

# Update on Financial Policy Review and Draft Integrated Budget/Planning Process

Presentation to
Finance and Facilities Committee
September 5, 2013





# **PwC – Financial Policies**

- Engaged PwC on June 17<sup>th</sup> to review MLHU financial policies in light of the Broader Public Sector guidelines
- PwC completed their review in late August
- PwC met with the Director of Finance to review first draft of findings



# **PwC – Financial Policies**

## Next Steps:

- SLT to review recommendations in September
- Report to Finance & Facilities
   Committee in October
- Revise financial policies & implement (educate staff on revisions)

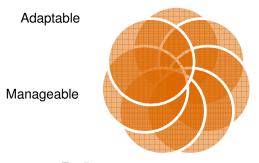


# What should the future budget/planning process achieve?

The future budget/planning process should better integrate operational planning with budget planning

The future state process should be:

#### Aligned with Board of Health's strategy



Driven by program requirements

Transparent

Easily Understood

Trustworthy

"Integrate and align Service Area planning and budgeting activities to mitigate against risk of unplanned expenditures and to support optimal allocation of resources to key initiatives."

PwC recommendation

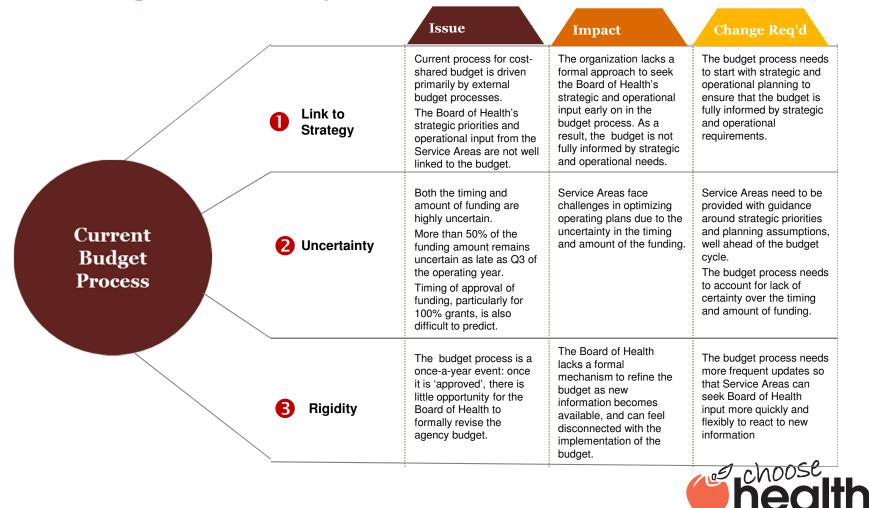
#### Once implemented, MLHU should be able to:

- ✓ Better align the budget to the Board of Health's overall strategic priorities
- ✓ Use operational plans to inform the development of the budget (not *vice versa*)
- ✓ Uphold public accountability over the use of financial resources in an open and transparent manner
- ✓ Foster confidence and trust in the integrity of the budget process
- ✓ Clearly communicate and report on the status of the budget, frequently and regularly, in order to facilitate effective decision making
- ✓ Manage the budget process more efficiently, spending less effort to achieve greater output
- ✓ React flexibly to new information and adapt the budget to ongoing developments



## What needs to change?

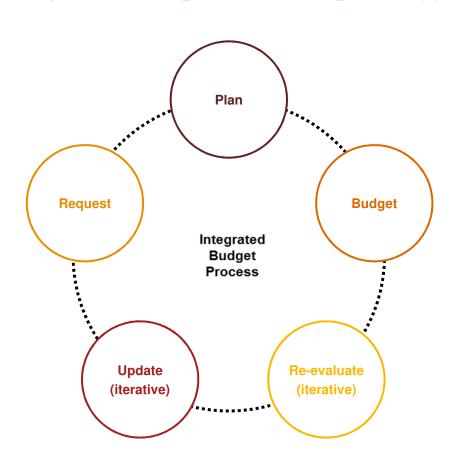
The current process has three fundamental issues that need to be addressed



