

## Month 8 Finance Report

### Governing Body Meeting

13 January 2022

<b>Author(s)</b>	Chris Cotton, Deputy Director of Finance, Diane Mason, Jayne Taylor and Pat Lunness, Senior Finance Managers
<b>Sponsor Director</b>	Jackie Mills, Director of Finance
<b>Purpose of Paper</b>	
<p>This report provides information on the financial position at Month 8 (November 2021), together with an assessment of the risks and existing mitigations available to deliver the CCG's control total of achieving a surplus of £21.9m relating to our historic surplus allocation.</p>	
<b>Key Issues</b>	
<p>Governing Body approved the revised full year financial plan for 2021/22 on 4 November 2021. This was the third iteration of the financial plan for 2021/22, recognising the changing financial arrangements that have been in place over the course of the year. The plan is designed to deliver an in-year break even position (with the cumulative surplus equal to the brought forward surplus of £21.9m).</p> <p>The overall year-to-date position at the end of November period shows surplus of £14.7m (which is slightly higher than planned surplus of £14.6m). This is predicated on the receipt of £2.2m additional allocations in relation to Hospital Discharge and Additional Roles Reimbursement funding.</p> <p>The forecast position is in line with the overall plan to deliver £21.9m surplus, but is again predicated on the receipt of £20.4m of additional allocations including £5.4m Hospital Discharge Programme; £5.4m Winter Access Fund for primary care; £6.6m Service Development Funding (mainly ICS funding) and £2.9m from the Additional Roles Reimbursement Scheme. Given that the time of year and reducing level of financial risk and available mitigations, I have moved the RAG rating of achieving the CCG's control total to green.</p>	
<b>Is your report for Approval / Consideration / Noting</b>	
Approval	
<b>Recommendations / Action Required by Governing Body</b>	
<p>Governing Body is asked to note/approve the following:</p> <ul style="list-style-type: none"> <li>Note the CCG's year to date position to the end of November 2021.</li> </ul>	

- Note the CCG's forecast position for the year-ended 31 March 2022 and that the RAG rating of delivery has moved to GREEN.
- Note expectation that anticipated allocations will be received for a range of expenditure including the Hospital Discharge Programme (HDP); Additional Roles Reimbursement (ARRS); Service Development Funding (SDF) and Winter Access Funding (WAF).
- Approve budget movements over £2m

### **Governing Body Assurance Framework**

#### **Which of the CCG's objectives does this paper support?**

Strategic Objective - To ensure there is a sustainable, affordable healthcare system in Sheffield. It supports management of the CCG's principal risks 4.1 and 4.7 in the Assurance Framework.

#### **Are there any Resource Implications (including Financial, Staffing etc)?**

Not specifically

#### **Have you carried out an Equality Impact Assessment and is it attached?**

**Please attach if completed. Please explain if not, why not**

Not applicable

#### **Have you involved patients, carers and the public in the preparation of the report?**

Not applicable

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### 1. Executive Summary

Key Duties	Year to date	Forecast	Key Issues
Deliver the historical CCG surplus of £21.861m surplus (CCG's Control Total) against Commissioning Revenue Resource Limit (RRL) + RCA combined.	(£14.7m) Under-spend	(£21.9m) Under-spend	<p>The CCG received an allocation relating to the historic surplus in Month 6 and therefore this is reported as the CCG Control Total (in year breakeven).</p> <p>There are a number of anticipated allocations not yet received by the CCG, which are highlighted in the Introduction section. The CCG is confident allocations will be received.</p> <p>Given that the time of year and reducing level of financial risk and available mitigations, I have moved the RAG rating of achieving the CCG control total to green.</p>
a) Achieve a surplus against the Programme Allocation	(£14.7m) Under Spend	(£20.6m) Under Spend	As noted above.
b) Remain within Running Cost Allowance (RCA) of £11,154k	(£1.0m) Under Spend	(£1.3m) Under Spend	The original notified allocation for RCA for the full year was £11,154k and there is a requirement not to exceed this funding level.
Remain within the Cash Limit (i.e., Maximum draw down set by NHS England)	£8.4m closing balance	Breakeven	The CCG's maximum draw down for the first eight months of 2021/22, notified in November was £1,174.5m. To remain within this limit, which requires the revenue position to be brought in on plan, cash payments will need to be managed to meet this target.

