

HSC FINANCE SCRUTINY QUESTIONS

1. Please summarise the Trust's 2017/18 financial plan – i.e. your start position, agreed control total, key elements of the plan including STF (sustainability and transformation funding).

- The planned surplus for the year is £1,747K.
- The agreed control total is £1,972K, which includes £916K of STF.

2. Please set out your current 2017/18 forecast outturn position and key risks to delivery.

- As of the end of Month 6, the Trust is forecasting to achieve a surplus of £544K, resulting in an adverse position of £1,203K. When adjusting for the transfer of the Parkway property to NHS Property Services and depreciation on donated assets, the Trust is forecasting to exceed the performance against control total by £8K (which is £1,980K). (The NHS has two measures when reporting its financial performance:
 - The first is its retained position, for HCT this is £544k.
 - As the property transfer is intra NHS this gets adjusted back. Improving the HCT position back to the £1.9m.
- Key risks that may impact in delivering the forecast:

Risk/Opportunity	RAG Rating/Risk Score	Risk Assessed Value £'000
Planned sale of properties does not deliver expected savings.	5	(192)
Cost Improvement Plans - Customer Service Transformation	25	(500)
Cost Improvement Plans - Renegotiate E&NH Trust Service Level Agreement	16	(320)
100% of CQUIN targets are not achieved.	16	(160)
Loss of overhead for Rapid Response Service Decommissioning in October 2017	12	(240)
NHSE Contract 16/17 Over performance Income	12	(38)
Total		(1,450)

3. Please identify any significant commissioning / contractual issues not yet reflected into the 2017/18 plan (i.e. differences between commissioner and provider positions)

For HCT there have been no formal contract challenges to date.

HCT are anticipating potential changes to the income forecast as a result of future contract variations as follows:

- Nascot Lawn

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- Potential market testing of Heart Failure and Cardiac Rehabilitation Services, Community Diabetes Service, and Development of Podiatry Services.

Herts Valley CCG has also announced its plans to recommission Adult Community Services for the west of Hertfordshire through open market procurement. This includes the following services **that HCT currently provides**:

- Integrated Community Nursing and Therapy Services
- Community Intermediate Care Beds
- Specialist Palliative Care
- Bladder and Bowel
- Adult Speech and Language
- Lymphoedema
- Leg Ulcer and Tissue Viability Services
- Community Neuro Rehabilitation Service
- Podiatry (excluding Diabetes)
- Nutrition and Dietetics

HCT will be working closely with Herts Valley CCG and our other partners throughout this process to ensure we are in position to put in a winning bid for the services.

4. Please summarise your 2017/18 savings plans, current progress and expected impacts / key risks.

SRC Overview of CIP Performance 2017/18

CIP by Programme

	In Month £'000			Year to Date £'000			Forecast Year End Achievement £'000		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
Operational Productivity	192	19	(173)	1,152	1,382	230	2,304	2,304	
Lord Carter Review	50	50		300	300		600	600	
SLA Review	42		(42)	250	74	(176)	500	500	
Customer Service Transformation	42		(42)	250		(250)	500		(500)
Other Savings plans	95	291	196	571	766	196	1,141	1,641	500
Estates & Infrastructure	12	73	60	73	73		145	145	
Total CIPs	432	432	(0)	2,595	2,595		5,190	5,190	-

The Trust is expecting to fully meet its 2017/18 saving plan and year date is delivering, in total, the expected level. Although the actual delivery of the schemes is different to that originally planned.

5. Please summarise CQUINs that apply to your organisation in 2017/18, financial value and expected outturn position

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Goal reference (National CQUIN)	Indicator name	Provider type relevant for
Indicator number		
1a	Improvement of health and wellbeing of NHS staff	Community
1b	Healthy food for NHS staff, visitors and patients	Community
1c	Improving the uptake of flu vaccinations for frontline clinical staff	Community
8b	Supporting proactive and safe discharge (Community)	Community
9a	Preventing ill health by risky behaviours - alcohol and tobacco: Tobacco screening	Community
9b	Preventing ill health by risky behaviours - alcohol and tobacco: Tobacco brief advice	Community
9c	Preventing ill health by risky behaviours - alcohol and tobacco: Tobacco referral and medication	Community
9d	Preventing ill health by risky behaviours - alcohol and tobacco: Alcohol screening	Community
9e	Preventing ill health by risky behaviours - alcohol and tobacco: Alcohol brief advice or referral	Community
10	Improving the assessment of wounds	Community
11	Personalised care and support planning	Community

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	Annual Plan				Forecast			
	Total	STP	CT	CQUIN	Total	STP	CT	CQUIN
% of total contact	2.50%	0.50%	0.50%	1.50%	2.50%	0.50%	0.50%	1.50%
% of 2.5% CQUIN		20.00%	20.00%	60.00%		20.00%	20.00%	60.00%
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
ENCCG	977	195	195	586	977	195	195	586
HVCCG	1,289	258	258	773	1,238	248	248	743
West Essex CCG / Essex County Council								
NHS England (H&S LAT)	18	4	4	11	18	4	4	11
C&P CCG	39	8	8	23	38	8	8	23
BEDFORDSHIRE	6	1	1	4	6	1	1	4
Total*	2,328	466	466	1,397	2,276	455	455	1,366

