

## **Finance, Procurement and Contracting**

# Financial Performance Report: Month 6

**Jason Dorsett: Chief Finance Officer** 



## Financial Performance Report

Integrated themes and issues from Month 6 (September 2024)

#### **Finance**

Overall

Income and Expenditure (I&E) was a £25.8m deficit to Month 6, £8.7m worse than plan. The underlying deficit was £45.4m with an improvement in the underlying run rate of £1.2m from the previous month. The Trust's plan from Month 6 has been revised following confirmation of £7.9m national deficit funding, to a £0.2m deficit for the year.



Value Weighted Activity is still subject to review as the relevant data standards have changed from April. Our provisional estimate has been held at £2.3m behind plan to date at Month 6, pending resolution of data issues. £1.6m of this is the estimated impact of industrial action.

The latest position on VWA year to date (YTD) to Month 6 is 105.8% of the 2019/20 baseline (which is below the target the Trust has been commissioned to provide of c.107% of the VWA delivered in 2019/20).



Commissioning income (including VWA, excluding passthrough) was £9.9m worse than plan year to date, driven principally by £11.3m from a risk assessment on additional income items in the plan. There is also a £1.0m impact from VWA risk reflected in the position YTD after receipt of £1.3m industrial action impact funding this month. Some income continues to be accrued to plan while remaining contracts are being finalised (particularly the NHSE contract).

Passthrough drugs and devices were £20m above plan YTD. BOB ICB makes up c.30% of this over-performance. NHSE consider this to be a system challenge that OUH is jointly responsible for addressing.



Whole Time Equivalent headcount (excluding R&D) in September decreased by 27 WTE, an overall 375 WTE reduction since March. The reductions have been in temporary staffing (89 WTE agency, 333 WTE bank) while substantive staff has increased by 49 WTE. Management have not detected an adverse operational or quality impact from headcount reduction, neither through the initial QIA or any KPIs being monitored.



Pay costs are £2m adverse to plan YTD. Pay was £1.6m adverse to plan in September although the underlying run-rate improved on pay by £0.9m from August. Bank and agency expenditure has increased by £0.1m from August.



**Non-pay costs** were £2.6m better than plan to Month 6 (excluding pass through), but this was entirely due to one-off items some of which were non-cash.



Cash was £3.6m at the end of September, £0.4m higher than the previous month. The Trust had to draw down PDC revenue support of £10m in September to be able to pay some revenue creditors. The primary driver for cash falling below planned levels and now requiring PDC revenue support is the operating cash deficit (driven by the underlying I&E deficit) with a high proportion of efficiencies delivered being non-cash releasing.



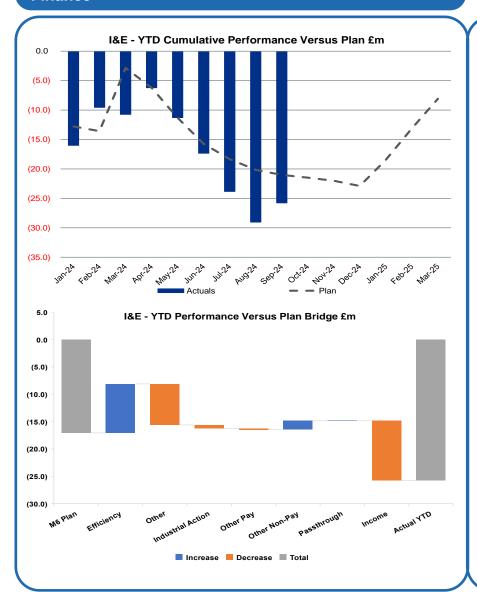
Performance in Month 6 has shown some improvement compared to last month and the YTD (on pay and income). The underlying position in September was a £5.7m deficit, until August it had consistently been over £7m deficit a month, driven by under-performance on income and pay overspends.

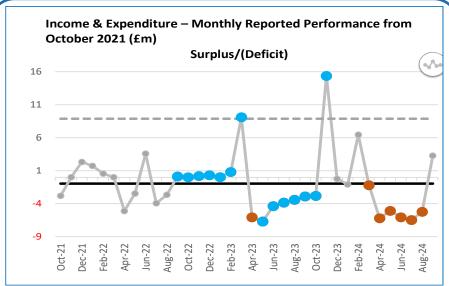
## Financial Performance Report

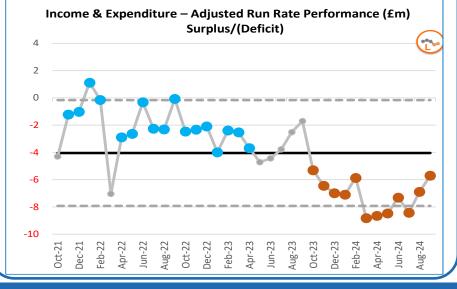


**Integrated themes and issues from Month 6 (September 2024)** 

#### **Finance**







#### **Bridge from Reported Performance to Underlying Performance**



Month 6 Year to	Date (£m)				
Plan	Underlying	R&D	Pass through	One-off	Reported
Income	655.5	28.6	106.9	0.0	791.0
Pay	(437.1)	(23.5)	0.0	0.0	(460.7)
Non pay	(193.6)	(5.1)	(106.9)	2.7	(302.8)
Non-Opex	(44.6)	0.0	0.0	0.0	(44.6)
Total Plan	(19.8)	0.0	(0.0)	2.7	(17.1)

Actuals	Underlying	R&D	Pass through	One-off	Reported
Income	639.2	28.1	126.9	5.9	800.1
Pay	(440.5)	(21.6)	0.0	(0.5)	(462.7)
Non pay	(199.6)	(4.5)	(126.9)	10.8	(320.2)
Non-Opex	(44.5)	0.0	0.0	1.5	(43.0)
Total Actuals	(45.4)	2.0	(0.0)	17.7	(25.8)

Variance	Underlying	R&D	Pass through	One-off	Reported
Income	(16.4)	(0.5)	20.0	5.9	9.1
Pay	(3.4)	1.9	0.0	(0.5)	(2.0)
Non pay	(6.1)	0.6	(20.0)	8.0	(17.4)
Non-Opex	0.2	0.0	0.0	1.5	1.7
Total Variance	(25.6)	2.0	0.0	15.0	(8.7)

#### **R&D**:

- £2m underspend of £0.5m in M1 and £1.5m in M4 due to surpluses on commercial and non-commercial income (released from the Balance Sheet).
- Small mix change between pay and non-pay due to specific grants won and projects/trials delivered.

#### Pass through:

- Passthrough was under-budgeted to align with commissioner requested contract values. The Trust is paid 3+ months in arrears for over-performance and after suppliers have been paid contributing c£20m to the Trust's cash shortfall by the end of September. The Trust does not have an I&E exposure to over-performance.
- The Trust has subsequently received (in October) a payment on account from BOB ICB of £5.6m for Q1 overperformance as well as £6.7m from NHSE towards overperformance.
- This leaves £7.7m still due in cash for pass through drugs and devices (mostly from NHSE).

**One-off:** The more significant non-recurrent items included in the reported financial position to date for this financial year include:

- M1: +£1.9m on PFI accruals adjustment relating to prior years' costs).
- M2: +£3.3m commissioning income for agreement of balances (NHSE).
- M3: -£1m (estimated) to income resulting from industrial action in June.
- M3-M4: -£0.6m industrial action pay costs impact for shifts and extra sessions to cover strikes. Now confirmed will be reimbursed in M7 by NHSE.
- M3: +£2.8m PFI life-cycling prepayment release relating 2023-24 due to over-estimate of impact of PFI accounting changes.
- M4: +£1.3m rates rebate for prior years 2017-18 to 2020-21 (net of advisor fees).
- M5: +£1.2m PFI insurance rebate from the periodic gain-share arrangement on relevant costs.
- Month 6+£3.9m NHSE deficit funding, +£1.3m industrial action funding, +£1.6m rates and outsourcing accruals, +£1.4m fair value gains.

