# NHS Ayrshire & Arran



Meeting: Ayrshire and Arran NHS Board

Meeting date: Monday 31 January 2022

Title: Financial Management Report for the nine months to

**31 December 2021** 

Responsible Director: Derek Lindsay, Director of Finance

Report Author: Rob Whiteford, Assistant Director of Finance - Operational

Services

# 1. Purpose

This is presented for:

Discussion

This paper relates to:

Annual Operational Plan

This aligns to the following NHS Scotland quality ambition(s):

Effective

# 2. Report summary

#### 2.1 Situation

The Revenue Plan is a deficit of £12.1 million. The deficit after nine months is £3.0 million. The deficit decreased by £0.2 million in month nine.

# 2.2 Background

The budget for 2021/2022 was approved at the Board meeting on 24 May 2021. It is recognised that COVID-19 will continue to have a significant impact in 2021/2022.

#### 2.3 Assessment

Additional costs will be incurred in 2021/2022 related to COVID-19. Those incurred so far are detailed in Appendix 2. Over £1.0 million per month is spent on additional hospital bed capacity including ITU beds, with another £0.9 million per month on Covid-19 vaccinations which use 195 Whole Time Equivalent staff.

#### 2.3.1 Quality/patient care

Financial resources contribute directly to quality of patient care.

#### 2.3.2 Workforce

Section five of the attached report comments on workforce numbers, agency spend, consultant vacancies and staff absence rate.

#### 2.3.3 Financial

The cash releasing efficiency savings plan (CRES) is shown in Appendix 4. This forecasts a £3.5 million shortfall against planned efficiency savings for the year.

### 2.3.4 Risk assessment/management

Section six in the paper attached sets out risk assessment and mitigations.

#### 2.3.5 Equality and diversity, including health inequalities

An impact assessment has not been completed because this report is a monitoring report therefore does not require an equality and diversity impact assessment.

### 2.3.6 Other impacts

This report reflects the best value principles of governance and accountability in respect of use of resources.

# 2.3.7 Communication, involvement, engagement and consultation

The Board has carried out its duties to involve and engage external stakeholders where appropriate.

#### 2.4 Recommendation

Members are asked to discuss the attached report.

# 3. List of appendices

The following appendices are included with this report:

Appendix No 1, Income and expenditure summary for health services

Appendix No 2, Covid expenditure

Appendix No 3, Confirmed and Anticipated allocations

Appendix No 4, Cash releasing efficiency savings

Appendix No 5, Capital Expenditure

# 1. Background

1.1 This report shows the revenue position for the nine months ended 31 December 2021.

# 2. Revenue resource limit and overall financial position

- 2.1 The revenue budget for the year is £1.03 billion. Allocations received are £943.0 million and anticipated allocations amount to £82.9 million. Of this £59.0 million is for Family Health Services such as payments to dentists, opticians and pharmacists whilst £18.3 million is for COVID-19.
- 2.2 Allocations received in December included £1.5 million for multidisciplinary teams and £1.1 million for support staff. We have recruited 74 staff against the £1.1 million, half in acute and half in partnerships. Both of these are part of the £300 million national investment announced in October. In addition we received £1.4 million for Combat Stress, a service which helps war veterans.
- 2.3 The Board set a deficit budget of £12.1 million for 2021/2022. We are overspent by £3.0 million after nine months.
- 2.4 The figures below include our spend on COVID-19. This spend is matched with budget.

#### 3. Acute Services

3.1.1 The annual budget for Acute Services is £378.5 million. The directorate is overspent by £1.8 million after nine months, and overspent by £0.6 million in December.

