



Auditor's Annual Report 2021/22

QUEEN VICTORIA HOSPITAL NHS
FOUNDATION TRUST

15 June 2022

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This report is addressed to Queen Victoria Hospital NHS Foundation Trust (the Trust) and has been prepared for the sole use of the Trust. We take no responsibility to any member of staff acting in their individual capacities, or to third parties.

External auditors do not act as a substitute for the audited body's own responsibility for putting in place proper arrangements to ensure that public business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively.

Summary

Introduction

This Auditor’s Annual Report provides a summary of the findings and key issues arising from our 2021-22 audit of Queen Victoria Hospital NHS Foundation Trust (‘the Trust’). This report has been prepared in line with the requirements set out in the Code of Audit Practice published by the National Audit Office and is required to be published by the Trust alongside the annual report and accounts.

Our responsibilities

The statutory responsibilities and powers of appointed auditors are set out in the Local Audit and Accountability Act 2014. In line with this we provide conclusions on the following matters:

- **Accounts** - We provide an opinion as to whether the accounts give a true and fair view of the financial position of the Trust and of its income and expenditure during the year. We confirm whether the accounts have been prepared in line with the Group Accounting Manual prepared by the Department of Health and Social Care (DHSC).
- **Annual report** - We assess whether the annual report is consistent with our knowledge of the Trust. We perform testing of certain figures labelled in the remuneration report.
- **Value for money** - We assess the arrangements in place for securing economy, efficiency and effectiveness (value for money) in the Trust’s use of resources and provide a summary of our findings in the commentary in this report. We are required to report if we have identified any significant weaknesses as a result of this work.
- **Other reporting** - We may issue other reports where we determine that this is necessary in the public interest under the Local Audit and Accountability Act.

Findings

We have set out below a summary of the conclusions that we provided in respect of our responsibilities:

Accounts	<p>We issued an unqualified opinion on the Trust’s accounts. This means that we believe the accounts give a true and fair view of the financial performance and position of the Trust.</p> <p>We have provided further details of the key risks we identified and our response on page 4.</p>
Annual report	<p>We did not identify any significant inconsistencies between the content of the annual report and our knowledge of the Trust.</p> <p>We confirmed that the Governance Statement had been prepared in line with the DHSC requirements.</p>
Value for money	<p>We are required to report if we identify any matters that indicate the Trust does not have sufficient arrangements to achieve value for money.</p> <p>We have reported a significant weakness in the Trust’s governance arrangements due to the deterioration of the relationship between the Board and the Council of Governors. We have provided further details on page six.</p>
Other reporting	<p>We did not consider it necessary to issue any other reports in the public interest.</p>

Accounts audit

The table below summarises the key risks that we identified to our audit opinion as part of our risk assessment and how we responded to these through our audit.

Risk	Findings
<p>Valuation of land and building</p> <p>Land and buildings are required to be held at fair value. As hospital buildings are specialised assets and there is not an active market for them, they are usually valued on the basis of the cost to replace them with a 'modern equivalent asset'.</p> <p>This requires assumptions to be made about how assets would be provided, including their location and any changes that may be made to the assets from their existing state.</p> <p>Due to the value of properties and the complexity of estimating their valuation we identify a significant risk associated with this balance.</p>	<p>The Trust commissions external valuers to prepare their valuation of the estate. We assessed the expertise of the valuers utilised by the Trust as well as reviewing the instructions and information that was provided to them to enable an accurate valuation to be prepared.</p> <p>We confirmed that the valuation had been prepared in line with the requirements of accounting standards and that appropriate assumptions had been applied in determining the value assigned to the properties.</p> <p>We considered the estimate to be balanced based on the procedures performed.</p> <p>We utilised our real estate valuation specialist to review the full valuation and found the valuation performed by external valuers was reasonable.</p>
<p>Management override of controls</p> <p>We are required by auditing standards to recognise the risk that management may use their authority to override the usual control environment.</p>	<p>We tested the controls in place for posting journal entries and reviewed the controls in place for making manual adjustments to the accounts.</p> <p>We used data and analytics in order to assess whether there were any transactions that displayed characteristics suggesting they may have been inappropriate. We tested all transactions identified as a result of this procedure and did not identify any exceptions.</p> <p>We assessed the key estimates included within the accounts to consider whether there were any indications of bias in their preparation. This primarily relates to the value of property, plant and equipment as set out above and we did not identify any indicators of bias in the preparation of these balances.</p> <p>We tested the income and expenditure transactions around the year end to assess whether they had been recorded within the correct period.</p>