*excludes Business Unit CQUIN income, value c£30k

The CQUIN is also indicated in the risk table below:

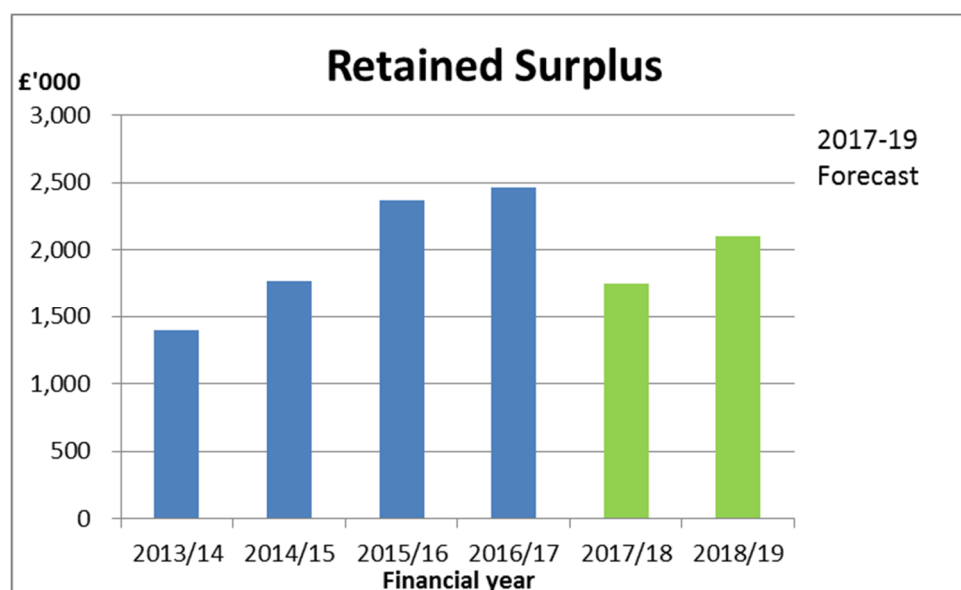
Risk/Opportunity	RAG Rating/Risk Score	Risk Assessed Value £'000
100% of CQUIN targets are not achieved.	16	(160)

6. Please set out the longer term financial outlook for your organisation and summarise the key elements of your longer term financial sustainability plan

See combined answer with below question

7. How has the Trust reviewed its effectiveness and value for money in delivering service outcomes?

The Trust prides itself on managing its resources well and has continually delivered surpluses since its inception.

