Belfast Health and Social Care Trust

TRUST BOARD

MEETING	**Trust Board - Pubic**	**Ref No. 7.1**
DIRECTOR	**Director of Finance**	**Date**
2021/22 Month 4 Finance Report		
Purpose	• Finance performance report for (April-July 2021) • Update on 2021/22 financial deficit	
Corporate Objective	• Delivery of all corporate objectives, including statutory duty to breakeven	
Key areas for consideration	This paper provides: • a report on the Trust's actual performance at the end of July 2021 • An update on the financial position for 2021/22	
Recommendations/Actions	**This report is for discussion and noting.**	

Trust Board Financial Planning 2021/22

1. Executive Summary

1.1 The DoH opening allocation for 2021/22 includes additional funding of £495.2million, however only £52.1million of this represents recurrent mainstream funding which is to cover the Agenda for Change (AFC) pay increase in 2021/22.

1.2 The Trust began the year with an underlying recurrent opening deficit (before any pay and price inflation and other cost pressures in 2021/22) of £69.1m, which had built up over the last few years from undelivered savings and unfunded inescapable pressures.

1.3 For the last number of years the Trust has only been able to achieve financial balance because of substantial non-recurrent monies, obtained through a combination of additional Monitoring Round monies, in-year slippage on investments and other, often fortuitous, non-recurrent measures.

1.4 The HSCB indicative 2021/22 allocation, issued in May 2021, did not include any recurrent or non-recurrent funding to address prior year unmet savings targets or prior year unfunded inescapable pressures. DoH, through HSCB, also levied a new MORE pharmacy savings target, amounting to £3.8m, against which the Trust anticipates savings of £2.1m.

1.5 The Trust's draft financial plan, submitted at the end of May 2021, identified an anticipated deficit of £90m for 2021/22. This comprises the opening deficit (£69m), 2021/22 inescapable pressures net of anticipated income (£17.1m), Transformation and COVID-19 pressures (£16m), No More Silos pressures (£5.3m) and a shortfall on MORE pharmacy savings (£1.7m). The resultant financial gap has been reduced to reflect anticipated non-recurrent slippage on investments and accounting adjustment savings of £14.6m and savings in relation to downturn in elective care/other 'business as usual' spend due to COVID-19 of £4.7m.

1.6 In June, HSCB advised the Trust of some additional funding and agreed a number of planning assumptions around income and expenditure. They determined that No More Silos services would have to live within available funding of £2.7m, requiring a reduction of services within the urgent care centre and the deferral of planned community initiatives. HSCB also asked the Trust to assume that COVID-19 response costs would be funded in full and confirmed that transformation scheme surpluses could be offset against any transformation deficits. At the same time the Trust reviewed and revised its estimates in relation to in-year slippage and other non-recurrent cost reduction measures. The resulting deficit is £52m and an update financial plan has been submitted to HSCB and DoH.

1.7 No further income has been assumed in terms of additional non-recurrent funding from in-year Departmental Monitoring Rounds or additional centrally held slippage which have both provided significant in-year monies in previous years and have been a major factor in achieving breakeven in the HSC and the Belfast Trust in the past. At this point, unless additional funding is received, the Trust is clear that financial balance could not be achieved through efficiency alone and a breakeven plan would require savings to be generated from service downturn.

1.8 The Month 4 position is a £18.5m deficit and the forecast for the year is a deficit of £52m in line with the draft financial plan. Whilst it is too early in the year to identify any changing trends, there are some concerning areas of expenditure compared with the same period last year, including admin agency pay. It is important that budget holders continue to monitor spend against budgets and take early action where variances are emerging and spend run rates are rising.

2. 2021/22 Recurrent Opening Deficit

2.1 The Trust has an underlying recurrent opening deficit (before any pay and price inflation and other cost pressures in 2021/22) of £69.1m, which has built up over the last few years from undelivered savings and unfunded inescapable pressures, including pressures relating to superannuation auto enrolment, energy price increases, high cost placement of children and LD transitioning to adulthood. This can be summarised as follows:

	2021/22	
	£'m	£'m
Residual opening deficit 2018/19		**1.7**
2018/19 General Savings Target shortfall	9.7	
2019/20 General Savings Target shortfall	18.6	
2020/21 General Savings Target shortfall	18.4	
2018/19 unfunded pressures	11.2	
2019/20 unfunded pressures	8.2	
2020/21 unfunded pressures	1.3	
		67.4
Gross Opening Deficit for 2021/22		**69.1**

