

Trust Board Report

Meeting Date:	23 September 2013
Title:	Annual Audit Letter
Executive Summary:	See Below
Action Requested:	To note the contents of the Annual Audit Letter
Report of:	Chief Financial Officer
Author: Contact Details:	Kevin Stringer, Chief Financial Officer Tel: 01902 695954 Email: kevin.stringer@nhs.net
Resource Implications:	None
Public or Private: (with reasons if private)	Public Session
References: (eg from/to other committees)	N/A
Appendices/ References/ Background Reading	
NHS Constitution: (How it impacts on any decision-making)	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none">  Equality of treatment and access to services  High standards of excellence and professionalism  Service user preferences  Cross community working  Best Value  Accountability through local influence and scrutiny

Background Details

1	The Annual Audit Letter is issued by the External Auditors (PricewaterhouseCoopers) summarising the results of the 2012/13 audit.
2	The letter and its contents were discussed at the September Audit Committee and approved for discussion at the Board.
3	<p>The key findings are detailed in the letter, but in summary are:-</p> <ul style="list-style-type: none"> • All of the 6 areas identified in the Audit scorecard were classed as green • The accounts were given an 'unqualified audit opinion' on the Trust's financial statements on 10 June 2013 and were prepared on time

Title:

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| | <ul style="list-style-type: none">• No significant issues were identified and the quality of the working papers was high• The Trust achieved all of the financial reporting targets for 2012/13• There were no significant matters to bring to the attention of the Board and no areas of concern in the Annual Governance Statement• The Auditors issued an 'unqualified conclusion' on the Trust's arrangements for the use of its resources• The Auditors issued an 'unqualified limited assurance' report and completion certificate on the 2012/13 Quality Account on 28 June 2013• The Auditors issued an 'unqualified opinion' on the Trust's Summary Financial Statements' within the Annual Report on the 28 June 2013 |
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The Royal Wolverhampton NHS Trust

Annual Audit Letter

July 2013

2012/13 Audit



The Board
The Royal Wolverhampton NHS Trust
New Cross Hospital
Heath Town
Wolverhampton
WV10 0QP

30 July 2013

Ladies and Gentlemen

We are pleased to present our Annual Audit Letter summarising the results of our 2012/13 audit. We would like to thank all those directors and staff with whom we have had contact for their help and assistance throughout the course of our work.

Yours faithfully

A handwritten signature in black ink that reads 'PricewaterhouseCoopers LLP'.

PricewaterhouseCoopers LLP

Code of Audit Practice and Statement of Responsibilities of Auditors and of Audited Bodies

In April 2010 the Audit Commission issued a revised version of the 'Statement of responsibilities of auditors and of audited bodies'. It is available from the Chief Executive of each audited body. The purpose of the statement is to assist auditors and audited bodies by explaining where the responsibilities of auditors begin and end and what is to be expected of the audited body in certain areas. Our reports and letters are prepared in the context of this Statement. Reports and letters prepared by appointed auditors and addressed to directors or officers are prepared for the sole use of the audited body and no responsibility is taken by auditors to any director or officer in their individual capacity or to any third party.

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Introduction

The purpose of this letter

The purpose of this letter is to provide a high level summary of the results of the audit work we have undertaken as part of the 2012/13 audit of The Royal Wolverhampton NHS Trust that is accessible for the Board and other interested stakeholders.

We have already reported the detailed findings from our audit work to those charged with governance, which in the case of the Trust has previously been agreed as being the Trust's Audit Committee, in the following reports:

- Progress reports for work carried out in the early stages of the 2012/13 audit (February 2013 and April 2013);
- Report on the results of our audit of the 2012/13 financial statements under the requirements of the International Standards on Auditing (ISA) (UK and Ireland) 260 (UK&I) 260 (May 2013);
- Audit opinion on the 2012/13 financial statements, incorporating our value for money conclusion (June 2013);
- Audit opinion on the summary financial statements included within the Annual Report (June 2013);
- Long form report setting out our findings on the 2012/13 Quality Account (which was reported directly to the Trust Board at its meeting in June 2013);
- Limited assurance report* on the 2012/13 Quality Account (June 2013); and
- Audit Completion Certificate (June 2013).

* A limited assurance engagement is less in scope than a reasonable assurance engagement (such as the external audit of accounts). The nature, timing and extent of procedures for gathering sufficient appropriate evidence are deliberately limited compared to a reasonable assurance engagement.

