

BOARD MEETING

Title	M4 Financial review/Finance recovery plan		
Paper Date:	18 August 2025	Board Meeting Date:	09 September 2025
Purpose:	Discussion	Agenda Item:	07
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Executive Summary

Executive Summary

M04 Financial position BOB ICB & ICS

Paper to brief the committee on the financial position of the ICB and wider system (M04)

- The overall BOB System is reporting a YTD favourable position to plan. This however is in part due to mitigations planned for later in the year being brought forward to mitigate pressures from industrial action (IA) in late July.
- Direct costs of IA included in M04 position were estimated to be circa £1.1m (£0.3m Bucks Healthcare, £0.4m Oxford University Hospitals, £0.4m Royal Berkshire). The impact of lost activity/income or any premium costs of re-providing for lost activity are not included in the M4 position as data is yet to be validated and quantified.
- At M04, the overall ICB position is breakeven YTD and FOT. With Mental Health and acute contract over activity being mitigated.

Action Required

The board are asked to note the final ICB and System position (M4)

Conflicts of Interest:

No conflict identified

- *Provide details of any known relevant direct, indirect or potential conflicts of interest, and how these have been/are to be managed in the meeting, for voting members and/or standing invitees*
 - *Provide supporting details (the same as above) for discussions, decisions and recommendations in the lead up to the decision required from this paper. (E.g., including clinical engagement, bidders for and staff involved in procurements which leads to contract award)*
 - *If not required, state 'Not applicable'*
- If unclear, please consult the Governance Team*

Date/Name of Committee/ Meeting, Where Last Reviewed:

SPC on 28 August 2025
Formal EMT on 1 September 2025

BOB ICB Finance Report

Month 04 - 2025/26

BOB system summary position M04

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

Surplus / (Deficit) - Adjusted Financial Position Organisation	YTD Plan	YTD Actual	YTD Variance	Annual Plan	Forecast Outturn	Forecast Variance	Annual Plan Income/ Allocation
	£'m	£'m	£'m	£'m	£'m	£'m	£'m
Berkshire Healthcare NHS Foundation Trust	1.0	1.0	0.0	1.7	1.7	0.0	(396.1)
Buckinghamshire Healthcare NHS Trust	(5.0)	(4.9)	0.1	(0.8)	(0.8)	0.0	(687.2)
Oxford Health NHS Foundation Trust	1.3	1.3	0.0	4.8	4.8	0.0	(706.7)
Oxford University Hospitals NHS Foundation Trust	(9.5)	(9.2)	0.3	2.0	2.0	0.0	(1,722.3)
Royal Berkshire NHS Foundation Trust	(8.8)	(8.8)	0.0	(7.8)	(7.8)	0.0	(663.2)
TOTAL In-System Providers Surplus/ (Deficit)	(21.1)	(20.7)	0.4	(0.2)	(0.1)	0.0	
Buckinghamshire, Oxfordshire And Berkshire West ICB	(13.7)	(13.7)	(0.0)	0.2	0.1	(0.0)	(4,457.9)
BOB ICS Surplus/ (Deficit)	(34.7)	(34.4)	0.4	(0.0)	(0.0)	(0.0)	

* The column figures represent each individual organisations income so BOB's £4,458 would include an element of the provider's income.

The overall BOB System is reporting a YTD favourable position to plan. This however is in part due to mitigations planned for later in the year being brought forward to mitigate pressures from industrial action (IA) in late July. Direct costs of IA included in M04 position were estimated to be circa £1.1m (£0.3m Bucks Healthcare, £0.4m Oxford University Hospitals, £0.4m Royal Berkshire). The impact of lost activity/income or any premium costs of re-providing for lost activity are not included in the M4 position as data is yet to be validated and quantified.

Various regular/monthly system meetings including SRTB, Bilaterals, CFO and Deputies meetings are taking place with regular monitoring to agree action plans with particular focus on efficiencies to identify schemes from opportunities to be developed and reduce risk.

OxH are reporting a £9.2m deficit YTD which is a £0.3m surplus to plan. The YTD underspend is in part due to a one-off benefit in month from a PFR insurance rebate.

BHT are reporting a YTD £0.1m favourable to plan with income mitigating pay and non pay pressures.

ICB Finances

ICB Overall position M04

Buckinghamshire, Oxfordshire
and Berkshire West
Integrated Care Board

BOB ICB OVERALL by Service Line M4	YTD Budget	YTD Actual	YTD Variance	Annual Budget	Forecast Outturn	Forecast Variance
	£'m	£'m	£'m	£'m	£'m	£'m
Acute	678.9	685.4	(6.5)	2,010.2	2,020.6	(10.4)
Community Health Services	138.0	138.0	0.0	415.8	418.0	(2.1)
Continuing Care	75.1	75.4	(0.3)	224.9	224.9	(0.0)
Mental Health	136.7	139.7	(2.9)	408.9	416.6	(7.7)
Other Programme	5.1	(5.4)	10.5	57.8	35.6	22.2
Primary Care	15.6	15.0	0.6	47.8	49.4	(1.6)
Prescribing, Central Drugs and Oxygen	98.3	99.8	(1.5)	289.6	290.0	(0.4)
Delegated Specialised Commissioning	154.3	154.3	(0.0)	477.1	477.1	0.0
Pharmacy, Optometry and Dentistry (POD)	49.8	49.8	0.0	151.4	151.4	0.0
Delegated Co-Commissioning	130.8	130.8	0.0	391.1	391.1	0.0
Total Programme Commissioned Costs	1,482.6	1,482.6	(0.0)	4,474.6	4,474.6	0.0
Admin Costs	8.9	8.9	0.0	26.8	26.8	(0.0)
Total before ICB Surplus/(Deficit)	1,491.4	1,491.4	(0.0)	4,501.5	4,501.5	0.0
ICB Surplus / (Deficit)			0.0	0.2	0.2	(0.0)
Total after Surplus/ (Deficit)	1,477.8	1,477.8	0.0	4,501.6	4,501.6	0.0

At M04, the overall ICB position is breakeven YTD and FOT.

With the majority of the contracts agreed with providers, the budgets therefore are now amended in the ledger. Cost pressures coming through at M04 are being investigated through data validation and the challenge process, with CIPs expected to be on target at year-end. For CIP schemes where planned dates have slipped due to contract finalisation, there will either be accelerations or mitigations found to ensure the ICB delivers the planned target. *Please refer to CIP slide for more details.*

The main drivers of the movement in ICB's M04 FOT are:

- **Acute (adverse £10.4m)** – due to Frimley Health NHS FT, Circle and Ramsay over performance
- **Community (adverse £2.1m)** - due to Physio and Endoscopy over performance (£1.2m) and Equipment (£1.9m) due to the national change in provider (NRS to Millbrook) resulting in additional non-recurrent set up costs and additional on-going costs
- **Mental Health & LD (adverse £7.7m)** - due to Sec.117, ADHD and LD & Autism spend increase against budget. A deep dive exercise is being carried out to ascertain the drivers.

ICB Acute M04

Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board

Acute M4 25/26	YTD Budget	YTD Actual	YTD Variance	Annual Budget	Forecast Outturn	Forecast Variance
	£'m	£'m	£'m	£'m	£'m	£'m
NHS providers	598.3	601.4	(3.1)	1,775.5	1,780.7	(5.1)
Independent Sector Providers with Contract	22.3	25.2	(2.9)	60.0	64.6	(4.5)
Discharge to assess cost	0.6	0.6	(0.0)	1.8	1.8	0.0
Equipment- Diabetic Pump	0.8	0.8	(0.0)	2.3	2.3	0.0
Urgent Care	1.5	1.7	(0.2)	4.5	4.5	0.0
London Providers	11.8	12.2	(0.4)	35.4	36.5	(1.1)
Voluntary Sector Grants	0.1	0.1	0.0	0.3	0.3	0.0
Winter Resilience costs	0.1	0.1	0.0	0.2	0.2	0.0
Acute LVA	4.0	4.0	0.0	12.0	12.0	0.0
Acute NCA	2.9	2.7	0.2	8.6	7.9	0.7
Ambulance Services	30.6	30.6	0.0	91.7	91.7	0.0
Patient Transport	5.9	6.0	(0.1)	17.8	18.1	(0.3)
Grand Total	678.9	685.4	(6.5)	2,010.2	2,020.6	(10.4)

Key reasons for variance	Acute M4 £m	Acute M3 £m	Improve/ (Worsened)
Key Pressures:			
Drugs *	(0.2)	0.5	(0.7)
Devices**	0.0	(0.2)	0.2
Unbundled Radiology***	(0.8)	(0.3)	(0.5)
Other Trust / IS variances	0.0	0.0	0.0
CIP unallocated	0.0	0.0	0.0
Diabetic Pumps	0.0	0.0	0.0
Total Pressures	(1.0)	0.0	(1.0)
Key Mitigations:			
Contract finalisation provision	0.0	0.0	0.0
Other (PTS, non-ERF NCA)	0.0	0.0	0.0
Total Mitigations	0.0	0.0	0.0
Variance	(1.0)	0.0	(1.0)

In Month 4, the ICB received three month's worth of provider activity data. Currently, Indicative Activity Plans for Bucks Health Trust have been agreed and is forecasting £200k pressure relating to variable activity with Royal Berks and Oxford University IAPs are being finalised.

NHS Provider variances: YTD variance overspend of £3.1m, and a forecasted pressure of £5.1m. The pressure is primarily due to a forecasted pressure of £3.2m in Frimley Health NHS FT for increased elective activity, £0.8m Unbundled radiology and unachieved CIPs of £1.7m relating to schemes for PLCVs, Devices, and challenges.

Independent Providers: Main forecasted variances to plan relate to £5m cost pressure in Circle, relating to increased prices for T&O and significant increases in elective activity this year in Chiltern and Reading sites. Ramsey is reporting £2.7m forecasted overspend on elective and Foscot is reporting £1.6m overspend against plan, driven by increased activity across various services, and increased costs included Q1 IPT charges. These cost pressures have been offset by a favourable variance across the three main Ophthalmology providers Spamedica, Newmedica and Community Health Eyecare where elective activity levels continue to track below plan, reflecting a downward trajectory, reducing the overall forecasted overspend to £4.5m.

Any overperformance identified to date is to be addressed by working closely with providers to review performance, develop activity management plans, and agree targeted actions that support delivery of the system financial plan.

