



Auditor's Annual Report 2023/24

Bolton NHS Foundation Trust

—

27 June 2024

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This report is addressed to Bolton NHS Foundation Trust (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.



01 Executive Summary

Executive Summary

Purpose of the Auditor’s Annual Report

This Auditor’s Annual Report provides a summary of the findings and key issues arising from our 2023-24 audit of Bolton 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 on 27 June 2024. 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 pages 7-9.</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 Department of Health and Social Care 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 nothing to report in this regard.</p>
Other reporting	<p>We did not consider it necessary to issue any other reports in the public interest.</p>



02 Audit of the Financial Statements

Audit of the financial statements

KPMG provides an independent opinion on whether the Trust's financial statements:

- Give a true and fair view of the state of the Trust's affairs as at 31 March 2024 and of its income and expenditure for the year then ended;
- Have been properly prepared in accordance with the accounting policies directed by NHS England with the consent of the Secretary of State in February 2024 as being relevant to NHS Foundation Trusts and included in the Department of Health and Social Care Group Accounting Manual 2023/24; and
- Have been prepared in accordance with the requirements of the National Health Service Act 2006 (as amended).

We conducted our audit in accordance with International Standards on Auditing (UK) ("ISAs (UK)") and applicable law. We have fulfilled our ethical responsibilities under, and are independent of the Trust in accordance with, UK ethical requirements including the FRC Ethical Standard. We believe that the audit evidence we have obtained is a sufficient and appropriate basis for our opinion.

Audit opinion on the financial statements

We have issued an unqualified opinion on the Trust's financial statements on 27 June 2024.

The full opinion is included in the Trust's Annual Report and Accounts for 2023/24 which can be obtained from the Trust's website.

Further information on our audit of the financial statements is set out overleaf.

Audit of the financial statements

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	Procedures undertaken	Findings
<p>Valuation of land and buildings</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>There is a risk the assumptions used to determine the valuation are not accurate.</p>	<ul style="list-style-type: none"> – We critically assessed the independence, objectivity and expertise of Cushman and Wakefield, the valuers used in developing the valuation of the Trust's properties at 31 March 2024; – We inspected the instructions issued to the valuers for the valuation of land and buildings to verify they are appropriate to produce a valuation consistent with the requirements of the Group Accounting Manual; – We compared the accuracy of the data provided to the valuers for the development of the valuation to underlying information, such as floor plans, and to previous valuations, challenging management where variances were identified; – We evaluated the design and implementation of controls in place for management to review the valuation and the appropriateness of assumptions used; – We challenged the appropriateness of the valuation of land and buildings; including any material movements from the previous revaluations. We challenged key assumptions within the valuation, including the use of relevant indices and assumptions of how a modern equivalent asset would be developed, as part of our judgement; – We performed inquiries of the valuers in order to verify the methodology that was used in preparing the valuation and whether it was consistent with the requirements of the RICS Red Book and the GAM; – We agreed the calculations performed of the movements in value of land and buildings and verified that these have been accurately accounted for in line with the requirements of the GAM; and – Disclosures: We considered the adequacy of the disclosures concerning the key judgements and degree of estimation involved in arriving at the valuation. 	<p>We did not identify any material misstatements relating to this risk.</p> <p>We identified one non-material misstatement relating to the floor areas used by the valuer that has not been corrected by management. Updating this would lead to a reduction in the net book value of Buildings.</p> <p>We determined that the judgements made by the external valuers and adopted by the Trust were balanced.</p>

