2.4 Financial Health

2.4.1 Income and Expenditure

Although not directly related to the quality of services provided, not to clinical

governance procedures, financial health measured in terms of adequate income and

expenditure and efficient use of resources gives a sense of how well a trust may be

As table 2.7 shows, the trust's income increased from 89189 k in 1994/95 to

109868 k in 1999/00.

Table 2.7 Trust income and expenditure 1994/95 to 1999/00

Year	Income	Expenditure
	£'000	£'000
1994/95	89189	88471
1995/96	91 , 627	90,821
1996/97	95 , 560	94,676
1997/98	96 , 960	93,809
1998/99	101,607	98,202
1999/00	109868	106,543

Source: HCIS database of Trust accounts 1994/95-1999/2000

In 1999/00, the trust made adeficit of £ -234 k.

Add text here about performance against statutory financial targets - this should be available from the trust's annual report

Table 2.8 shows that the trust earned its income mainly from

Table 2.8 Sources of Trust income 1999/00

Source	Proportion
Health Authority	89.4
Education, Training	& Research1.0%
DoH	0.0%
Other patient related	d 1.9%
Other non-patient related	

Source: HCIS database of Trust accounts 1999/2000

2.4.2 Other Measures

There are other measures of trust performance which related to the use of human and

physical resources. Table 2.9 outlines some of these

Table 2.9 Measures of efficiency and waiting time

Mean length of stay:	31.5
Day case	0%
Total	8
Percentage over 12 month	0.0%

Over 12 month inpatient 0
Percentage of outpatients seen in 26 100.0

2000.	Sources: Day case rate and LOS - DOH analysis of HES; Inpatient waits - DoH waiting green book Dec	
2000;	Outpatient waits - DoH waiting red book Dec 2000	
able	to	perform.

£

xxxxxxxxxxxxxxxxxx.

income income

rate:
waiters:
waiters:
waiters:

weeks