ICB Acute M04 – key provider information

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

The tables below highlights the variance performance of the three in-system (and out of system) Acute Trusts in BOB ICS for the key variable elements of the contract:

Analysis of Other Elective variance M4	High Cost Drugs	High Cost Devices	Unbundled Radiology / Nuclear Medicine	Total
	£m	£m	£m	£m
Buckinghamshire Healthcare NHST	2.3	(0.0)	2.9	5.2
Oxford University Hospitals NHSFT	(2.7)	0.0	(3.0)	(5.7)
Royal Berkshire NHSFT	0.0	0.1	0.0	0.1
In System NHS Acute Providers Other Elective Variance	(0.4)	0.1	(0.1)	(0.5)
Out of System NHS Acute Providers Other Elective Variance	0.2	(0.0)	(0.7)	(0.5)
All NHS Acute Providers Other Elective Variance	(0.2)	0.0	(0.8)	(1.0)
High Cost Drug & Device Reserve - revision of forecast and offset of spend				
All NHS Acute Providers Other Elective Variance	(0.2)	0.0	(0.8)	(1.0)

Other Elective (Includes HCDD): A forecast net overspend of £0.4m is reported across in-system NHS providers. OUH is projecting an overspend of £2.7m against plan, which is largely offset by a £2.3m underspend at BHT. The overall HCD position is further improved by a £0.2m underspend in out-of-system NHS providers, while RBFT has been reported at breakeven in Month 4 due to unreliable data submissions. For unbundled radiology and nuclear medicine, Month 4 shows a forecast net pressure of £0.8m across BOB, the majority of which relates to out-of-system providers. OUH is projecting an overspend of £3.0m, partly balanced by a £2.9m underspend at BHT based on Month 3 data returns.

In-System NHS Providers: At Month 4, cost pressures across other elective variables are being monitored against agreed or draft Indicative Activity Plans (IAPs) and could be subject to change for IAPS that are currently in draft. Buckinghamshire Healthcare NHS Trust (BHT) has an agreed IAP, while Royal Berkshire NHS Foundation Trust (RBFT) is operating under a near-final draft. Variances for in-system providers are currently driven by BHT and RBFT, with Oxford University Hospitals NHS Foundation Trust (OUH) reported at plan values pending IAP agreement.

Out-of-System NHS Providers: A £0.2m underspend on High-Cost Drugs is forecast, primarily due to a £0.226m underspend at Guy's and St Thomas' NHS Foundation Trust. The main driver of cost pressure relates to unbundled radiology, totalling £0.7m, with significant variances observed at Frimley Health, Milton Keynes University Hospital, and Guy's and St Thomas.

ICB Community M04

Community Health Services M4 25/26	YTD Budget	YTD Actual	YTD Variance	Annual Budget	Forecast Outturn	Forecast Variance
	£'m	£'m	£'m	£'m	£'m	£'m
NHS provider	90.4	90.4	0.0	271.1	271.1	0.0
BCF S75	26.1	26.1	(0.0)	79.6	79.7	(0.1)
Palliative care	2.0	1.9	0.0	6.0	6.0	0.0
Intermediate care	3.1	3.0	0.0	9.2	9.1	0.1
Child & Young Persons, TOP	2.0	1.8	0.2	5.9	5.3	0.6
Endoscopy, Ultrasound, Audiology, Physio	5.1	5.3	(0.3)	15.2	16.4	(1.2)
Non CHC NCA-Interim Health Fund	0.8	0.7	0.1	2.4	2.2	0.2
Comm-Health Inequalities	1.6	1.6	0.0	4.9	4.8	0.1
Comm-Long Term Conditions (LTC)	1.4	1.3	0.0	4.1	4.0	0.2
Community Equipment	5.7	5.8	(0.1)	17.5	19.4	(1.9)
Total	138.0	138.0	0.0	415.8	418.0	(2.1)
<i>Prior Month</i>	<i>103.8</i>	<i>103.8</i>	<i>0.1</i>	<i>418.2</i>	<i>418.1</i>	<i>0.1</i>

- **NHS Providers:** Contracts have been agreed and budgets and payments amended to agree to the contract values.
- **BCF S75:** The procurement of the new model for Short Stay Hub Beds in Oxfordshire is complete meeting the CIP target of £0.831m. The remaining CIP of £0.598m (£0.066m YTD) is on target to be fully met. Work is on going to identify BCF specific budgets and ensure these are correctly coded in the ledger.
- **Child & Young Persons, TOP:** The FOT of £0.6m underspend for Marie Stopes contract is a straight-line extrapolation of the YTD spend which is lower than budget.
- **Endoscopy, Ultrasound, Audiology, Physio:** The FOT of £1.2m overspend is due to activity levels being greater than budget for Inhealth Endoscopy £0.3m, Berkshire West Endoscopy £0.1m, Specsavers audiology £0.2m, and Physiotherapy AQP's £0.6m.
- **Non-CHC NCA-Interim Health Fund:** The Broadcare FOT continues to report an underspend, £1.3m at Month 4. There is uncertainty about whether this level of underspend will continue as one or two new expensive packages could result in a significant increase in costs. The reported FOT underspend at M4 is the YTD actual spend plus budget for the remainder of the year. In previous months the reported FOT was breakeven.
- **Equipment:** The current equipment provider NRS ceased operating as at the end of July. A contract has been agreed with an alternative provider Millbrook and this ensures continuation of the service. The FOT £1.9m overspend includes £1.0m non-recurrent set up costs as a result of changing provider and the remaining £0.9m is due to on-going increased costs. YTD CIP savings of £0.476m were achieved as at Month 3 and no further savings have been reported in Month 4. The full year CIP saving of target of £1.0m remains as being forecast to be achieved as new CIP schemes will need to be identified, however this will need to be revisited for Month 5 when more is known about the situation with the new provider.

ICB Mental Health, Learning Disability & Autism M04

By Place: NHS	YTD Budget £m	YTD Actual £m	YTD Variance £m	Annual Budget £m	Forecast £m	Variance £m
Buckinghamshire	21.4	21.3	0.1	64.1	64.1	0.0
Oxfordshire	45.1	44.9	0.2	135.3	135.2	0.0
Berkshire West	32.2	32.1	0.1	96.5	96.3	0.2
Corporate	2.8	3.1	(0.2)	8.5	8.5	0.0
LVAs	0.6	0.6	0.0	1.9	1.9	0.0
SDF	8.8	8.9	(0.1)	26.5	26.5	0.0
Total	110.9	110.9	0.1	332.8	332.5	0.2
By Place: Non-NHS	YTD Budget £m	YTD Actual £m	Variance £m	FOT Budget £m	FOT Actual £m	Variance £m
Buckinghamshire	9.2	8.2	1.0	27.6	25.0	2.6
Oxfordshire	4.2	6.0	(1.8)	12.7	19.6	(6.9)
Berkshire West	9.7	12.3	(2.6)	29.0	35.1	(6.1)
Corporate	0.7	0.4	0.2	1.5	(0.5)	2.0
SDF	2.0	1.8	0.2	5.4	4.9	0.5
Total	25.8	28.7	(3.0)	76.2	84.1	(7.9)
Total All	136.7	139.7	(2.9)	408.9	416.6	(7.7)
Prior Month	102.4	103.9	(1.6)	409.0	415.2	(6.2)

By Service	YTD Budget £m	YTD Actual £m	YTD Variance £m	Annual Budget £m	Forecast £m	Variance £m
LVAs & NCAs (NHS/Non-NHS)	0.9	0.8	0.0	2.6	2.7	(0.0)
CAMHS / ED	12.7	12.7	0.0	38.2	38.2	0.0
S117, individual MH/LDA	93.4	94.5	(1.1)	280.1	279.4	0.7
Right to Choose	1.7	3.3	(1.5)	4.7	12.3	(7.5)
Perinatal	1.3	1.3	0.0	4.0	4.0	0.0
Talking Therapies	9.6	9.5	0.0	28.7	28.7	0.0
Ward Liaison	1.1	1.1	0.0	3.4	3.4	0.0
EIP	1.3	1.3	0.0	4.0	4.0	0.0
Crisis	2.8	2.8	0.0	8.4	8.3	0.1
SDF	10.8	10.8	0.0	31.8	31.3	0.5
Neuro, Staffing, Legal, Other	0.9	1.5	(0.5)	2.9	4.4	(1.5)
Total	136.7	139.7	(2.9)	408.9	416.6	(7.7)
Prior Month	102.4	103.9	(1.6)	409.0	415.2	(6.2)

At M04, YTD was £2.9m worse than plan, driven by Sec.117 pressures, especially with Oxford County Council (OCC).

- **NHS** provider spend (mainly OHFT and BHFT) is on plan.
- Bucks deteriorated by £0.5m and Berks West improved by £0.3m. OCC deteriorated by £1.1m.
- MH Community, Housing and Dementia packages report a combined forecast underspend of £0.7m
- ADHD, Right to Choose and LSD activity has increased significantly year-on-year with more providers delivering assessments.
- The position includes CIP target of £0.5m Right to Choose, £1.5m Sec.117 packages of care and stretch target of £3m.
- The Mental Health Provider Collaborative are also tasked with delivering a further saving of £5m against the system target of £24m.
- There is a deep dive exercise carried out between M04 and M05 to validate the forecast outturn based on the year-to-date activity.

ICB Prescribing M04

GP Prescribing M4 25/26	YTD Budget	YTD Actual	YTD Variance	Annual Budget	Forecast Outturn	Forecast Variance
	£'m	£'m	£'m	£'m	£'m	£'m
GP Prescribing	95.7	95.7	0.0	287.2	287.1	0.1
CIP	(3.7)	(2.4)	(1.3)	(16.4)	(16.4)	0.0
Drugs Met Centrally	3.0	3.0	(0.0)	8.9	9.0	(0.1)
Oxygen	0.6	0.6	(0.0)	1.8	1.9	(0.1)
GP Incentive Schemes	0.6	0.6	(0.0)	1.8	1.9	(0.1)
Dressing Products	1.9	1.9	(0.1)	5.6	5.8	(0.2)
Prescribing Decision software	0.2	0.2	(0.0)	0.6	0.7	(0.0)
Total	98.3	99.8	(1.5)	289.6	290.0	(0.4)
<i>Prior Month</i>	<i>73.9</i>	<i>74.0</i>	<i>(0.1)</i>	<i>289.6</i>	<i>290.0</i>	<i>(0.4)</i>

M04 position includes April and May data. As of July, the Prescribing forecast outturn indicates an overspent of £435k with YTD overspent of £1.5m, most of which related to CIP.