	Annual	YTD	YTD		Month	Month	Month
Table 1a	Budget	Budget	Actual	YTD Var	Budget	Actual	Var
All Acute	£000	£000	£000	£000	£000	£000	£000
Pay	277,191	204,661	205,531	(870)	22,885	23,153	(267)
Supplies	62,875	44,265	43,640	626	4,957	5,061	(104)
Purchase of Healthcare	70,829	53,058	51,945	1,113	5,632	5,590	41
Provision of Healthcare	(27,337)	(20,483)	(20,476)	(7)	(2,278)	(2,339)	61
Operating Income	(1,496)	(1,276)	(1,325)	49	(59)	(64)	5
Unallocated Savings	(3,568)	(2,676)	0	(2,676)	(297)	0	(297)
Total	378,494	277,550	279,315	(1,764)	30,841	31,402	(561)

- 3.1.2 Overspends on medical pay of £1.7 million in the year to date are partially offset by a £0.9 million underspend on Healthcare Sciences and a £0.2 million underspend on radiographer staffing. Increasing medical agency expenditure (as shown graphically in section 5.6) is a major contributory factor to the overspend.
- 3.1.3 Supplies budgets show year to date overspends on drugs (£1.1 million), equipment and service contracts (£1.2 million) and taxis for patient care (£0.4 million) were offset by a £2.8 million underspend on surgical supplies caused by the reduction in surgical activity necessitated by COVID-19.
- 3.1.4 Unallocated Acute CRES is £3.6 million for the year and is contributing £0.3 million per month to the acute overspend in the absence of further plans.

- 3.1.5 Crosshouse medical wards are £3.3 million overspent in the year to date, whilst Ayr's medical wards are £2.5 million overspent due to service pressures resulting in the overspends outlined in paragraphs 3.1.2 and 3.1.3 as well as the unachieved CRES outlined in paragraph 3.1.4. Surgical wards are £1.0 million underspent on each main hospital site due to reduced elective activity. External Service Level agreements were £1.1 million under due to lower cost per case activity.
- 3.1.6 Looking at the acute directorate by area:

	Annual	YTD	YTD		Month	Month	Month
Table 1b	Budget	Budget	Actual	YTD Var	Budget	Actual	Var
All Acute	£000	£000	£000	£000	£000	£000	£000
Crosshouse	162,671	119,958	122,271	(2,313)	13,139	13,676	(537)
Ayr	119,672	88,815	89,944	(1,129)	9,834	10,215	(381)
External SLAs	63,147	47,612	46,491	1,121	5,064	4,965	99
High Cost Medicines	5,126	3,615	3,288	328	513	329	184
COVID	16,454	11,871	11,871	(0)	1,540	1,540	(0)
Medical Records	7,521	5,639	5,478	161	626	619	6
Management	3,903	39	(28)	67	125	58	67
Total	378,494	277,550	279,315	(1,764)	30,841	31,402	(561)

#### 3.2 Other Clinical Services

- 3.2.1 Other Clinical Services includes budgets for Pharmacy teams, the New Medicines Fund (NMF) and out of area activity such as brain injuries and transcatheter aortic valve implantation (TAVI) replacements. The annual budget is £26.9 million. It is overspent by £0.5 million in the year to date. The adverse variance is caused by the New Medicines Fund which is £1.5 million overspent in the year to date, and is expected to overspend by £2.35 million by year end. This is partially offset by underspends of £1.0 million year to date (forecast £1.35 million by year end) in out of area treatments and central pharmacy teams.
- 3.2.2 The Board are not able to influence spend on the NMF, and it is by nature high cost and low volume. It has a budget of £15.4 million, of which £3.6 million is from Scottish Government.
- 3.2.3 The table below lists those new medicines with particularly high overspend, using data available at month seven.

	Month 1-7 Total	Month 1-7	Month 1-7
	Spend	Budget	Overspend
Medicine	£000	£000	£000
Daratumumab	719	363	(356)
Durvalumab	122	0	(122)
Ivacaftor	1,019	120	(899)
Kaftrio	668	1,391	723
Trastuzumab Emantansine	191	63	(129)
Pembrolizumab	1,020	833	(187)
Venetoclax	135	39	(96)
Dabrafenib	221	119	(102)
Ipilimumab	474	187	(287)
Nivolumab	552	341	(212)
Total	5,121	3,455	(1,665)

3.2.4 Many NMF medicines have complex and material rebate arrangements, involving local and national usage triggers. An estimate of these benefits is included in the forecast year end position.