2.2 For the last number of years the Trust has only been able to achieve financial balance because of substantial non-recurrent monies, obtained through a combination of additional Monitoring Round monies, in-year slippage on investments (where planned investments have not started on time due to longer lead in times, workforce shortages etc) and other, often fortuitous, non-recurrent measures. In 2020/21, there were additional one-off underspends associated with the downturn in elective care/other 'business as usual' spend as a result of COVID-19. The scale of reliance on non-recurrent measures over the last two years is shown below:

	2019/20	**2020/21**
	£m	**£m**
N/R savings/slippage on investments	25	29
N/R funding	20	3
N/R transformation	19	14
Savings from COVID-related downturn in activity		29
TOTAL	**64**	**75**

2.3 The Trust cannot continue to manage its finances with such heavy reliance on non-recurrent funding and without the assurance of a fully funded recurrent baseline.

2.4 It should be noted that the Trust has made cash releasing and productivity savings in excess of £300m over the past 12 years. However, given the scale of savings achieved in that time against a background of an increasingly elderly population and associated health and social care needs, rising bed occupancy levels and recruitment difficulties which necessitates the use of high cost backfill, the opportunities for cash savings have reduced significantly. The Trust continues to seek and exploit any opportunities available, for example in high cost drugs, but has been unable to meet the circa £20m of additional savings per year required by DOH in the last three years.

2.5 In addition to the £69.1m opening recurrent deficit, there are other costs which had been funded non-recurrently in 2020/21 and before, which the Trust has committed to this year with DoH knowledge; these will require ongoing financial support on a recurrent basis to sustain, otherwise they will have to be stood down which will have service implications. For the first year in a number of years, Trusts have not received new demography monies this year despite continued demographic growth. Furthermore, anticipated additional funding in relation to the FYE of 2020/21 demography funding was significantly reduced to recurrently fund a range of regional transformation projects which has reduced the amount available to fund demographic growth pressures. Moreover, the Trust appears to have been disproportionately affected- whilst we identified transformation projects totalling £1.3m to be funded from top-sliced demography funding, the Belfast Trust's share of demography funding was reduced by circa £3m.

3. Detailed breakdown of 2021/22 Financial Position

3.1 The DoH opening allocation for 2021/22 includes additional funding of £495.2million, however only £52.1million of this represents recurrent mainstream funding which is to cover the Agenda for Change (AFC) pay increase in 2021/22. The remaining allocation is non recurrent and is planned to be used to fund COVID-19 expenditure tails, COVID-19 rebuild costs, COVID vaccination deployment, NDNA initiatives, other inflationary uplifts and limited demography and transformation investment.

3.2 Although the Belfast Trust ended the 2020/21 financial year in a balanced financial position, this was only achieved, as was the case in previous financial years, through a combination of substantial non-recurrent funding from HSCB, one-off accounting measures, and both internal and HSCB slippage on a number of service developments and downturn in elective care/other business as usual spend due to COVID-19. The year-end outturn position does not therefore adequately reflect the severe financial challenges encountered in 2020/21 which have had to be factored into the recurrent underlying position.

3.3 The HSCB indicative 2021/22 allocation, issued in May 2021, did not include any recurrent or non recurrent funding to address previous year unmet savings targets or historical inescapable pressures. At the same time, no additional efficiency savings target was imposed this year with the exception of a MORE pharmacy savings target of £3.76m. After years of sustained significant savings, this will be the first year that the Trust expects not to be able to achieve its full pharmacy savings target with forecast savings of £2.06m. The resulting residual initial deficit was £89.7m.

