
Total Assets Employed	-13,413	-12,725	-78
TAXPAYERS EQUITY			
General Fund	-14,343	-13,655	688
Revaluation Reserve	930	929	-1
Government Grant Reserve	0	0	0
Other Reserves	0	0	0
	-13,413	-12,725	688

3) APPENDIX 3 : CAPITAL EXPENDITURE

CAPITAL EXPENDITURE	MONTH 2 - MAY 12			YEAR TO DATE			FORECAST YEAR END		
	LATEST BUDGET	ACTUAL	VARIANCE	LATEST BUDGET	ACTUAL	VARIANCE	LATEST BUDGET	FORECAST ACTUAL	EXPECTED VARIANCE
	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s	£ 000s

Capital Programme Expenditure	MONTH 2 - MAY 12			YEAR TO DATE			FORECAST YEAR END		
1 Maintenance	0	0	0	0	0	0	100	100	0
2 Equipment	0	0	0	0	0	0	200	200	0
3 TOTAL CAPITAL EXPENDITURE	0	0	0	0	0	0	300	300	0

CHARGE AGAINST CAPITAL RESOURCE LIMIT (CRL)

1 TOTAL CAPITAL EXPENDITURE (PER 3 ABOVE)	0	0	0	0	0	0	300	300	0
2 Less :Asset Sales Proceeds (i.e. Net Book Value Element)	0	0	0	0	0	0	0	0	0
3 Less: Captal Grants	0	0	0	0	0	0	-50	-50	0
4 NET CHARGE AGAINST THE CRL	0	0	0	0	0	0	250	250	0
5 CAPITAL RESOURCE LIMIT (CRL)	0	0	0	0	0	0	250	250	0
6 CAPITAL (UNDER) OR OVERSPEND AGAINST THE CRL	0	0	0	0	0	0	0	0	0

NOTES

The Capital Resource Limit (CRL) is expected to be formally confirmed by the Strategic Health Authority in the near future. The gross CRL is expected to be £300k, however we plan to use £50k of this to fund capital grants for Primary Care.

3) APPENDIX 4: CASHFLOW MAY 2012

CASHFLOW STATEMENT	£000's
Net Operating Cost	(45,108)
Profit From Sale of Fixed Asset	0
Depreciation Charge	109
Working Capital	
(Increase)/Decrease in Stocks	1
(Increase)/Decrease in Receivables	1,973
Increase/(Decrease) in Payables	(1,923)
Increase/(Decrease) in Provisions	(267)
Net cash inflow/(outflow) from operating activities	(45,215)
CAPITAL EXPENDITURE	
(Payments) to acquire tangible fixed assets	0
Receipts from sale of tangible fixed assets	0
Net cash inflow/(outflow) from Capital Expenditure	0
Net cash (outflow) before financing	(45,215)
Interest Received	0
FINANCING	
Net cash inflow from financing	45,622
INCREASE/(DECREASE) IN CASH	407

3) APPENDIX 5: OTHER KEY FINANCIAL TARGET PERFORMANCE

1 CASH MANAGEMENT TARGETS

- A) All Cash Expenditure is Kept Within Cash Limits (Not Overdrawn)
 B) Cash Balance Held At Period End less than £500K or 5K at Y/End *

PREVIOUS MONTH			MONTH 2 - MAY 2012			FORECAST YEAR END		
BUDGET/TARGET	ACTUAL	VARIANCE	BUDGET/TARGET	ACTUAL	VARIANCE	BUDGET/TARGET	ACTUAL	VARIANCE
£000s or %	£000s or %	£000s or %	£000s or %	£000s or %	£000s or %	£000s or %	£000s or %	£000s or %
Yes	Yes	None	Yes	Yes	None	Yes	Yes	None
500	68	-432	500	409	-91	2	2	0

2 PROMPT PAYMENT OF INVOICE PERFORMANCE

- A) % of NHS Invoices Paid Within 30 Days - By Value
 B) % of NHS Invoices Paid Within 30 Days - By Number
 C) % of Non NHS Invoices Paid Within 30 Days - By Value
 D) % of Non NHS Invoices Paid In 30 Days - By Number