# 3.3 Health and Social Care Partnerships (HSCPs)

- 3.3.1 The total health budgets for the three HSCPs are £465.1 million. They are underspent by £4.0 million in aggregate at the end of December 2021.
- 3.3.2 Appendix 1 forecasts no net under or overspend outturn against the three HSCPs as these belong to Integration Joint Boards rather than the Health Board. However the East HSCP is underspent by £2.1 million, North HSCP by £0.9 million and South HSCP by £1.0 million.
- 3.3.3 The underspend in the East HSCP is due to high vacancy levels in community hospitals and mental health services, as well as underspends on Dental Services, Ayrshire Unscheduled Care Service and Primary Care, for which East is the lead partnership.

# 3.4 Infrastructure and Support Services

3.4.1 Infrastructure and Support Services includes estates, hotel services and information technology. They have an annual budget of £91.6 million. They are £0.1 million underspent against their year to date budget at month nine.

# 3.5 Corporate Services

3.5.1 Corporate Services have budgets of £46.3 million, with £10.7 million of this being the COVID-19 vaccination programme within Public Health. Corporate Services comprises Public Health, the Nursing Directorate, the Medical Directorate, Human Resources and Organisational Development, Finance, Transformation and Sustainability and the Chief Executive's office. These areas are £1.2 million underspent with £0.6 million of this being in the Public Health directorate.

### 3.6 Corporate Resource and Reserves

3.6.1 Reserves are £2.1 million overcommitted for the year to date. This is mostly a result of the underlying £12.1 million deficit being held centrally, offset by one-off benefits. A number of actual and anticipated allocations are held within reserves until allocated to departments, the largest being for COVID-19.

### 4. Efficiency and Transformation Programme

4.1 Following a risk assessment of our programme we expect to deliver £10.2 million of operational cash releasing efficiency savings (CRES) against a target of £13.7 million as shown in Appendix 4.

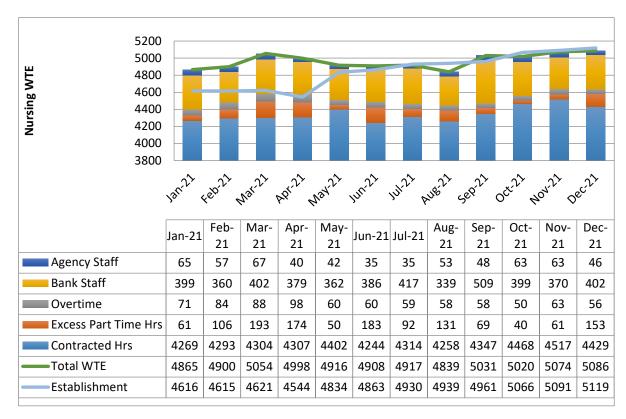
#### 5. Workforce

5.1 Against a funded establishment for the whole organisation of 10,558 whole time equivalent (WTE) staff, hours worked in December 2021 amounted to 10,303 WTE.

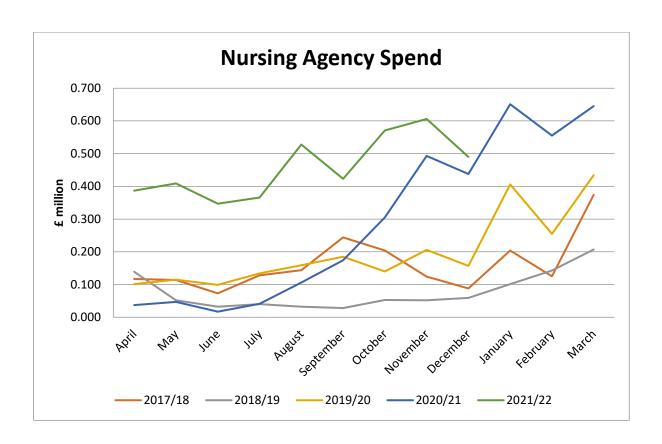
The table below shows the WTE staff used in the first nine months of 2021/2022. It then compares these with the average in 2020/2021 and 2019/2020. There has been a marked and sustained increase in WTE during the COVID-19 pandemic. 195 of these are for the COVID-19 vaccination programme and another 103 are for Test and Protect.