#### Key:

Red	Significant risk of non-delivery. Additional actions need to be urgently pursued.
Amber	Medium risk of non-delivery requires additional management effort.
Green	Low risk of non-delivery – current management effort should deliver success.

## 2. Introduction

The total resources anticipated at Month 8 is £1.2bn, as summarised in the table below. In addition to the confirmed allocation at month 8, we are anticipating the receipt (based on national guidance) of additional allocations totalling £20.4m, which are expected to be received in H2, as follows:

<b>Table 1 - Revenue Resource Limit (£000's)</b>	
Confirmed Revenue Resource Limit - Programme	1,181,207
Anticipated Allocations;	
Hospital Discharge Programme (HDP)	5,359
Vaccination Centres	9
SDF Allocations	6,642
Winter Access Fund (WAF)	5,442
Additional Roles Re-imburement Scheme (ARRS)	2,949
<b>Anticipated Revenue Resource Limit</b>	<b>1,201,608</b>
<b>Confirmed Revenue Resource Limit - Running Cost Allowance</b>	<b>11,154</b>
<b>Anticipated Revenue Resource Limit - TOTAL</b>	<b>1,212,762</b>

## 3. Summary of the reported position

A summary position of the overall variances are shown in Table 2 below, for the year-to-date position to the end of November and the forecast to the end of the year.

Appendix A provides a more detailed view of each section.

<b>Table 2 - Variances against budget in thousands (£000's)</b>	<b>YTD (November)</b>	<b>Full Year</b>
Acute & Community NHS Services	(0)	(0)
Other Acute & Community	(5)	(120)
Mental Health	(34)	(24)
Other Primary & Community services	(120)	(203)
Primary Care Co-Commissioning	481	974
Locally Commissioned Primary Care	(147)	(127)
Continuing Care	905	1,272
Prescribing	(239)	(360)
Collaborative Working	(13)	(4)
Reserves	(14,574)	(22,005)
<b>Total Programme Position</b>	<b>(13,746)</b>	<b>(20,598)</b>
Running Costs	(990)	(1,262)
<b>Total CCG Position</b>	<b>(14,736)</b>	<b>(21,861)</b>

#### 4. Further Information on Key Budgets and Related Risks

##### Acute and Community NHS Services:

The block arrangements established during 20/21 have remained in place for the whole of this financial year. These blocks are predominantly underpinned by 2019/20 costs, as they were last year.

The system top-ups and COVID funding arrangements continue but the values are now based on Provider plans submitted to the ICS and reflect different elements of costs / funding than they did last year. Table 3 below shows the amounts being paid to the three Sheffield NHS Providers for the whole year, this includes the agreed funding for H2.

Table 3: - Full Year System funding for Sheffield Providers (£000's)	Growth Funding	COVID Funding	System Top Up	Provider Income Loss	Total
Sheffield Health and Social Care	507	6,038	3,618	602	10,765
Sheffield Teaching Hospitals	3,134	36,015	28,244	2,899	70,292
Sheffield Children's	854	5,178	17,075	422	23,529
<b>Total system funding</b>	<b>4,495</b>	<b>47,231</b>	<b>48,937</b>	<b>3,923</b>	<b>104,586</b>

Other providers within the ICS are receiving their system top-ups from their local CCGs.