3.4 In late June 2021, HSCB issued further guidance regarding income and expenditure assumptions. At the same time, the Trust reviewed its estimate of further non-recurrent savings in relation to new investment slippage. As a result, the financial position has been revised to £52m. Annex A gives a detailed breakdown of the deficit. It should be stressed that the Trust has been advised to assume that COVID-19 response costs will be met in full, that transformation slippage can be offset against transformation deficits and that No More Silos services can be reduced to the funding provided of £2.7m, with the exception of the GP Out of hours cost pressure. The Trust has also been told to assume that projected costs in relation to holiday pay and sick pay overtime can be maintained at 2020/21 accrued levels. A summary of the revised financial position is below:

Residual Deficit after income and savings

	£'m
Residual opening deficit 2018/19	**1.7**
2018/19 General Savings Target shortfall	9.7
2019/20 General Savings Target shortfall	18.6
2018/19 unfunded pressures	11.2
2019/20 unfunded pressures	8.2
2020/21 General Savings Target shortfall	18.3
2020/21 unfunded pressures	1.3
2021/22 opening pressures	13.9
Opening deficit 2021/22	**83.0**
Income for pressures	(7.6)
COVID-19 pressure	0.0
Transformation pressure	1.7
NMS pressure	1.0
2021/22 MORE pharmacy shortfall	1.7
2021/22 savings	(27.7)
Revised deficit 2021/22	**52.0**

3.5 The 2021/22 savings of £27.7m include £5.1m of savings in relation to downturn in elective care/other 'business as usual' spend due to COVID-19 in the context of services returning to normal levels of activity, as well a range of other recurrent and non recurrent saving measures, as summarised in table below:

Recurrent and non recurrent savings	**2021/22 £'m**
Anticipated BAU spend reductions	5.10
Anticipated demography slippage	0.50
Procurement rebates	0.50
Research & Development change in accounting treatment	0.85
Estimated investment slippage	7.12
Planned recurrent savings	0.65
Non recurrent savings re one-off drug rebates	4.00
Other non-recurrent accounting measures	9.00
	27.72

3.6 Further information has been sought from HSCB and DoH regarding slippage on investments for which funding is held centrally in order to set this against the projected gap, but no further non recurrent income or slippage has been assumed at this stage. The HSCB are currently working to identify any further slippage that may be held centrally for allocation.

3.7 Nothing has been assumed in terms of additional non-recurrent funding from in-year Departmental Monitoring Rounds which have provided significant in-year monies in previous years and have been a major factor in achieving breakeven in the HSC and the Belfast Trust in the past.

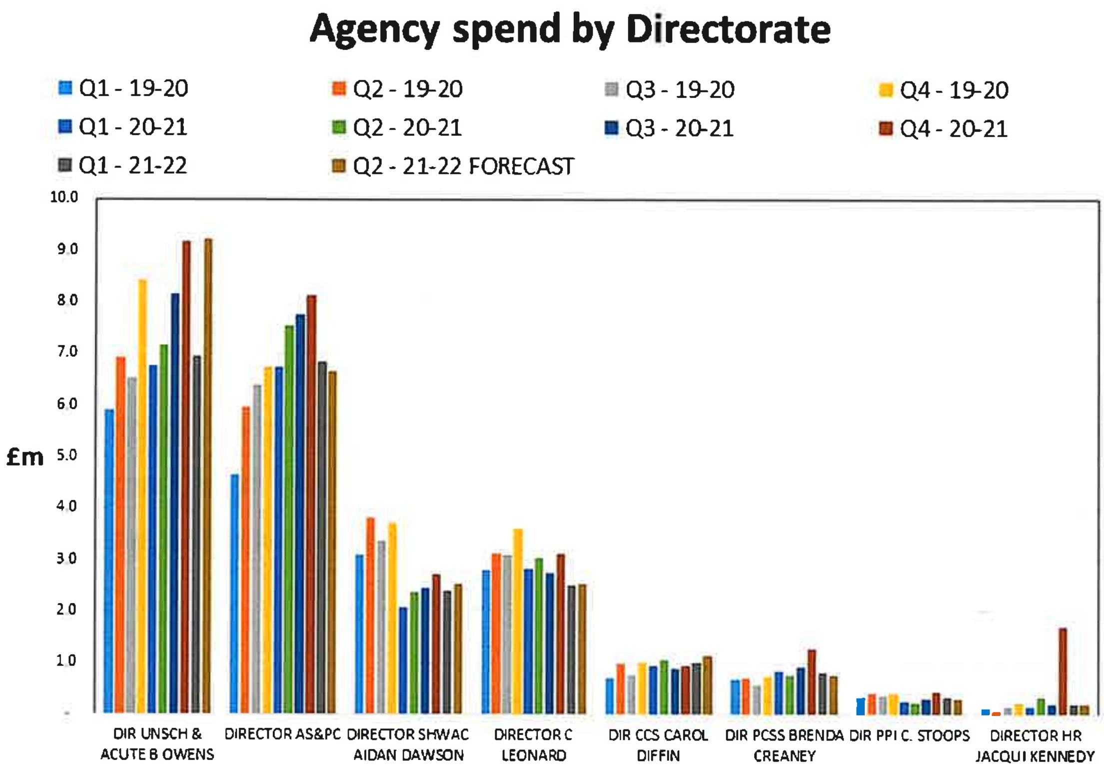
3.8 Beyond the efficiencies identified above and the work already progressed through the Trust's MORE programme, the only other options available to significantly reduce the residual deficit are likely to have significant local and regional service impact. The Trust acknowledges that it has a statutory obligation to deliver a breakeven position each year. At this point, unless additional funding is received, the Trust is clear that financial balance could not be achieved through efficiency alone and a breakeven plan would require savings to be generated from service downturn.