The Prescribing forecast is based on 2024/25 actual data with an adjusted growth rate of 4.3% applied, reflecting trends observed in the past six months. Cost pressures from NICE TA have also been factored in, particularly weight loss medication Tirzepatide and treatments of type 2 diabetes drugs, including Dapagliflozin and Empagliflozin. ADHD prescribing under the right to choose pathway continues to present a significant financial pressure. Last year alone added circa £1m cost pressure with similar risk levels expected to persist this year.

The forecast assumptions include a 4% growth in Central Drugs since 2023/24, and GP Incentives projections based on 2024/25 data assuming a 95% payouts. Dressing forecast has risen by £187k, with a monthly movement of £306k, attributed to an 11% growth. The Oxygen forecast is calculated using the average cost for the period April to June.

While Category M remains the largest contributor, No Cheaper Stock Obtainable (NCSO) pressures are substantial adding £540k to the YTD position representing unavoidable overspend due to supply shortages and price hikes. Monthly NCSO costs rose slightly from £266k in April to £274k in May, indicating sustained pressure month on month.

It must be noted that the achievement of the full £16.4m CIP is currently risk rated, with the £7.5m stretch target requiring resource investment to realise. At month 4 the expectation is to make up the slippage to date and the team are exploring additional opportunities as mitigations to ensure full delivery.

ICB Primary Care & Pharmacy, Optometry, Dental (POD) M04

Primary Care M4 25/26	YTD Budget	YTD Actual	YTD Variance	Annual Budget	Forecast Outturn	Forecast Variance
	£'m	£'m	£'m	£'m	£'m	£'m
GP LCS	3.8	3.8	0.0	12.2	15.2	(3.0)
PC Investment	1.5	1.5	0.0	4.7	4.7	0.0
GPIT/Digital	2.7	2.5	0.2	8.2	8.0	0.2
PC Transformation	1.5	1.5	0.0	4.4	4.4	0.0
Primary Care Programme Admin	0.5	0.4	0.1	1.5	1.3	0.2
Medicines Management	0.9	0.6	0.3	2.8	1.8	1.0
Out of Hours	4.6	4.6	0.0	13.8	13.8	0.0
GP Delegated	130.7	130.7	0.0	391.1	391.1	0.0
POD Delegated	49.8	49.8	0.0	151.4	151.4	0.0
Total	196.0	195.4	0.6	590.1	591.7	(1.6)
<i>Prior Month</i>	<i>145.0</i>	<i>144.6</i>	<i>0.4</i>	<i>579.6</i>	<i>578.5</i>	<i>1.1</i>

The YTD Actual month 4 position for Primary Care shows a total £0.6m underspend across all budgets, reflecting current savings from staff vacancies.

The forecast outturn is reporting a £1.6m overspend due to: GP LCS showing an adverse variance of £3.0m as a result of CIP slippage and Medicines Management showing a favourable variance of £1.0m due to pay savings from vacancies.

Prior year accruals from 2024/25 are being monitored with actual spend being recorded to determine whether any benefits can be realised in the 2025/26 year. The majority of these accruals brought forward are part of the GP Delegated and POD Delegated budgets, the gross total of these being £23m.

The POD Delegated budget for 2025/26 held a total reserve/contingency of £11.4m, of which £9.2m related to dental services and £2.2m related to general expenses. The ICB has now reallocated £8.2m to primary dental services (via various schemes), £0.5m to pharmacy services and £0.7m to ophthalmic services. An additional reserves amount was identified from within the recent funding for the agreed pharmacy contract for 2025/26 and so this currently leaves a reserve/contingency amount of £2.4m to be utilised by year-end.

The CIP target of £4.4m is under pinned by numerous identified savings schemes such as GP premises rates rebates (£1.5m), pharmacy quality scheme (£1.0m), patient list cleaning (£0.1m) and PPV (£0.2m). As highlighted above, this target is risk rated with opportunities within the POD accruals brought forward from 2024/25 identified to mitigate the position.

ICB All Age Continuing Care (AACCC) M04

Continuing Healthcare FOT M4 25/26	Annual Budget £'m	Forecast Outturn £'m	Forecast Variance £'m
Bucks	77.5	75.5	2.0
Oxon	105.5	105.1	0.5
Berkshire West	45.0	48.4	(3.4)
Uplift, not allocated	1.1	1.1	0.0
Anticipated CIP delivery (not on Broadcare)	(9.0)	(9.0)	0.0
Stretch target CIP	(5.0)	(5.0)	0.0
CHAS	9.3	8.7	0.6
Provision impact	0.4	0.0	0.4
Total	224.9	224.9	(0.0)
Prior Month	224.4	226.8	(2.4)

CHAS M4 25/26	Annual Budget £'m	Forecast Outturn £'m	Forecast Variance £'m
Depreciation	0.0	0.1	(0.1)
Interest on lease liabilities	0.0	0.0	0.0
Establishment, licences	0.2	0.3	(0.1)
Legal fees	0.1	0.2	(0.1)
Salaries and wages	7.6	5.0	2.6
Agency	0.0	2.2	(2.2)
Other professional	0.7	0.5	0.3
Supplies & services	0.7	0.5	0.2
Education & training	0.0	0.0	0.0
Total	9.3	8.7	0.6
Prior Month	9.3	9.0	0.3

CHC Budget and spend is split into 2 main areas. Packages of Care (PoC), driven by the Broadcare database and Continuing Healthcare Assessment & Support (CHAS), of which 85% of the budget is allocated to pay (substantive and agency).

The forecast outturn position at M04 is break-even, a favourable movement of £2.4m from the overspend reported at M03.

Although most of the original CIP target of £9m is forecast to be achieved, most of the benefit is already within the Broadcare Packages of Care figures. The £5m stretch target is now forecast to be achieved and although plans are not yet fully developed, it is likely to focus on DHTs and areas where invoicing and commissioning processes could be improved.

Cost pressures have been identified across all three places and the AACCC team are in the process of reviewing activity by line to identify reasons and mitigations. The existing pressure of £4.6m has been recorded in risks at present, rather than within the position, allowing for further investigation. The risk register also records some potential opportunities e.g. use of uncommitted growth and uplifts budgets. The AACCC team are committed to deliver within £224m full year budget, with the caveat that the specifics of the £5m stretch may not be achieved in totality. Overall net cases decreased by 41 (increase of 63 in M03).

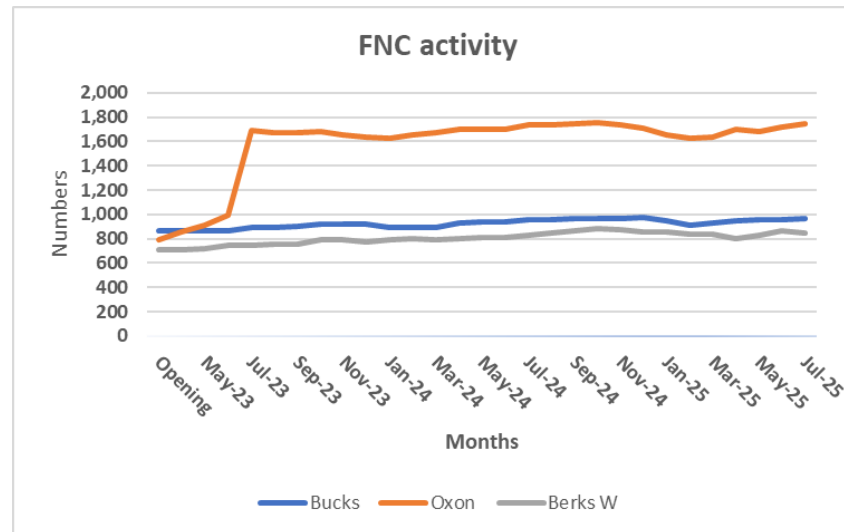
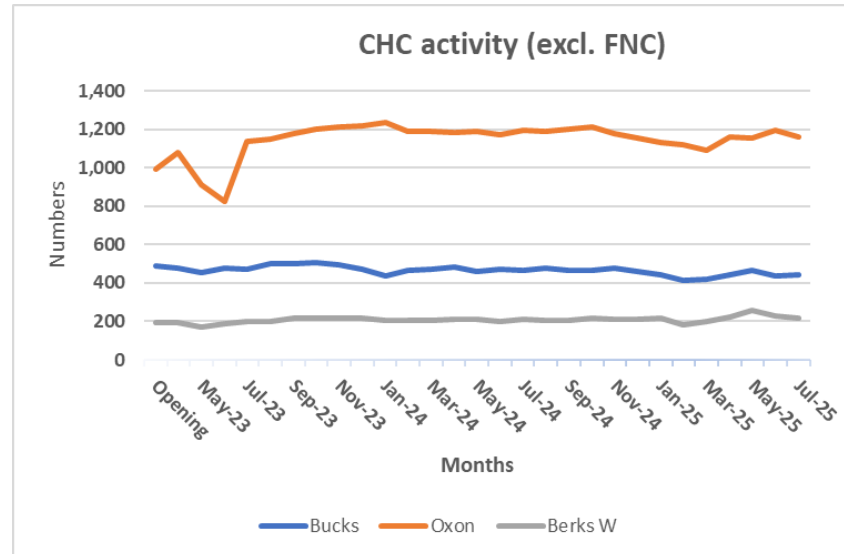
Continuing Healthcare Assessment and Support (CHAS):

This relates to the non-packages of care spend and is reporting a forecast outturn underspend of £0.6m (£0.3m underspend M03). Points to note include;

- Depreciation is for the capitalised lease costs of Saffron House as per IFRS16.
- Pay costs are showing an underspend, now recruiting to the new structure where appropriate and approved.
- Agency costs are set to decrease over the year as substantive posts are filled. Work is ongoing to move agency staff onto new contracts with NHSP at lower rates.
- Pay (Salaries and wages) is forecasting an underspend.
- Other professional is for DOLS (Deprivation of Liberty Safeguards) costs.
- Supplies and services includes the costs for the CHF and PHB SLA in Oxon and the brokerage team in Bucks. It also includes the costs of the Arden Gem contract which is ending in August 2025.

ICB AACCC Activity M04

Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board



Movt M03 to M04 activity	Bucks	Oxon	BW	Total
B/fwd cases, analysis below:				
B/fwd cases still ongoing				
PoC unchanged	1,290	2,685	968	4,943
PoC increases	14	55	8	77
PoC decreases	14	115	5	134
B/fwd cases now ended				
Cases ended RIP	67	33	71	171
Cases ended other	11	34	40	85
Cases ended RIP & other	(78)	(67)	(111)	(256)
New cases	76	45	67	188
Restarts	9	4	14	27
Total current month ongoing	1,403	2,901	1,062	5,366

Per the table above, overall activity from M03 to M04 is showing 215 new and restarted cases (391 M03) with 256 cases ended (328 M03), made up of RIPs with some invalid cases. The net movement between M03 and M04 is a decrease of 41 cases (increase of 63 M03). The table also shows 77 on going packages having increases to their costs (102 M03) whilst 134 had a decrease (40 M03).

