

Agenda item:	13
Date of meeting:	21 May 2025
Report to the:	Group Trust Board
Title of report:	NCHC March 2025 finance report
Report author:	Lucy Johnston, Head of Financial Management
Executive sponsor:	Emma Lunny, Interim Director of Finance
Recommendation:	Discuss

Assurance level:	<p><b>Substantial</b> <input type="checkbox"/></p> <p><b>Reasonable</b> <input checked="" type="checkbox"/></p> <p><b>Partial</b> <input type="checkbox"/></p> <p><b>Minimal</b> <input type="checkbox"/></p>
Rationale:	Results are not yet audited but have been subject to internal financial controls.

### How the report supports tackling Health Inequalities

Robust financial governance enables the delivery of the Trust's operational and strategic priorities, which supports the tackling of health inequalities.

### Links to Board Assurance Framework / Trust(s) Risk and Issue Registers

BAF risk G – in year finance risk.

### Legal and Regulatory requirements

A legal requirement to remain within the allotted revenue and capital department expenditure limits set by NHS England.

### Previous consideration by Committee or Executive

Reported to Board throughout the financial year.

### Executive summary

The Trust's full year adjusted financial performance was a surplus of £1,582k versus a plan of £1,500k, representing an £82k favourable variance.

The Trust's 2024/25 target of £8,362k for efficiencies was delivered. £4,618k of recurrent efficiencies were delivered, which was £1,527k lower than plan. This was offset by non-recurrent efficiencies being £1,527k higher than plan.

Spend on temporary staffing (bank and agency) was £6.5m, of which 93% related to clinical staff. £1,377k was spent on agency staff, which represents 1.1% of total pay costs and which is under the NHS England agency cap.

The Trust's cash balances remained high, at £42.3m. This represents 3.0 months of operating expenditure. Cash was £3.1m ahead of plan primarily due to trade creditors being £4.7m above plan (this converts to a lower level of cash outflow than planned).

The Trust spent £4.9m on capital during the year. After charitable funded assets and the net book value of disposals are taken into account this represents a charge of £4.6m against CDEL, £25k below the Trust's revised CDEL allocation.

The Willow project is complete and has been moved out of work in progress. The project was delivered within its revised capital envelope, which was £1m (5%) higher than the initial national capital grant. On its transfer out of work in progress and into an operational asset the unit was valued by the Trust's independent valuers and impaired by £7.6m (36% of cost). Such an impairment is typical for NHS builds when moved out of work in progress, and in this case is largely due to the significant cost of groundworks.

Better payment practice code (BPPC) exceeded the targeted level of 95% this month for quantity passed (96.4% achieved) and narrowly missed the value target (93.9% achieved).