# HEALTH UNIT How does the future st

# How does the future state Budget/Planning Process work?

The future state process is comprised of five major stages



	Stage	Key Objectives
1	Plan	<ul> <li>Formulate strategic direction</li> <li>Set next year's high-level planning parameters</li> <li>Review prior year's operating outcomes</li> <li>Establish next year's service operating plans</li> </ul>
2	Budget	<ul> <li>Assess current year's budget status</li> <li>Assess program evidence – new, existing, cancellations</li> <li>Cost out program requirements</li> <li>Recommend, approve and communicate budget</li> </ul>
3	Re-evaluate (iterative)	<ul> <li>Assess health of operating surpluses in prior quarters based on agreed-upon criteria</li> <li>Prioritize operating initiatives</li> <li>Develop and agree on operating surpluses deployment plans</li> </ul>
4 Update (iterative)		<ul> <li>On a frequent basis, update status of operating and budget to key stakeholders</li> <li>Assess impact of new information on operating plans, budget, and use of operating reserves</li> <li>Based on new information, make refinements to current year budget and "lock-in" the budget forecast for the next quarter</li> </ul>
5	Request	On the basis of the ongoing activities of the above stages, work with the City, County and the Province to make funding requests, as required





## What are the key activities for each stage? (2015 Process)

1. Plan

#	Lead	Support	Activity	Timing
1	Finance Committee, BOH	SLT	Provide MLHU with strategic direction and key budget planning assumptions for the next year (i.e. 2015)	March 2014
2	SLT	Service Areas	SLT outline high-level planning parameters to Service Areas	March
3	Service Areas	SLT	Review prior year summaries	March
4	Service Areas	SLT	Review prior year operational plan outcomes	March
5	Service Areas	SLT	Review current year Q1 variance reports	April
6	Service Areas	SLT	Assess feasibility of current year targets	April
7	Service Areas	SLT	Create operating plans for each Service Area	April

"Unless commitment is made, there are only promises and hopes; but no plans."

Peter F. Drucker

#### Notes

#### **Expected Outputs**

- High-level operating planning parameters for Service Areas
- Operating plans for each Service Area

#### Linkages

• Prior quarter's budget status should inform the assessment of current year targets



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## What are the key activities for each stage?

#### 2. Budget

(2015	<b>Process</b> )
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#	Lead	Support	Activity	Timing
1	Service Areas	SLT	Analyze operational and financial information to date, per above	May
2	Service Areas	SLT	Assess additional program evidence - current and new	Мау
3	Service Areas	SLT	Cost out program changes (new/current/cancellation) to develop budgets	June to July
4	Service Areas	SLT	Consider agency-wide initiatives and assess impact on plans	June to July
5	Service Areas	SLT	Meet with SLT to dialogue on Service Area plans and budgets	August
6	SLT	Service Areas	Report to BOH on high level program initiatives	September
7	SLT	Service Areas	Recommend budget for next year to BOH	October
8	BOH, whole	SLT	Approve budget for next year	November
9	SLT	Service Areas	Communicate budget and program directions with staff	December

#### Notes

#### **Expected Outputs**

• Approved budget for next year

#### Linkages

• Priorities for operating initiatives should inform the development of operating reserve deployment plans, which in turn should be a key consideration in developing the operating budget for next year

"Don't tell me what you value, show me your budget, and I'll tell you what you value." Joe Biden





## What are the key activities for each stage? (2015 Process)

#### 3. Re-evaluate

#	Lead	Support	Activity	Timing
1	Service Areas	SLT	Assess status of operating reserves from prior quarters	July
2	Service Areas	SLT	Prioritize operating initiatives using both operating and financial criteria	July
3	Service Areas	SLT	Develop operating reserve deployment plans based on priorities	August
4	Service Areas	SLT	Agree on operating reserve deployment plans based on priorities	September

"The Principle of Priority states (a) you must know the difference between what is urgent and what is important, and (b) you must do what's important first."