#### **Income and Expenditure: Subjective Analysis – Adjusted Underlying Position**

Source: Finance Ledger (underlying position, excluding R&D, passthrough and non-recurrent items)

I & E Subjective Adjusted		IN MC	NTH 6			YEAR TO	DATE	
£ms	Plan	Actual	Var	Var %	Plan	Actual	Var	Var %
Income								
Commissioning Income	102.5	95.9	(6.7)	(6.5%)	585.4	567.5	(17.9)	(3.1%)
Other Income	10.6	10.2	(0.4)	(3.8%)	61.8	62.5	0.7	1.1%
PP, Overseas and RTA Income	1.4	1.8	0.4	27.4%	8.3	9.2	0.8	10.0%
Total Income	114.5	107.8	(6.7)	(5.8%)	655.5	639.2	(16.4)	(2.5%)
Pay								
Consultants and Medics	(25.3)	(25.2)	0.1	0.3%	(149.6)	(151.9)	(2.3)	(1.5%)
Health Care Assistants & Support	(6.1)	(6.4)	(0.2)	(3.9%)	(39.7)	(39.1)	0.6	1.4%
Nurse and Midwives	(14.0)	(20.4)	(6.3)	(45.0%)	(111.8)	(123.9)	(12.1)	(10.8%)
Other Staff	(15.6)	(10.7)	4.9	31.5%	(77.3)	(66.0)	11.3	14.6%
Scientific, Therapeutic and Technical	(10.1)	(9.9)	0.2	1.8%	(58.7)	(59.6)	(0.8)	(1.4%)
Total Pay	(71.2)	(72.6)	(1.4)	(2.0%)	(437.1)	(440.5)	(3.4)	(0.8%)
Non-Pay								
Clinical negligence	(3.1)	(3.2)	(0.0)	(0.5%)	(18.8)	(18.9)	(0.0)	(0.2%)
Clinical Supplies & Services	(14.4)	(12.8)	1.6	11.0%	(64.0)	(68.1)	(4.1)	(6.4%)
Drugs & Devices	(4.9)	(3.0)	1.9	39.3%	(24.7)	(19.7)	5.0	20.2%
General Supplies & Services	(0.4)	(0.6)	(0.2)	(41.0%)	(2.6)	(3.6)	(1.0)	(37.9%)
Internal Recharges	0.0	0.2	0.1	334.8%	0.7	1.0	0.2	28.9%
Premises & Fixed Plant	(9.8)	(9.6)	0.2	2.0%	(59.9)	(60.9)	(1.0)	(1.7%)
Other Expenditure	(0.8)	(4.5)	(3.7)	(460.6%)	(24.3)	(29.4)	(5.1)	(21.1%)
Total Non-Pay	(33.4)	(33.4)	(0.0)	(0.1%)	(193.6)	(199.6)	(6.1)	(3.1%)
Underlying EBITDA	9.9	1.8	(8.1)	(81.7%)	24.8	(1.0)	(25.8)	(104.0%)
Financing and Capital Charges (Excl Tech Adj)	(7.4)	(7.5)	1.2	0.0%	(44.6)	(44.5)	1.7	0.0%
Underlying Surplus / (Deficit)	2.5	(5.7)	(8.2)	(325.0%)	(19.8)	(45.4)	(25.6)	(129.4%)

# NEW SLIDE M6 Oxford University Hospitals NHS Foundation Trust

#### Income

- Underlying commissioning income (excluding passthrough), is £17.9m worse than plan YTD. This adverse variance is driven by £11.3m from a risk assessment on additional income items in the plan and the impact of VWA (£2.3m risk reflected in the position YTD excluding NR industrial action funding).
- Underlying other income is £0.7m better than plan YTD and education income £0.4m better than plan.
- Underlying PP, Overseas and RTA income is £0.8m better than plan YTD.

#### Pay

Underlying pay is £3.4m worse than plan YTD. This is principally due to a shortfall against planned recurrent pay efficiencies of £2m (from temporary staffing pay which is £2.1m worse than plan, reflecting increasing efficiency targets each month on the temporary staffing reduction efficiency programme that have not been fully delivered).

#### Non-Pay

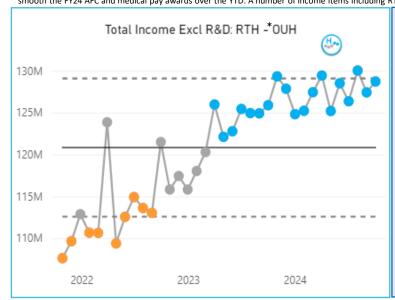
 Underlying non-pay is £6.1m worse than plan YTD. This is after excluding several non-recurrent non-pay benefits taken YTD and reflects an underlying pressure on the level of non-pay spend from nonelective activity growth and inflation pressures. A shortfall of £1.6m on recurrent efficiencies YTD is a factor in this.

#### **Income Overview**

#### **Oxford University Hospitals**

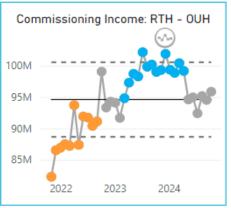
Source: Finance Ledger

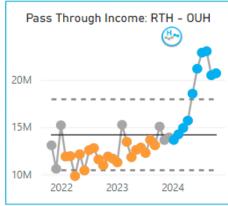
\*income in the charts below were adjusted to remove the FY22, FY23 and FY24 (month 12) year-end pension and annual leave accruals. FY23 was also adjusted to remove the non-consolidated AFC pay bonus funding accrual and to smooth the FY24 AFC and medical pay awards over the YTD. A number of income items including RTA catch up and API performance in FY2024 has been smoothed over the year to avoid distortion to the underlying run rate.

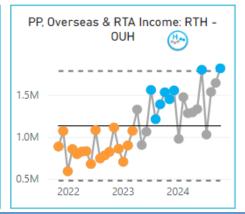


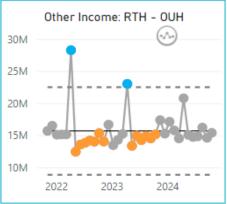
#### September 2024 (Month 6) - Total in-month Income of £139.2m

- Total income was £7.1m higher in September compared to August.
- Commissioning income was £4.6m higher in September. Passthrough income was £0.2m higher than the previous month. The remaining £4.4m increase was mainly due to recognising £3.9m of deficit funding in the position for the YTD and £1.3m of Industrial Action funding.
- API income performance for September (based on M6 SUS data) was 104.1%. The YTD performance is 105.8% (which is below the commissioned target of c.107% of the VWA delivered in 2019/20). The Trust's plan has assumed achievement of 109% of 2019/20 income to meet performance targets. In addition to this, income related to growth for business cases has been included in the plan. See VWA slide for details.
- Other income was £2.3m higher in September compared to August, this was due to R&D income (£1.2m and offset by increased expenditure), education income (£0.5m) and non-patient care income from other bodies (£0.3m).
- Private patients, overseas and RTA income increased in September by £0.2m this
  was £0.1m of RTA income and £0.1m of overseas income.









#### **SPC Trend Analysis**

Total Income has consistently increased over the last financial year, driven by commissioning income and passthrough income (also seen in the 'Commissioning Income' and 'Pass Through Income' charts above). This a result of the pay award funding as well as the recognition of additional non-recurrent commissioner funding in the second half of 2022/23 and 2023/24.

- <u>Total Income</u> in March 2022 and March 2023 were all significantly high as a result of year-end adjustments and R&D income.
- PP, Overseas and RTA Income showed an upward trend in 2023/24, this is driven by changes in the RTA income capture process.