	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	2021-22	2020-21	2019-20
	WTE	Apr-Dec	Apr-Mar	Apr-Mar								
										Average	Average	Average
										WTE	WTE	WTE
Contracted Hrs	9,181	9,278	9,086	9,148	9,154	9,210	9,360	9,411	9,417	9,249	9,034	8,809
Excess Part Time Hrs	499	270	433	342	365	301	274	309	309	345	317	285
Overtime	161	101	102	108	101	103	98	111	104	110	116	93
Bank Staff	379	362	386	417	339	509	399	370	402	396	321	253
Agency Staff	70	73	66	60	73	76	87	84	71	73	55	60
Total WTE	10,290	10,084	10,073	10,075	10,032	10,199	10,218	10,285	10,303	10,173	9,843	9,500

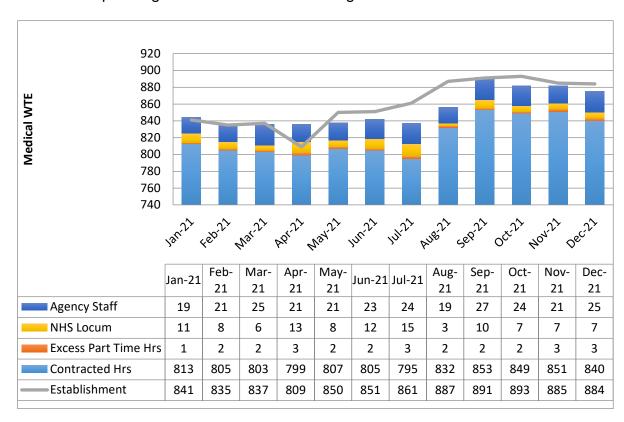
5.3 The graph below shows the trend for nursing staff. We were 33 WTE under our nursing establishment in month nine. This will include bank staff overtime, excess part time hours and agency as shown in the table below the graph.



5.4 The cumulative month nine nursing agency spend is £4.1 million. December agency spend was £0.5 million. The increasing reliance on agency is driven by COVID-19 and the requirement to temporarily staff additional unscheduled care beds in the acute hospitals. The graph below shows the trend in 2021/2022 and compares this with previous years.

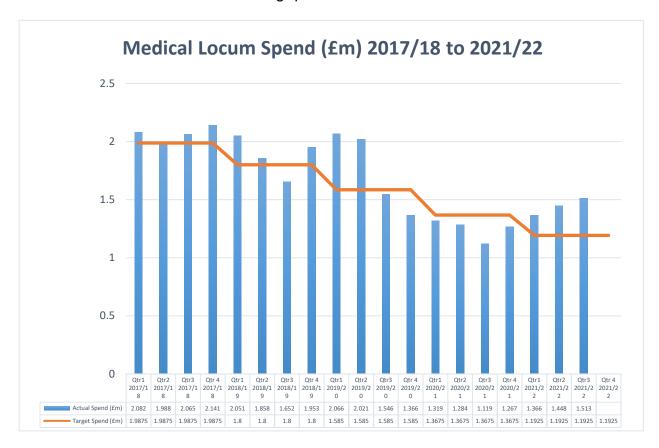


We used 875 WTE medical staff in December, including locums and agency, which was 9 under establishment. The high cost of some medical agency staff is a driver for an overspend against the medical staff budget.

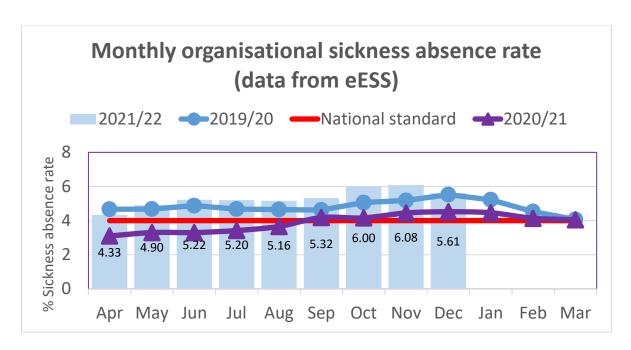


5.6 The graph below shows the trend in medical agency spend from quarter one of 2018/2019 to quarter three of this financial year. There is an increasing trend from