Scope of work

Our audit work is conducted in accordance with the Audit Commission's Code of Audit Practice (NHS), International Standards on Auditing (UK and Ireland) and other relevant guidance issued by the Audit Commission.

The Trust is responsible for preparing and publishing its financial statements, including the Annual Governance Statement. It is also responsible for putting in place proper arrangements to secure economy, efficiency and effectiveness in its use of resources.

As auditors we are responsible for:

- forming an opinion on the statutory financial statements (including reviewing the Trust's Annual Governance Statement) and the summary financial statements included in the Annual Report;
- form a conclusion on the arrangements the Trust has in place to secure economy, efficiency and effectiveness in its use of resources; and
- carrying out any other work specified by the Audit Commission, which this year comprised work on the Trust's Quality Account.

We have carried out our audit work in line with our 2012/13 Audit Plan that we originally discussed and agreed with the Audit Committee at its meeting in December 2012.

Audit scorecard

We have set out in the rest of this report what we consider to be the most significant matters arising from our audit. The following scorecard summarises our views across the main areas of our audit using the following key:

Key

- R** Red – significant improvements required
- A** Amber – some improvements required
- G** Green – no or some minor improvements required

Audit Area	Comments
Financial Statements	<p>G Your draft financial statements were submitted to the Department of Health on time. Our audit identified no significant issues with respect to the quality of the draft financial statements presented for audit. Working papers to support the preparation and audit of the financial statements were of a good quality, although the Trust did experience some delays in preparing the working papers for income and expenditure. Working papers for other areas were either provided in advance of the audit or were ready for us when we arrived.</p> <p>We identified only a very small number of uncorrected misstatements as part of our audit. The overall impact of the uncorrected misstatements, if adjusted, would have been to increase the Trust's 2012/13 surplus by £100,000 and to decrease net assets by a corresponding amount. After considering our report on the results of our audit of the 2012/13 financial statements, the Trust's Audit Committee decided not to adjust the accounts for these uncorrected misstatements on the basis that they were not material, either individually or in aggregate, to the financial statements. We issued an unqualified opinion on the Trust's financial statements on 10 June 2013.</p> <p>In the context of the other pressures on the Finance Team, including preparing the working papers for income and expenditure during the course of the first week of the audit and changes within the team for the preparation of the accounts, the Trust's accounting performance with respect to the 2012/13 financial statements is to be commended.</p>
Financial Standing/Going Concern	<p>G The Trust achieved all of the financial reporting targets that it is required to report upon within the statutory financial statements. There were no material uncertainties related to events and conditions that may have cast significant doubt on the Trust's ability to continue as a going concern. The Trust is on target to achieve its financial plans in 2013/14.</p>
Internal Controls	<p>G We reviewed the Trust's systems of internal financial control for the purposes of our audit and our review of the Annual Governance Statement. Our work identified no significant matters to bring to your attention. We reviewed the Trust's Annual Governance Statement to consider whether it complied with relevant guidance and whether it was misleading or inconsistent with other information known to us from our audit work. We found no areas of concern to report in this context.</p>
Use of Resources/Value for money conclusion	<p>G We focussed our work in particular on:</p> <ul style="list-style-type: none"> • the Trust's performance against its cost improvement programme for 2012/13; • its cost improvement programme plans for 2013/14; and • the views expressed by regulators in order to identify any issues which may have an impact on our value for money conclusion. <p>Based on the findings from all of our work we concluded that the Trust had put in place proper arrangements to secure economy, efficiency and effectiveness in the use of resources. We therefore issued an unqualified conclusion on the Trust's arrangements for its use of resources on 10 June 2013.</p>

Quality Account
and Audit
Completion
Certificate



We were required by the Audit Commission to review the content of the 2012/13 Quality Account and two performance indicators. The results of this work were to be reported in a limited assurance report; a limited level of assurance reflects the nature, timing and extent of assurance work required for gathering sufficient appropriate evidence.

Our work concluded that no issues had come to our attention that led us to believe that the Quality Account:

- had not been prepared in accordance with the requirements set out in the National Health Service Quality Account Regulations;
- was not materially consistent with source documents specified by the Audit Commission; and
- we identified no issues to indicate that the two indicators had not been prepared in all material respects in accordance with the criteria set out in the Audit Commission's 'NHS Quality Accounts – Auditor Guidance 2012/13'.