# Oxford University Hospitals NHS Foundation Trust

Value Weighted Elective Activity only: by Point of Delivery (POD)

		2024-25		2019-20	Variance 2425 act	ual v 1920
POD	M1-5 plan	M1-5 actual	M1-5 Variance	M1-5 1920 baseline	baseline	•
	£m	£m	£m	£m	£m	%
Day Case	26.59	25.19	(1.40)	25.75	(0.57)	-2%
Elective Inpatient	36.09	34.04	(2.05)	30.33	3.70	12%
Elective Excess Beddays	0.47	0.42	(0.05)	0.55	(0.13)	-24%
Outpatient First Appts	24.09	22.26	(1.83)	25.20	(2.94)	-12%
Outpatient Procedures	7.66	8.79	1.13	5.33	3.45	65%
Total	94.91	90.70	(4.21)	87.17	3.53	4%

Value Weighted Elective Activity only, by Commissioner

		2024-25		2019-20	Variance 2425 act	ual v 1920
Commissioner	M1-5 plan	M1-5 actual	M1-5 Variance	M1-5 1920	baseline	
	Wil Spian Wil Succeed			baseline		
	£m	£m	£m	£m	£m	%
BOB ICB	47.59	46.73	(0.87)	49.19	(2.47)	-5%
NHSE Spec Comm	32.00	29.80	(2.20)	27.79	2.01	7%
Other Commissioners	15.31	14.17	(1.14)	10.19	3.98	39%
Total	94.91	90.70	(4.21)	87.17	3.53	4%

Value Weighted Elective Activity only: by Division

		2024-25		2019-20	Variance 2425 act	ual v 1920	
Division	vision M1-5 plan		M1-5 actual M1-5 Variance			baseline	
	£m	£m	£m	£m	£m	%	
NOTSSCAN	45.94	42.77	(3.17)	40.60	2.17	5%	
SUWON	26.82	26.01	(0.80)	26.89	(0.88)	-3%	
MRC	18.87	18.32	(0.55)	18.21	0.11	1%	
CSS	3.28	3.60	0.32	1.48	2.12	144%	
Total	94.91	90.70	(4.21)	87.17	3.53	4%	

NB Data taken from SLAM M5 2425, adjusted to exclude non-ERF elective activity

1920 baseline: 1920 activity with 2425 tariffs applied

'Other Commissioners' includes LVAs - these are fixed payments; no overperformance will be paid

These figures are from the current version of SLAM. Work is ongoing to reconcile the plan to the national figures. This is complicated by there being no national figures published yet by NHSE on ERF performance in 2024/25. However, all indications are that the Trust is underperforming against the national ERF targets, and therefore will not be delivering the income generation/stretch targets.

#### By POD:

- Subsequent review has determined c£375k YTD issue with ophthalmology OPFA under-reporting; this will be caught up by M7 reporting. Contrary to the position reported last month, all spinal activity is included.
- Industrial action impact has been estimated to have caused c£1.6m of VWA loss in M3 and M4.
- The remainder of the variance is likely to be due to doing less activity than planned.

#### By Commissioner:

- BOB has queried low VWA in its performance meetings with the Trust.
- Spec Comm is below plan predominantly due to industrial action; draft Q1 figures from NHSE indicate the OUH is meeting the national target and so is not being queried externally.

#### By Division:

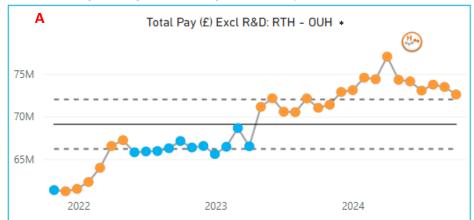
- NOTSSCAN's income variance is due to shortfalls in day cases (£0.8m) and elective inpatients (£1.6m) and outpatient first appointments (£1.9m).
- At a directorate level these are driven by day cases in Specialist Surgery (£0.7m); elective inpatients in Children's and Specialist Surgery (£0.6m and £0.7m respectively); and outpatient first appointments in Ophthalmology (£1.2m).

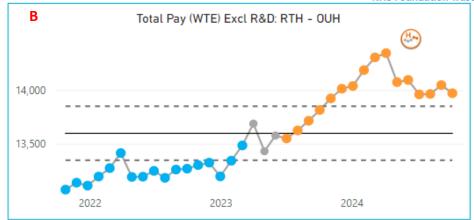
#### **Pay: Run Rate Overview**

Source: Finance Ledger, excluding R&D costs, including COVID and recovery costs.









\*Pay spend in the chart above was adjusted to remove the FY22, FY23 and FY24 (month 12) pension and annual leave accruals. The pay awards in September 2021 and September 2022 were spread across month 1 to month 6, respectively, on a straight-line basis. The additional FY23 non-consolidated AFC pay bonus accrual has been removed. The FY24 AFC and medical pay awards have been smoothed over the YTD. The annual leave accrual releases throughout the year were removed. FY22 pay spend was not adjusted for inflation.

#### Sep 2024 (Month 6)

£76.9m (£72.6m excl.

13.972 WTE

R&D)

- Total pay was £0.6m higher in September compared to August. Excluding R&D, pay costs were £0.5m lower in September compared to August.
- Substantive staffing costs were £0.4m higher in September compared to August. Excluding R&D, substantive pay decreased by £0.6m, nursing costs lower by £0.3m, consultants and medics costs £0.2m lower and other staff £0.2m lower. The Trust plan is based on the month 1-9 run rate of 23/24, the run rate for substantive staff increased in quarter 4 and though it has reduced since April it continues to be above the plan assumption. The Trust has implemented financial controls on vacancies as part of the overall financial controls required across the
- Temporary staff in-month expenditure was £0.1m higher in September compared to August. Bank staff costs increased by £0.1m in-month and agency costs remained at the same level as the previous month. The Trust has implemented a temporary staffing programme aiming to reduce temporary staffing by 700 WTE compared to the December 23 position. By the end of September 305 WTE had been achieved against this. Compared to December 23 temporary staffing costs this month have reduced by £2.3m, reflecting the work being undertaken to provide additional controls over temporary staffing. Sickness rates have been reducing since January and turnover rates are also reducing which should be supporting the reduction in temporary staffing.
- Overall WTEs decreased by 27 in September compared to August (excluding R&D). Substantive staff increased by 28 WTE in September (nursing staff increased by 20 WTE). Bank staff decreased by 61 WTE (health care assistant staff 44, consultants and medics 25) and agency staff increased by 5 WTE (scientific staff 15).

#### **Trend Analysis**

Pay spend and WTEs are both down this year, continuing the recent trend following the introduction of increased pay controls. This trend is seen in Chart A and B above. The previously increasing trend was driven by the annual pay awards, alongside other increases in pay relating to approved business cases, overall pay increase for Junior Doctors, open escalation beds and the use of temporary staffing to backfill sickness. Trend by staff group and type are shown in the additional detail provided in the Diligent Reading Room.

#### **Non-Pay Run Rate Overview**

Source: Finance Ledger, excluding R&D costs, including COVID and recovery costs.

\* FY23 non-pay spend in the charts below has been adjusted to remove the ROE staff non-consolidated AFC pay bonus accrual.

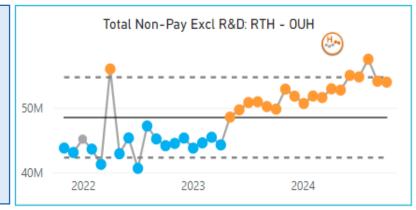




**NHS Foundation Trust** 

#### September 2024 (Month 6) - Total Non-Pay £52.9m (£52.1m excl. R&D)

- Total non-pay was £1.1m lower in September than in August. Excluding R&D, nonpay costs were £1.3m lower in September compared to August. The fallout of a non-recurrent benefit in the position last month of £1.2m from a PFI insurance reduction was replaced with another one-off benefit of £1m in relation to rates being over accrued in 2023/24. Expenditure on healthcare from the independent and commercial sectors was £2m lower in September compared to August, this included the release of an accrual giving a non-recurrent benefit of £0.6m.
- We have included in the plan £4.6m more per month in pass-through items incorrectly included in non-pass through in 2023/24 since April. This has the effect of distorting the trend for the pass through and non-passthrough drugs in the charts below.



#### **SPC Trend Analysis**

Non-pay expenditure has increased over the last two financial years and is an adverse special cause variation. This is driven by three principal factors.

- Activity driven non-passthrough costs, analysis suggest that in 2023/24 activity increased by 4.4%, we were also exposed to increased inflation, above the CUF assumed in the plan (+3.1%).. These are seen in the clinical supplies special cause variation in H2 2023/24.
- Non-elective (NEL) activity has grown significantly over the last 12 months, this growth is unfunded in the commissioner contracts (see Non-Elective Activity analysis in the reading room pack).
- Non-activity driven non-pay costs have been impacted by extra-inflationary increases, premises & fixed plant has seen an increase in PFI costs from high RPI uplifts over the last two years (in excess of that allowed for in the CUF). Energy prices increased 226% in 2023/24 driving up costs in this area.