##### Sheffield Teaching Hospitals NHS Foundation Trust (STHFT) update:

The activity plan submitted as part of the H2 planning confirmed that the Trust planned to meet activity targets for the following:

- the assumption of zero 104 week waiters by March 2022
- to hold the number of 52 week waiters at the level seen at the end of September 2021
- to meet the original assumption for the 63 days cancer trajectory

However, they also confirmed that the overall size of the waiting list is likely to be higher at the end of March 2022 than at September 2021.

As at the end of November, the Trust provided an update confirming that elective performance was behind plan, although there had been an improvement in diagnostic waits. The trust also noted the increasing length of stay for patients on emergency pathways, with increasing numbers of patients deemed medically fit for discharge. A city wide plan was agreed to support the system over the winter period which included additional support for social care, as well as the procurement of additional care home beds, to support discharge.

**Mental Health:** The under-spend to date relates predominantly to the Individual Funding Request (IFR) budget as there has been no approvals by the CCG panel for Mental Health IFR needs, this is partly offset by additional independent sector costs where patient choice has meant greater referrals for ADHD services.

**Continuing Health Care (CHC) and Funded Nursing Care (FNC):** Whilst the revised budget approved in November was based on a re-assessment of likely spend, we are reporting an additional pressures above those previously anticipated. The over-spend to date reflects cost pressures arising from growth in the number and cost of approved

packages in addition to QIPP targets which have not been achievable due to the focus on hospital discharge. CHC packages, both in terms of adults and childrens, remain the greatest financial pressure to the CCG, with spend at the end of 2021/22 being forecast to be 17% higher than spend in 2020/21.

It should be noted that the reported position includes the utilisation of non recurrent funding from the Hospital Discharge Programme, funding for which has been confirmed will end in March 2022. The recurrent financial pressure is therefore greater than the in year variance (by approximately £3m).

**Primary Care Co-Commissioning and Locally Commissioned Primary Care:** The position at month 8 shows an overspend of £334k. This is primarily on delegated budgets which, within full year budgets, have a shortfall of £2m between estimated expenditure and the allocation received. The forecast position is an overspend of £847k as the £2m has been mitigated by the contingency budget of £0.4m, a 20/21 year end accrual benefit of £0.5m and other underspends in Delegated and LCS budgets. Work is ongoing to identify how the remaining shortfall can be managed and PCCC reports have previously outlined possible mitigations.

**Prescribing:** Data for the period April – October 2021 has now been received. The average price per item continues to reduce slightly from £7.18 to £7.13 for Non-Flu items. As reported last month, the change in price was expected due to the reduction in Category M prices nationally for the period July – September 2021. The average daily items prescribed compared to last financial year shows a very small increase of 0.5% (this has reduced from the 1.3% increase reported last month). The impact of both the price and volume changes has resulted in an a small forecast underspend of £46k against the full-year budget.

**Running Costs:** The full year allocation is unchanged at £11.154m. Within the full year budgeted spend, £500k QIPP is expected to be delivered, due mainly to management of vacancies. The year-to-date position is an underspend of £990k with a year end saving of £1,262k forecast. This is a significant improvement against the previously reported position. A mix of staffing vacancies and non-recurrent non-pay savings have contributed to the under-spend.

Table 5: Running Costs	Budget M1-8 £000's	Variance M1-8 £000's	Forecast Variance Year-end £000's
Pay	7,292	-644	-1,041
Non Pay	1,929	-860	-896
Income	-1,681	77	-14
Running Cost Reserve	-437	437	689
<b>TOTAL</b>	<b>7,103</b>	<b>-990</b>	<b>-1,262</b>

**COVID Expenditure:** A budget of £1.8m (£0.8m in H1 and £1m in H2) has been allocated to the CCG from the covid funding within the system envelope. In addition, £1.4m of additional allocations have been received (£1.1m for the primary care COVID support/expansion Fund and £301k for Long COVID) resulting in a full-year COVID budget of £3.3m. COVID forecast expenditure at M8 is £2.6m and is included in the Month 8 position. As system pressures mount, we continue to review the level of additional capacity required to support both the current covid response as well as mitigating the reduced capacity due to social distancing and staff absences.