We issued an **unqualified 'limited assurance' report** on 28 June 2013.

As a result of the timing of completion of this work we were not able to issue our Completion Certificate on the audit at the same time as our audit opinion on the financial statements and our conclusion on your use of resources. We issued the **Completion Certificate** as soon as we had completed and reported on our work on the Quality Account on 28 June 2013.

Annual Report
and Summary
Financial
Statements



We reviewed whether the content of the Annual Report complied with the NHS Manual for Accounts and our review identified no significant issues. We issued an **unqualified ('consistent with') opinion on the Trust's summary financial statements** included within the Annual Report on 28 June 2013.

Audit Findings

Accounts

Audit opinion

We audited the Trust's financial statements in line with approved Auditing Standards in May 2013. We reported the detailed findings from our audit of the financial statements to the Trust's Audit Committee at its meeting on 6 June 2013 and subsequently issued an unqualified audit opinion on 10 June 2013.

We summarise below the significant matters arising from our audit of the financial statements.

Accounts preparation

Your draft financial statements were submitted to the Department of Health on time. Our audit identified no material issues with respect to the quality of the accounts presented for audit; any disclosure issues identified were amended appropriately.

We agreed what we would need for our audit and met with the finance team in advance of the audit to discuss the Trust's progress. This identified that, due to unforeseen circumstances, the Trust was behind schedule in terms of preparing working papers in support of the accounts. As a result some working papers (relating to income and expenditure items) were delayed until the second week of the audit.

The finance team kept us up to date on its progress and worked closely with us to make sure the audit was completed on time. When working papers were ready for us the quality of those papers was generally very good. The finance team were also very helpful in resolving our queries during the audit.

Accounting issues

Provisions

The financial statements included provisions totalling £4.3 million. We focussed our work on provisions on three key issues: the creation of new provisions in year, the utilisation of provisions raised in prior years and the reversal of unused provisions. The two most significant issues arising from our work on provisions are summarised below.

Restructuring provisions

The Trust recognised £1.0 million for redundancy provisions in 2012/13 in relation to Dental services (£0.5 million) and Cytology services (£0.5 million). Under International Accounting Standard (IAS) 19 there is required to be a "detailed formal plan with no realistic possibility of withdrawal" in place for recognition of a provision for redundancy costs. Management provided us with the detailed plans and communications which had been issued to staff in respect of both provisions together with evidence in support of the underlying assumptions and basis for the method of calculation. We concluded that there were sufficient grounds for the recognition of a provision, and that the amount recognised was reasonable, for both redundancy provisions.

Discharge re-enablement monies provision

A provision of £600,000 was included within the accounts relating to monies received for the discharge re-enablement service. This service had not been fully delivered by the financial year-end so the Trust provided for the difference between monies received and spent, on the basis that these monies could be required to be repaid to the Wolverhampton Clinical Commissioning Group (CCG). The circumstances under which the Trust would need to return the money to the CCG, should it fail to deliver the activity associated with the income, were set out in a letter from the CCG to the Trust. We reviewed the provision against the requirements of International Accounting Standard (IAS) 37: 'Provisions, contingent liabilities and contingent assets'. We satisfied ourselves that the requirements of IAS 37 had been met; our audit of these provisions included a review of communications that had been received by the Trust from the CCG which confirmed that there was potential for these monies to be required to be repaid should the Trust fail to deliver the associated services.

Deferred income in relation to the Safe Hands Project

The Trust was approached by the Department of Health back in 2009/10 to pilot the 'Safe Hands project', which was intended to be rolled out to other NHS organisations upon completion at the Trust. In 2009/10 the Trust received a payment of £1.0 million from the West Midlands SHA relating to the Safe Hands project, the total amount of which was deferred at the year-end (31 March 2010). A subsequent amount of £1.5 million was received from the Department of Health in 2010/11; both the £1 million and the £1.5 million were deferred as at 31 March 2011. As part of the 2010/11 audit, we reviewed the contract that had been entered into by the Trust with the supplier, which was for £2.1 million excluding VAT.

In the 2011/12 financial statements, the Trust recognised a £0.5 million release to income and accounted for the balance of £2.0 million as deferred income at 31 March 2012. The Trust continued to account for £2.0 million of the monies received as deferred income as at 31 March 2013, with the Trust recognising no release to income in 2012/13.

