

**NHS GOLDEN JUBILEE**

**SUMMARY FINANCIAL REPORT**

**August 2025/26**

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| **FINANCIAL POSITION –Summary Financial Report August 2025/26** |
| **EXECUTIVE SUMMARY** |
| 1. **Key Points as at end August 2025**  * NHS GJNUH reports a YTD surplus against plan of £1.140m. * Non-Core is on plan. * Capital expenditure plan for 2025/26 has been prioritised by the Capital Development Group (CDG) and was approved by the Strategic Capital Programme Group (SCPG) in August. * Efficiency workstreams of £8.358m have been identified and work continues to deliver in full by the year end. |
| 1. **2025/26 CORE INCOME & FUNDING POSITION**  |  |  | | --- | --- | | **Current Risk Rating** | **Medium** |  * Core RRL confirmed to-date is £134.140m of a total anticipated RRL of £201.026m. * No Capital resource has been received to-date against expected capital funding of £17.392m (£9.7 related to on-going Phase 2 WTOs). * No Non-Core resource has been received to-date against expected funding of £14.6m. |
| 1. **2025/26 CORE EXPENDITURE POSITION**   Core Expenditure is £1.062k or 0.95% below the Financial Plan at end August 2025.  **PAY COSTS**   |  |  | | --- | --- | | **Current Risk Rating** | **Low** |   Pay costs are underspent by £1.807m or 2.20% below the total pay budget.  Pressures remain across medical staffing areas relating to WLIs and agency incurred throughout the year.  **NON PAY COSTS**   |  |  | | --- | --- | | **Current Risk Rating** | **Medium** |   Non Pay costs remain overspent by (£0.746m) equating to -2.50% though the level of overspend has reduced compared to previous months. The Month 5 position reflects the cost of the activity undertaken against planned activity. Savings of £4.093m are also factored into the YTD position. |
| 1. **2024/25 EFFICIENCY REQUIREMENT**  |  |  | | --- | --- | | **Current Risk Rating** | **Medium** |   The (£8.358m) efficiency requirement within the Financial Plan has been split between Central Workstreams of £5.1m and Divisional Schemes of £3.2m.  To-date £4.093m of savings have been factored into the YTD position, largely being off-set through YTD underspends across Nursing and Admin vacancies. |
| **FINANCIAL REPORT – Month 5 as at end August 2025** |
| **NHS GOLDEN JUBILEE- OVERALL POSITION**  The YTD position as at Month 5 is a £1.140m surplus against plan  **Table 1** |
| **Main Drivers and Risks within the Reported Position**  **REVENUE RESOURCE LIMIT (RRL)**  £134.140m has been formally received in the August Allocation Letter - this is 67% of the actual anticipated total RRL. As we approach the end of the financial year both final Non-Core and Capital Allocations are confirmed.  In the month 5 Allocation Letter from SG we have received £20.80m for NES ADP activity.  NHS GJ Finance team continue to meet regularly with SG Finance team to ensure all Anticipated Allocations are still accurate and it is expected a significant proportion of RRL will be confirmed over the next few months.  **RISKS**   * Phase 1 and Phase 2 recruitment is assumed to be agreed as per funding last year, but the on-going recruitment in 2025/26 is yet to be finalised (£700k potentially). * Phase 2 utilities increase (over the part-year funding in 2024/25) is still to be finalised (£900k). * Recent meetings around Ophthalmology and Orthopaedic activity have confirmed an increase to the Ophthalmology ADP to 13,540 procedures with a potential increase of 40 joints to Orthopaedics. Funding is expected to be confirmed shortly to this effect.   **SERVICE LEVEL AGREEMENTS (SLA INCOME)**  Total income is **£78k** over-recovered at Month 5.  **Table 2**    **KEY RISKS**   * Total SLA income is currently based upon 2024/25 price base whilst agreement of 2025/26 SLA uplifts are finalised for inflation and NIC uplift. Currently £112k below plan YTD for   Non-WoS and TAVI activity.   * Over-performance on West of Scotland SLAs will not be funded given the nature of the fixed-block arrangement. * NSD activity above agreed profile may not be funded in full so has not been factored in to the YTD position as yet. |
| **CORE EXPENDITURE POSITION**  Total expenditure to date of £110.913m is below the year to date budget of £111.975m resulting in a surplus variance of £1.062m overall 0.95%.   * Pay Costs underspend of £1.807m, 2.20% * Non-Pay Costs overspend of (£0.746m), -1.50%   **PAY COSTS AT MONTH 5**  **Table 4 – Pay Costs**    **KEY RISKS AND ISSUES**   * **Medical Staff (-£286k) YTD overspend**   HL&D – CT Anaesthetics vacant PA’s but a Speciality Doctor has just been recruited so this should cover some gaps and reduce WLI costs. Cardiac Consultant has also been recently recruited and will start 6th October 2025.  NES – The majority of specialties remain overspent due to reliance on Agency and WLI but there has been a reduction in overspend this month – recruitment remains an issue. Ophthalmology now have three high-cost agency locum to move to Direct Engagement model.   * **Nursing Staff - £864k YTD underspend**   HL&D – Vacancies still remain high showing £114k underspend in Critical Care.  This is being partly covered by Bank and Agency.  NES – Theatre vacancies remain very high which is the main driver of the £632k underspend. Efficiency savings have also been taken from the slippage this month.  