The Month 8 position also assumes additional costs associated with the Hospital Discharge Programme (HDP). Expenditure incurred under the HDP will be funded separately, as in 20/21. Current spend is £6.1m, of which a retrospective allocation of £4.8m has been received to date covering the costs for Months 1 – 6 and a further £1.3m is assumed to cover the estimated month 7 - 8 costs.

## 5. Overall Risk Assessment

The range of risks and potential benefits has reduced compared to last month. Our assessment, using the information available to date, identifies a risk range of -£3.5m upside to +£0.6m downside, which reflects a range of issues that could impact on the delivery of the final year end position. Key risks are summarised below.

Table 6: Key Risks	
Assumed Allocations	Expenditure on hospital discharge programme, ARRS, and Winter Access Funding is anticipated to be funded and any risk of not being funded is small. Experience in previous years has been that additional allocations may be received with little time to plan to spend these, in particular in relation to the ICS.
Non NHS Acute/MH/Community	Variability in IFR spend
Primary Care	Potential slippage on list size changes, pressures on locum spend.
Continuing Care	Variability of assumptions on run rate for adult CHC, children's CHC and Funded Nursing Care
Prescribing	Prescribing has the widest range in scenarios of year end forecast, since the start of the COVID pandemic spend month to month has been more variable and even though the last few months spend per day has reduced this can change month to month and with quarterly changes to nationally set Category M prices there is more possible step changes in average price for items prescribed
Running Costs	Additional slippage possible on budgets including corporate costs and legal fees.

At present, my assessment of the overall level of risks and available mitigations, alongside the limited number of months remaining in the financial year, is such that I have more confidence in the delivery of the CCG's financial position and have therefore moved the 'RAG' rating of achieving the CCG control total to green.

## 6. Delivery of Cash Position

The CCG was notified of a maximum 8-month cash drawdown limit of £1,174.5m at month 8. The CCG is able to use this cash and income received, whilst some expenditure items listed are outside the cash limit. The total cash used to the end of November was £794.6m against a requested cash drawdown of £720.5m, prescribing and home oxygen (including PCSE errors & vaccination adjustments) of £71.0m, other income of £10.7m and a brought forward balance of £0.8m. The cash balance at bank at the end of the month was £8.4m. A minimal cash balance at bank is planned for the period end, which will have to be closely managed.

## 7. Better Payment Practice Code

The Better Payment Practice Code requires the CCG to pay all valid invoices by the due date or within 30 days of receipt of a valid invoice, whichever is later. A summary of the position for the 12-month period to the end of November is reported in Table 6 below:

Table 7: Measure of compliance	12 months to November 2021 (Number)	12 months to November 2021 £000's
Non-NHS Payables		
Total Non-NHS Trade invoices paid in the year	18,457	244,837
Total Non-NHS Trade Invoices paid within target	18,215	242,565
<b>Percentage of Non-NHS Trade invoices paid within target</b>	<b>98.69%</b>	<b>99.07%</b>
NHS Payables		
Total NHS Trade invoices paid in the year	896	756,744
Total NHS Trade invoices paid within target	885	756,573
<b>Percentage of NHS Trade invoices paid within target</b>	<b>98.77%</b>	<b>99.98%</b>

In addition to the Better Payment Practice Code, the latest Procurement Policy Note guidance states that Suppliers should be paid within seven days where possible. The finance team continues to ensure that payments are processed as speedily as possible.

## 8. Key Budget Movements

In line with the Scheme of Budgetary Delegation, the Governing Body is required to sign off all budget movements over £2m. Given that a revised annual financial plan was approved by Governing Body in November, the budget movements shown are against that revised plan.