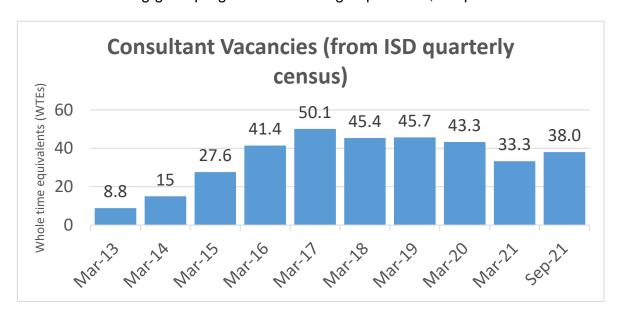
quarter three of 2020/2021. In this financial year to date we have spent £4.3 million, with £1.5 million incurred during quarter three 2021.



- 5.7 Staff sickness absence from work has organisational impact beyond the individual staff member, affecting other staff, service delivery, productivity and cost, where backfill arrangements have to be put in place.
- Driven by the Board's People Strategy, the Health, Safety & Wellbeing Improvement Plan identifies the programme of work being undertaken to improve staff health and wellbeing and, through the Promoting Attendance Policy, to have a clear process for appropriately managing staff sickness absence.
- 5.9 A national standard for sickness absence of 4% exists across NHS Scotland. The graph below shows our performance against this target. This excludes absence for COVID-19 shielding, isolation and absence.



5.10 The level of consultant vacancies is a main driver for expenditure on temporary medical staff. The graph below shows the trend over the last few years, with the Board now making good progress in recruiting to positions, despite a rise vacancies.



# 6. Risk assessment and mitigation

- 6.1 NHS Ayrshire & Arran posted a breakeven position in 2020/2021. This included non-recurrent funding for under delivery of CRES and being allowed to retain savings generated by reduced elective and outpatient activity.
- The position to date is ahead of the £12.1 million deficit plan, and would result in a £4.0 million deficit if extrapolated in a straight line. A more nuanced and detailed forecast anticipates that non-recurring support of £4.7 million is required in order to achieve an in year break even position.
- 6.3 Scottish Government have indicated they will fund all Health Boards to a breakeven position non recurringly in 2021/2022. To a very large extent this de-risks our 2021/2022 financial position.

- 6.4 GP Prescribing is likely to be £1.0 million overspent based on seven months of information. There remains considerable uncertainty over potential price changes, volume levels and volume phasing.
- 6.5 Not all CRES required to deliver the plan has been identified, and some CRES is high risk. The £3.5 million shortfall in Appendix 4 adds to our unachieved CRES and is to be refunded by Scottish Government through COVID-19 allocations.
- The ongoing recurring management of COVID-19 and Remobilisation will require additional recurring funding.
- 6.7 In year financial risks are negated by the content of section 6.3. The recurring challenge facing the Board is now the main financial risk.

#### 7. COVID-19 and Remobilisation Plans

- 7.1 The Board previously submitted Remobilisation Plan three for 2021/2022. This totalled circa £60 million including funding for council HSCP expenditure.
- 7.2 Subsequently the Financial Performance Report for Quarter one included an updated request for COVID-19 funding. This was scrutinised by Corporate Management Team and totalled £67.5 million.
- 7.3 The Financial Performance Report for Quarter Two was submitted based on Remobilisation Plan four and included a revised COVID-19 forecast. To date over £50 million of COVID-19 funding has been received and we expect to receive another £18.8 million. We will complete a revised forecast for Quarter Three by the end of January 2022.
- 7.4 Scottish Government have indicated the Financial Performance Report for Quarter 3 will be used to quantify and fund all COVID19 related expenditure.