Additional part-time hours, OT, Bank and Agency are being used to cover the gaps.   * **Clinical Staff - £310k YTD underspend**   HL&D – Vacancies mainly within Cardiac Physiology – but Radiology continue to restructure their workforce.  NES – Optometrists, Physician Assistants and Rehabilitation are the main drivers of the underspend – currently recruiting to vacancies to cover all gaps.   * **Admin Staff - £810k YTD underspend**   NES and Corporate divisions are currently undergoing a review of the admin service.  Corporate has the majority of the admin vacancies within Finance, EHealth and HR. Recruitment has started in these areas.  NES - the majority is within Business Service departments.   * **Support Staff - £109k YTD underspend**   NES– CSPD are the main driver of the vacancy slippage in this category. Recruitment has now started for these vacancies.  **ACTIONS**   * Recruitment continues to be a challenge, with HR supporting the Divisions in prioritising filling vacancies. Hiring efforts are focused on the primary areas of concern. * There has been an increase in staff currently being employed through Direct Engagement – but there are now three high cost locum’s who continue to consider switching, costing the organisation £84k YTD in additional VAT costs. * Reduced Working Week meetings and calculations have all been completed and the final paper is with HR Senior Team who will take this forward to SG. * Ongoing communications with between NSD and NHS GJ Exec Team regarding the funding pressures within the SACCS service.   **NON PAY COSTS AT MONTH 5**  Total Non-Pay costs are overspent at end August by **(£0.746m) -2.50%**.  **Table 6 – Non-Pay Summary**    **KEY RISKS AND ISSUES**   * HL&D - Surgical Supplies – TAVIs are underperforming by 10 against plan * Pharmacy costs remain high within Critical Care due to the Anti-fungal drug costs increasing;   Dalteparin (which is used on the majority of patients to prevent prophylaxis) is also a risk as the costs are increasing significantly and Pharmacy are liaising with services to review alternative medicines available.   * NES – additional non-pay funding has now been released to the level of activity agreed in this year’s ADP – but there continues to be high spending issues mainly within Orthopaedics.   **ACTIONS**   * Pharmacy – A SLWG is has been set-up for clinical and pharmacy staff to identify alternative to Dalteparin. * EHealth to provide a time line for the Patient App Digital Development to go live (delayed due to staff changes). * NES - A detailed review of non-pay consumables is underway to pinpoint challenges in correctly funded, high expenditure categories. * TAVI 2025/26 – Letters were circulated by the Director of Finance to each WoS Health Boards, confirming the agreed activity levels for 2025/26. |
| **2025/26 EFFICIENCY REQUIREMENT**  The **(£8.358)** efficiency requirement within the Financial Plan has been split between Corporate Workstreams and Divisional targets as shown in the table below.      The actual current savings achieved YTD **(£4.093m)**. The majority of savings identified to date are non-recurring mainly relating to vacancy underspends. Work is continuing to identify recurring schemes as we move into 2026/27. |
| **Sustainability & Value**  Achieving the Balance Programme continues to be chaired by the DoF, providing support and  challenge to progress against efficiency schemes and agreement of deliverables throughout the  year. This is aligned to the SG 15 Box grid to ensure consistency in approach across National  saving workstreams. |
| **2025/26 CAPITAL INCOME AND EXPENDITURE**  Resource Formula for Capital expenditure has been confirmed as £2.8m for 2025/26.  With the increased capacity and associated equipment and infrastructure required to deliver this scale of increase in services within the NHSGJ over recent years, this places a significant level of risk on the Golden Jubilee’s replacement programme that have been previously highlighted in our 5 year plan.    Further funding that has been confirmed beyond the Core Formula Capital is:-   * Confirmed carry-forward of schemes approved in 2024/25, but not deliverable until 2025/26 - £961k * National Infrastructure Board funding - £1m * Business Continuity Planning funding - £740k * Turn-key works for implementation of CT scanner - £1m * Planned Phase 2 WTOs to be completed in 2025/26 – £9.7m * Sustainability Funding - £1.2m   The Table below provides a summary of the anticipated Capital Resource Limit (CRL) for 2025/26:  **Table 12**   |  |  |  | | --- | --- | --- | |  | Expected Allocation | YTD Spend | |  | £m | £m | | Formula Core Capital | 2.826 | 0.596 | | 24/25 carried forward | 0.961 | 0.441 | | NIB | 1.000 | 0.000 | | BCP | 0.740 | 0.000 | | CT Scanner – Implementation | 1.000 | 0.567 | | Sustainability | 1.165 | 0.000 | | **Total Core Capital Funding** | **7.692** | **1.604** | | Phase 2 | 9.700 | 0.568 | | **Total CRL Anticipated 2025/26** | **17.392** | **2.172** | |  |  |  | |

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| **Decision–**    **(1) Approve the Final Summary Financial Report as at 31st August 2025 (Month 5)** |

**Jonny Gamble**

**Director of Finance**

**NHS Golden Jubilee**