The graphics on the left show CHC activity (excluding FNC) and FNC activity only, from March 2023 to date for the 3 places. There have been fluctuations in the Oxon data as a result of the introduction of the Broadcare database and work to validate the data. There is a more recent increase in cases in Oxfordshire which does not appear replicated in Bucks/Berks. This has been suggested to be due to increasing population growth in Oxfordshire cf. Bucks and Berks W.

The table below shows costs per head of population at M04.

Costs & popn M04	Bucks	Oxon	BW	Uplift/CIP	Care costs	CHAS	Total
FOT costs per Broadcare £	75,532,057	105,062,403	48,445,330	-12,866,649	216,173,141	8,713,569	224,886,710
Popn	590,858	818,924	585,283		1,995,065		1,995,065
Cost per head £	128	128	83		108		113
Cost per 50k/popn £	6,391,727	6,414,661	4,138,624		5,417,697		5,636,075

ICB Staff WTEs M04

ICB Staff WTEs M04	2025/26 Pay Budget			2025/26 Permanent staff in post M04			2024/25 WTE Variances post M04			OPWs inc. Agency		
Directorate	Running costs	Programme	Total	Running costs	Programme	Total	Running costs	Programme	Total	Running costs	Programme	Total
	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE	WTE
Corporate/Senior Leadership Team	9.4	0.0	9.4	8.0	0.0	8.0	(1.4)	0.0	(1.4)	0.0	0.0	0.0
Medical	14.0	87.7	101.7	11.5	65.0	76.5	(2.5)	(22.7)	(25.2)	0.0	3.4	3.4
Delivery Performance & Oversight	35.3	53.1	88.4	25.7	43.0	68.7	(9.6)	(10.1)	(19.7)	1.0	2.0	3.0
Nursing	24.0	191.0	215.0	21.3	114.0	135.3	(2.7)	(77.0)	(79.7)	0.0	33.3	33.3
Finance & Contracting	77.0	0.0	77.0	57.1	1.0	58.1	(20.0)	1.0	(19.0)	2.8	0.0	2.8
People	13.0		13.0	4.7		4.7	(8.3)	0.0	(8.3)	4.0	0.0	4.0
Strategy Digital & Transformation	50.9	35.1	86.0	37.0	26.6	63.6	(13.9)	(8.5)	(22.4)	0.2	0.0	0.2
Total	223.5	366.9	590.5	165.2	249.6	414.8	(58.3)	(117.4)	(175.7)	8.0	38.7	46.7

Per the table above, overall actual Staff in Posts at M04 is showing 175 WTE less than plan across both running cost and programme budgets. This is mainly due to vacancies across Nursing, Medical, Delivery and Finance directorates.

The work to ensure that all staff are correctly assigned across directorates and the relevant income streams are assigned is in the main complete.

MEMO M4 ESR and Payroll data:

Funded WTE	590
Permanent WTE on payroll	405
Off Payroll Workers WTE	45
Headcount on payroll	487

ICB Staff Costs M04

ICB Staff Costs YTD M04	2025/26 Pay Budget			2025/26 Permanent staff in post M04			2024/25 £ Variances post M04			OPWs inc Agency		
Directorate	Running costs	Programme	Total	Running costs	Programme	Total	Running costs	Programme	Total	Running costs	Programme	Total
	£m's	£m's	£m's	£m's	£m's	£m's	£m's	£m's	£m's	£m's	£m's	£m's
Corporate/Senior Leadership Team	0.6	0.0	0.6	0.6	0.0	0.6	0.0	0.0	0.0	0.00	0.00	0.00
Medical	0.5	1.7	2.2	0.4	1.6	2.0	(0.1)	(0.1)	(0.2)	0.00	0.10	0.10
Delivery Performance & Oversight	1.1	0.6	1.7	0.8	1.2	2.0	(0.2)	0.6	0.3	0.03	0.14	0.17
Nursing	0.6	3.3	3.9	0.6	2.2	2.8	0.0	(1.1)	(1.1)	0.00	0.78	0.78
Finance & Contracting	1.8	0.0	1.8	1.4	0.0	1.4	(0.4)	0.0	(0.4)	0.24	0.00	0.24
People	0.4	0.0	0.4	0.2	0.0	0.2	(0.2)	0.0	(0.2)	0.11	0.00	0.11
Strategy Digital & Transformation	1.4	1.1	2.5	1.0	0.8	1.8	(0.4)	(0.3)	(0.7)	0.01	0.00	0.01
Uplift	0.0	0.0	0.0	0.0	0.2	0.2	0.0	0.2	0.2	0.00	0.00	0.00
Total	6.4	6.7	13.1	5.0	6.0	11.1	(1.4)	(0.8)	(2.2)	0.39	1.02	1.41

The underspend is indicative of the on-going vacancies as a result of the recruitment freeze, the £2.2m variance does not include any costs of filling vacancies with agency staff or secondments and any off-payroll workers . These costs have been shown at the side of the table.

Some programme areas on the ledger need adjusting to reflect actual staff activity, so forecasts are not yet accurate. One such area is CHC where there are a large number of vacancies some of which are being filled by agency staff, but the FOT has been put into the ledger as breakeven.

ICB Running Costs M04 YTD Actuals

	25/26 YTD M4 Actual Spend £m	25/26 M4 Budget Spend £m
Running Costs Non Pay Subjective Grouping		
Administration & Business Support	0.1	-1.2
Chair & Non Exec	0.1	0.2
Primary Care Support	0.0	0.0
Communications and PR	0.3	0.8
Contract Management	1.8	5.6
Corporate Costs & Services	0.1	0.5
Corporate Governance	0.4	1.2
Estates & Facilities	0.3	1.0
Finance	2.0	5.8
General Reserves Admin	0.0	0.2
Human Resources	0.7	1.6
Medical Directorate	0.5	1.5
Nursing Directorate	0.2	0.5
Operations Management	1.0	3.4
Quality Assurance	0.4	1.5
Strategy & Development	0.5	2.4
Executive Management Team	0.6	1.8
Totals	8.9	26.8

Running Costs now exclude the Primary Care team which has been moved to Programme.

Current CSU spend within the ICB is still in discussion so costs may change. Spend to date are accruals based on the Q1 invoice received for some services and the 2024/25 SLA values for others.

	25/26 YTD M4 Actual Spend £m	25/26 M4 Budget Spend £m
Running Costs Non Pay Subjective Grouping		
Estates and Facilities Costs	0.3	0.8
Audit Fees	0.2	0.5
Other Non-Pay Staff Related Costs (incl. Clinical Leads)	0.2	0.6
Computers and Telecoms	0.1	0.2
CSU	2.7	6.7
Consultancy, Professional and Legal Fees	0.2	0.1
Recruitment fees	0.0	0.0
Apprentice Levy	0.0	0.1
Other	(0.1)	(1.0)
Totals	3.5	8.1

Only depreciation value of most leases is included within below due to many being capitalised leases.

	25/26 YTD M4 Actual Spend £m	25/26 M4 Budget Spend £m
Running Costs Estate Grouping		
Bath Road	0.20	0.75
Unipart	0.05	0.08
Amersham	0.04	0.12
WBCH PALs Office	0.00	0.00
Study Centre - Aylesbury	0.01	0.00
IT Assets Depreciation	0.01	0.04
Totals	0.30	0.95

Month 4 CIP Summary by Scheme



Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board

Current Position (M4)

Delivery to M4 is £15.6m against a plan of £19.2m giving a shortfall to plan of £3.5m This is largely due to stretch CIP’s being phased too early in the year. The year end forecast for CIP delivery has been retained on plan but there are considerable risks against that particularly around the identification and delivery of the Prescribing and Primary Care stretch targets. However, the red rated schemes have reduced in the month by £3.7m and now represent 12.6% of the total plan, and are detailed in the following slide

Current material risks include

- Primary Care Prescribing stretch targets are largely identified but will need ICB investment and close engagement with and from GPs. An investment paper needs to be collated to fully assess these schemes viability.
- Delays in implementation timelines for the Procedures of Limited Clinical Value (PLCV) scheme and the lack of engagement from BHT are putting that scheme at risk.
- The Community Equipment scheme has been downgraded to high risk following the insolvency of a material supplier. The impact of this risk will be fully assessed in M5.
- Needing to keep identifying and developing new opportunities to mitigate any slippage in existing schemes.

As mitigation, in M4 we have implemented a more robust implementation monitoring process for existing schemes to ensure delivery to plan and manage the risk of slippage.