4. Financial Performance at 31 July 2021

4.1 At the end of July 2021, the Trust is showing a £18.5m deficit, which pro-rated gives a deficit of £55.5m forecast at year end which is in £3m higher that the draft financial position due to the fact not all slippage and accounting adjustments have been achieved, although this is still the expectation. Spend this year to date on COVID-19 is £23.6m, including £10.4m PPE, £3.5m additional staffing costs and £4m service delivery costs. The spend on transformation projects is £5.2m including £1m on mental health transformation, FYE forecast is £17.7m. Annex B details the forecast COVID-19 spend for the year, which at this stage the Trust is assuming will be fully funded.

4.2 The underspends being seen within G&S in the large acute directorates due to the underperformance against funded activity have decreased in comparison to last year as expected due to increasing activity levels. The underspends for the first four months were circa £2.1m. This underspend is primarily being offset against prior year unmet savings targets. It should be noted that the underspends are being removed from directorates and held centrally. There is a significant pressure in relation to LD community placements and the Trust is looking to apply any underspends in resettlements in year to offset this increasing spend. Spend in relation to domiciliary care has also significantly increased, especially in discharge to assess. Currently underspend in the nursing and residential home spend is offsetting some of this pressure.

4.3 The ongoing pressure in relation to workforce continues in 2021/22. Agency is £800k (3%) higher than the first four months of last year with significant increases being seen in nursing (£402k, 2%), admin (£450k, 15%) and social services (£225k 10%). This would represent a significant increase pay overspend for the year if this rate of spend continues. The graph below shows agency costs for quarter 1, 2, 3, and Q4 2019/20 & 2020/21 against Q1 and forecast Q2 2021/22.



4.5 The financial position at 31 July 2021, by directorate, is shown below:

Summary Position by Directorate at end July 2021

Directorate	Budget £'000	Spend £'000	Variance £'000
Specialist Hospitals & Women's Health	70,022	72,354	**2,332**
Adult Social & Primary Care	140,455	141,823	**1,368**
Surgery & Specialist Services	111,024	111,430	**406**
Unscheduled & Acute Care	135,217	137,685	**2,468**
Children's Community Services	29,133	29,518	**386**
Finance, Estates & Capital Development	13,453	13,044	**(409)**
Nursing & User Experience	29,826	29,035	**(791)**
Other including Corporate Directorates	41,551	54,304	**12,753**
Total	**570,680**	**589,194**	**18,514**

Note: There is also a small income surplus of £32k which, added to the deficit above, gives deficit of £18.5m.

5. Summary Capital Position

5.1 The Trust's latest Capital Resource Limit (CRL) issued by the Department of Health for 2021/22 is dated 1st July 2021.

5.2 The total capital allocation is £67.13m. This consists of specific schemes totalling £35.07m and a general capital allocation of £32.06m.

5.3 The Trust's projected capital outturn position for 2021/22 is breakeven. The progress of schemes throughout the year will be monitored each month and should there be any changes identified to the annual spend profiles, these will be highlighted.