Table 8: Budget Movements	Month	From	To	Amount (£'000)
Adjustment to Top-up funding	8	Sheffield Teaching Hospitals & Sheffield Children's Hospital	ICS& CCG Reserve	18,100

## 9. Recommendation

Governing Body is asked to **note/approve** the following:

- Note the CCG's year to date position to the end of November 2021.
- Note the CCG's forecast position for the year-ended 31 March 2022 and that the RAG rating of delivery has moved to GREEN.
- Note expectation that anticipated allocations will be received for a range of expenditure including the Hospital Discharge Programme (HDP); Additional Roles Reimbursement (ARRS); Service Development Funding (SDF) and Winter Access Funding (WAF).
- Approve budget movements over £2m (as set out in section 8)

Paper prepared by Chris Cotton, Deputy Director of Finance, Diane Mason, Jayne Taylor and Pat Lunniss, Senior Finance Managers

On behalf of Jackie Mills, Director of Finance  
December 2021



NHS Sheffield Clinical Commissioning Group  
Finance Report 2021/22 - Financial Position for Period Ending 31st November 2021

	Year to Date: November				Forecast Out-turn for the Year			
	Budget	Expenditure	Variance		Budget	Forecast	Variance	
	£'000	£'000	Over (+)/ Under(-)	%	£'000	£'000	Over (+)/ Under(-)	%
<b>PROGRAMME COSTS BY PROVIDER/ SERVICE</b>								
<b>Revenue Resource Limit</b>	<b>790,216</b>	<b>790,216</b>	<b>0</b>		<b>1,181,208</b>	<b>1,181,208</b>	<b>0</b>	
<b>Anticipated Allocations</b>								
Hospital Discharge Programme	1,304	1,304	0		5,359	5,359	0	
GPIT COVID	3	3	0		9	9	0	
Winter Access Fund	0	0	0		5,442	5,442	0	
Service Development Funding (SDF)	0	0	0		6,642	6,642	0	
Additional Roles Reimbursement Scheme (ARRS)	862	862	0		2,949	2,949	0	
<b>Revised Budget</b>	<b>792,385</b>	<b>792,385</b>	<b>0</b>		<b>1,201,610</b>	<b>1,201,610</b>	<b>0</b>	
<b>EXPENDITURE</b>								
Sheffield Teaching Hospitals	358,135	358,135	(0)	0.0%	527,635	527,635	0	0.0%
Sheffield Children's Hospital	46,744	46,744	(0)	0.0%	68,463	68,463	0	0.0%
Yorkshire Ambulance Service	19,700	19,700	(0)	0.0%	29,571	29,571	(0)	0.0%
Other NHS Trusts	9,021	9,021	(0)	0.0%	13,512	13,512	0	0.0%
<b>Acute &amp; Community NHS Services</b>	<b>433,600</b>	<b>433,600</b>	<b>(0)</b>	<b>0.0%</b>	<b>639,180</b>	<b>639,180</b>	<b>(0)</b>	<b>0.0%</b>
ISTC & Extended Choice	2,889	2,913	24	0.8%	4,386	4,413	27	0.6%
Ambulance Services	1,257	1,269	12	0.9%	1,906	1,914	9	0.5%
Non Contract Activity	600	589	(11)	-1.9%	915	887	(28)	-3.1%
Other Community	997	997	0	0.0%	1,290	1,290	0	
Individual Funding Requests	393	363	(30)	-7.6%	591	464	(128)	-21.6%
<b>Other Acute &amp; Community</b>	<b>6,136</b>	<b>6,130</b>	<b>(5)</b>	<b>-0.1%</b>	<b>9,088</b>	<b>8,968</b>	<b>(120)</b>	<b>-1.3%</b>