Accounts audit

Risk	Findings
<p><i>Fraudulent expenditure recognition</i></p> <p>Public sector auditing standards suggest for public sector entities a rebuttable assumption that there is a risk expenditure is recognised inappropriately by manipulating non-pay expenditure as the Trust is set a target for its budgetary performance.</p> <p>We considered this would be most likely to occur through overstating accruals given the current nature of the funding regime, for example to bring forward expenditure from 2022-23 to mitigate financial pressures.</p>	<p>We assessed the control environment around the accruals process.</p> <p>We inspected a sample of accruals made at 31 March 2022 for expenditure not yet invoiced to understand whether the valuation of the accrual was consistent with the value billed after year end. We also reviewed the accuracy of accruals made in previous periods to consider the risk that there are inaccuracies in the accruals and we compared the balances accrued year on year in order to assess whether there was a risk of missing accruals or accruals that were not required.</p> <p>We performed testing over a sample of non-pay expenditure items and specific cut-off testing over expenditure transactions around the end of the year and identified no instances of transactions having been recorded incorrectly.</p> <p>We did not identify any exceptions as a result of the work that we performed.</p>
<p><i>Fraudulent revenue recognition</i></p> <p>Professional standards require us to make a rebuttable presumption that the fraud risk from revenue recognition is a significant risk.</p> <p>As the Trust is required to meet a control total at the end of the year this may create an incentive for revenue to be manipulated in order to achieve budgeted financial performance. We anticipate that this would occur through manipulation of year end income accruals.</p>	<p>We reviewed the controls in place for engaging in the agreement of balances exercise with other NHS providers and commissioners and also reviewed the controls in place for agreeing variations to contract funding amounts and block funding levels from the CCGs.</p> <p>We agreed additional funding streams received at the end of the year to notifications received.</p> <p>We reviewed income entries made around the end of the financial year in order to confirm whether they had been included within the correct period.</p> <p>We did not identify any exceptions as a result of the work that we performed.</p>

Value for money

Introduction

We consider whether there are sufficient arrangements in place for the Trust for each of the elements that make up value for money. Value for money relates to ensuring that resources are used efficiently in order to maximise the outcomes that can be achieved.

We undertake risk assessment procedures in order to assess whether there are any risks that value for money is not being achieved. This is prepared by considering the findings from other regulators and auditors, records from the organisation and performing procedures to assess the design of key systems at the organisation that give assurance over value for money.

Where a significant risk is identified we perform further procedures in order to consider whether there are significant weaknesses in the processes in place to achieve value for money.

Further details of our value for money responsibilities can be found in the Audit Code of Practice at [Code of Audit Practice \(nao.org.uk\)](https://nao.org.uk)

Matters that informed our risk assessment

The table below provides a summary of the external sources of evidence that were utilised in forming our risk assessment as to whether there were significant risks that value for money was not being achieved:

Care Quality Commission rating	Good
Governance statement	The Trust has identified a significant internal control matter relating to the governance arrangements between the Board and Council of Governors.
Head of Internal Audit opinion	Adequate and effective framework for risk management, governance and internal control.

Commentary on arrangements

We have set out on the following pages commentary on how the arrangements in place at the Trust compared to the expected systems that would be in place in the sector.