Scheme	Executive Lead	Risk Rating	Plan to M4 £'000	Actual to M4 £'000	Variance to M4 £'000	Forecast Month 5 to Month 12 £'000	Total Year end Forecast £'000
Clear backlog review cases CHC and Fast Track	Sarah Bellars	Low	£615	£1,027	(£412)	£993	£2,020
Purchasing CHC funded nursing homes through joint OCC framework	Sarah Bellars	Low	£148	£148	£0	£296	£444
Review Database and follow up cases for RC and dispute transfers.	Sarah Bellars	Low	£1,996	£1,268	£728	£4,366	£5,634
Market management tool / framework for Complex Dom Care	Sarah Bellars	Medium	£0	£0	£0	£110	£110
Review finance process for PHB and reclaim unspent funds	Sarah Bellars	Medium	£42	£80	(£38)	£75	£155
Rollout mechanical reposition pilot to other place bases, and CHC	Sarah Bellars	Medium	£22	£6	£16	£194	£200
Undertake clinical review of all interim funded cases	Sarah Bellars	Medium	£28	£433	(£405)	(£183)	£250
Implementation of a single, ICB wide CYPCC, funding framework	Sarah Bellars	High	£0	£0	£0	£150	£150
Opportunities/ Stretch savings - AACCH stretch CIP	Sarah Bellars	Low	£1,668		£1,668	£5,000	£5,000
Contract Challenges	Matthew Tait	Low	£0		£0	£600	£600
Opportunities/ Stretch savings - Elective IAPs stretch CIP	Matthew Tait	Low	£1,942	£1,942	£0	£3,058	£5,000
CMDU (Covid Medicines Delivery Unit)	Matthew Tait	Low	£166	£166	£0	£334	£500
Opportunities/ Stretch savings - IAP Management	Matthew Tait	Medium	£1,000	£1,000	£0	£4,000	£5,000
High Cost Devices	Matthew Tait	Medium	£0	£0	£0	£500	£500
Equipment Services	Matthew Tait	Low	£476	£476	£0	£0	£476
Use of BCF uplifts to fund suitable ICB budgets	Matthew Tait	Low	£66	£66	£0	£532	£598
Oxfordshire Short Stay Hub Beds	Matthew Tait	Low	£831	£831	£0	£0	£831
Equipment Services (NRS)	Matthew Tait	High	£21		£21	£524	£524
S117 Reviews in Berkshire West	Matthew Tait	Medium	£433	£481	(£48)	£1,019	£1,500
Restriction on RTC	Matthew Tait	High	£0		£0	£500	£500
Stretch savings - Transformation fund release	Matthew Tait	Low	£668	£668	£0	£1,332	£2,000
Stretch savings - Acute Bucks Release balance of UTC budget.	Alastair Groom	Low	£300	£300	£0	£0	£300
Stretch savings - Estates stretch CIP	Alastair Groom	High	£100	£0	£100	£300	£300
Stretch savings - Corporate stretch CIP	Alastair Groom	Low	£332	£332	£0	£668	£1,000
Stretch savings - Other SDF general	Alastair Groom	Low	£540	£405	£135	£1,209	£1,614
CSU Contract Reduction	Alastair Groom	Low	£498	£498	£0	£1,002	£1,500
Opportunities/ Stretch savings - Health Inequalities	Ben Riley	Low	£164	£164	£0	£336	£500
Procedures of Limited Clinical Value (PLCV)	Ben Riley	High	£38		£38	£1,000	£1,000
Biosimilar Switches (ustekinumab, adalimumab, etanercept)	Ben Riley	Low	£1,360	£1,360	£0	£6,640	£8,000
Business Rates Review	Ben Riley	Medium	£780	£368	£412	£412	£780
Business Rates Review	Ben Riley	Medium	£0		£0	£600	£600
Opportunities/ Stretch savings - Medical stretch CIP	Ben Riley	Low	£1,000	£1,000	£0	£2,000	£3,000
Rebates	Ben Riley	Low	£500	£484	£16	£1,516	£2,000
Scriptswitch (PQS is one mechanism that feeds into this)	Ben Riley	Low	£900	£1,006	(£106)	£1,694	£2,700
Prescribing Stretch - Off Patent	Ben Riley	Low	£1,000	£654	£346	£596	£1,250
Prescribing Stretch - Incentivised Switches	Ben Riley	Low	£0	£0	£0	£950	£950
Oxygen Rx VAT rebate	Ben Riley	Low	£0	£0	£0	£1,500	£1,500
Prescribing Stretch	Ben Riley	Low		£37	(£37)	(£37)	£0
Dietetic Saving Schemes	Ben Riley	Medium	£80	£15	£65	£385	£400
Outlying prescribing	Ben Riley	Medium	£0	£90	(£90)	£610	£700
Waste Reduction (inc overprescribing/ de-prescribing/ polypharmacy)	Ben Riley	Medium	£0	£37	(£37)	£63	£100
Woundcare - development of a best value formulary.	Ben Riley	Medium	£40		£40	£500	£500
Prescribing Stretch - Waste Stretch	Ben Riley	Medium	£0	£0	£0	£200	£200
Stoma and Catheter Saving Scheme - centralised service	Ben Riley	High	£200	£17	£183	£983	£1,000
Prescribing Stretch - Stopping Branded Prescribing	Ben Riley	High	£0	£0	£0	£2,500	£2,500
Prescribing Stretch - Stopping Gluten Free Prescribing	Ben Riley	High	£0	£0	£0	£210	£210
Prescribing Stretch - Cows Milk Protein Allergy	Ben Riley	High	£0	£0	£0	£350	£350
Prescribing Stretch - Over the Counter Prescribing (OTC) /Self Care	Ben Riley	High	£40	£18	£23	£163	£180
Prescribing Stretch - Low Priority Prescribing	Ben Riley	High	£40	£25	£15	£135	£160
Prescribing Stretch	Ben Riley	High	£920		£920	£1,700	£1,700
9 Schemes re CSU delivery	Hannah Iqbal	Low	£233	£233	£0	£480	£713
			£19,187	£15,634	£3,553	£52,065	£67,699

Risk Rating	Plan to M4 £'000	Actual to M4 £'000	Variance to M4 £'000	Forecast M5 to M12 £'000	Full Year Forecast £'000
Low	15,403	13,064	2,339	35,100	48,130
Medium	2,425	2,510	- 85	8,483	10,995
High	1,359	60	1,300	8,482	8,574
Total	19,187	15,634	3,553	52,065	67,699

Details of Schemes Rated High Risk



Buckinghamshire, Oxfordshire
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Scheme	Executive Lead	Risk Rating Reported at Month	Plan to M4 £'000	Actual to M4 £'000	Variance to M4 £'000	FOT £'000	Comment
Implementation of a single, ICB wide CYPCC, sliding scale funding framework	Sarah Bellars	High	0	0	0	150	Scheme still in development stage. Detailed project plan with milestones have been requested which will inform timelines for delivery of expected
Equipment Services (NRS)	Matthew Tait	High	21		21	524	Risk changed from low to high due to a nationwide issue relating to community equipment supplier - Delivery line split with YTD achievement rated low risk and the remainder of delivery rated high risk
Restriction on RTC	Matthew Tait	High	0		0	500	Project at development stage. Due to procurement timelines It was highlighted that the likelihood of any savings being achieved in 2025/26 is low. Potential savings on the procurement will be in 2026/27 .
Opportunities/ Stretch savings - Estates stretch CIP	Alastair Groom	High	100	0	100	300	Value from exiting Wokingham Hospital lodge has reduced. Activity on Amersham and Bath Road progressing but unlikely to have 25/26 benefit. Three new voids from OH has increased pressure. At the moment unlikely to have 25/26 benefit.
Procedures of Limited Clinical Value (PLCV)	Ben Riley	High	38		38	1,000	Plans still in development stage, likelihood of delivering expected savings in 2025/26 low. VM to provide PMO support to team to help move scheme along. Forecast will be reviewed once detailed plan including milestones and savings assumptions have been developed.
Stoma and Catheter Saving Scheme - centralised service	Ben Riley	High	200	17	183	1,000	Scheme rated High risk due to delay in implementation of plans, Project CIP will be delayed due to project rollout. Earliest plan is 1st Oct 2025 so savings won't be realised til Jan 2026 at the earliest. Project lead working with various
Prescribing Stretch - Stopping Branded Prescribing	Ben Riley	High	0	0	0	2,500	Investment required for resources support to practices
Prescribing Stretch - Stopping Gluten Free Prescribing	Ben Riley	High	0	0	0	210	Investment required for resources support to practices
Prescribing Stretch - Cows Milk Protein Allergy	Ben Riley	High	0	0	0	350	Investment required for resources support to practices
Prescribing Stretch - Over the Counter Prescribing (OTC) /Self Care	Ben Riley	High	40	18	23	180	Savings delivery dependent on primary care engagement. Communication campaign also required for key messaging to patients
Prescribing Stretch - Low Priority Prescribing	Ben Riley	High	40	25	15	160	Savings delivery dependent on primary care engagement. Communication campaign also required for key messaging to patients
Prescribing Stretch	Ben Riley	High	920		920	1,700	Unidentified - Potential scheme for dietetics with business case of potential savings of circa £1m needing investment
	Total		1,359	60	1,300	8,574	

System savings target £24m – M04

Savings target phasing:

Project Title	Development and Delivery Status	Risk Rating	April	May	June	July	August	September	October	November	December	January	February	March	TOTAL
			£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
System Acute CIP - CMDU	Fully Developed	Low	175	175	175										526
System Acute CIP- High Cost Drugs	Plans in Progress	Medium	706	706	706	706	706	706	706	706	706	706	706	706	8,474
System Acute CIP - Plans in Progress	Opportunity	High	69	68	68	561	560	560	1,194	1,194	1,194	1,511	1,510	1,510	10,000
System Mental Health CIP - Plans in Progress	Opportunity	High	250	250	250	333	333	333	500	500	500	583	583	583	5,000
			1,200	1,200	1,200	1,600	1,600	1,600	2,400	2,400	2,400	2,800	2,800	2,800	24,000
FOT			1,200	1,200	1,200	1,600	706	706	2,400	2,400	2,400	2,800	2,800	4,587	24,000

Clawback by organisation in M04:

SUMMARY

	OUH	BHT	RBFT	OH	BHFT	ICB	FULL YEAR TOTAL @ M04
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Gross Clawback - Q1	(4,700.0)	(3,200.0)	(3,200.0)	(1,800.0)	(1,800.0)	(9,300.0)	(24,000.0)
Total Achieved	440.8	300.2	300.2	0.0	0.0	741.0	1,782.1
Net Clawback	(4,259.2)	(2,899.9)	(2,899.9)	(1,800.0)	(1,800.0)	(8,559.0)	(22,217.9)

Q1 Clawback @ M04

	OUH	BHT	RBFT	OH	BHFT	ICB	Q1 TOTAL
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Gross Clawback - Q1	(705.0)	(480.0)	(480.0)	(270.0)	(270.0)	(1,395.0)	(3,600.0)
M04 Achievement:							
System Acute CIP - CMDU	0.0	0.0	0.0	0.0	0.0	526.0	526.0
System Acute CIP - HCD	440.8	300.2	300.2	0.0	0.0	215.0	1,256.1
System Acute CIP - Plans in Progress	0.0	0.0	0.0	0.0	0.0	0.0	0.0
System MH/LD CIP - Sec.117	0.0	0.0	0.0	0.0	0.0	0.0	0.0
System MH/LD CIP - Plans in Progress	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total M04 Achievement:	440.8	300.2	300.2	0.0	0.0	741.0	1,782.1
M04 Net Clawback	(264.2)	(179.9)	(179.9)	(270.0)	(270.0)	(654.0)	(1,817.9)

Position at M04:

A risk share has been agreed to deliver recurrent savings to mitigate the £24m allocated to the in-system acute providers at the planning stage.

At M04 potential schemes have been identified with an estimated value of up to £20.5m. The above table highlights the risk rating and status of the identified schemes and the phased target each month.

At Q1 a potential £1.8m has been delivered against the target £3.6m, with a total clawback of £1.8m to offset the Q1 shortfall.

Work continues to develop the schemes, including formalising the governance and reporting arrangements to track delivery through the year. This will include confirmation of the process and timing of clawbacks to be triggered if required, to secure delivery of the financial plan.