During 2012/13 there was a further delay in the project as a result of a change in suppliers, which effectively stopped progress on the project, as the Trust was unable to utilise the existing hardware until an alternative software supplier was identified. A new contract was entered into by the Trust in February 2013. The proposed completion of delivery and implementation across the Trust is now anticipated to be 31 December 2013. The Trust subsequently reforecast the expenditure to be incurred during the lifetime of the project; based on the actual spend incurred in 2012/13 and the forecast spend going forward to complete the project.

During 2012/13, the Trust incurred actual expenditure of £0.4 million against a total reforecast spend for the remaining lifetime of the project (from 1 April 2012) of £2.4 million. We undertook sensitivity analysis to compare the release of income over the lifetime of the project using different assumptions and judgements. This demonstrated that even when different assumptions and judgements were used on how the deferred income could or should be released the difference was not material to the financial statements. We concluded that the accounting treatment adopted by the Trust would not result in a material misstatement in the financial statements.

Misstatements and significant audit adjustments

We identified only a very small number of uncorrected misstatements as part of our audit; uncorrected misstatements are misstatements that we identified during the course of our audit, other than those of a trivial nature, which had not been corrected by management in the financial statements. The overall impact of the uncorrected misstatements, if adjusted, would have been to increase the Trust's 2012/13 surplus by £100,000 and to decrease net assets by a corresponding amount. After considering our ISA 260 Report on the results of our audit of the 2012/13 financial statements, the Trust's Audit Committee decided not to adjust the accounts for these uncorrected misstatements on the basis that they were not material, either individually or in aggregate, to the financial statements.

As part of our audit we identified two misstatements where the Trust decided to adjust the financial statements; the nature of the adjustments was such that they did not impact upon the Trust's reported surplus or net assets position.

Financial standing/Going concern

Financial standing

The Trust is responsible for ensuring that it has arrangements in place to secure its financial standing. One of our key responsibilities as auditors is to fully consider the financial standing of the Trust. Where there are significant doubts as to the Trust's ability to meet its statutory financial duties we are required to take appropriate steps to ensure that the Trust's accounts fully reflect such matters and to draw any concerns in relation to financial standing to the attention of management, the Board and in certain circumstances, to external parties.

The Trust's performance in 2012/13 in relation to the financial reporting targets that the Trust is required to report upon within the statutory financial statements is summarised below:

Performance Target	2012/13 Performance	Achieved
To achieve its statutory duty to break-even	The Trust reported an in-year retained surplus of £7.023 million, a break-even position (after adjustments) of £8.688 million and a cumulative surplus of £26.546 million.	✓
To absorb the cost of capital	Achievement of the 3.5% prescribed absorption rate.	✓
To remain within the Capital Resource Limit	The Trust reported an underspend of £0.2 million against its Capital Resource Limit.	✓
To remain within the External Financing Limit	The Trust undershot its notified External Financing Limit by £5.9 million.	✓

*The adjusted retained surplus used for measuring performance against the statutory duty to break-even is calculated by deducting or including a small number of items of income and expenditure as mandated by Department of Health guidance.

Going concern

There were no material uncertainties related to events and conditions that may cast significant doubt on the Trust's ability to continue as a going concern. In addition to the points noted in the table above, we noted:

- the Trust achieved a total of £12.9 million against the target of £15.3 million for 2012/13, which represents an under-achievement of £2.4 million;
- recurrent cost improvements of £9.1 million had been achieved against the target of £15.3 million, with the recurrent shortfall of £6.2 million carried forward by the Trust into 2013/14; and
- the Trust monitored its cost improvement schemes throughout the year, with non-recurrent schemes put in place during the year to replace schemes which were assessed as no longer being achievable; £3.8 million of the £12.9 million achieved in year was delivered through non-recurrent schemes.

We concluded that in overall terms the Trust had sufficient resources available to meet its commitments for at least a 12-month period after the date of our audit opinion. Therefore, we concluded that the use of the going concern assumption was appropriate in the preparation of the financial statements.