Sheffield Health & Social Care	71,488	71,488	0	0.0%	107,679	107,679	0	0.0%
Other Mental Health	2,850	2,887	36	1.3%	3,976	4,027	51	1.3%
Sheffield Local Authority (MH)	901	902	1	0.1%	1,352	1,354	1	0.1%
Voluntary Sector (MH)	1,216	1,245	29	2.4%	1,788	1,811	24	1.3%
Individual Funding Requests (MH)	100	0	(100)	-100.0%	300	200	(100)	-33.3%
<b>Mental Health</b>	<b>76,556</b>	<b>76,522</b>	<b>(34)</b>	<b>0.0%</b>	<b>115,095</b>	<b>115,071</b>	<b>(24)</b>	<b>0.0%</b>
Sheffield Local Authority	19,620	19,603	(17)	-0.1%	30,369	30,344	(25)	-0.1%
St Lukes Hospice	2,402	2,371	(31)	-1.3%	3,660	3,572	(87)	-2.4%
Voluntary Sector	196	196	(0)	0.0%	295	295	0	0.0%
Other Commissioning	2,491	2,459	(32)	-1.3%	3,771	3,750	(21)	-0.6%
Development Nurses (Directly Employed)	321	281	(41)	-12.6%	486	416	(70)	-14.4%
<b>Other Primary &amp; Community services</b>	<b>25,030</b>	<b>24,910</b>	<b>(120)</b>	<b>-0.5%</b>	<b>38,581</b>	<b>38,378</b>	<b>(203)</b>	<b>-0.5%</b>
Core Contract	37,360	37,360	0	0.0%	56,007	56,007	0	0.0%
Premises	7,311	7,293	(18)	-0.2%	10,967	10,949	(18)	-0.2%
QoF	5,825	5,825	(0)	0.0%	8,737	8,737	0	0.0%
Enhanced Services	7,520	7,489	(31)	-0.4%	12,998	12,954	(43)	-0.3%
Primary Care Other Services	1,461	1,991	530	36.3%	1,629	2,665	1,036	63.6%
<b>Primary Care Co-Commissioning</b>	<b>59,477</b>	<b>59,958</b>	<b>481</b>	<b>0.8%</b>	<b>90,338</b>	<b>91,313</b>	<b>974</b>	<b>1.1%</b>
Locally Commissioned Services	11,299	11,188	(111)	-1.0%	17,027	16,963	(64)	-0.4%
GP IT	645	608	(36)	-5.7%	1,362	1,298	(63)	-4.6%
<b>Locally Commissioned Primary Care</b>	<b>11,943</b>	<b>11,796</b>	<b>(147)</b>	<b>-1.2%</b>	<b>18,389</b>	<b>18,262</b>	<b>(127)</b>	<b>-0.7%</b>
Adults Continuing Care	38,143	39,004	861	2.3%	59,005	60,646	1,642	2.8%
Children's Continuing Care	2,893	3,043	149	5.2%	4,786	4,514	(272)	-5.7%
Continuing Healthcare Assessments	1,614	1,556	(57)	-3.5%	2,504	2,489	(15)	-0.6%
Funded Nursing Care	3,793	3,744	(48)	-1.3%	5,727	5,644	(83)	-1.5%
<b>Continuing Care</b>	<b>46,442</b>	<b>47,347</b>	<b>905</b>	<b>1.9%</b>	<b>72,022</b>	<b>73,294</b>	<b>1,272</b>	<b>1.8%</b>
Prescribing	64,989	64,950	(39)	-0.1%	97,433	97,387	(46)	0.0%
Medicines Optimisation	1,290	1,090	(200)	-15.5%	1,950	1,636	(314)	-16.1%
<b>Prescribing</b>	<b>66,279</b>	<b>66,040</b>	<b>(239)</b>	<b>-0.4%</b>	<b>99,384</b>	<b>99,023</b>	<b>(360)</b>	<b>-0.4%</b>
Accountable Care Partnership	84	90	6	6.6%	119	119	0	0.0%
Better Care Fund	131	117	(14)	-10.8%	203	203	0	0.0%
Integrated Care System	52,409	52,409	(0)	0.0%	57,908	57,908	0	0.0%

NHS Sheffield Clinical Commissioning Group  
 Finance Report 2021/22 - Financial Position for Period Ending 31st November 2021