ICB Other Financial Statements – Balance Sheet M04

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

Statement of financial position as at:	As at 31 March 25	As at 30 June 25	Movement	As at 31 July 25
31 July 2025	£m	£m	£m	£m
Non current assets	1.6	1.4	(0.1)	1.4
Total non current assets	1.6	1.4	(0.1)	1.4
NHS receivables - revenue	1.2	1.0	(0.2)	0.8
NHS prepayments and accrued income	1.7	1.3	0.2	1.6
Non-NHS receivables - revenue	2.1	1.1	0.2	1.3
Non-NHS prepayments and accrued income	3.9	11.1	1.2	12.3
Other receivables	25.9	6.6	(0.3)	6.3
Total trade and other	34.7	21.2	1.1	22.2
Cash	1.0	22.3	(12.1)	10.2
Total current assets	37.3	44.8	(11.1)	33.8
NHS payables - revenue	(11.9)	(24.8)	0.8	(24.0)
NHS accruals and deferred income	(29.6)	(14.3)	(1.0)	(15.3)
Non-NHS payables - revenue	(33.5)	(8.5)	0.3	(8.1)
Non-NHS payables - capital	(0.1)	(0.1)	0.0	(0.1)
Non-NHS accruals and deferred income	(103.8)	(123.6)	(3.1)	(126.7)
Other payables	(55.2)	(53.0)	6.2	(46.7)
Borrowings	0.0	(2.5)	2.5	0.0
Provisions	(3.2)	(2.5)	0.0	(2.5)
Total current liabilities	(237.3)	(229.2)	5.7	(223.5)
Total non current liabilities	(0.6)	(1.3)	0.1	(1.2)
Total assets employed	(200.6)	(185.6)	(5.4)	(191.0)
General fund	(200.6)	(185.6)	(5.4)	(191.0)
Total taxpayers equity	(200.6)	(185.6)	(5.4)	(191.0)

The statement of financial position summarises the assets and liabilities of the ICB at a point in time.

- Receivables have increased by £1.08m and now stand at £22.24m.
- Cash ledger balance at 31 July stands at £10.16m
- Current liabilities have decreased by £5.67m and now stand at £223.50m.
- The net result is an increase in total taxpayers equity of £5.36m.

ICB Other Financial Statements Receivables and Cash M04

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

Receivables

Aged receivables	NHS receivables		Non NHS receivables		Total	
	Value (£m)	No	Value (£m)	No	Value (£m)	No
Less than 31 days (not due)	0.75	6	0.66	11	1.41	17
Between 31 - 60 days	0.00	0	0.09	1	0.09	1
Between 61 - 90 days	0.00	0	0.00	0	0.00	0
Greater than 90 days	0.06	2	0.53	8	0.59	10
Total	0.81	8	1.29	20	2.10	28

At the end of month, BOB ICB had 2 NHS and 8 non NHS overdue invoices over 90 days.

Non NHS over 90 days debts amounts are being proactively chased, and outstanding salary overpayment, efforts to recover amount is being progressed via legal route.

Cash drawings

Main cash drawdown to date	Prescribing to date	Total cash drawings to date	Current allocation	Drawings to date as a % of allocation
£m	£m	£m	£m	%
1,376.37	124.67	1,501.05	4,500.24	33.4%

- The ICB processed a cash drawdown of £338.30m in July resulting in a total annual figure of £1,376.37m.
- The drawings against prescribing stand at £124.67m (including £24.77m dental). The cash drawn down to date is £1,501.05m which represent 33.4% utilisation against annual cash allocation limit of £4,500.24m.
- At the end of the month the ICB had £10.16m cash at bank which represents 3.00% of cash drawn down for the month.
- A small number of large value invoices were not validated and approved for payment within the period.
- The ICB has not achieved NHSE cash at bank target which should be no greater than 1.25% of cash drawn down for the month.

ICB Other Financial Statements – Payables M04

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

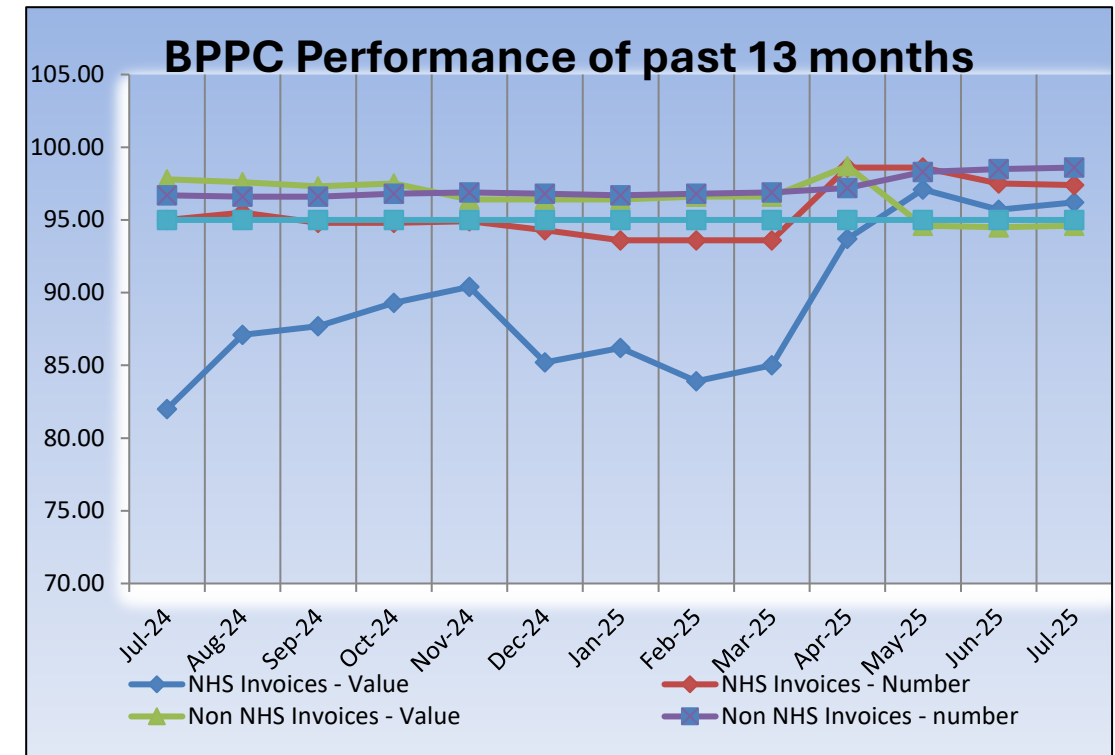
Aged payables - value	Not Due	Overdue	Overdue	Overdue	Overdue	Total
	£m	1-30 days £m	31-60 days £m	61-90 days £m	90+ days £m	
At 31 May	12.85	9.40	4.29	3.39	16.74	46.67
At 30 June	14.54	4.45	3.77	3.52	15.63	41.91
At 31 July	13.85	9.17	1.82	4.59	17.72	47.14
Aged payables - volume	Nos	Nos	Nos	Nos	Nos	Total Nos
At 31 May	1,414	467	304	159	913	3,257
At 30 June	1,385	407	257	268	966	3,283
At 31 July	1,444	531	262	178	1,067	3,482

The value of NHS invoices has been significantly reduced with the introduction of block payments, which are not invoiced, and therefore not included in the figures above.

The Better payment practice code requires the ICB to aim to pay all valid invoices by the due date or within 30 days of receipt of a valid invoice, whichever is later. The target for achievement is 95%. The ICB is achieving its target of paying NHS invoices by volume and value.

Better payment practice code - payment within 30 days (cumulative ytd)	NHS invoices		Non NHS invoices		Total	
	Value of invoice £m	Number	Value of invoices £m	Number	Value of invoice £m	Number
Total invoices paid	8.41	311	154.14	16,567	162.55	16,878
Total invoices paid within 30 days	8.10	303	145.84	16,327	153.94	16,630
% Paid within 30 days	96.2%	97.4%	94.6%	98.6%	94.7%	98.5%
Rating	Green	Green	Amber	Green	Amber	Green

95% or more
75% to 95%
Less than 75%



Provider Finances

Berkshire Healthcare FT provider summary

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

BHFT are reporting on plan YTD.

- Pay costs are under plan by £1.3m, mostly relating to substantive staff.
- Efficiencies are also on plan although the split has shifted towards more non-recurrent schemes. 100% of schemes are classed as fully developed with only 19% high risk (77% classed as low risk).

Income and Expenditure	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Income	(34.0)	(33.5)	(0.5)	(133.0)	(133.2)	0.2	(398.7)	(398.7)	(0.0)
Workforce pay cost	27.0	26.5	0.5	104.7	103.5	1.3	314.9	312.9	2.0
Non-pay cost	6.7	6.6	0.0	26.7	28.0	(1.3)	80.3	82.1	(1.9)
Non operating Items	0.2	0.1	0.0	0.6	0.8	(0.1)	1.9	1.9	(0.1)
Surplus/(deficit)	0.2	0.2	(0.0)	1.0	1.0	0.0	1.7	1.7	0.0
As % of income	0.5%	0.5%	(0.0%)	0.8%	0.8%	0.0%	0.4%	0.4%	0.0%

Efficiencies	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Pay	0.7	0.5	(0.2)	2.7	1.9	(0.7)	8.0	5.5	(2.5)
Non-Pay	0.1	0.1	(0.1)	0.6	0.3	(0.3)	1.7	1.2	(0.5)
Income	0.2	(0.4)	(0.6)	0.6	0.1	(0.6)	1.9	0.2	(1.8)
Total Recurrent	1.0	0.1	(0.8)	3.9	2.2	(1.6)	11.6	6.8	(4.7)
Pay	0.2	0.3	0.0	0.9	1.0	0.1	2.8	3.4	0.6
Non-Pay	0.3	0.5	0.2	1.0	2.0	1.0	3.1	5.5	2.4
Income	0.0	0.6	0.6	0.0	0.6	0.6	0.0	1.8	1.8
Total Non-Recurrent	0.5	1.3	0.8	2.0	3.6	1.6	5.9	10.6	4.7
Total Efficiencies	1.5	1.5	0.0	5.8	5.8	0.0	17.5	17.5	(0.0)

Workforce pay costs	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Substantive	25.0	24.6	0.4	96.8	95.6	1.1	291.0	289.5	1.5
Bank	1.5	1.4	0.2	6.1	5.5	0.6	18.5	16.5	2.0
Agency	0.4	0.5	(0.2)	1.4	1.9	(0.5)	4.2	5.7	(1.5)
All other Pay	0.1	0.1	0.0	0.4	0.4	0.0	1.2	1.2	0.0
Total workforce pay cost	27.0	26.5	0.5	104.7	103.5	1.3	314.9	312.9	2.0

Workforce WTE	M04		
	Plan	Actual	Variance
Substantive WTE	5,008.6	4,838.5	170.0
Bank WTE	319.8	292.1	27.8
Agency WTE	32.8	33.2	(0.4)
Total workforce WTE	5,361.1	5,163.7	197.4

Bucks Healthcare provider summary

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

BHT are reporting £0.1m favourable to plan YTD.