Summary High Level Opening Gap 2021/22 after savings **ANNEX A**

	2021/22 £'m	2021/22 £'m
Residual opening deficit 2018/19		**1.68**
2018/19 General Savings Target shortfall	9.70	
2019/20 General Savings Target shortfall	18.60	
2018/19 unfunded pressures	11.56	
2019/20 unfunded pressures	8.73	
		48.59
Gross Opening Deficit for 2020/21		**50.27**
2020/21 savings		
Target		
MORE pharmacy	3.89	
General efficiency	18.45	
		22.33
Gross Opening Deficit after saving target in 2020/21		**72.60**
Recurrent pharmacy savings	(3.89)	
		(3.89)
Gross Opening Deficit after recurrent saving in 2020/21		**68.71**
Income for 18/19 pressures	(0.35)	
Income/reduction for 19/20 pressures	(0.50)	
other recurrent savings (go against 18/19 target)	(0.10)	
		(0.95)
Adjusted deficit to allow for savings/adjustment to opening deficit		**67.76**
20/21 unfunded pressures	1.29	
20/21 expected FYE demography	3.41	
20/21 Demography funding received	(3.39)	
		1.30
Revised Deficit after new 20/21 emerging pressures		**69.07**
21/22 opening pressures	13.92	
Income received to reduce pressures	(7.60)	
Shortfall on transformation	1.67	
Shortfall on NMS	1.00	
21/22 MORE pharmacy savings target	3.76	
2021/22 MORE pharmacy savings	(2.06)	
Non recurrent slippage on investments & accounting adjustments	(14.58)	
Downturn in BAU	(4.70)	
Further downturn BAU	(0.40)	
Further non recurrent slippage	(8.04)	
		(17.03)
Closing deficit 21/22 including savings		**52.04**

COVID 19 forecast spend and funding

ANNEX B

Analysis of CoViD-19 Expenditure		Outturn Year to Date Actual	Outturn End of Year Forecast
Description		£k	£k
Workforce			
	Additional staffing costs	1,737	6,900
	Travel/subistence/hotels	70	150
	Payments for unsociable hours/ overtime	176	757
	Agency costs	222	1,085
	enhanced nursing	272	1,600
	additional medical payments	124	1,300
	THRIVE (PTSD Pilot)	8	434
	Band 5-6 for ICU/respiratory	198	1,282
	Infection control (IPC)	41	140
	CCANI		870
	Overtime Band 8+	434	760
	AHP supervision		180
	AHP student trainees	83	993
	Cancer recovery plan- 6 B5 Diagnostic Radiographer		133
	Phlebotomy- additional staffing	44	170
	Pharmacy Workforce Resilience		36
	NORTHERN IRELAND PALLIATIVE CARE PHARMACY ALLIANCE (NIPCPA)		-
	Occupational health	103	649
	Support for LAMP testing		33
Service Delivery			
	Pathology/Laboratory Costs	150	758
	Regional Virology Laboratory Extended Working Day	1,540	9,526
	WGS FOR SARS -COV-2	537	1,894
	Child Protection Costs	163	500
	Independent Care Beds	80	236
	Grant payment to homes		-
	PMO posts & oversight group	90	270
	Psychological support for staff	47	140
	Remote Monitoring for Home Pacing		86
	Additional Dom care support		
	Beechall community covid	292	800
	Echo services	10	51
	support to care homes	13	250
	Covid swabbing centre	240	1,300
	Vaccination centre	934	1,700
Infrastructure			
	Consumable costs / IPC / Oxygen	32	240
	Estates Related Work	665	2,987
	COBAS	47	142
Equipment and Supply			
	PPE	10,121	32,000
	PPE Stores	25	951
	FIT testing	287	1,004
Digital and Communications			
	IT costs (e.g. remote working costs/ Teleconferencing)		
	Application Development		
	Application Maintenance		106
Corporate			
	Cleaning / Deep Cleans		
	Loss of Income Car Parking	631	1,225
	Loss of income- catering	578	1,150
	Loss of income- client contributions	630	3,000
	Loss of income- Private patients	508	1,138
	Loss of income- Other	291	558

Other		
IS Support for rebuilding HSC services		
RCCE	**500**	1,500
flu vaccinators		150
flu vaccinator for secondary school children		120
Social distancing restart of services	**39**	132
Reidential childrens homes care support	**75**	212
NI Pharmacy Rx info		-
School of dentistry		525
ICU follow up		
Oxygen generator servicing and recalibration		228
0.8% inflationary uplift for care homes	321	964
Cardiac Ct Fractional flow reserve		42
medicine delivery service	34	136
Mental health in-patient bed pressures	**30**	100
Cath labs- SHSCT to BHSCT		565
HIV PREP		240
CR118 - Cancer Recovery Plan – Oncology Haematology Stabilisation		570
CR122 - Long-Term Health Effects of Covid-19 infection		238
CR133 - Covid 19 Orthopaedic Integrated Clinical Assessment and Treatment Service		125
NMS	1,200	3,600
SUB TOTAL -ADDITIONAL COSTS	**23,622**	**88,931**