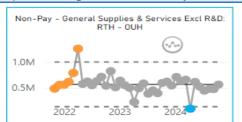
(Drugs (excluding passthrough) costs have reduced since re-categorising some pass-through items incorrectly included in non-pass through in 2023/24).

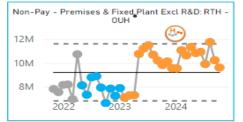




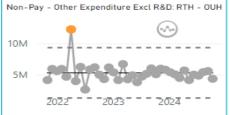














					Actual vs Target (£m)			
Indicator	Target	Unit	£/unit	Q1 24-25	Jul-24	Aug-24	Sep-24	Total YTD
Elective ALOS	3.9	Days, per Patient	1 day = £0.740m/month	(£0.7)	£0.1	£0.1	£0.2	(£0.2)
Non-Elective ALOS	4	Days, per Patient	1 day = £4.2m/month	£1.7	£0.8	£0.4	£1.7	£4.6
Theatre Session Units (Planned)	1,782	Sessions per month	1 session = £12.1k income per session	(£4.9)	£0.7	(£0.3)	£1.5	(£3.0)
Non F2F Outpatients Appointments	25%	% of all appt	1 Appt = £100	(£2.4)	(£0.9)	(8.03)	(£0.8)	(£4.9)
Staff Sickness Rate	3.1%	% of staff	1% = £0.85m/month	(£2.0)	(£0.7)	(8.0 <del>2</del> )	(8.0 <del>3</del> )	(£4.2)
Staff Turnover Rate	12%	% of staff	1% = £440k/month	£2.4	£0.9	£0.9	£0.9	£5.1
		Total Im	pact, Positive/(Adverse)	(£6.0)	£1.0	(£0.4)	£2.7	(£2.7)

#### Impact of key indicators

The selected productivity key indicators above represent the drivers to performance and the financial impact of movements versus the Trust's planning assumptions. The approach seeks to join up the operational data with the financial run rate.

The Trust's run rate deficit is driven by the estimated negative impact of reductions in productivity. YTD (month 6), the overall negative impact estimated at £2.7m and is driven by:

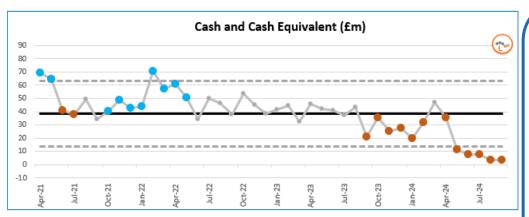
- £3m from a decrease in planned Theatres sessions activity compared to prior year. There is a significant decrease of Theatre sessions in Jun-24 of £2.9m, likely linked to industrial action.
- £4.2m from sickness rate landing above trust target (for the 12-month rolling average and the in-month rate), which drives the use of temporary staffing to fill staffing gaps. Although the 12- month rolling has remained level, month 6 sickness has increased by 0.4%.
- £0.2m from an increase in Elective ALOS (vs. prior year), predominantly for activity that exclude medically fit patients.
- The YTD estimated benefit financial impact of £5.1m for staff turnover, which were achieved through programmes targeting hospital discharges and recruitment of international nurses. and £4.6m for ALOS for NEL activity.

	Plan 2024/25 (£m)	Plan YTD (£m)	Delivered YTD (£m)	Variance to Plan (£m)	Percentage Delivered
Income					
Private Patient	1.4	0.4	0.9	0.5	223%
Overseas Visitors	0.4	0.1	0.1	0.0	139%
Non-Patient Care/Other Income	19.0	6.1	7.9	1.8	129%
Total Income	20.8	6.6	9.0	2.3	135%
Pay					
Bank	31.0	11.3	6.5	-4.8	57%
Agency	4.2	1.6	4.2	2.7	274%
Staffing	2.4	1.0	3.1	2.1	303%
Total Pay	37.6	13.9	13.8	-0.1	100%
Non-Pay					
Medicines efficiencies	1.2	0.4	0.3	-0.0	88%
Procurement	9.0	2.7	5.2	2.5	192%
Net zero carbon	1.0	0.3	0.0	-0.3	0%
Other Non-Pay	18.9	4.5	7.6	3.1	168%
Total Non-Pay	30.1	7.9	13.1	5.2	166%
Non-EBITDA	4.0	0.0	1.5	1.5	0%
TOTAL £m	92.5	28.4	37.4	9.0	132%

Division	Plan 2024/25 (£m)	Plan YTD (£m)	Identified 2024/25 (£m)	Percentage Identified 2024/25	Delivered YTD (£m)	Variance to Plan YTD (£m)	Percentage Delivered
CSS	12.8	4.7	14.4	112%	4.2	-0.6	88%
MRC	15.6	5.8	18.5	119%	9.3	3.4	159%
NOTSSCAN	18.9	6.6	21.2	112%	5.7	-0.9	86%
SUWON	17.0	6.3	16.2	96%	3.2	-3.0	52%
Corporate	5.8	1.8	3.5	59%	0.4	-1.4	21%
Operational Services	0.8	0.3	1.7	212%	0.8	0.5	291%
Education	0.9	0.3	0.0	1%	0.0	-0.3	3%
Estates	1.7	0.5	4.2	248%	4.1	3.6	814%
Central	18.9	2.1	14.3	76%	9.7	7.6	469%
TOTAL £m	92.5	28.4	94.0	102%	37.4	9.0	132%

#### Efficiency savings

- At Month 6 the Trust was ahead of delivery of its efficiency plan for the YTD by £9m. However, we assess c£7.5m of that has not improved the I&E so far (i.e. they were schemes to improve productivity such as LOS reductions which are not immediately cash releasing).
- Three out of four clinical divisions were behind plan (£4.5m) and this primarily relates to being behind plan on bank staff savings.
- The efficiency plan, and the overall Trust financial plan is back loaded reflecting prior experience of delivery, but this creates a risk that savings expected later in the year are not delivered.
- To mitigate this risk we place significant attention on the identification of schemes not yet delivered as a proxy for the level of risk.
- At Month 6 102% of schemes (£94m) have been identified.
   Following a deep dive review of the themes, identified efficiency schemes have increased significantly (71% to 102%) between M5 and Month 6.
- The main uplift relates to temporary staffing reduction, with the full value of £35m opportunity identified, an increase from £16.5m. Commercial schemes have increased in line with delivery of private patient income and recognition of RTA income.



120%

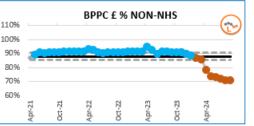
100%

80%

40%

20%

Oct-21



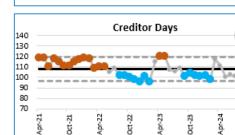
**Debtor Days** 

35

30 25

15

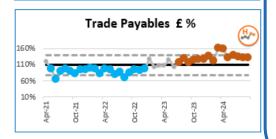
10



BPPC £ % NHS

27-22





#### Cash

Cash decreased YTD by £43m and in month it increased by £0.4m. Headline reasons for the decrease YTD are:

- £16m retained deficit the majority of this is due to the Trust spending more than planned;
- £10m receipt of PDC revenue support;
- £24m increase in trade and other receivables intra NHS is primarily the cause, see comment below under debtor days;
- · £11m repaying borrowings including PFI liabilities; and
- £30m payment of capital

The Trust drew down PDC revenue support of £10m in Month 6 and used it to pay some revenue creditors.

#### **Better Payment Practice Code (BPPC)**

Payments are being managed very carefully by the Director of Finance. Performance has declined due to less cash being available to pay suppliers.

#### Contract Receivables as a % income

Contract receivables are in line with trends.

#### Trade Payables as a % of costs

Trade payables are running higher than average due to the Trust not having funds to pay creditors.