- YTD pay costs are £3.3m adverse to plan (a significant deterioration from £1.5m adverse to plan at M3).
- £0.3m of the adverse pay variance is due to Industrial Action (IA) during M4. This has been mitigated by the early release of balance sheet flexibilities planned for later in the year; this creates a financial pressure in H2. The remaining YTD adverse pay variance has been offset by income £3.8m above plan.
- Efficiencies are £0.1m ahead of plan YTD. There is underachievement of pay efficiencies in line with the overall pay position, mitigated by overachievement on non-recurrent non-pay schemes. £22.1m (58%) of efficiency forecast is classed as fully developed (£25.6m at M3). £6.0m (16%) is classed as high risk

Income and Expenditure	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Income	(58.2)	(61.9)	3.7	(228.9)	(232.7)	3.8	(691.1)	(690.6)	(0.5)
Workforce pay cost	35.6	37.3	(1.8)	141.0	144.3	(3.3)	415.4	415.4	0.0
Non-pay cost	21.7	23.8	(2.1)	87.5	88.5	(1.0)	260.0	260.3	(0.3)
Non operating Items	1.4	1.1	0.2	5.5	4.9	0.6	16.5	15.7	0.8
Surplus/(deficit)	(0.4)	(0.3)	0.1	(5.0)	(4.9)	0.1	(0.8)	(0.8)	0.0
As % of income	(0.7%)	(0.5%)	0.1%	(2.2%)	(2.1%)	0.0%	(0.1%)	(0.1%)	0.0%

Efficiencies	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Pay	0.9	0.6	(0.3)	2.8	1.7	(1.1)	11.3	10.9	(0.4)
Non-Pay	0.8	0.5	(0.3)	2.2	2.0	(0.2)	9.1	9.6	0.5
Income	0.1	0.1	0.0	0.2	0.2	(0.0)	0.9	0.8	(0.1)
Total Recurrent	1.8	1.2	(0.6)	5.2	3.8	(1.3)	21.3	21.3	0.0
Pay	1.0	(0.4)	(1.4)	2.9	0.6	(2.3)	11.9	9.2	(2.7)
Non-Pay	0.4	(1.4)	(1.8)	1.2	0.8	(0.4)	4.8	2.6	(2.2)
Income	0.0	4.0	4.0	0.0	4.1	4.1	0.0	4.9	4.9
Total Non-Recurrent	1.4	2.2	0.8	4.1	5.5	1.4	16.7	16.7	0.0
Total Efficiencies	3.2	3.4	0.2	9.3	9.4	0.1	37.9	37.9	0.0

Workforce pay costs	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Substantive	32.8	34.3	(1.5)	129.6	133.3	(3.6)	381.9	381.9	0.0
Bank	2.4	2.7	(0.2)	9.9	9.6	0.2	29.1	29.1	0.0
Agency	0.4	0.4	(0.0)	1.5	1.4	0.1	4.4	4.4	0.0
All other Pay	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total workforce pay cost	35.6	37.3	(1.8)	141.0	144.3	(3.3)	415.4	415.4	0.0

Workforce WTE	M04		
	Plan	Actual	Variance
Substantive WTE	6,379.7	6,386.1	(6.4)
Bank WTE	421.4	399.1	22.3
Agency WTE	43.8	49.3	(5.5)
Total workforce WTE	6,844.8	6,834.5	10.3

Oxford Health FT provider summary

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

OHFT are reporting a £9k surplus to plan YTD.

- Pay costs are £2.5m over plan YTD offset by non-pay and income favourable to plan. The misalignment between £ and WTE is due to plan £ being set too low and not including the full cost of posts funded through MHIS and SDF as well as increases in R&D and Education and Training Income. Internal budgets within OH have been adjusted to reflect this and pay costs are underspent to internal budgets.
- Efficiencies are on plan YTD. £31.4m (87%) of schemes are classed as fully developed . £2.4m (7%) is classed as high risk.

Income and Expenditure	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Income	(60.0)	(60.6)	0.6	(236.7)	(237.1)	0.4	(710.0)	(709.1)	(0.9)
Workforce pay cost	35.6	36.8	(1.2)	140.0	142.5	(2.5)	418.8	429.9	(11.1)
Non-pay cost	24.1	23.5	0.5	95.8	93.8	2.0	287.2	275.7	11.6
Non operating Items	(0.0)	(0.0)	0.0	(0.4)	(0.5)	0.1	(0.8)	(1.2)	0.4
Surplus/(deficit)	0.4	0.3	(0.0)	1.3	1.3	0.0	4.8	4.8	0.0
As % of income	0.6%	0.6%	(0.1%)	0.5%	0.5%	0.0%	0.7%	0.7%	0.0%

Efficiencies	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Pay	0.6	1.7	1.2	1.8	3.6	1.8	9.0	9.8	0.8
Non-Pay	0.4	0.3	(0.0)	1.4	1.4	(0.0)	4.8	4.4	(0.4)
Income	0.0	0.0	0.0	0.1	0.1	0.0	0.4	0.4	0.0
Total Recurrent	1.0	2.1	1.1	3.3	5.1	1.8	14.2	14.6	0.4
Pay	1.7	0.8	(0.9)	6.6	5.0	(1.5)	18.3	19.6	1.3
Non-Pay	0.3	0.1	(0.2)	0.4	0.1	(0.3)	3.5	1.8	(1.7)
Income	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total Non-Recurrent	2.0	0.9	(1.1)	6.9	5.1	(1.8)	21.8	21.4	(0.4)
Total Efficiencies	3.0	3.0	(0.0)	10.2	10.2	(0.0)	36.0	36.0	0.0

Workforce pay costs	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Substantive	30.9	32.3	(1.4)	121.8	125.6	(3.8)	364.7	378.1	(13.4)
Bank	3.3	3.1	0.2	12.8	12.0	0.8	38.8	36.3	2.5
Agency	1.5	1.4	0.1	6.2	5.6	0.6	17.6	17.6	0.0
All other Pay	(0.2)	(0.1)	(0.1)	(0.8)	(0.7)	(0.1)	(2.3)	(2.1)	(0.2)
Total workforce pay cost	35.6	36.8	(1.2)	140.0	142.5	(2.5)	418.8	429.9	(11.1)

Workforce WTE	M04		
	Plan	Actual	Variance
Substantive WTE	6,668.3	6,664.3	4.0
Bank WTE	655.2	598.2	56.9
Agency WTE	185.4	155.8	29.7
Total workforce WTE	7,508.9	7,418.3	90.6

Oxford University Hospitals FT provider summary

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

OUH are reporting a £9.2m deficit YTD which is a £0.3m surplus to plan.

- The YTD underspend is in part due to a one-off benefit in month from a PFR insurance rebate.
- YTD pay costs are £1.2m favourable to plan (£0.7m favourable to plan at M3). £0.4m of direct pay costs relating to the Industrial Action in July are included in the YTD pay costs and have been mitigated by other pay costs below plan. The activity and income impact of the IA will be confirmed by the trust during M5
- Non-Pay costs are £11.6m over plan YTD but offset by Income (£9.3m) and pay (£1.2m) favourable to plan.
- Efficiencies are £0.3m favourable to plan YTD (£2.2m behind plan at M3). OUH are reporting £10.7m overachievement in FOT against efficiency schemes. This is due to non-cash releasing efficiencies now being included (as per PFR changes by NHSE). £60.9m of CIP schemes categorised as fully developed (£45.3m at M3). £36.0m (33%) are classified as high risk £37.5m at M3).

Income and Expenditure	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Income	(146.0)	(148.7)	2.7	(576.0)	(585.4)	9.3	(1,730.8)	(1,735.2)	4.4
Workforce pay cost	85.4	85.0	0.5	337.1	335.9	1.2	989.1	989.1	0.0
Non-pay cost	57.8	61.8	(4.0)	233.0	244.6	(11.6)	691.1	696.5	(5.5)
Non operating Items	3.9	2.9	1.0	15.5	14.1	1.4	48.6	47.6	1.1
Surplus/(deficit)	(1.2)	(1.0)	0.2	(9.5)	(9.2)	0.3	2.0	2.0	0.0

As % of income	(0.8%)	(0.6%)	0.1%	(1.6%)	(1.6%)	0.0%	0.1%	0.1%	0.0%
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Efficiencies	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Pay	2.3	0.9	(1.4)	5.5	5.2	(0.2)	38.5	39.9	1.4
Non-Pay	1.5	2.8	1.3	6.0	5.9	(0.1)	18.0	22.4	4.4
Income	0.3	2.4	2.1	1.2	2.8	1.5	3.7	12.0	8.3
Total Recurrent	4.1	6.1	2.0	12.7	13.9	1.2	60.2	74.3	14.1
Pay	0.6	1.4	0.8	2.5	3.9	1.4	7.5	5.3	(2.2)
Non-Pay	1.9	0.8	(1.1)	7.4	5.4	(2.1)	22.3	26.2	3.9
Income	0.4	1.2	0.8	2.1	1.9	(0.3)	9.1	4.0	(5.1)
Total Non-Recurrent	2.8	3.3	0.5	12.1	11.2	(0.9)	38.9	35.5	(3.4)
Total Efficiencies	7.0	9.4	2.5	24.7	25.0	0.3	99.0	109.7	10.7

Workforce pay costs	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Substantive	81.1	80.8	0.3	319.5	319.6	(0.1)	938.5	938.5	0.0
Bank	3.7	3.7	0.0	14.7	13.8	1.0	42.7	42.7	0.0
Agency	0.3	0.3	0.1	1.6	1.3	0.3	4.3	4.3	0.0
All other Pay	0.3	0.3	0.0	1.2	1.2	0.0	3.7	3.7	0.0
Total workforce pay cost	85.4	85.0	0.5	337.1	335.9	1.2	989.1	989.1	0.0

Workforce WTE	M04		
	Plan	Actual	Variance
Substantive WTE	13,978.6	13,802.6	176.0
Bank WTE	644.0	579.9	64.1
Agency WTE	35.0	32.7	2.3
Total workforce WTE	14,657.6	14,415.2	242.4

Royal Berkshire FT provider summary

**Buckinghamshire, Oxfordshire
and Berkshire West**
Integrated Care Board

RBFT are reporting an £8.8m deficit YTD which is on plan.