#### 8. Capital Expenditure

- 8.1 The Board on 29 March 2021 approved capital spend of £21.9 million.
- £8.6 million of this was for the national forensic service for adolescents in Scotland, and due to escalating costs and a review process by NHS Assure the building work at Ayrshire Central Hospital has been delayed, and only foundations and preparatory work will now be completed this year, at a cost of around £3 million. The remaining £5.6 million will be given back to Scottish Government to be carried forward to next year.
- 8.3 Covid 19 demands on acute services have affected the 'high risk' projects in the plan, and therefore a further £1.6 million is being returned to SG to be made available next year, including for the ITU project.
- 8.4 Additional allocations not in the Board approved capital plan have been received or are being anticipated as follows:

	£ million
Purchase of East Ayrshire Community Hospital	12.000

SG – Infrastructure Board	5.591
SG funded electro-medical equipment	1.756
Net revenue to capital transfer	1.483
Endoscopy UHA 4th room	1.100
Staff Wellbeing Suites	1.000
Covid 19	0.629
SG – Cancer Funding	0.487
EV Infrastructure	0.077
UXH Hydronic System Feasibility	0.065
CT Pod	0.060
Transfer to NHS Lanarkshire	(0.225)

Appendix 5 shows in more detail the updated capital plan, amounting to £38.7 million and year to date spend against this of £16.5 million.

# Spend and Budget includes COVID-19 – December 2021

Income and Expenditure Summary for Health Services : Financial Year 2021/22 December

	Salaries				Supplies				Total				
	Galarios				oupplies			Total					
			/a.a.s.ta Data				/ t- Dota			,	Vanata Data		FOT
		) 	ear to Date			'	ear to Date	ı			Year to Date		M9
	Annual Budget				Annual Budget	_ ~			Annual Budget	_		_	_
	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Acute	277,191	204,661	205,531	(870)	101,303	72,889	73,784	(895)	378,494	277,550	279,315	(1,764)	(2,532)
East Hscp	57,748	41,827	39,290	2,537	142,878	101,320	101,752	(432)	200,626	143,147	141,041	2,105	0
North Hscp	84,887	60,663	59,437	1,226	80,707	58,916	59,248	(332)	165,595	119,579	118,685	894	0
South Hscp	30,756	22,965	21,829	1,136	68,183	50,741	50,870	(129)	98,938	73,706	72,699	1,007	0
HSCP underspends owed to IJBs	0	0	4,899	(4,899)	0	0	(893)	893	0	0	4,006	(4,006)	0
Other Clinical Services	9,969	7,478	6,874	604	16,929	12,488		(1,072)	26,898	19,966	20,434	(468)	(1,001)
Hospital Community and Family													
Health Services (section 1)	460,552	,	337,860	(266)		296,355	298,321	(1,967)		633,948	636,181	· /	
Chief Executive	916	687	679	8	37	27	5	22	953	714	684	30	41
Director Public Health	22,058	13,364	12,701	663	4,022	3,331	3,439	(108)	26,081	16,695	16,140	555	740
Medical Director	3,766	2,798	3,248	(450)	(2,423)	(1,851)	(2,208)	356	1,344	947	1,040	(94)	(125)
Nursing Director	6,625	4,570	4,108	462	(219)	(286)	(142)	(144)	6,406	4,284	3,966	318	424
Infrastructure Support Services	41,752	31,454	30,587	867	49,846	33,974	34,729	(755)	91,598	65,428	65,316	112	0
Finance	4,294	3,220	3,216	5	(645)	(484)	(522)	38	3,649	2,737	2,694	42	56
ORG and HR Development	5,655	4,103	3,900	203	346	180	218	(39)	6,001	4,283	4,118	164	219
West Of Scotland Region Ce	114	90	121	(31)	(114)	(432)	(464)	31	0	(342)	(342)	0	0
Transformation+sustainability	1,766	1,325	1,231	94	117	69	22	47	1,883	1,393	1,253	140	187
Clinical and Non Clinical Support	20.612	04.044	<b>50.7</b> 64	4.000	<b>50</b> 600	0.4.565	05.050	(550)	407.644	00.465	04.000	4.000	4 5 4 5
Services (Section 2)	86,946	61,611	59,791	1,820	50,968	34,527	35,079	(552)	137,914	96,138	94,869	1,269	1,543
Corporate Resource	(700)	(700)	(700)	0	7,186	2,219	2,141	78	6,486	1,519	1,441	78	0
Corporate Reserves	1,330	0	0	0	10,575	(2,146)	0	(2,146)	11,905	(2,146)	0	(2,146)	1,990
Corporate Resource and Reserves	630	(700)	(700)	0	17,760	73	2,141	(2,068)	18,391	(627)	1,441	(2,068)	1,990
NHS A&A Total	548,129	398,505	396,951	1,554	478,728	330,955	335,541	(4,586)	1,026,856	729,460	732,492	(3,032)	(0)
Antcipated COVID Funding	0	0	0	0	0	0	0	0	0	0	0	0	0
NHS A&A Total	548,129	398,505	396,951	1,554	478,728	330,955	335,541	(4,586)	1,026,856	729,460	732,492	(3,032)	(0)