# Oxford University Hospitals NHS Foundation Trust

Capital Expenditure - by funding source		IN MONTH 6		,	YEAR TO DATE		Full year
£m	Plan	Actual	Variance	Plan	Actual	Variance	Plan
Gross Capital Expenditure included in Capital Allocation	1.83	2.42	-0.59	10.35	6.30	4.05	29.51
Less disposals/other deductions included in CDEL	0.00	0.00	0.00	0.00	-0.01	0.01	0.00
Purchase/(Sale) of Financial Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net Capital Expenditure included in Capital Allocation before IRFS 16	1.83	2.42	-0.59	10.35	6.29	4.05	29.51
IFRS 16 - Right of Use assets/Lease accounting	0.17	0.00	0.17	12.30	0.04	12.26	19.70
Net Capital Expenditure included in Capital Allocation after IRFS 16	1.99	2.42	-0.42	22.65	6.33	16.32	49.21
National Funding PDC	0.26	0.01	0.25	0.79	0.23	0.56	4.56
Residual interest (UK GAAP accounting for PFI life-cycling)	0.45	0.45	0.00	2.70	2.70	0.00	5.40
Capital Departmental Expenditure Limit (CDEL)	2.71	2.88	-0.17	26.14	9.26	16.88	59.17
Charitable and other donations	0.26	0.00	0.26	1.33	0.62	0.70	3.28
Government grants	0.75	0.63	0.12	6.77	6.33	0.44	12.40
IFRIC 12 - PFI life-cycling (less Residual Interest)	1.02	0.24	0.78	4.31	3.11	1.20	10.40
Net Capital Expenditure	4.74	3.75	0.99	38.54	19.31	19.22	85.25
Add back sales, disposals, and other deductions	0.00	0.00	0.00	0.00	0.01	-0.01	0.00
Gross Capital Expenditure	4.74	3.75	0.98	38.54	19.32	19.22	85.25

Capital Expenditure - by strategic theme		IN MONTH 6		,	Full year		
£m	Plan	Actual	Variance	Plan	Actual	Variance	Plan
Replacement / compliance	3.4	3.0	0.3	21.5	17.4	4.2	47.4
Clinical strategy	1.4	0.6	0.8	16.8	1.1	15.7	37.5
People plan	0.0	0.1	(0.1)	0.2	0.4	(0.2)	0.4
Other	-	0.0	(0.0)	-	0.5	(0.5)	-
Gross Capital Expenditure	4.7	3.8	1.0	38.5	19.3	19.2	85.3

# Cumulative Performance Against Plan (£m) Cumulative Performance Against Plan (£m) Actual Plan Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar

Gross CapEx to September was £19.3m, £19.2m below plan, overall.

The £11.7m value of the MK Radiotherapy and Linac lease was planned for completion in August. The contract is expected to be completed and signed in October and the value agreed recognised in this month.

Spend within the ICS CDEL allocation (before IFRS16) is £6.3m, £4m behind plan, overall, with variances within that total, including:

VAT recovery in July of £0.65m on steelworks for the Surgical Elective Centre (JR Theatres & SSD). With this adjustment, there is a £0.2m net expenditure on the JR Theatres programme to date, against a plan of £1.7m. The underlying underspend is £0.8m.

Expenditure on the rest of the Estates programme to date is £4.6m, which is £2.3m behind plan, overall, including underspend to plan on imaging replacement projects: Gamma Camera £0.5m & biplane £0.6m, both pending finalization of MES options; NOC X-ray turnkey £0.4m, with works starting in September; RAAC £0.4m; JR PSDS (Trust funded) £0.4m.

There have also been VAT recoveries against prior year expenditure on the Digital programme of £0.5m, realized in July. This brings the expenditure to date to less than £0.1m against a plan of £0.7m. Discounting the VAT recoveries, underlying investment for Digital is £0.2m behind plan, with £1.5m of current orders out to delivery, predominantly on SDE.

Equipment expenditure to date of £1.5m, marginally ahead of plan.

Slippage on other IFRS 16 (£0.5m), National PDC (£0.6m), NIHR grant (£0.5m), charitable and other donations (£0.7m), and PFI life-cycling (£1.2m) bring total gross CapEx to £19.3m against a plan to date of £38.5m.



**Appendix 1 – Other Supporting Analysis: Month 6 2024/25** 

#### **Adjusted Run Rate and Underlying Position**



2024/25 Reported Position excl. Pass-through and R&D	M1	M2	M3	M4	M5	M6	YTD
£m	107.0	1001	400.5	1010	407.0	440.5	
Income	107.2	108.1	103.6	104.9	107.8	113.5	645.1
Pay	(75.1)	(73.7)	(73.4)	(73.1)	(73.1)	(72.6)	(441.0)
Non-Pay	(32.2)	(31.4)	(29.0)	(31.9)	(32.9)	(31.4)	(188.9)
Operational EBITDA	(0.0)	2.9	1.3	(0.2)	1.8	9.4	15.2
Financing and Capital Charges (Excl Tech Adj)	(6.6)	(8.0)	(7.3)	(7.9)	(7.0)	(6.1)	(43.0)
Operational Surplus / (Deficit)	(6.7)	(5.1)	(6.1)	(8.0)	(5.2)	3.3	(27.8)
Smoothing Adjustments	M1	M2	M3	M4	M5	M6	YTD
Income	(0.5)	0.2	0.3	1.9	(1.3)	(1.0)	(0.5)
Pay	0.7	(0.3)	0.2	(0.3)	(0.4)	0.0	(0.0)
Non-Pay	(0.2)	(0.6)	0.1	(0.1)	0.8	0.0	0.0
Financing and Capital Charges	(0.5)	0.5	0.0	0.0	0.0	0.0	0.0
Smoothing Adjustments Total	(0.6)	(0.2)	0.7	1.5	(0.9)	(1.0)	(0.5)
2024/25 'Smoothed' Position excl. Pass-through and R&D	M1	M2	M3	M4	M5	M6	YTD
£m Income	106.7	108.2	103.9	106.8	106.5	112.5	644.6
	(74.4)	(74.0)	(73.2)	(73.4)	(73.5)	(72.6)	
Pay	` ′	` ′	` ′	` '	` ′	` '	(441.0)
Non-Pay	(32.4)	(32.0)	(28.8)	(32.0)	(32.1)	(31.4)	(188.9)
Operational EBITDA	(0.1)	2.2	1.9	1.4	0.9	8.4	14.7
Financing and Capital Charges (Excl Tech Adj)	(7.2)	(7.4)	(7.3)	(7.9)	(7.0)	(6.1)	(43.0)
Operational Surplus / (Deficit)	(7.3)	(5.3)	(5.4)	(6.5)	(6.1)	2.3	(28.2)
Run Rate Adjustments	M1	M2	M3	M4	M5	M6	YTD
Income	0.0	(1.1)	1.0	(1.2)	0.4	(4.6)	(5.5)
Pay	0.2	(0.2)	0.4	0.2	0.0	0.0	0.5
Non-Pay	(1.5)	(1.9)	(3.3)	(0.9)	(1.2)	(2.0)	(10.8)

Run Rate Adjustments	M1	M2	M3	M4	M5	M6	YTD
Income	0.0	(1.1)	1.0	(1.2)	0.4	(4.6)	(5.5)
Pay	0.2	(0.2)	0.4	0.2	0.0	0.0	0.5
Non-Pay	(1.5)	(1.9)	(3.3)	(0.9)	(1.2)	(2.0)	(10.8)
Financing and Capital Charges	0.0	0.0	(0.1)	0.0	0.0	(1.4)	(1.5)
Run Rate Adjustments Total	(1.4)	(3.2)	(1.9)	(1.9)	(8.0)	(8.0)	(17.2)

2024/25 Run Rate Position excl. Pass-through and R&D £m	M1	M2	M3	M4	M5	M6	YTD
Income	106.7	107.2	105.0	105.6	107.0	107.8	639.2
Pay	(74.3)	(74.2)	(72.8)	(73.2)	(73.5)	(72.6)	(440.5)
Non-Pay	(33.9)	(34.0)	(32.1)	(32.9)	(33.3)	(33.4)	(199.6)
Operational EBITDA	(1.5)	(1.0)	0.1	(0.6)	0.2	1.8	(1.0)
Financing and Capital Charges (Excl Tech Adj)	(7.2)	(7.4)	(7.4)	(7.9)	(7.0)	(7.5)	(44.5)
Operational Surplus / (Deficit)	(8.7)	(8.5)	(7.3)	(8.4)	(6.9)	(5.7)	(45.4)

#### Revisions to monthly underlying deficit values

To note, the estimated monthly underlying deficit can change in subsequent months due to new income or expenditure items which are then smoothed over prior months (if applying to the YTD). Further analysis can sometimes also mean adjustments to the monthly estimated deficits are necessary.