95.00%	99.59%	-4.59%	95.00%	99.59%	-4.59%	95.00%	95.00%	0.00%
95.00%	95.87%	-0.87%	95.00%	95.87%	-0.87%	95.00%	95.00%	0.00%
95.00%	94.42%	0.58%	95.00%	94.42%	0.58%	95.00%	95.00%	0.00%
95.00%	94.78%	0.22%	95.00%	94.78%	0.22%	95.00%	95.00%	0.00%

3 AGED DEBT

NHS

Non NHS

Total

Current		0-30 days		31-60 days		Over 60 days		TOTAL
£	%	£	%	£	%	£	%	£
249,110	50.93	36,871	7.54	3,331	0.68	11,461	2.34	300,773
17,629	3.60	16,440	3.36	114,949	23.50	39,337	8.04	188,355
266,739	54.53	53,311	10.90	118,280	24.18	50,799	10.39	489,129

Invoices outstanding over £15,000, over 60 days

Customer Name

DANUM MEDICAL SERVICES LIMITED

Invoice Number	Amount £	Days Outstanding	Action (s) Taken
3006790	25,626.09	81	Invoice disputed by Danum re funding issues. Tim Fowler is contacting Danum to resolve.

4 RUNNING COST

PCT Commissioning Running Costs
 Public Health Running Costs
 Total Running Costs
 Unified weighted population
 PCT Commissioning Running Costs per head
 Public Health Running Costs per Head
 Cost per head (unified weighted)

2011/12 Running Costs in Final Accounts	2012/13 Forecast Running Costs	2012/13 Planned Running Costs
3,727	3,752	4,132
392	403	456
4,119	4,155	4,588
163,799	163,799	163,799
22.75	22.91	25.23
2.39	2.46	2.78
25.15	25.37	28.01

3) APPENDIX 6: RESOURCE LIMIT ALLOCATION INFORMATION

	Use / Destination	STATUS OF ISSUED RESOURCE LIMIT ITEMS			Revenue	Capital	Total
		RECURRENT	NON RECURRENT (ONE OFF)	TOTAL	Cash Limit	Resource Limit	Cash Limit
		£000's	£000's	£000's	£000's	£000's	£000's
1) BASE ALLOCATION							
Total Confirmed Funding		263,692	0	263,692	263,692	0	263,692
2) NEW IN YEAR ALLOCATIONS							
Pharmaceutical Services	-	0	2,249	2,249	2,249	0	2,249
Dental Allocation	-	0	5,912	5,912	5,912	0	5,912
General Ophthalmic Services	-	0	1,602	1,602	1,602	0	1,602
nGMS Contract Fees Dispensing Doctors	-	0	22	22	22	0	22
GP Dispensing Personal Admin	-	0	1,254	1,254	1,254	0	1,254
Mental Health Capacity Act	-	0	31	31	31	0	31
Reduction - central pressure	-	0	(40)	(40)	(40)	0	(40)
Social Care Support	-	0	1,915	1,915	1,915	0	1,915
Specialist National Commissioning Group transfer	-	0	(1,730)	(1,730)	(1,730)	0	(1,730)
Cancer Drugs Fund	-	0	(422)	(422)	(422)	0	(422)
Free School Fruit	-	0	(127)	(127)	(127)	0	(127)
Total Confirmed Funding		0	10,666	10,666	10,666	0	10,666
3) ANTICIPATED ALLOCATIONS							
Drugs Pooled Treatment Budget	-	0	1,720	1,720	1,720	0	1,720
Childhood Vaccination	-	0	28	28	28	0	28
Charge for Overseas Visitors	-	0	(160)	(160)	(160)	0	(160)
SIF Return	-	0	600	600	600	0	600
Emergency Threshold 70% Marginal Topslice	-	0	(2,000)	(2,000)	(2,000)	0	(2,000)
Return of Surplus from 2011/12	-	0	2,000	2,000	2,000	0	2,000
Roundings	-	0	(2)	(2)	(2)	0	(2)
Total Anticipated Funding		0	2,186	2,186	2,186	0	2,186
4) TOTAL RESOURCES & BUDGET RECONCILIATION							
4A Confirmed resources per 1) and 2) above	-	263,692	10,666	274,358	274,358	0	274,358
4B Anticipated resources per 3) above	-	0	2,186	2,186	2,186	0	2,186
4C Total Resources (3A + 3B)	-	263,692	12,852	276,544	276,544	0	276,544
4D Latest Budgets	-	263,692	12,852	276,544	276,544	0	276,544
4E Variance Should = Zero (3D Minus 3C)		0	0	0	0	0	0