# **COVID-19 Expenditure**

Catagory	COVID Funds	COVID Budget YTD £000	COVID Expenditure YTD £000
Category  Additional Hospital Bed Capacity/Costs - Maintaining Surge Capacity	13,404		9,455
Loss of Income	945	708	708
Additional staff overtime and enhancements	0	36	367
	1,809	1,191	1,694
Additional temporary staff spend - All Other  Medical Staffing	743	374	117
Additional temporary staff spend - Returning Staff			60
	0	0	0
Additional temporary staff spend - Student Nurses & AHP	1,372	533	
COVID-19 screening and testing for virus	·		533
Personal protective equipment	0	0	11
Equipment & Sundries	0000	0	59
Deep cleans	960	822	525
Digital, IT & Telephony Costs	100	100	179
Estates & Facilities cost including impact of physical distancing measures	0	0	(3)
Staffing support, including training & staff wellbeing	516	404	325
HR Staff Hub	0	0	82
Additional Temporary Staff - CNO Care Home Additional Responsibilities	458	321	321
IPC Team	224	98	98
Carehomes Peripatetic Team	341	95	95
Public Health	658	76	76
Covid - Covid Vaccinations	10,726		7,775
Ph Covid Health Protection	667	176	176
Covid - Mass Testing	2,690	1,003	
Contact Tracing Costs	4,398	3,322	3,322
Covid £500 Bonus	0	0	0
Reserves	12,383	0	0
Subtotal Health Board	52,394	26,978	
Community Hubs	1,852		
East HSCP _ Various	562	562	562
East Flu Vaccinations	15		
East Hscp Long Covid	240		
North HSCP - Various	667	667	667
North Hscp Long Covid	400		242
South HSCP - Various	138		
Biggart Beds	545		409
South Hscp Long Covid	135		1
Subtotal HSCPs	4,554	3,276	3,276
COVID-19 Return Total	56,948		· · · · ·
Mh Remobilisation Plan	463	463	
Redesign of Urgent Care	1,238	326	
South Mh Remob Plan	32	32	32
Subtotal Exclusions	1,733		821
YTD in COVID-19 Cost Centres	58,681	31,075	31,075

# Appendix3

		Earmarked	Non	
Category	Recurring	Recurring	Recurring	Total
- anogo.y	£'000	£'000	£'000	£'000
M8 Baseline Allocation	786,405	82,967	69,599	938,972
Scottish Trauma Network	·	291	·	291
Wellbeing In Primary Care		109		109
Mental Health Pharmacy		69		69
Pharmacy Champions		21		21
Pre-registration Pharmacist		(180)		(180)
Multi-disciplinary Teams		, ,	1,520	1,520
Combat Stress			1,424	1,424
Band 2-4 Additional Staff			1,106	1,106
Mdt Recruitment			243	243
Task Force - Adp Funds			217	217
Primary Medical Telephony			40	40
Inequalities Projects			30	30
Chronic Pain - Winter			16	16
Blood Pressure Monitoring			15	15
Neonatal Aph Role			13	13
Forensic Medical Improvement			10	10
Sub Total Allocations Received @ M9	786,405	83,278	74,233	943,917
Fhs Ncl	58,998			58,998
Primary Care Invest Fund		857		857
Distinction Awards		79		79
Discovery Top Slice		(40)		(40)
Ndc Topslice		(967)		(967)
Covid 21/22			18,271	18,271
Ailsa Demolition Ame			5,000	5,000
Del			900	900
Woodland View Depreciation			829	829
Ame Provision			723	723
Nsais Nat Secure Adolescent Inpatient Service			634	634
Rmp4 Hscp Items Excl Covid-19			555	555
Amu Ayrshire Maternity Unit			552	552
Ame Donated Asset Dep			400	400
Capital Sacrifice			296	296
Adp Drug Death Task Force			217	217
Office 365			200	200
Donations Not Sg			(300)	(300)
Scotstar			(369)	(369)
Child Hospice			(443)	(443)
Pet Scan			(618)	(618)
Golden Jubilee			(1,028)	(1,028)
Revenue Sacrifice			(1,806)	(1,806)
Total Received and Antcipated Allocations	845,404	83,207	98,246	1,026,857