2013/14 financial performance for the year to date

For the three month period to the end of June 2013 the Trust has recently reported:

- a surplus position of £1.273 million, which is £0.111 million above the three month plan;
- a planned forecast outturn (to 31 March 2014) of £7.5 million; and
- an annual cost improvement programme (CIP) of £21.3 million, of which £4.4 million had been identified and withdrawn from budgets, which represents 21% of the total. However £603,000 of this has been achieved non-recurrently. Of the remaining £16.9 million the Trust has identified £5.9 million as 'red' risk and £7.6 million as 'amber' risk.

We will continue to monitor the Trust's financial resilience and performance against budget and against its cost improvement plans as a routine part of our 2013/14 audit procedures.

Internal controls

Accounting systems and systems of internal control

It is the responsibility of the Trust to develop and implement systems of internal financial control and to put in place proper arrangements to monitor their adequacy and effectiveness in practice. We review these arrangements for the purposes of our audit of the financial statements and our review of the Annual Governance Statement. Our work identified no significant matters to bring to your attention.

Annual Governance Statement (AGS)

The Trust is required to produce an Annual Governance Statement (AGS) for inclusion in the Annual Report and Accounts. The aim of the AGS is to give a sense of how successfully the Trust has coped with the challenges it faces and of how vulnerable the organisation's performance is or might be, drawing on evidence on governance, risk management and controls. We reviewed the AGS to see whether it complied with relevant guidance and whether it was misleading or inconsistent with what we know about the Trust. We found no areas of concern to report in this context.

Our value for money conclusion

The Audit Commission's Code of Audit Practice requires us to carry out sufficient and relevant work in order to conclude on whether you have put in place proper arrangements to secure economy, efficiency and effectiveness in the use of resources.

In accordance with guidance issued by the Audit Commission, in 2012/13 our conclusion was based on two criteria:

- the organisation has proper arrangements in place for securing financial resilience; and
- the organisation has proper arrangements for challenging how it secures economy, efficiency and effectiveness.

In order to form our conclusion we determined a local programme of audit work based on our audit risk assessment, informed by these criteria and our statutory responsibilities.

Cost Improvement Programmes (CIPs) 2012/13 and 2013/14

We reviewed the Trust's cost improvement programme outturn for 2012/13 and plans going forward as reported to the April 2013 Board meeting.

2012/13 Cost Improvement Programme

The key findings in relation to the 2012/13 cost improvement programme as reported were:

- the Trust achieved a total of £12.9 million against the target of £15.3 million for 2012/13, which represented an under-achievement of £2.4 million;
- recurrent CIPs of £9.1 million had been achieved against the target of £15.3 million, with the recurrent shortfall of £6.2 million carried forward by the Trust into 2013/14; and
- the Trust monitored the CIP schemes throughout the year, with non-recurrent schemes put in place during the year to replace schemes which were assessed as no longer being achievable; £3.8 million of the £12.9 million achieved in year had been delivered through non-recurrent schemes.

2013/14 Cost Improvement Programme

The key findings from our review of the 2013/14 cost improvement programme undertaken at the time of our audit (May 2013) were as follows:

- the cost improvement programme for the Trust had been set at £21.3 million;
- at the time the identified CIP programme totalled £15.2 million, which would deliver the original target amount for 2013/14, however there remained a shortfall in relation to the carry forward elements of the CIP programme that were identified non-recurrently during 2012/13;
- all divisions and corporate areas across the Trust had been tasked with identifying additional schemes to recover the shortfall, with divisions held accountable on a monthly basis by the Change Programme Board for progress against action plans; and
- the Trust was monitoring 140 schemes in total across all areas of the Trust; the schemes were categorised into groups depending upon factors such as the extent to which key milestones had been achieved or were achievable, the degree of confidence that the scheme was deliverable and the scheme's assessed impact on quality.

Clinical performance and views of regulators

We considered the views expressed by regulators in order to identify any issues which may have an impact on our value for money conclusion. We identified no significant issues that would have an adverse impact upon our value for money conclusion.

Value for money conclusion

Based on the findings of all our work we concluded that the Trust had put in place proper arrangements to secure economy, efficiency and effectiveness in the use of resources. We issued an unqualified conclusion on the Trust's arrangements for its use of resources on 10 June 2013.

Quality Account

A quality account is a report about the quality of services provided by an NHS healthcare service. The report is published annually by each NHS healthcare provider and is available to the public. The first statutory quality accounts were published in June 2010. The Trust has a legal duty to publish an annual Quality Account which must contain the elements required by Quality Accounts Regulations.