Summary of findings

We have set out in the table below the outcomes from our procedures against each of the domains of value for money:

Domain	Risk assessment	Summary of arrangements
Financial sustainability	One significant risk identified	No significant weaknesses identified
Governance	Two significant risks identified	One significant weakness identified
Improving economy, efficiency and effectiveness	No significant risks identified	No significant weaknesses identified

We identified three significant risks: one associated with financial sustainability and two associated with governance. Our assessment of the processes in place for managing the Trust's financial performance did not identify any significant weaknesses around financial sustainability, however we did identify a significant weakness around the relationship between the governors and the Board. We have provided further details in our commentary on the following pages.

Financial sustainability	
Description	Commentary on arrangements
<p>This relates to ensuring that the Trust has sufficient arrangements in place to be able to continue to provide its services within the resources available to it.</p> <p>We considered the following areas as part of assessing whether sufficient arrangements were in place:</p> <ul style="list-style-type: none"> How the Trust sets its financial plans to ensure services can continue to be delivered; How financial performance is monitored and actions identified where it is behind plan; and How financial risks are identified and actions to manage risks implemented. 	<p>The Covid-19 Pandemic has continued to have a significant impact on the Trust and continued to have an impact on the financial regime for the NHS through 2021-22, with providers remaining on a block contract framework. NHS organisations were required to submit two plans for 2021-22, one that covered H1 (Months 1-6) and one for H2 (Months 7-12). The Trust worked with the wider system to establish a breakeven budget for H1, which included an efficiency (CIP) target of £800k for the Trust. This was approved by the Trust Board in June 2021, in line with revised national planning timetables. This was replicated for H2, thus resulting in a full year efficiency target for H1 and H2 of £1.6m. The Trust reported that they had achieved the full £1.6m of planned efficiencies in 2021/22.</p> <p>In April 2021, the Trust presented their initial 2021/22 business planning and budget setting exercise to the Board, indicating an anticipated deficit of £6.9m. This included the above efficiencies and was based on a starting position of the 2020/21 forecast outturn at month 11, with the key adjustments being for non-recurrent items and with the majority of planned non-pay expenditure resorting to pre-pandemic 19/20 outturn. This was then streamlined and the final plan submitted to NHSI in June 2021 forecast a much smaller deficit of £0.7m. At the date of writing this report, the Trust has achieved a surplus of £1.7m for 2021/22, approximately £2.4m higher than the initially expected.</p> <p>We found adequate arrangements for the alignment of financial, workforce and operational plans. During the financial planning process, medium/long term plans are aligned to the budgets (financial plans) approved by budget holders. Budget holders have joint ownership of workforce and operational plans, which ensures alignment of key planning documents within the Trust.</p> <p>We found that the Trust has an appropriate financial reporting framework in place. The financial performance of the Trust is reported each month to the Finance and Performance Committee with identification of risks within the position. There was evidence of discussion and challenge by the Committee. A monthly financial report is presented to the Board which includes key aspects, including monthly financial performance, run rate, income and expenditure and working capital. The financial reporting includes an effective analysis of the recurrent financial position of the Trust alongside analysing changes during the period.</p> <p>The Trust has identified financial sustainability as a key strategic objective, which is included on the Board Assurance Framework reported to the Board. The principle risks identified being 'loss of confidence in the long-term financial sustainability of the Trust due to a failure to create adequate surpluses to fund operational and strategic investments'. This risk is regularly reported to the Audit Committee and assurance provided over the actions being taken to manage the risk to ensure the Board provides appropriate oversight.</p>