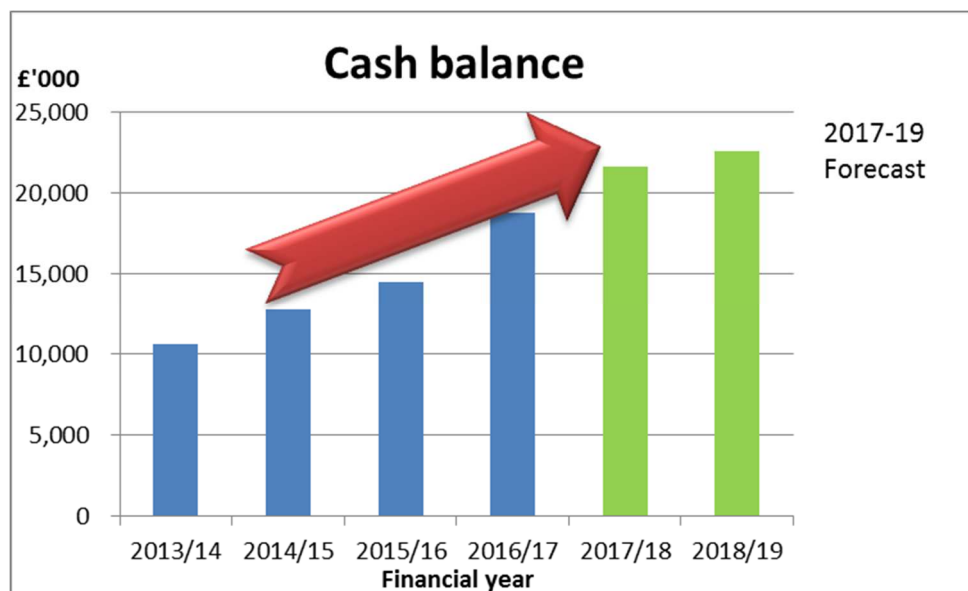


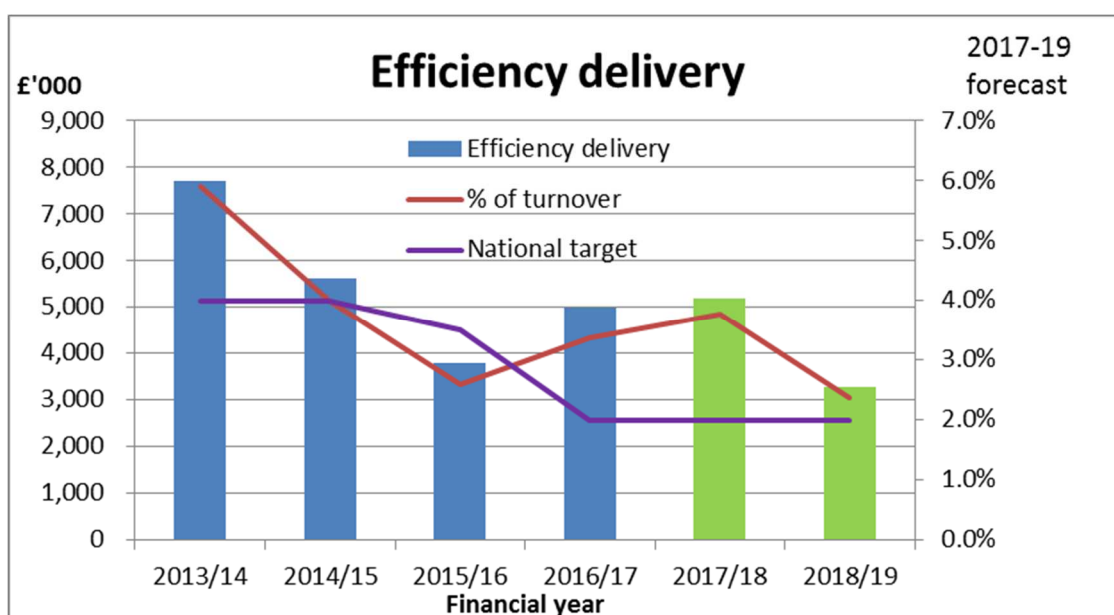
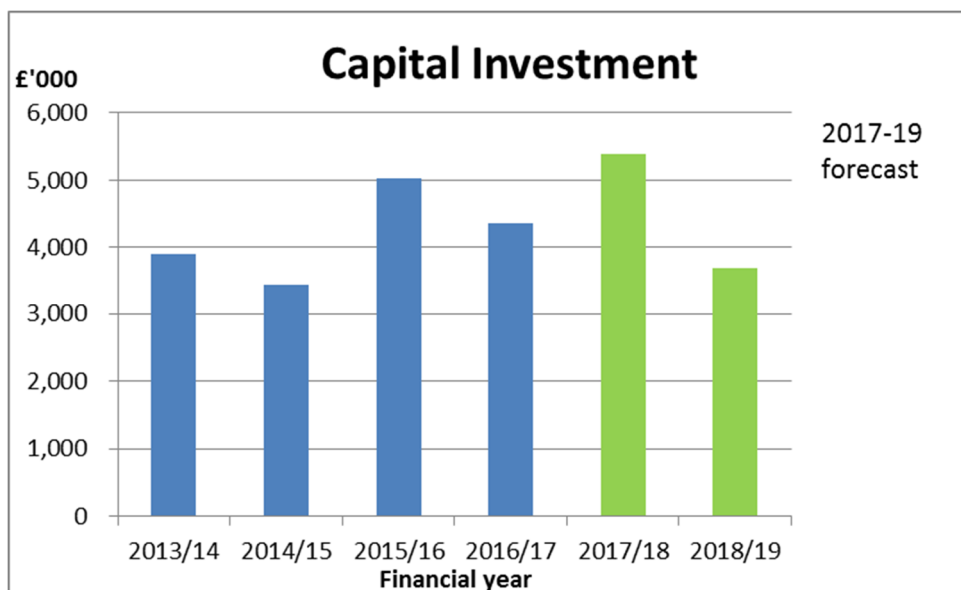
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The financial constraints placed on the sector at present is acutely appreciated by the Trust and its short and medium term financial strategy is to manage within these constraints and still invest significantly in its estate and IT strategies.

The financial stability of the Trust has enabled it to have a firm platform to invest its significant cash reserves in schemes that deliver efficiencies and mitigate emerging risks to expenditure.

The Trust has been, and expects to be, rated as a '1' in the NHS Improvements (NHSI) Single Oversight Framework (SOF) for the foreseeable future. This coupled with the Trusts 'Good' CQC rating and a reference cost of 88 demonstrates the sound integrated service and financial delivery of the organisation.





The Trust is mandated to submit annual reference cost information which demonstrates the Trust cost of delivering activity against its peers. In addition to this, the Trust is also part of the Lord Carter Model Hospital non acute cohort. The group has been established to provide an opportunity for progressive Trusts to share learning and best practice across the sector.

8. How is your organisation working in partnership to deliver improved system-wide sustainability?

The Trust is a proactive and valuable system partner. It uses these relationships and those fostered with other providers and commissioners to bring new ideas and best practice innovation to the system.

The Trust is already recognised as having an innovate approach to service delivery demonstrated by

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- Mobile working successful roll out
- Rapid response
- FIRST – discharge to assess model to support potential Winter pressures
- Working with Hertfordshire CCGs to transform/redesign community service team delivery models

The Trust has instigated individual service reviews on a rotational basis during

The Trust is also an active member of its Strategic Transformation Partnership.