The Department of Health agreed with the Audit Commission that Trust auditors would carry out work on the Quality Account in 2012/13 and issue a limited assurance report on whether anything has come to the auditor's attention which would lead them to believe that:

- the Quality Account has not been prepared in accordance with the requirements set out in the Regulations;
- the Quality Account is not materially consistent with the sources of information in the NHS Quality Accounts - Auditor Guidance 2012/13 issued by the Audit Commission in April 2013; and
- the specified indicators in the Quality Account subject to limited assurance have not been prepared in all material respects in accordance with Section 10c of the NHS (Quality Accounts) Amendment Regulations 2012 and the six dimensions of data quality set out in the Guidance.

This work was carried out in line with guidance issued by the Audit Commission in May 2013. Our findings in respect of the work on the content of the Quality Account and the two specified performance indicators can be summarised as follows:

Area	Findings
Content of the Quality Account	No issues came to our attention that led us to believe that the Quality Account had not been prepared in accordance with the Regulations, and that the 2012/13 Quality Account was not consistent with other information sources defined by the Audit Commission.
Performance Indicator - Percentage of patient safety incidents resulting in severe harm or death.	No issues identified.
Performance Indicator – Rate of Clostridium difficile infections	Two minor control issues were identified and reported which did not impact on our limited assurance opinion.

We completed our work in June 2013 and concluded that:

- no issues had come to our attention that led us to believe that the Quality Account had not been prepared in accordance with the requirements set out in the Regulations;
- no issues had come to our attention that led us to believe that the Quality Account was not materially consistent with source documents specified by the Audit Commission; and
- we identified no issues to indicate that the specified indicators had not been prepared in all material respects in accordance with the criteria set out in the Audit Commission’s ‘NHS Quality Accounts – Auditor Guidance 2012/13’.

We reported the detailed findings from our audit of the Quality Account in a report that was considered by the Trust Board at its meeting on 24 June 2013. As a result of our work, we were able to provide an unqualified limited assurance report in respect of our work on the Trust’s 2012/13 Quality Account.

As a result of the timing of completion of this work we were not able to issue our Completion Certificate on the audit at the same time as our audit opinion on the financial statements and our conclusion on your use of resources. We issued the Completion Certificate as soon as we had completed and reported on our work on the Quality Account on 28 June 2013.

Annual Report and summary financial statements

The NHS Manual for Accounts requires NHS bodies to publish, as a single document, an annual report and accounts. The Annual Report consists of a Directors’ Report, based on the requirements of Chapter 5 of Part 15 of the Companies Act 2006, and a Remuneration Report based on Chapter 6 of Part 15 of the Companies Act 2006. The accounts can either be the full statutory accounts or a set of summary financial statements.

Auditors are required to review the Annual Report for consistency with the information in the statutory financial statements. We are also required to consider whether the content of the Annual Report meets the requirements set out by the NHS Manual for Accounts and whether the summary financial statements included in the Annual Report are consistent with the Trust’s statutory financial statements.

Our initial review of the draft Annual Report identified some instances of non compliance with the NHS Manual for Accounts. After discussing these matters with the Trust, the Trust prepared an amended and updated version of the Annual Report on which we were able to issue an unqualified (‘consistent with’) opinion on 28 June 2013.

Summary of recommendations

During the course of our audit work we have made a number of recommendations to the Trust. These have been discussed and agreed with management. None of these recommendations are significant enough to warrant reporting in this letter. However, we will continue to report to the Trust’s Audit Committee on the Trust’s progress in implementing the agreed actions in response to the recommendations that we have made.

Fees update

Fees update for 2012/13

We reported our original fee proposals in our 2012/13 Audit Plan that was presented to you in December 2012. We updated our fee proposals as a result of the guidance issued by the Department of Health regarding the transfer of property assets under the national Transforming Community Services (TCS) initiative not transferring in 2012/13 as was anticipated and we communicated the reduction in our audit fee to you in our Progress Report to the Audit Committee in February 2013. An update of our final fee against this revised fee (excluding VAT) has been provided below:

	2012/13 Final Fee £	2012/13 Revised Audit Plan Fee (per February 2013 progress report) £
Accounts	59,320	59,320
Value for Money	12,500	12,500
Quality Account	10,000	10,000
Total	81,820	81,820
Scale Fee set by the Audit Commission	81,820	
Variation from Scale Fee	0	

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