- This table shows underlying financial position to the end of September adjusted for timing differences (smoothing adjustments in the table above) and the position when in-year one-off costs and benefits are removed from the reported position (run rate adjustments in the table above).
- The average run rate deficit for 2022/23 was £2.2m a month, last year this worsened to an average of £5.1m a month. The average run rate deficit to date is now £7.6m for the current year, this is a deterioration of £2.5m a month from the average underlying deficit last financial year. This underlying deficit continues to trigger an adverse special cause variation.

#### **Income and Expenditure: Subjective Analysis in-month – Reported Position**

Source: Budget in Finance Ledger. Adjusted from plan submitted to NHSE for pay deals.

Oxford University Hospitals
NHS Foundation Trust

I & E Subjective		IN MONTH 6					
£m	Plan	Actual	Var	Var %			
Income							
Commissioning Income	102.5	100.5	(2.0)	-2.0%			
Passthrough Drugs & Devices	16.8	20.7	3.9	23.0%			
Other Income	15.5	16.2	0.7	4.5%			
PP, Overseas and RTA Income	1.4	1.8	0.4	27.4%			
Total Income	136.3	139.2	2.9	2.1%			
Pay							
Consultants and Medics	(25.9)	(26.0)	(0.1)	-0.5%			
Health Care Assistants & Support	(6.2)	(6.4)	(0.3)	-4.2%			
Nurse and Midwives	(15.7)	(22.2)	(6.5)	-41.4%			
Other Staff	(16.4)	(11.3)	5.1	31.2%			
Scientific, Therapeutic and Technical	(11.1)	(10.9)	0.2	1.7%			
Total Pay	(75.3)	(76.9)	(1.6)	-2.1%			
Non-Pay							
Clinical negligence	(3.1)	(3.2)	(0.0)	-0.5%			
Clinical Supplies & Services	(14.6)	(12.4)	2.2	15.3%			
Drugs & Devices	(21.7)	(23.7)	(1.9)	-8.9%			
Passthrough Drugs & Devices	(16.8)	(20.7)	(3.9)	-23.0%			
Drugs	(4.9)	(3.0)	1.9	39.4%			
General Supplies & Services	(0.4)	(0.6)	(0.2)	-41.2%			
Internal Recharges	(0.1)	0.0	0.1	100.0%			
Premises & Fixed Plant	(9.8)	(8.9)	0.9	9.1%			
Other Expenditure	(0.7)	(4.2)	(3.5)	-507.3%			
Total Non-Pay	(50.5)	(52.9)	(2.4)	-4.8%			
Operational EBITDA	10.5	9.4	(1.1)	-10.1%			
Financing and Capital Charges (Excl Tech Adj)	(7.4)	(6.1)	1.2	16.8%			
Operational Surplus / (Deficit)	3.1	3.3	0.2	6.2%			

#### Income

- Commissioning income, including passthrough, was £1.9m better than
  plan in September. £3.9m is due to passthrough drugs and devices
  (offset by increased expenditure), the remaining adverse variance of
  £2m mainly relates to the impact from a risk assessment on additional
  income items in the plan not being accrued into the actual income
  position.
- Other income was £0.7m better than plan in-month, this relates to education income (£0.2m), salary recharge income (£0.3m) and car parking income (£0.1m).
- PP, Overseas and RTA income was £0.4m better than plan in September. RTA income was £0.3m better than plan and overseas income was £0.2m better than plan, offset by private patient income being £0.1m worse than plan.

#### Pav

Pay was £1.6m worse than plan in September. Excluding R&D, pay for September was £1.4m worse than plan. Substantive staff costs (£1.1m) and bank staff costs (£0.9m) were worse than plan offset by agency staff costs being £0.6m better than plan. The adverse variance on bank costs reflects the increasing efficiency targets each month on the temporary staffing reduction efficiency programme that have not been fully delivered.

#### Non-Pay

 Non-pay was net £2.4m worse than plan in September, removing the £3.8m adverse position on passthrough and R&D, it was £1.4m better than plan. This is mainly due to the release of two accruals that give a one-off benefit in the position this month, one relating to rates from 2023/24 (£1m) and the second relating to outsourcing from the private sector (£0.6m).

#### Income and Expenditure: Subjective Analysis YTD – Reported Position

Oxford University Hospitals

NHS Foundation Trust

Source: Finance Ledger (Includes COVID-19 and Recov	erv)	101.040	NITHE			FILL VEAR			
I & E Subjective		IN MO	NTH 6			YEAR T	O DATE		FULL YEAR
£m	Plan	Actual	Var	Var %	Plan	Actual	Var	Var %	Plan
Income									
Commissioning Income	102.5	100.5	(2.0)	-2.0%	585.4	575.4	(9.9)	-1.7%	1,175.7
Passthrough Drugs & Devices	16.8	20.7	3.9	23.0%	106.9	126.9	20.0	18.7%	213.7
Other Income	15.5	16.2	0.7	4.5%	90.4	90.8	0.4	0.5%	185.1
PP, Overseas and RTA Income	1.4	1.8	0.4	27.4%	8.3	6.9	(1.4)	-16.8%	17.2
Total Income	136.3	139.2	2.9	2.1%	791.0	800.1	9.1	1.1%	1,591.8
Pay									
Consultants and Medics	(25.9)	(26.0)	(0.1)	-0.5%	(153.3)	(155.8)	(2.5)	-1.6%	(305.3)
Health Care Assistants & Support	(6.2)	(6.4)	(0.3)	-4.2%	(39.8)	(39.4)	0.4	1.1%	(78.0)
Nurse and Midwives	(15.7)	(22.2)	(6.5)	-41.4%	(120.5)	(132.2)	(11.6)	-9.7%	(227.8)
Other Staff	(16.4)	(11.3)	5.1	31.2%	(82.3)	(70.2)	12.1	14.7%	(168.0)
Scientific, Therapeutic and Technical	(11.1)	(10.9)	0.2	1.7%	(64.7)	(65.1)	(0.4)	-0.7%	(128.3)
Total Pay	(75.3)	(76.9)	(1.6)	-2.1%	(460.7)	(462.7)	(2.0)	-0.4%	(907.4)
Non-Pay									
Clinical negligence	(3.1)	(3.2)	(0.0)	-0.5%	(18.8)	(18.9)	(0.0)	-0.2%	(37.7)
Clinical Supplies & Services	(14.6)	(12.4)	2.2	15.3%	(65.2)	(68.4)	(3.2)	-4.9%	(123.7)
Drugs & Devices	(21.7)	(23.7)	(1.9)	-8.9%	(131.6)	(146.7)	(15.1)	-11.5%	(262.8)
Passthrough Drugs & Devices	(16.8)	(20.7)	(3.9)	-23.0%	(106.9)	(126.9)	(20.0)	-18.7%	(213.7)
Drugs	(4.9)	(3.0)	1.9	39.4%	(24.8)	(19.9)	4.9	19.8%	(49.1)
General Supplies & Services	(0.4)	(0.6)	(0.2)	-41.2%	(2.6)	(3.1)	(0.5)	-18.6%	(4.5)
Internal Recharges	(0.1)	0.0	0.1	100.0%	(0.1)	0.0	0.1	100.0%	(0.2)
Premises & Fixed Plant	(9.8)	(8.9)	0.9	9.1%	(60.0)	(54.3)	5.7	9.5%	(113.8)
Other Expenditure	(0.7)	(4.2)	(3.5)	-507.3%	(24.3)	(28.7)	(4.4)	-18.3%	(47.3)
Total Non-Pay	(50.5)	(52.9)	(2.4)	-4.8%	(302.8)	(320.2)	(17.4)	-5.8%	(589.9)
Operational EBITDA	10.5	9.4	(1.1)	-10.1%	27.6	17.2	(10.4)	-37.6%	94.4
Financing and Capital Charges (Excl Tech Adj)	(7.4)	(6.1)	1.2	16.8%	(44.6)	(43.0)	1.7	3.8%	(94.7)
Operational Surplus / (Deficit)	3.1	3.3	0.2	6.2%	(17.1)	(25.8)	(8.7)	-50.8%	(0.2)

#### Income

- Commissioning income, including passthrough, is £10.1m better than plan YTD. £20m is due to passthrough drugs and devices (offset by increased expenditure), the remaining adverse variance of £9.9m mainly relates to the impact of industrial action on elective API performance and income risks.
- Other income is £0.4m worse than plan YTD. R&D income is £0.6m worse than plan and education income £0.7m better than plan.
- PP, Overseas and RTA income is £1.4m worse than plan YTD driven by a write-off of BUPA private patient debtors of £2.2m (offset by reduced bad debt provision in non-pay).