Note

The numbers in the use/destination columns, refer to the line number on the Operating Cost Statement (Page 13)

3) APPENDIX 7: CCG FORMAT - FINANCIAL MONITORING STATEMENT 2012/13. COMMISSIONING OPERATING COST AS AT (MAY 2012) - FINANCE PERIOD 2.

KEY	ALL CLINICAL COMMISSIONING GROUP AREAS OF INDICATIVE BUDGET RESPONSIBILITY	YEAR TO DATE				YEAR END POSITION			
		BUDGET	SPEND	VARIANCE		BUDGET	SPEND	VARIANCE	
		£	£	£	%	£	£	£	%
1) PRACTICE AREAS OF BUDGET RESPONSIBILITY.									
A) SECONDARY & TERTIARY CARE									
1	Northern Lincolnshire & Goole Hospitals NHS FT	15,004,831	14,970,204	-34,626	-0.23%	90,028,990	90,028,990	0	0.00%
2	Hull & East Yorkshire NHS Trust	2,055,114	2,055,114	0	0.00%	12,330,691	12,330,691	0	0.00%
3	Doncaster & Bassetlaw NHS FT	521,215	504,773	-16,442	-3.15%	3,127,297	3,127,297	0	0.00%
4	Sheffield Teaching Hospitals NHS FT	279,251	279,251	0	0.00%	1,675,518	1,675,518	0	0.00%
5	Sheffield Childrens Hospital NHS FT	209,388	186,388	-23,000	-10.98%	1,256,315	1,256,315	0	0.00%
6	United Lincolnshire Hospitals NHS Trust	280,055	280,055	0	0.00%	1,680,350	1,680,350	0	0.00%
7	Sub Total : Main PBR Based Care Costs	18,349,853	18,275,785	-74,069	-0.40%	110,099,160	110,099,160	0	0.00%
8	PPA Drugs & Home Oxygen Costs (Practice Specific Costs - Only)	4,757,289	4,757,289	0	0.00%	28,543,848	28,543,848	0	0.00%
9	SUB TOTAL : CORE PRACTICE AREAS OF BUDGET RESPONSIBILITY.	23,107,142	23,033,074	-74,069	-0.32%	138,643,008	138,643,008	0	0.00%
10	Budget Adjustment - For High Cost PBR Spells in Excess of £ 10K.	0	0	0	-	0	0	0	-
11	TOTAL : CORE PRACTICE AREAS OF BUDGET RESPONSIBILITY.	23,107,142	23,033,074	-74,069	-0.32%	138,643,008	138,643,008	0	0.00%
12	Exclusions - Non Contract Activity	183,974	183,974	0	0.00%	1,103,835	1,103,835	0	0.00%
13	TOTAL : CORE PRACTICE AREAS OF BUDGET RESPONSIBILITY.	23,291,116	23,217,048	-74,068	-0.32%	139,746,843	139,746,843	0	0.00%
B) OTHER COMMISSIONING BUDGETS									
14	East Midlands Ambulance Trust	753,429	753,429	0	0.00%	4,520,576	4,520,576	0	0.00%
15	All Other Secondary & Tertiary Care Services	596,888	606,889	10,001	1.68%	3,581,350	3,581,350	0	0.00%
16	Main Mental Health Contract - RDASH	2,245,610	2,245,607	-3	0.00%	13,639,990	13,639,990	0	0.00%
17	NHS North Lincolnshire Community Provider Services	1,479,670	1,479,670	0	0.00%	8,878,019	8,878,019	0	0.00%
18	Other Community Based Services	487,787	486,380	-1,406	-0.29%	2,926,753	2,926,753	0	0.00%
19	Private & Voluntary Sector Services (Including : Continuing & Funded Care etc)	2,462,187	2,508,673	46,486	1.89%	15,782,232	15,782,232	0	0.00%
