

Freedom of Information Act Request

I am writing to request information under the Freedom of Information Act 2000.

SECTION ONE: financial breakeven requirements

From 2025-26, NHS England's financial framework requires NHS trusts to meet a statutory breakeven duty. Where possible, trusts must avoid in-year deficits and recover prior deficits.

Request (section one):

1. *Please provide the trust's in-year deficit or surplus for 2024–25, and its estimated in-year deficit or surplus for 2025–26, 2026–27 and 2027–28. (Where the trust plans to break even, please confirm this. Where a deficit or surplus is projected, please state the estimated value.)*

Adjusted financial performance

2024/25 actual deficit	£2.423m
2025/26 forecast deficit	£4.250m
2026/27 planned deficit	In the process of being developed
2027/28 planned deficit	In the process of being developed

SECTION TWO: efficiency, productivity and cost-reduction requirements

NHS England has set mandatory efficiency measures, including: reducing organisational cost base by at least 1%; delivering around 4% productivity improvement; reducing corporate service spending to pre-pandemic levels; and reducing reliance on temporary and agency staffing.

Request (section two):

2a. Workforce reductions and permanently deleted posts

At the time of responding to this request, the Trust has not formally agreed or identified specific services, departments or functions for reduction, reconfiguration or closure within its approved financial plans for the financial years 2025–26, 2026–27 and 2027–28.

This should include job cuts or redundancies, and posts that have already been permanently deleted whether or not this resulted in redundancy.

Where possible, and within statutory cost limits, please break this information down by staff group, for example: clinical staff, non-clinical staff, corporate / administrative staff

Please express figures in full-time equivalent (FTE). Where only headcount figures are held, please provide these instead and indicate this.

The Trust does not hold this information in a single, centrally collated dataset.

While workforce data (such as starters, leavers and establishment) is recorded within the Electronic Staff Record (ESR), the system does not include a field identifying whether a post reduction, vacancy deletion or staff departure occurred specifically as a result of financial recovery or breakeven planning.

Relevant information is held across multiple sources including ESR records, divisional workforce plans and financial recovery documentation.

To respond to this request the Trust would need to manually review and reconcile workforce establishment records, individual post histories, redundancy data and financial planning documentation across multiple financial years and organisational areas in order to determine which changes could reasonably be attributed to breakeven planning.

We estimate that locating, retrieving and extracting this information would exceed the appropriate limit of £450 (equivalent to 18 staff hours) set under the Freedom of Information and Data Protection (Appropriate Limit and Fees) Regulations 2004.

Accordingly, this part of the request is refused under **Section 12(1) of the Freedom of Information Act 2000**.

2b. Method of workforce reduction and post deletion

Where possible, please provide a breakdown of how the workforce reductions and permanent post deletions described in section 2a are being or will be achieved, for example through: compulsory redundancies, voluntary redundancies, non-renewal of fixed-term contracts, natural wastage, vacancy controls or recruitment freezes.

Where data is held, please break this information down by staff group (clinical/non-clinical/corporate, or equivalent categories used by the trust) and by financial year (2025–26, 2026–27, 2027–28).

The Trust does not hold information identifying workforce reductions specifically attributable to breakeven planning in the format requested.

As explained in response to Question 2a, determining this information would require a manual review of multiple datasets and documents and would exceed the appropriate cost limit under Section 12(1) of the Freedom of Information Act 2000.

SECTION THREE: planned service reductions

Breakeven planning may involve changes to service delivery, including reductions, reconfiguration or cessation of services.

Request (section three):

- 3. Please outline any services, departments or functions that the trust has identified for reduction, reconfiguration or closure as part of its breakeven duty and medium-term financial plan, and indicate in which financial year(s) these changes are planned (2025–26, 2026–27 and/or 2027–28).*

The Trust is required to deliver financial efficiencies as part of its annual financial planning process and wider medium-term financial plan. This includes the development of Cost Improvement Plans (CIPs) and transformation programmes aimed at improving productivity, reducing waste and ensuring services remain sustainable.

At the time of responding to this request, the Trust has not formally agreed or identified specific services, departments or functions for reduction, reconfiguration or closure solely as part of breakeven planning for the financial years 2025–26, 2026–27 or 2027–28.

Cost Improvement Plans may include a range of efficiency and productivity initiatives and do not necessarily represent reductions or closures of services.

Any potential future service changes would be subject to the Trust's governance processes and, where appropriate, engagement with commissioners, partners and the public.

For information, any future proposal that would result in a change to the range of services available, the material scope of services, and/or the geographical location from which services are delivered would be subject to the NHS England guidance "Planning, assuring and delivering service change for patients." This guidance places obligations on providers and commissioners in relation to public and local authority engagement and consultation and advises that public consultation should be commissioner led.

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Should commissioners agree to proceed to public and local authority consultation in relation to any proposed service change, the relevant plans would be published in the public domain at that stage. It is not possible at this stage to indicate when this might occur, as there are currently no formally agreed service reductions and any timeline would depend on the agreement of multiple organisations and the development of consultation materials.

If you are not satisfied with the handling of your request, you have the right to request an internal review. Requests for an internal review should be submitted within 40 working days from the date of this response, and should be addressed to d.wraith@nhs.net.

If you remain dissatisfied after the internal review, you have the right to appeal to the Information Commissioner's Office (ICO). The ICO can be contacted at:

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF
Tel: 0303 123 1113
Website: <https://ico.org.uk/make-a-complaint/>

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