The Shrewsbury and Telford Hospital

Finance Assurance Committee, Key Issues Report					
Report Date: 31 December 2024	Report of: Finance Assurance Committee				
Date of meeting: 31 December 2024	Members : Richard Miner (Chair), Sarah Dunnett, Helen Troalen, Paula Gardner. Attendees: Adam Winstanley, Simon Balderstone, Lisa Mitchell Apologies : Sarah Dixon (NHSE), Simon Crowther				
1 Agenda 2a Alert	 The Committee considered the following: Finance Highlights Month 8 Report (including forward look) Financial planning update 25/26 Energy Centre - updated contract arrangements Workforce plan and financial impact 4A Reports: Efficiency and Sustainability Group and Capital Planning Group 				
2a Alert Matters of concerns, gaps in assurance or key risks to escalate to the Board	 Deficit is now £13.2m (up from £10.9m in month 7) adverse to plan which is itself a planned deficit for the year of £44.3m. This planned deficit is funded and, in essence, reduces the Trust to a break-even position. The underlying position is driven primarily by workforce costs. Current year end forecast outturn is a deficit (to the agreed deficit) of £24.3m, a marginal improvement from last month's £25.2m. In coming to this figure, savings have already been identified and work is ongoing through the various governance groups, together with PwC input, to improve that position. That said, the Committee would categorise current initiatives as incremental cost reduction ("salami slicing") and consider transformational change is the real answer. Bank spend, medical workforce spend and MEC division financial performance represent the most critical areas. The pace of implementation of planned workforce changes continue to pose a particular challenge (and also opportunity) with the full runrate benefits and opportunities unlikely to impact until the start of FY25/26. Nationally mandated, but not fully funded, pay awards have added to the existing pressures allied to escalation and unavailability. There is varying divisional performance with MEC particularly challenged through its medical pay bill and the Committee will invite MEC to attend the March meeting to look at the 2025/26 financial plan. The Committee reviewed the draft financial plan for FY25/26. The Committee wanted to alert the Board that the financial plan for the year is likely to mean little in the way of additional cash and therefore little financial flexibility for service developments and investments. There is satill substantial uncertainty around the potential cost of clinical support worker re-gradings and quantification is vital. The Committee was advised that this would not be known until well into the new financial year. 				

2b	Assurance Positive assurances and highlights of note for the Board				
2c	Advise Areas that continue to be reported on and/or where some assurance has been noted/further assurance sought.	 FAC asked last month for detailed analysis on the underlying monthly deficit to track movements in it. FAC has asked for further assurance around the potential full year impact on FY24/25 and the potential savings that could be taken into FY25/26. In addition, FAC will closely follow the monthly reporting on the forecast financial outturn, the workforce modelling and the mitigations against overspends and deficits. Efficiency and Sustainability Group and Capital Planning Group 4As Issued and noted with follow up monitoring around capital spend trajectory. Energy Centre contract update – the Committee was briefed that the finalisation of the contract will not be until the end of January and in order to ensure work continues a letter has been issued to the supplier to agree the programme of work and associated funding for January. 			
2d	Actions Significant follow up actions	 Continued maintenance of the relationship between the FRG and its actions and FAC. Potential review of 2025 meeting dates as current dates may not allow sufficient time for post month end reporting. 			
3	Report compiled by	,	Minutes available from	Lisa Mitchell	