20	Pooled Mental Health Services	65,776	65,775	-1	0.00%	394,679	394,679	0	0.00%
21	Pooled Learning Disability Services	70,707	70,705	-2	0.00%	428,941	428,941	0	0.00%
22	Pharmacy Contract & Non Practice Specific PPA Costs.	443,504	444,915	1,410	0.32%	2,661,030	2,661,030	0	0.00%
23	All Other Commissioned Services	630,982	638,432	7,450	1.18%	3,285,862	3,285,862	0	0.00%
24	OTHER COMMISSIONING BUDGETS	9,236,540	9,300,473	63,934	0.69%	56,099,432	56,099,432	0	0.00%
25	TOTAL : PRACTICE AREAS OF BUDGET RESPONSIBILITY.	32,527,656	32,517,522	-10,135	-0.03%	195,846,276	195,846,276	0	0.00%
2 CCG AREAS OF BUDGET RESPONSIBILITY									
CLINICAL BUDGETS									
26	Enhanced Primary Care Services	78,953	78,953	0	0.00%	473,694	473,694	0	0.00%
27	Out of Hours Services	225,565	225,565	0	0.00%	1,353,382	1,353,382	0	0.00%
28	Local Safeguarding of Adults & Children	26,081	26,080	-1	0.00%	156,502	156,502	0	0.00%
29	Exclusions - Contract Based & Mental Health	0	0	0	-	0	0	0	-
30	Remaining Budget Reserve - For High Cost PBR Spells in Excess of £ 10K.	0	0	0	-	0	0	0	-
CENTRAL BUDGETS (INCLUDING CSS CENTRAL BUDGETS)									
31	Organisational Services	846,718	942,220	95,502	11.28%	5,067,842	5,067,842	0	0.00%
32	Technical & Provision Costs	7,662	0	-7,662	-100.00%	2,697,096	2,697,096	0	0.00%
33	Contingency	653,666	592,726	-60,940	-9.32%	4,000,000	4,000,000	0	0.00%
34	Depreciation & Capital Charges	35,084	35,084	0	0.00%	210,512	210,512	0	-
35	Planned Surplus	342,000	0	-342,000	-100.00%	2,000,000	0	-2,000,000	-100.00%
36	TOTAL : CCG AREAS OF BUDGET RESPONSIBILITY.	2,215,729	1,900,629	-315,100	-14.22%	15,959,028	13,959,028	-2,000,000	-12.53%
37	TOTAL : PRACTICE & CCG AREAS OF BUDGET RESPONSIBILITY.	34,743,385	34,418,151	-325,235	-0.94%	211,805,304	209,805,304	-2,000,000	-0.94%
MEMO ITEM: OTHER AREAS OF BUDGET RESPONSIBILITY									
•	Estates	233,591	233,585	-6	0.00%	1,401,933	1,401,933	0	0.00%
•	Primary Care - NHS Commissioning Board (CB)	5,173,022	5,173,021	-1	0.00%	31,038,248	31,038,248	0	0.00%
•	Public Health	2,179,848	2,132,928	-46,920	-2.15%	13,079,505	13,079,505	0	0.00%
•	Specialist Commissioning Group Services (SCG)	3,203,154	3,233,316	30,162	0.94%	19,219,010	19,219,010	0	0.00%
	TOTAL : OTHER AREAS OF BUDGET RESPONSIBILITY.	10,789,615	10,772,849	-16,765	-0.16%	64,738,696	64,738,696	0	0.00%
MEMO TOTAL : WHOLE NHS NORTH LINCOLNSHIRE POSITION									
		45,533,000	45,191,000	-342,000	-0.75%	276,544,000	274,544,000	-2,000,000	-0.72%