# **Cash Releasing Efficieency Savings**

Plan v Forecast	£000	£000 M9 YTD	£000 M9 YTD	£000 YTD	£000 M9	£000 Forecast
Plan Area (operational)	Annual Plan	Plan	Actual	Variance		Variance @ M9
Chemotherapy	203	145	135	(10)	193	(10)
Frailty Pathway	150	0	0	0	0	(150)
Surgical Beds	280	140	0	(140)	0	(280)
Cardiology	134	101	101	0	134	0
Acute Medical Agency	500	375	(282)	(657)	(416)	(916)
Acute Other	2,134	1,617	482	(1,136)	654	(1,480)
Acute Prescribing	1,585	1,097	1,006	(90)	1,316	(269)
Primary Care Prescribing	2,300	1,647	1,519	(128)	2,080	(220)
External SLAs	2,000	1,500	1,500	0	2,000	0
HR	96	72	26	(47)	34	(62)
Finance	72	54	54	0	72	0
Public health	87	65	65	0	87	0
Chief Executive	63	46	46	0	63	0
Transformation & Sustainability	(25)	(19)	(19)	0	(25)	0
Medical Director (Corporate) &	192	141	141	0	192	0
Nursing directorate	94	70	70	0	94	0
EACH PFI Buyout	1,000	733	733	0	1,000	0
Travel Savings	454	340	340	0	454	0
Recombinant blood products	350	262	262	0	350	0
Energy	332	217	217	0	332	0
Estate Rationalisation	175	104	66	(38)	100	(75)
Infrastructure Support Services	1,528	868	883	15	1,529	0
Total	13,703	9,574	7,344	(2,230)	10,243	(3,460)

	Original Capital	Current Capital	Spend
Capital spend at 31 December 2021	Plan	Plan	to Date
Suprial Sporta at 01 Societies 2021	£000's	£000's	£000's
Electromedical Equipment	2,002	2,125	1,000
SG Equipment funding	0	1,756	88
SG Infrastructure	0	5,545	0
Cancer funding	0	487	0
Staff Wellbeing Suites - SG Allocation	0	1,000	26
Digital services	1,337	1,336	587
National Forensic Service in Scotland	8,600	3,000	750
Security / CCTV	150	150	106
Trauma/Orthopaedics	0	610	514
UHC Pre-Op Assessment	0	1,027	0
Ward 4A Upgrade	580	45	23
GP Premises Contingency	500	35	0
Endoscopy Decontamination	450	2,635	259
Endoscopy UHA 4th Room	0	1,100	2
Chemotherapy review	400	400	22
1B Forensic Exam	0	170	12
ITU Review	3,410	50	0
ACH Pavilions 10/11	0	307	26
Spend to save on revenue - energy	250	250	1
EV Infrastructure	0	77	77
Theatre Light Replacement Programme	75	75	4
Caring for Ayrshire	500	500	308
West of Scotland Laundry transfer	145	0	0
CDU Equipment Upgrade	200	294	10
Theatre Instrumentation	181	0	0
Urgent Replacements	72	72	37
Transfer of Resource for Vascular Theatre	62	0	0
UHA Dishwasher Replacement	0	218	10
COVID19	0	629	197
Value Adding from Estates Formula Revenue	750	750	256
Discharge Lounge	0	549	0
Purchase of EACH	0	12,000	12,000
Contingency on Capital Plan	477	503	0
Capital Prioritisation Projects	1,764	0	0
CT Pod	0	86	116
Student Accommodation	0	566	5
Aggregate schemes under £100k	0	383	98
Total spend	21,905	38,728	16,533