#### Pay

Pay is £2m worse than plan YTD, £3.9m excluding R&D. This is principally due to a higher run rate of pay since Q4 of last financial year (higher than allowed for in the plan). Temporary staffing pay is £1.3m worse than plan, reflecting increasing efficiency targets this month on the temporary staffing reduction efficiency programme that have not been fully delivered.

#### Non-Pay

 Non-pay is net £17.4m worse than plan YTD, removing the £19.4m adverse position on passthrough and R&D, it is £2m better than plan. This is due to the release of the bad debt provision for PP debt, offset in income, and non-recurrent benefits relating to the PFI contract.

#### **Income and Expenditure: Division Subjective Analysis**

Source: Finance Ledger (Includes COVID-19 and Recovery)

Oxford University Hospitals

NHS Foundation Trust

I & E Subjective				IN MOI	NTH 6		YEAR TO DATE				
£ms			Budget	Actual	Variance	Var %	Budget	Actual	Variance	Var %	
Clinical		Income	8.9	9.6	0.7	7.6%	63.2	64.9	1.7	2.7%	
	Clinical Support Services	Pay	(13.0)	(13.4)	(0.4)	-2.8%	(77.0)	(80.4)	(3.3)	-4.3%	
		Non-Pay	(1.1)	(1.2)	(0.1)	-8.9%	(7.2)	(8.8)	(1.6)	-22.8%	
	Total Clinical Support Services		(5.2)	(5.0)	0.2	4.0%	(21.0)	(24.3)	(3.3)	-15.6%	
		Income	30.2	31.7	1.6	5.2%	179.5	184.9	5.4	3.0%	
	Medicine Rehabilitation and Cardiac	Pay	(16.4)	(16.4)	0.0	0.1%	(98.3)	(98.9)	(0.6)	-0.6%	
		Non-Pay	(9.7)	(11.1)	(1.4)	-14.1%	(58.4)	(63.7)	(5.3)	-9.1%	
	Total Medicine Rehabilitation and Car	diac	4.1	4.3	0.2	5.6%	22.8	22.3	(0.5)	-2.2%	
	Neurosciences Orthopedics Trauma	Income	35.7	36.3	0.6	1.8%	215.8	217.1	1.4	0.6%	
	Specialist Surgery Childrens and	Pay	(18.7)	(18.7)	(0.1)	-0.3%	(112.0)	(114.9)	(3.0)	-2.6%	
	Neonates	Non-Pay	(11.4)	(11.4)	(0.0)	-0.4%	(68.0)	(75.2)	(7.2)	-10.6%	
	Total Neurosciences Orthopedics Trau	ıma Specialist Suı	5.6	6.1	0.5	9.4%	35.8	27.0	(8.8)	-24.6%	
		Income	34.8	36.3	1.4	4.1%	209.5	217.5	8.0	3.8%	
	Surgery Women and Oncology	Pay	(16.5)	(16.2)	0.3	1.6%	(99.1)	(98.7)	0.4	0.4%	
		Non-Pay	(12.9)	(15.4)	(2.5)	-19.3%	(77.9)	(89.6)	(11.7)	-15.0%	
	Total Surgery Women and Oncology		5.5	4.7	(8.0)	-14.6%	32.5	29.2	(3.3)	-10.2%	
Non-Clinical	Corporate	Total	(10.1)	(10.0)	0.0	0.3%	(60.3)	(60.6)	(0.3)	-0.6%	
	Education and Training	Total	3.0	3.2	0.2	7.2%	16.8	18.9	2.1	12.8%	
	Estates	Total	(11.8)	(10.8)	1.0	8.4%	(71.6)	(69.4)	2.3	3.2%	
	Hosted Services	Total	0.0	(0.0)	(0.0)	-110.6%	0.1	0.0	(0.1)	-87.7%	
	Operational Services	Total	(0.9)	(0.9)	(0.0)	-2.5%	(6.0)	(5.5)	0.5	8.0%	
	Research and Development	Total	0.0	(0.0)	(0.0)		(0.0)	2.0	2.0		
Non-Clinical Total			(19.7)	(18.5)	1.2	5.9%	(121.1)	(114.5)	6.5	5.4%	
Technical	Operating Expenses	Total	(3.0)	(2.1)	1.0	31.6%	(18.1)	(15.1)	3.0	16.3%	
	Trust Wide Services	Total	15.9	13.8	(2.1)	-13.2%	51.9	49.6	(2.2)	-4.3%	
Technical Total			12.9	11.7	(1.1)	-8.9%	33.8	34.5	0.7	2.1%	
Total			3.1	3.3	0.2	6.2%	(17.1)	(25.8)	(8.7)	-50.8%	

#### **Clinical Divisions**

Clinical divisions are £15.9m off plan of which a maximum of £2m can be attributed to industrial action. Variances in this format are distorted by £20m of over-performance on passthrough which increases income and non-pay. Pay variances in CSS and NOTSSCAN reflect limited success to date on temporary staff reduction.

#### Corporate, Opex, Trustwide Services

Under spends in corporate areas and operating expenses are primarily one-off items in Estates, Opex (PFI accounting) and R&D. This has partially
offset overspending in the clinical divisions.

### **Statement of Financial Position (SOFP)**

	<u>NHS</u>
Oxford	<b>University Hospitals</b>
	NHS Foundation Trust

Statement of Financial Position	MONTH 12	IN MONTH 6 YTD					
£m	2024	Plan	Actual	Variance			
Non Current Assets:							
Property, Plant and Equipment	739.8	750.6	730.9	(19.7)			
Intangible Assets	16.6	15.1	17.5	2.4			
Investment Property	44.8	44.8	45.9	1.1			
Other investments/financial assets	12.9	12.9	12.9	0.0			
Other property, plant and equipment (excludes	1.1	1.1	1.5	0.3			
leases)	1.1	1.1	1.5	0.3			
Trade and Other Receivables	8.7	8.7	9.1	0.4			
Total Non Current Assets	823.9	833.2	817.7	(15.5)			
Current Assets:							
Inventories	32.2	34.5	31.9	(2.6)			
Trade and Other Receivables	87.3	107.9	106.7	(1.2)			
Credit Loss Allowances	(17.9)	(17)	(15)	2.2			
Cash and Cash Equivalents	46.8	0	4	3.5			
Total Current Assets	148.5	125.5	127.4	1.9			
Total ASSETS	972.4	958.7	945.1	(13.6)			
Current Liabilities:							
Trade and Other Payables	(198.1)	(181.5)	(180.5)	1.0			
Borrowings	(13.8)	(23.1)	(13.3)	9.7			
Commercial Loans	(0.7)	(1)	(1)	(0.3)			
DH Capital Loan	(0.7)	(1)	(1)	0.0			
Provisions	(1.3)	(1.3)	(0.9)	0.3			
Other Liabilities	(2.7)	(11.7)	(8.5)	2.9			
Total Current Liabilities	(217.4)	(218.8)	(205.1)	13.7			
Net Current Assets/(Liabilities)	(68.9)	(93.3)	(77.7)	15.7			
Total Assets Less Current Liabilities	755.0	739.9	740.1	0.2			
Non Current Liabilities:							
Borrowings	(360.1)	(355.9)	(351.5)	4.4			
Commercial Loans	(5.1)	(5)	(5)	0.0			
DH Capital Loan	(13.9)	(14)	(14)	(0.0)			
Provisions	(6.2)	(6.2)	(6.2)	0.0			
Other Liabilities	(5.5)	(5.4)	(2.5)	(0.2)			
Total Non Current Liabilities	(390.9)	(385.9)	(381.8)	4.1			
Assets Less Liabilities (Total Assets Employed)	364.1	354.0	358.3	4.3			
Public Dividend Capital	329.2	330.0	339.5	9.5			
Revaluation Reserve	212.6	206.6	207.0	0.4			
FV Assets Reserve	(9.8)	(9.8)	(9.8)	(0.0)			
Other Reserves	1.7	1.7	1.7	0.0			
Retained Earnings reserve	(169.6)	(174.5)	(180.1)	(5.6)			
Total Taxpayers Equity	364.1	354.0	358.3	4.3			