- YTD pay costs are £2.0m adverse to plan (a significant deterioration from £0.8m adverse to plan at M3). The pay variance is largely driven by higher rates being paid for clinical sessions in order that activity targets are met. £0.4m of the adverse pay variance is due to Industrial Action (IA) during M4. This has been mitigated by the early release of balance sheet flexibilities planned for later in the year; this creates a financial pressure in H2. The remaining YTD adverse pay variance has been offset by income £2.3m above plan.
- CIP delivery is £3.0m favourable to plan (£2.2m at M3). £33.1m (82%) of CIP schemes are categorised as fully developed at M4. £17.2m (42%) of CIPs are classified as high risk of delivery.

Income and Expenditure	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Income	(56.5)	(57.8)	1.4	(220.8)	(223.1)	2.3	(667.3)	(667.3)	0.0
Workforce pay cost	34.6	35.9	(1.2)	137.3	139.3	(2.0)	409.2	409.2	0.0
Non-pay cost	22.0	22.2	(0.2)	89.3	89.6	(0.3)	256.5	256.5	0.0
Non operating Items	0.8	0.8	(0.0)	3.1	3.1	(0.0)	9.4	9.4	0.0
Surplus/(deficit)	(1.0)	(1.0)	(0.0)	(8.8)	(8.8)	0.0	(7.8)	(7.8)	0.0
As % of income	(1.7%)	(1.7%)	(0.0%)	(4.0%)	(4.0%)	0.0%	(1.2%)	(1.2%)	0.0%

Efficiencies	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Pay	0.5	(0.4)	(0.8)	2.0	0.3	(1.7)	15.5	1.9	(13.6)
Non-Pay	0.5	2.8	2.2	2.0	5.1	3.0	10.2	21.3	11.2
Income	0.1	(0.0)	(0.1)	0.5	0.1	(0.4)	1.2	0.6	(0.6)
Total Recurrent	1.1	2.3	1.3	4.5	5.5	1.0	26.8	23.8	(3.0)
Pay	0.2	1.2	1.0	0.7	2.9	2.2	1.6	8.4	6.8
Non-Pay	0.3	(1.3)	(1.5)	1.0	0.5	(0.5)	7.8	2.5	(5.3)
Income	0.3	0.3	0.0	0.7	1.0	0.3	4.4	6.0	1.6
Total Non-Recurrent	0.7	0.2	(0.5)	2.4	4.4	2.0	13.8	16.8	3.0
Total Efficiencies	1.8	2.6	0.8	6.8	9.8	3.0	40.6	40.6	0.0

Workforce pay costs	M04			YTD			Forecast		
	Plan	Actual	Variance	Plan	Actual	Variance	Plan	Actual	Variance
	£m	£m	£m	£m	£m	£m	£m	£m	£m
Substantive	32.9	34.4	(1.5)	130.4	133.0	(2.6)	388.5	388.5	0.0
Bank	1.6	1.3	0.2	6.2	5.7	0.5	18.7	18.7	0.0
Agency	0.2	0.1	0.0	0.7	0.6	0.1	2.0	2.0	0.0
All other Pay	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Total workforce pay cost	34.6	35.9	(1.2)	137.3	139.3	(2.0)	409.2	409.2	0.0

Workforce WTE	M04		
	Plan	Actual	Variance
Substantive WTE	5,897.2	5,960.9	(63.7)
Bank WTE	318.0	296.1	21.9
Agency WTE	20.9	12.1	8.8
Total workforce WTE	6,236.1	6,269.1	(33.0)

ICS Capital 2025/26 M04

Capital M4 2025/26	YTD Budget	YTD Actual	YTD Variance	Annual Budget	Forecast Outturn	Forecast Variance
	£'m	£'m	£'m	£'m	£'m	£'m
Operational Capital (BAU)	17.2	8.4	8.7	74.3	73.5	0.9
IFRS16	8.5	9.3	(0.8)	48.8	51.6	(2.9)
National Programmes - Estates Safety Fund	5.3	2.7	2.6	37.1	37.1	0.0
National Programmes - Constitutional Standards	1.2	0.0	1.1	39.6	27.6	12.0
Primary Care Utilisation Fund	0.7	0.0	0.7	2.8	2.8	0.0
PFI Capital Charges	3.5	3.5	0.0	10.6	10.6	0.0
Other	3.4	1.2	2.2	13.3	14.3	(1.0)
BOB ICS TOTAL	39.8	25.2	14.7	226.5	217.5	9.0
ICS CDEL total	36.9	24.1	12.8	216.3	207.3	9.0
Berkshire Healthcare NHS Foundation Trust	3.7	1.7	1.9	22.4	22.4	0.0
Buckinghamshire Healthcare NHS Trust	7.4	6.5	1.0	66.6	57.0	9.5
Oxford Health NHS Foundation Trust	5.5	1.6	3.9	20.9	20.9	0.0
Oxford University Hospitals NHS Foundation Trust	12.1	9.9	2.2	62.7	62.7	0.0
Royal Berkshire NHS Foundation Trust	6.2	4.3	1.9	37.4	37.9	(0.5)
BOB ICB	1.9	0.0	1.9	6.2	6.2	0.0
ICS Non-CDEL total	3.0	1.1	1.8	10.2	10.2	(0.0)

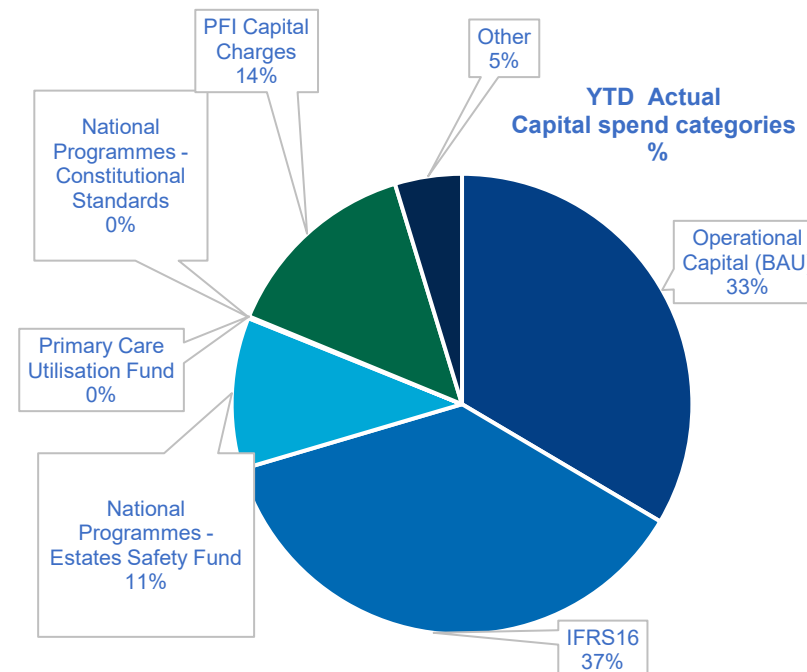
Gross Capital values: Owned (all funding sources), IFRS16 and PFI/ IFRIC 12 assets

At M04 System gross capital spend was £14.7m worse than plan due to profiling at the planning stage, of which:

- £8.7m of the operational capital schemes underspend relates to BHT (£1.6m), OHFT (£4.2m), RBFT (£2.0) and others (£0.9m)
- £0.8m of the IFRS16 overspend relates to RBFT with nothing planned but spend of £1.8 YTD and National Programmes are circa £2.8m due to planning profile

The full year forecast outturn is an underspend of £9.0m on approved plans and allocations. There is a £12m underspend on the Endoscopy Project at BHT which is set to be completed over two financial years. Therefore, the allocation underspend against this project will be removed from 2025/26 and transferred to 2026/27 – thereby eliminating the in-year variance. There is a further adjustment expected by BHT on their prior year UEC allocation of £2.m which is included in the in-year FOT.

IFRS 16 is forecasted to be £2.9 overspend. This relates to RBFT and OUH and is included in the £9m underspend as other operational capital has been adjusted to spend within allocation.



BOB ICS key capital priorities are:

- BOB ICS Estates and Capital Workstream (BAU)
- National Programme Estates Safety Fund (CIR)
- National Programme Constitutional Standards
- Primary Care IT
- Primary Care Utilisation Fund

Source: Provider PFR (per PFR tab 16)

Glossary of Terms



Term	Explanation
AACCC	All Age Complex and Continuing Care (see CHC below)
ALOS	Average Length of stay
API	Aligned Payment and Incentive - Payment mechanism covering almost all NHS provider activity and comprises fixed and variable elements. Almost all elective activity, and all activity which forms part of the ERF, is included in the variable element and is paid for using NHS Payment Scheme unit prices.
ARRS	Additional Roles Reimbursement Scheme for Primary care. NHS E reimburse costs of additional roles such as Pharmacists, Paramedics, MH workers retrospectively i.e. after the additional costs have been incurred.
BOB	Buckinghamshire, Oxfordshire and Berkshire West
Break even	Where actual costs are the same as planned
Capital	Property, plant or equipment held for use in delivering services that are expected to be used for more than one financial year
Category M drugs	Multiple source and widely available generic drugs
CIP	Cost Improvement Plans - schemes designed to save money without impacting on services and patient safety.
CHC	Continuing Healthcare - free social care for people with long term complex health needs that is funded solely by the NHS
Deficit	Expenditure in excess of resources
ERF	Elective Recovery Funding - to support the NHS in its endeavour to increase its elective activity, which are the non-emergency procedures that have been scheduled in advance.
Fast-Track	NHS Continuing Healthcare Fast-Track pathway for those where health is deteriorating quickly or nearing the end of life
FNC	Funded Nursing Care - for people not eligible for CHC but assessed as requiring nursing care in a care home. NHS pay a contribution towards the cost of registered nursing care.
FOT/Forecast	Forecast Outturn - forecast spend at end of the financial year
ICB	Integrated Care Board
ICS	Integrated Care System - consists of ICB and provider organisations in Buckinghamshire, Oxfordshire and Berkshire West.
Mitigations	Actions taken/to be taken to reduce impact of risks
NCA	Non-contracted activity
NCSO	"No cheaper stock obtainable" - generic drug not available at tariff price, higher cost items need to be used
Overspend/Adverse	Actual costs are more than planned
POD services	Pharmacy, Ophthalmology and Dental services delegated to ICBs from NHS E regional teams from 2022-23
Under spend/Favourable	Actual costs are less than planned
Variance	Difference between actual expenditure and plan
YTD	Year to date