	Year to Date: November				Forecast Out-turn for the Year			
	Budget	Expenditure	Variance Over (+)/ Under(-)		Budget	Forecast	Variance Over (+)/ Under(-)	
	£'000	£'000	£'000	%	£'000	£'000	£'000	%
<b>PROGRAMME COSTS BY PROVIDER/ SERVICE</b>								
Other Collaborative Working	57	53	(4)	-7.0%	86	82	(4)	-4.7%
<i>Collaborative Working</i>	52,682	52,669	(13)	0.0%	58,316	58,312	(4)	0.0%
<b>Sub total Programme before reserves</b>	<b>778,145</b>	<b>778,973</b>	<b>828</b>	<b>0.1%</b>	<b>1,140,393</b>	<b>1,141,799</b>	<b>1,407</b>	<b>0.1%</b>
<b>Reserves</b>								
Commissioning reserves	(0)	0	0		17,785	17,642	(144)	
General Contingency	0	0	0		288	288	0	
ICS Reserve	0	0	0		21,783	21,783	0	
Planned Surplus/(Deficit)	14,574	0	(14,574)		21,861	0	(21,861)	
<i>Reserves</i>	14,574	0	(14,574)		61,717	39,713	(22,005)	
<b>TOTAL EXPENDITURE - COMMISSIONING</b>	<b>792,719</b>	<b>778,973</b>	<b>(13,746)</b>	<b>-1.7%</b>	<b>1,202,110</b>	<b>1,181,512</b>	<b>(20,598)</b>	<b>-1.7%</b>
<b>(UNDER)/OVER SPEND - COMMISSIONING</b>	<b>334</b>	<b>(13,412)</b>	<b>(13,746)</b>		<b>500</b>	<b>(20,098)</b>	<b>(20,598)</b>	

**NHS Sheffield Clinical Commissioning Group**  
**Finance Report 2021/22 - Financial Position for Period Ending 31st November 2021**

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	Budget	Expenditure	Variance Over (+)/ Under(-)		Budget	Forecast	Variance Over (+)/ Under(-)	
	£'000	£'000	£'000	%	£'000	£'000	£'000	%
<b>PROGRAMME COSTS BY PROVIDER/ SERVICE</b>								
<b>RUNNING COSTS ALLOWANCE</b>								
<b>Allocation</b>	7,436	7,436	0	0%	11,154	11,154	0	0%
Accountable Officer (incl Deputy Accountable Officer)	1,907	1,697	(210)	-11.0%	2,861	2,553	(307)	-10.7%
Commissioning Development	1,424	1,189	(235)	-16.5%	2,135	1,858	(277)	-13.0%
Medical Directorate	322	319	(3)	-1.0%	483	477	(6)	-1.3%
Corporate Services	1,624	1,178	(446)	-27.4%	2,574	1,816	(757)	-29.4%
Finance & Corporate Services	1,254	1,214	(40)	-3.2%	1,915	1,880	(35)	-1.8%
Nursing & Quality	733	516	(217)	-29.6%	1,099	807	(292)	-26.6%
Running Cost Reserve	(161)	0	161	-100.0%	(413)	0	413	-100.0%
<b>Running Costs</b>	<b>7,103</b>	<b>6,113</b>	<b>(990)</b>	<b>-14%</b>	<b>10,654</b>	<b>9,392</b>	<b>(1,262)</b>	<b>-11.8%</b>
<b>(UNDER/OVER SPEND - Running Costs</b>	<b>(333)</b>	<b>(1,323)</b>	<b>(990)</b>		<b>(500)</b>	<b>(1,762)</b>	<b>(1,262)</b>	
<b>TOTAL (UNDER/OVER SPEND</b>	<b>0</b>	<b>(14,736)</b>	<b>(14,736)</b>		<b>0</b>	<b>(21,860)</b>	<b>(21,861)</b>	