- The PPE balance is decreasing largely due to underspends on capex, the level of capex is below depreciation hence the reducing balance. In the plan YTD there was also £11.7m of leased assets expected to be operational for the MK Radiotherapy project which haven't yet happened. In month, the Trust impaired a donated scanner to nil NBV incurring a loss of £0.5m due to water damage.
- Receivables are rising, largely this is due to the upcoming pay award and other backdated funding due to the Trust in October.
- Cash has reduced significantly since year-end. The Trust drew down PDC revenue support of £10m in Month 6 and used to pay some revenue creditors.
- Payables have been reducing overall, largely due to the Trust paying its capital creditors due from year-end.
- Deferred income ("other liabilities") has increased which is expected as the Trust receives some funding in advance for example Education. Deferred income is usually at its lowest point at the year-end. LVAs were received in M5, most of which covers the full year's funding.
- Long term borrowings have reduced since year-end due to the scheduled repayments of loans, leases and PFI arrangements. The planned new leased assets have largely not yet happened.

## **Cashflow**

# Oxford University Hospitals NHS Foundation Trust

	NHS Found								undation					
Cash flows from operating activities	MONTH 6	MONTH 7	MONTH 8	MONTH 9	MONTH 10	MONTH 11	MONTH 12	MONTH 1	MONTH 2	MONTH 3	MONTH 4	MONTH 5	MONTH 6	YTD
£m	2024	2024	2024	2024	2024	2024	2024	2025	2025	2025	2025	2025	2025	Movement
Cash Flows from Operating Activities														
Operating Surplus/(Deficit)	4.0	3.8	16.0	0.9	3.0	11.8	(27.8)	(1.0)	(1.4)	(2.2)	(2.9)	(0.9)	6.1	26.9
Depreciation and Amortisation	4.3	3.4	4.0	4.3	4.1	4.1	0.0	3.9	5.0	4.6	4.4	4.4	4.5	4.4
Impairments and Reversals	0.0	0.0	0.0	0.0	0.0	0.0	28.6	0.0	0.0	0.0	0.1	0.0	0.5	(28.6)
Donated Assets received credited to revenue but non-cash	(4.3)	(3.7)	(2.2)	(2.0)	(1.1)	(0.6)	(1.3)	(2.5)	(0.7)	(1.1)	(0.1)	(1.6)	(1.6)	(0.3)
Interest Paid	(2.4)	(2.3)	(2.4)	3.1	(1.7)	(1.7)	(1.8)	(1.7)	(1.8)	(1.7)	(1.7)	(1.7)	(1.7)	0.1
Dividend Paid	(9.6)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	(0.0)	0.0	0.0	(2.5)	0.0
Release of PFI/deferred credit	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	0.7	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.7)
(Increase)/Decrease in Inventories	(0.9)	0.2	0.9	(0.4)	(0.2)	(0.9)	(8.0)	0.1	(0.4)	(0.5)	1.0	(0.4)	0.5	0.4
(Increase)/Decrease in Trade and Other Receivables	(4.2)	(3.1)	(14.8)	9.3	(4.8)	(11.0)	31.3	(8.4)	(1.6)	2.3	(4.9)	(1.7)	(9.2)	(33.0)
Increase/(Decrease) in Trade and Other Payables	(7.0)	2.2	(0.8)	2.3	0.2	(3.8)	14.2	(1.7)	(6.0)	7.1	(1.3)	(1.1)	1.9	(15.3)
Increase/(Decrease) in Other Current Liabilities	(3.6)	14.3	(6.1)	(5.4)	(2.4)	1.0	(12.5)	10.5	(4.2)	(4.1)	8.5	0.9	(5.4)	13.5
Provisions Utilised	(0.1)	0.0	(0.0)	(0.1)	0.0	0.0	(0.9)	(0.2)	0.0	(0.0)	(0.0)	(0.0)	(0.0)	0.8
Increase/(Decrease) in Movement in non Cash Provisions	0.0	0.0	0.0	0.0	0.0	0.0	(0.5)	0.0	0.0	0.0	0.0	0.0	0.0	0.5
Net Cash Inflow/(Outflow) from Operating Activities	(23.8)	14.8	(5.4)	12.0	(3.1)	(1.0)	29.2	(0.9)	(11.1)	4.2	3.1	(2.2)	(7.1)	(31.4)
CASH FLOWS FROM INVESTING ACTIVITIES	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Interest Received	0.4	0.4	0.3	0.3	0.3	0.3	0.3	0.4	0.3	0.3	0.2	0.2	0.2	(0.1)
(Payments) for Property, Plant and Equipment	2.8	0.9	(5.2)	(2.3)	(3.7)	(2.5)	(10.2)	(8.7)	(11.3)	(5.6)	(1.0)	(0.3)	(0.2)	9.9
(Payments) for Intangible Assets	(0.5)	(0.3)	1.0	(0.1)	(0.1)	(1.4)	(2.3)	(0.0)	(0.0)	(0.7)	(0.8)	(0.0)	(0.9)	2.2
Receipt of cash donations to purchse capital assets	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	(0.1)	0.0	0.2	0.0
Net Cash Inflow/(Outflow) from Investing Activities	2.7	1.0	(3.9)	(2.1)	(3.4)	(3.6)	(12.2)	(8.3)	(11.0)	(6.0)	(1.6)	(0.2)	(0.7)	12.0
NET CASH INFLOW/(OUTFLOW) BEFORE FINANCING	(21.1)	15.8	(9.3)	9.9	(6.5)	(4.6)	17.1	(9.2)	(22.1)	(1.8)	1.5	(2.4)	(7.9)	(19.4)
CASH FLOWS FROM FINANCING ACTIVITIES	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Public Dividend Capital Received	0.0	0.0	0.0	0.0	0.0	18.4	0.0	0.0	0.0	0.0	0.0	0.0	10.3	(0.0)
Principal	0.0	0.0	(0.3)	0.0	0.0	0.0	0.0	0.0	(0.3)	0.0	0.0	0.0	0.0	0.0
Other Loans Repaid	(0.1)	0.0	0.0	(0.1)	0.0	0.0	(0.1)	0.0	(0.0)	(0.1)	0.0	0.0	(0.1)	0.1
On-SoFP PFI and LIFT	(1.1)	(1.1)	(1.1)	(6.9)	(1.5)	(1.8)	(1.9)	(1.9)	(2.0)	(1.8)	(1.2)	(2.4)	(1.9)	(0.5)
Net Cash Inflow/(Outflow) from Financing Activities	(1.2)	(1.1)	(1.5)	(7.1)	(1.5)	16.6	(2.0)	(1.9)	(2.4)	(1.9)	(1.2)	(2.4)	8.3	(0.4)
NET INCREASE/(DECREASE) IN CASH AND CASH EQUIVALENTS	(22.3)	14.8	(10.7)	2.9	(8.0)	12.0	15.0	(11.1)	(24.5)	(3.6)	0.3	(4.8)	0.4	(19.8)
the Period	43.2	20.9	35.7	24.9	27.8	19.8	31.8	46.8	35.7	11.3	7.6	8.0	3.1	(23.8)
Restated Cash and Cash Equivalents ( and Bank Overdraft) at	43.2	20.9	35.7	24.9	27.8	19.8	31.8	46.8	35.7	11.3	7.6	8.0	3.1	(23.8)
Beginning of the Period										11.3			5.1	, ,
Cash and Cash Equivalents (and Bank Overdraft) at YTD	20.9	35.7	24.9	27.8	19.8	31.8	46.8	35.7	11.3	7.6	8.0	3.1	3.6	(43.7)

The cash balance at the end of September is £3.6m. The forecast is indicating increased stress on the Trust's cash resources and the members of the operational and strategic cash committees are taking actions to address this in both the short term and over a longer time frame.