



Agenda Item No:

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Report to:	Humber and North Yorkshire Integrated Care Board
Date of Meeting:	11 September 2024
Subject:	Month 4 Finance Report
Director Sponsor:	Emma Sayner, Interim Executive Director of Finance & Investment
Author:	Dilani Gamble, Associate Director of Finance

STATUS OF THE REPORT:

Approve Discuss Assurance Information A Regulatory Requirement

SUMMARY OF REPORT:

This report presents the financial position, including NHS providers and the ICB, that is available for the system for the period ended 31 July 2024.

The ICS has reported a £50m deficit that is in line with the year-to-date plan at month 4. This demonstrates an improvement in year from the month 3 position. There is, however, further work on delivery in the remainder of the financial year to support full year delivery.

The system continues to focus on delivery of the 2024/25 financial position through the following forums:

- System Leaders Forum with responsibility for oversight of delivery and is the authorising environment for discretionary funds.
- Monthly DoFs and HRDs meeting aligning finance and workforce data and tracking delivery of efficiency.
- Weekly Directors of Finance meetings including NHSE regional representation to review key actions on a weekly basis with focus on profile delivery of financial improvement through to the end of the financial year.
- System Change and Delivery Group focused on prioritised 10 efficiency and productivity workstreams for the system.
- Multi-disciplinary summit to be convened mid-September 2024 to focus on set of clear delivery plans including milestones to support 2024/25 delivery and also to consider longer term opportunities.

System Financial Position - Revenue

- The month 4 position for the system is a deficit of £49.98m against a year-to-date plan deficit of £50.02m. This is an adverse year to date variance to plan of £0.04m.
- This is an improvement from the month 3 position mainly as a result of ERF delivery and reduction in clinical supplies costs.

System Financial Position - Capital

- Capital Expenditure, including all funding streams and IFRS, is underspent to date at month 5 mainly as a result of schemes starting later than planned. The forecast position

for the ICS is that expenditure will align with plan following confirmed adjustments for additional income to support provider specific schemes.

RECOMMENDATIONS:

Members are asked to:

- i. Note the month 4 system financial position for 2024/25.
- ii. Note the mitigating actions being pursued in year to deliver 2024/25 financial plan.

ICB STRATEGIC OBJECTIVE

Leading for Excellence	<input type="checkbox"/>
Leading for Prevention	<input type="checkbox"/>
Leading for Sustainability	<input checked="" type="checkbox"/>
Voice at the Heart	<input type="checkbox"/>

IMPLICATIONS

Quality	Deploying our resources in a way that manages quality and safety risks and supports improvement.
HR	Resources are deployed to facilitate effective deployment of workforce to deliver our agreed priorities.
Legal / Regulatory	NHS ICBs expected to operate within financial envelope and in line with formally approved financial plan.
Data Protection / IG	N/A
Health inequality / equality	Allocation methodologies to support delivery of the ICS four aims and resource utilisation in a way that addresses equality, diversity, and inclusion issues.
Conflict of Interest Aspects	N/A
Sustainability	Ensure that resources deployed in a way that promotes environmental sustainability. Capital spend subject to strict carbon footprint regulations.

ASSESSED RISK:

Revenue overspends – each organisation is managing this risk in line with their internal financial governance systems and processes. Monthly reports are collated and reviewed by the ICB and reported through to NHS England. Financial forecasts continue to be reviewed monthly.

MONITORING AND ASSURANCE:

The financial position is monitored on a monthly basis with a detailed report taken through the Finance Performance and Delivery committee.

ENGAGEMENT:

N/A

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No Yes

If yes, please detail the specific grounds for exemption.