Financial sustainability	
Description	Commentary on arrangements
<p>This relates to ensuring that the Trust has sufficient arrangements in place to be able to continue to provide its services within the resources available to it.</p> <p>We considered the following areas as part of assessing whether sufficient arrangements were in place:</p> <ul style="list-style-type: none"> How the Trust sets its financial plans to ensure services can continue to be delivered; How financial performance is monitored and actions identified where it is behind plan; and How financial risks are identified and actions to manage risks implemented. 	<p>The independent review released in February 2022 (see more in slide 8) identified that <i>“the financial position of the Trust is deteriorating with an underlying deficit, once non-recurrent funding is removed, of £9m in 2019/20”, and “shows a steep deterioration in the financial position of the Trust since 2017/18, when it reported a £0.8m surplus”.</i></p> <p>Additionally, the Trust received a letter from NHS Improvement on 20 October 2021, imposing additional licence conditions on the Trust. One of the grounds for the additional conditions noted in the letter was that the Trust <i>“is a very small NHS provider and its Board has identified it is unsustainable in its current form; in particular, the Licensee will continue to incur material financial deficits each year due to its lack of financial sustainability”.</i></p> <p>While the Trust reported an in-year surplus in 2020/21 and a further small surplus again in 2021/22 of £1.7m, an initial forecast of the financial performance for 2022/23 anticipated a deficit. Consistent with many providers within the sector at 31 March 2022 the Trust was forecasting a deficit performance for 2022/23, however in line with the national planning timetable we note that further development of the financial plan was undertaken to 20 June 2022 and the Trust anticipates setting a break-even financial plan for the year following the announcement of further national support towards inflationary cost pressures.</p> <p>We have obtained evidence to confirm that there was appropriate scrutiny of the draft financial plan, including through the Finance and Performance Committee. The Trust engaged with financial planning in line with the timetable set out by NHS Improvement and we note that it is consistent with the sector that the Trust had not developed a balanced financial plan by 31 March 2022.</p> <p>The Trust has undertaken efficiency planning for 2022-23 as part of completing its financial planning. At the time of submitting its financial plan it had identified efficiencies of £1.4m, all of which were recurrent savings and were in development at the time of submitting the financial plan.</p>

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Governance	
Description	Commentary on arrangements
<p>This relates to the arrangements in place for overseeing the Trust's performance, identifying risks to achievement of its objectives and taking key decisions.</p> <p>We considered the following areas as part of assessing whether sufficient arrangements were in place:</p> <ul style="list-style-type: none"> Processes for the identification and management of strategic risks; Decision making framework for assessing strategic decisions; Processes for ensuring compliance with laws and regulations; How controls in key areas are monitored to ensure they are working effectively. 	<p>Design of governance structures</p> <p>The Trust has appropriately designed governance arrangements to provide oversight and scrutiny to operations and enable informed decision making. The governance structure includes the committees required under the Foundation Trust Code of Governance, including an Audit Committee and Remuneration Committee, as well as those expected within the sector, including a Finance and Performance Committee to oversee financial and operational performance.</p> <p>The Trust has established a Council of Governors as required by the Foundation Trust Code of Governance, with members representing appropriate local, patient and staff constituencies. The Council of Governors has an appropriate remit in line with guidance issued by NHS Improvement.</p> <p>The Standing Financial Instructions and Scheme of Delegation set out the decision making limits and authorities for different types of transaction. Limits and escalation processes are consistent with those observed within the sector and include appropriate escalation to the Board for revenue and capital expenditure decisions exceeding £1million as well as procurement requirements that require tenders to be issued where expenditure is planned that would exceed £50,000, a lower limit than that required under public sector procurement regulations.</p> <p>Operation of governance structures</p> <p>On 20 October 2021 the Trust received a notice of imposition of additional license conditions from NHS Improvement under section 111 of the Health and Social Care Act. Following a referral made by the Trust NHS Improvement stated that they were satisfied the Trust was going to breach four of its license conditions. These related to the need for the Council of Governors to implement arrangements to work effectively with the Board and to ensure that the Trust has sufficient and effective Board leadership, capacity and capability.</p> <p>NHS Improvement's notice identified a deterioration in the relationship between the Board and the Council of Governors following a motion passed on 19 July 2021 for the Board to pause work on merger proposals. It highlighted that <i>'the Council and Board appear no longer to have a fully effective working relationship'</i> and that further actions by the Council to prevent or hinder development of a sustainable long term plan could <i>'destabilise the Trust's management, governance and services.'</i></p>

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Improving economy, efficiency and effectiveness

Description

Commentary on arrangements

This relates to how the Trust seeks to improve its systems so that it can deliver more for the resources that are available to it.