TABLE 1 **NET EXPENDITURE ACCOUNT** **Jul-21**	**Year to Date**		
	Budget	**Actual**	**Variance**
	£'000	**£'000**	**£'000**
Expenditure:			
Staff costs	354,795	359,593	4,798
Depreciation:	21,966	21,966	0
Other expenditure	215,885	229,601	13,716
Total expenditure	592,646	611,160	18,514
Income:			
Income from activities	16,322	16,332	10
Other income	21,270	21,293	23
Total income	37,592	37,625	33
Net expenditure	**555,054**	**573,535**	**18,481**
Less adjustments:			
Profit / (loss) on disposal of fixed assets	0	0	0
Depreciation	(19,754)	(19,754)	0
Amortisation	(2,212)	(2,212)	0
Impairments	0	0	0
Total adjustments	(21,966)	(21,966)	0
Net resource outturn	**533,088**	**551,569**	**18,481**
Calculation of Revenue Resource Limit (RRL)			
Allocation from HSCB	518,805	518,805	0
Allocation from PHA	6,726	6,726	0
DHSSPS non-cash RRL issued	0	0	0
SUMDE & NIMDTA (now only NIMDTA-SUMDE under HSCB RRL)	7,557	7,557	0
Revenue Resource Limit	**533,088**	**533,088**	**0**
Surplus / deficit against RRL	**0**	**(18,481)**	**(18,481)**

TABLE 2 - BALANCE SHEET		Actual 01/04/21 £k	Actual YTD £k	Forecast 31/03/22 £k	Original plan 31/03/22 £k
	FIXED ASSETS				
	Tangible assets				
1.1	- Land	111,919	111,918	111,918	111,918
1.2	- Buildings, installations and fittings	1,018,748	1,006,375	1,029,089	1,029,089
1.3	- Computer equipment	24,611	22,062	33,423	33,423
1.4	- Other equipment	85,528	80,696	96,756	96,756
1.5	- Assets under construction	109,557	117,873	134,596	134,596
1.6	**Total tangible assets**	**1,350,363**	**1,338,924**	**1,405,782**	**1,405,782**
1.7	Intangible assets	24,875	22,663	25,124	25,124
1.8	Financial assets	-	-	-	-
1.9	**Total non-current assets**	**1,375,238**	**1,361,587**	**1,430,906**	**1,430,906**
	CURRENT ASSETS				
2.1	Stocks and work in progress	20,604	21,697	20,100	20,100
2.2	Debtors: amounts falling due within one year	56,862	54,304	50,750	50,750
2.3	Debtors: amounts falling due after more than one year	-	-	-	-
2.4	Short term investments	-	-	-	-
2.5	Cash at bank and in hand	13,272	45,290	15,500	15,500
2.6	**Total current assets**	**90,738**	**121,291**	**86,350**	**86,350**
3.0	CREDITORS: amounts falling due within one year (-)	- 334,589	- 256,750	- 304,500	- 304,500
4.0	**NET CURRENT ASSETS / (LIABILITIES)**	(243,851)	(135,459)	(218,150)	(218,150)
5.0	**TOTAL ASSETS LESS CURRENT LIABILITIES**	1,131,387	1,226,128	1,212,756	1,212,756
6.0	CREDITORS: amounts falling due after more than one year (-)	- 10,598	- 10,598	- 9,850	- 9,850
		-	-	-	-
7.0	PROVISIONS FOR LIABILITIES AND CHARGES (-)	- 129,544	- 131,062	- 126,025	- 127,814
8.0	**TOTAL ASSETS EMPLOYED**	**991,245**	**1,084,468**	**1,076,881**	**1,075,092**
	FINANCED BY:				
9.0	Revaluation reserve	364,486	364,487	364,205	364,205
10.0	Donation reserve	-	-	-	-
11.0	Other reserves	-	-	-	-
12.0	General fund	626,759	719,981	712,676	710,887
		991,245	**1,084,468**	**1,076,881**	**1,075,092**