Steven Pressfield, The War of Art: Break *Through the Blocks & Win Your Inner* Creative Battles

#### Notes

#### **Expected Outputs**

• Operating reserve deployment plans

#### Linkages

• Operating reserve deployment plans are critical to developing next year's budget, as well as updating and refining the current vear budget





# What are the key activities for each stage? 4. Update (2015 Process)

#	Lead	Support	Activity	Timing
1	SLT	Service Areas	Review prior quarter's budget status	Last month of each quarter
2	Service Areas	SLT	Update current year operating plan status and outcomes	First month of each quarter*
3	Service Areas	SLT	Assess operating reserve deployment plans based on updates	First month of each quarter*
4	SLT	ВОН	Roll-up budget status and update BOH for information purposes	Second month of each quarter*
5	SLT	ВОН	Make refinements to current year budget and create "Budget Lock"	Second month of each quarter*

<sup>\*</sup> Except for July and August in Q3, these activities are superseded by main budget planning cycle for the next year.

"The biggest risk is not taking any risk... In a world that changing really quickly, the only strategy that is guaranteed to fail is not taking risks."

Mark Zuckerberg

#### Notes

#### **Expected Outputs**

- Summary operating plans status update
- Summary budget status update

#### Linkages

• During the main budget planning cycle for the following year, these updates will be required to inform the development of priorities





## What are the key activities for each stage? (2015 Process)

#### 5. Request

#	Lead	Support	Activity	Timing
1	Board of Health	SLT	Provide guidelines for City budget targets	May
2	SLT	City Council	Submit budget and planning information to City	September
3	City Council	SLT	Conduct formal City budget planning input process	Sept – Dec
4	SLT	City Council	Submit summary cost-shared budget to City	December
5	City Council	SLT	Confirm City's appropriation for cost-shared budget	February
6	County Council	SLT	Confirm County's appropriation for cost-shared budget	March
7	SLT	Province	Submit Ministry grant requests	April
8	Province	SLT	Confirm Ministry's funding grant	June to Sep
9	BOH whole	SLT	Approve and sign Ministry grant agreement	June to Sep

#### Notes

#### **Expected Outputs**

- Confirmation of City funding appropriation
- Confirmation of Council funding appropriation
- Ministry grant requests
- Signed Ministry grant agreements

#### Linkages

• Funding appropriations will be informed by the MLHU's budget and operating plans





Stage	Description for 2014 Budget/Planning Process	Timeline
Plan	2014 Budget/Planning Process Development	<ul><li>FFC on Sept 5</li><li>BOH on Sept 19</li></ul>
	Identify key initiatives for 2014 as well as areas for potential enhancements, efficiencies and reductions	Health Unit staff from Sept-Nov
Budget	Budget Targets (financial and strategic)	<ul><li>FFC on Sept 5</li><li>BOH on Sept 19</li></ul>
	Program Budgeting and Marginal Analysis (PBMA) process to prioritize budget changes based on Board of Health's policy criteria:  Program-level changes  Organization-wide initiatives	<ul> <li>BOH Retreat on Nov 1 (finalize criteria)</li> <li>FFC on Dec 5 (information report)</li> <li>BOH on Dec 12 (information report)</li> </ul>
	Draft Budget using new budget template format at team level incorporating:  Outcome report data Proposed budgets Proposed operating plans Proposals for enhancements and reductions	<ul> <li>FFC in Jan (initial report)</li> <li>BOH in Jan (initial report)</li> <li>FFC in Feb (final report)</li> <li>BOH in Feb (final report)</li> </ul>
Re-evaluate and Update	2013 Q2 Variance Report  2013 Q3 Variance Report	<ul> <li>SLT on Aug 12</li> <li>FFC on Sept 5</li> <li>BOH on Sept 19</li> <li>SLT on Nov 5</li> <li>FFC on Nov 7</li> </ul>
Request	Submit targets to City of London	<ul><li>BOH on Nov 21</li><li>Oct 1</li></ul>
	Submit budget to Province	March 31