We considered the following areas as part of assessing whether sufficient arrangements were in place:

- The processes in place for assessing the level of value for money being achieved and where there are opportunities for these to be improved;
- How the performance of services is monitored and actions identified in response to areas of poor performance;
- How the Trust has engaged with ICS partners in development of the organisation and system wide plans and arrangements;
- The engagement with wider partnerships and how the performance of those partnerships is monitored and reported within the organisation.

Assessing Value for Money and Opportunities for Improvement

A monthly paper is presented to the Trust’s Finance and Performance Committee in order to report on financial performance, allowing the Trust to assess the level of value for money being achieved. Management also maintains and monitors costs and services by reviewing the information received from the Model Hospital, which provides benchmarked insights on topics such as the quality of care, productivity and organisational culture across the NHS, in order to identify opportunities for improvement. We note that, at month 9 (December 2021), cost efficiency savings of £1.2m had been achieved to date in 2021/22, which is in line with the annual planned CIPs of £1.6m.

Monitoring of Performance of Services

The Trust has a performance management report format in place to set the structure of performance management. The main element of performance reporting is the integrated performance report which provides the Finance and Performance Committee, and subsequently the Board, with key operational performance indicators on a monthly basis. This report highlights performance on different indicators in line with the Trust’s strategy and highlights performance risk for each indicator. For these areas further information is provided, such as trends, to help inform the Finance and Performance Committee and provide the full context.

Partnership Working

The Trust is a member of the Sussex Health and Care Partnership (SHCP), which is an Integrated Care System (ICS) formed by 13 organisations. The financial position of the ICS is reported to the Board through chief executive reports and finance reports. The Trust is an active participant in Sussex ICS OPD programme. During the Covid-19 pandemic the Trust has supported partners within the local health system by making use of its facilities for treatments in areas such as cancer, helping other hospitals to cope with the response to the pandemic. The Trust is also engaged in other partner integrated care systems such as Kent and Medway due to the reach of its specialised services.

Based on the procedures performed we have not identified any significant weaknesses associated with improving economy, efficiency and effectiveness.

Recommendations

We raised the following recommendations in response to significant weaknesses identified in our value for money procedures.

#	Issue, Impact and Recommendation	Management Response / Officer / Due Date
1	<p>Relationship between Board and governors</p> <p>During the year the Trust referred itself to NHS Improvement due to the deterioration in the relationship between the Board of Directors and the Council of Governors over the exploration of a potential merger. NHS Improvement issued additional license conditions related to the appointment of an experienced and effective chair, and the need for governors to operate in accordance with the Trust constitution, their statutory role and national guidance.</p> <p>A subsequent independent review made a number of recommendations to support the Trust’s ability to move forward with developing a full business case for potential merger, and promote ongoing work and effective relationships with staff, governors and external stakeholders.</p> <p>The Board has accepted the recommendations of the independent review and committed to actions developed in response to these, however there had not been opportunity for these to be implemented by 31 March 2022.</p> <p>The Board should monitor the implementation of the action plans agreed following the independent review and assess the effectiveness of the implemented actions in order to ensure that the Board and the Council of Governors are able to maintain an effective working relationship and that the Council of Governors discharges its responsibilities effectively.</p>	<p>The Board continues to monitor the implementation of the actions agreed following the independent review and to assess the effectiveness of the implemented actions. This includes work to support an effective working relationship between the Board and the Council of Governors, and to support the Council of Governors to discharge its responsibilities effectively.</p>



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