TABLE 2(a) - CALCULATION OF AVERAGE RELEVANT NET ASSETS AND COST OF CAPITAL CHARGE		0 £k	0 £k	0 £k
13.0	Total capital and reserves	991,245	1,076,881	1,034,063
	less:			
14.0	Donation reserve (-)	0	0	0
	plus:			
15.0	Interest Bearing Debt (NIAS only)	0	0	0
16.0	Relevant Net Assets	991,245	1,076,881	1,034,063
17.0	**FORECAST COST OF CAPITAL AT 3.5%**			**36,192**

Table 3

Belfast Trust

Salaries & Wages Supplementary Schedule

Pay Cumulative to the end of	Jul 21		
Directorate	Cumulative Budget £'000	Cumulative Expenditure £'000	Cumulative Variance £'000
Specialist Hospitals & Women's Health	50,887	52,547	1,660
Adult Social & Primary Care	75,018	75,451	433
Surgery & Specialist Services	63,548	64,479	931
Unscheduled & Acute Care	97,512	100,406	2,894
Children's Community Services	18,390	18,410	20
Finance, Estates & Capital Development	8,687	8,089	(598)
Nursing & User Experience	23,880	23,365	(515)
Other Pay including Corporate Directorates	16,873	16,846	(27)
Total Salaries & Wages	354,795	359,593	4,798

Table 4

Belfast Trust

Goods & Services Supplementary Schedule

Goods Cumulative to the end of	Jul 21		
Directorate	Cumulative Budget £'000	Cumulative Expenditure £'000	Cumulative Variance £'000
Specialist Hospitals & Women's Health	19,135	19,807	672
Adult Social & Primary Care	65,437	66,372	935
Surgery & Specialist Services	47,476	46,951	(525)
Unscheduled & Acute Care	37,705	37,279	(426)
Children's Community Services	10,743	11,108	366
Finance, Estates & Capital Development	4,766	4,955	189
Nursing & User Experience	5,946	5,670	(276)
Other G&S including Corporate Directorates	24,678	37,458	12,780
Total Goods & Services	215,885	229,601	13,714

TABLE 5
CAPITAL EXPENDITURE (excluding donated assets)

	Project Business Case Status	Scheme Description	Actual Capital Expenditure to date 2021/22 £k	Forecast Total Expenditure 2021/22 £k	Notified CRL 2021/22 £k
Major capital and other specifically funded schemes	Approved schemes	RVH Maternity New Build	0	12,183,724	12,183,724
		RVH - Regional Children's Hospital Enabling and Ener	0	4,964,515	4,964,515
		RVH - Children's Hospital Site Infrastructure	0	5,224,101	5,224,101
		RGH Energy Centre	0	3,252,245	3,252,245
		Belfast Trust R&D Commerical Income Spend	0	6,000,000	6,000,000
		Glenmona Resource Centre	0	341,572	341,572
		100,000 Genomes R&D	0	0	0
		100,000 Genomes Capital Items	0	211,619	211,619
		GP Improvement Scheme Trust Owned	0	280,000	280,000
		Regional Radio-pharmacy Facility	0	369,883	369,883
		Invest to Save	0	1,160,000	1,160,000
		ICT	0	8,245,339	8,245,339
		0	0	0	0
		0	-	-	-
		0	-	-	-
Sub total			**0**	**42,232,998**	**42,232,998**
		0	-	-	-
Delegated schemes funded from general capital and other local resources		0	-	-	-
		0	-	-	-
		0	-	-	-
		0	-	-	-
		0	-	-	-
		0	-	-	-
		0	-	-	-
Sub total			**0**	**0**	**0**
Total			**0**	**42,232,998**	**42,232,998**
(Over)/Underspend against the CRL					

Project Business Case Status : Approved Schemes are classified as schemes for which business case approval has been confirmed by the Planning and Performance Management Directorate. Unapproved schemes are classified as schemes for which business case approval has not been confirmed by the Planning and Performance Management Directorate.

****Please provide an explanation of any variance included in column G on a scheme by scheme basis**

Table 5(a) Details of Trust Asset Disposal and Re-investment		Year to Date £k	Forecast 2019/20 £k
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0