Audit of the financial statements

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	Procedures undertaken	Findings
<p><i>Fraudulent expenditure recognition</i></p> <p>As the Trust and wider integrated care system is set a financial performance target by NHS England there is a risk that non-pay expenditure, excluding depreciation, may be manipulated in order to report that the target has been met for the year.</p> <p>The setting of a control total can create an incentive for the Trust to understate the level of non-pay expenditure compared to that which has been incurred.</p> <p>We consider this would be most likely to occur through understating accruals to mitigate financial pressures, by omitting accrued expenditure transactions that ought to be recognised in 2032/24.</p>	<ul style="list-style-type: none"> - We evaluated the design and implementation of controls for developing manual expenditure accruals at the end of the year to verify that they have been completely and accurately recorded; - We inspected a sample of invoices of expenditure and payments made, in the period after 31 March 2024, to determine whether expenditure has been recognised in the correct accounting period; - We inspected journals posted as part of the year end close procedures that decrease the level of expenditure recorded in order to critically assess whether there was an appropriate basis for posting the journal and the value can be agreed to supporting evidence; - We performed a retrospective review of prior year accruals to compare the items that were accrued at 31 March 2023 to those accrued at 31 March 2024 in order to assess whether any items of expenditure not accrued for as at 31 March 2024 have been done so appropriately. 	<p>We did not identify any material misstatements relating to this risk.</p>

Audit of the financial statements

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	Procedures undertaken	Findings
<p><i>Management override of controls</i></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>	<ul style="list-style-type: none"> – In line with our methodology, evaluated the design and implementation of controls over journal entries and post closing adjustments; – We evaluated the design and implementation of relevant general IT controls supporting our significant risk; – Assessed the appropriateness of changes compared to the prior year to the methods and underlying assumptions used to prepare accounting estimates; – Assessed the business rationale and the appropriateness of the accounting for significant transactions that are outside the Trust's normal course of business, or are otherwise unusual; and – We have analysed all journals through the year and focused our testing on those with a higher risk. 	<p>We did not identify any material misstatements relating to this risk.</p> <p>We raised non-significant recommendations relating to the design and implementation of general IT controls supporting this key risk – leavers being present in the journals approvers list and there being informal change management controls for the related IT systems and automated workflows.</p>

03 Value for Money

Value for Money

Introduction

We are required to consider whether the Trust has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources or 'value for money'. We consider whether there are sufficient arrangements in place for the Trust for the following criteria, as defined by the National Audit Office (NAO) in their Code of Audit Practice:



Financial sustainability: How the Trust plans and manages its resources to ensure it can continue to deliver its services.



Governance: How the Trust ensures that it makes informed decisions and properly manages its risks.



Improving economy, efficiency and effectiveness: How the Trust uses information about its costs and performance to improve the way it manages and delivers its services

Approach

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.

We are required to report a summary of the work undertaken and the conclusions reached against each of the aforementioned reporting criteria in this Auditor's Annual Report. We do this as part of our commentary on VFM arrangements over the following pages.

We also make recommendations where we identify weaknesses in arrangements or other matters that require attention from the Trust.

Summary of findings

	Financial sustainability	Governance	Improving economy, efficiency and effectiveness
Commentary page reference	13-15	16-17	18-19
Identified risks of significant weakness?	No	No	No
Actual significant weakness identified?	No	No	No
2022-23 Findings	No significant weakness identified	No significant weakness identified	No significant weakness identified
Direction of travel			

Value for Money

NATIONAL CONTEXT

Financial performance

The 2023-24 financial year saw a significant increase in the level of financial pressures facing the NHS sector. This followed the end of Covid-19 related financing arrangements. The sector has faced cost pressures from a range of factors, most significantly the impacts of inflation felt during the year and the costs of industrial action.

At the end of January 2024 NHS England forecast that the NHS would record an overspend of £1.1bn against its agreed budgets. This came after additional funding had been made available earlier in the year to support with the costs of industrial action.

Operational performance

In January 2023 the Government announced five pledges for 2023, including reducing NHS waiting lists and the time people wait for procedures. Waiting lists had grown significantly during the Covid-19 pandemic as elective activity was postponed in order to prioritise the treatment of Covid patients and ensure safe working.

According to the Health Foundation the NHS waiting list had grown from 6.2 million patients at the beginning of 2022 to 7.2 million in January 2023. There had also been a significant increase in the number of patients with long waits. At the end of 2023 there remained 355,000 patients that had been waiting over a year for treatment. Income arrangements for the acute sector were revised in year to reimburse providers for elective activity based on the actual number of patients treated.

System working

The Health and Care Act 2022 formally established integrated care systems (ICSs), 42 partnerships within local geographies to promote closer working between the organisations responsible for healthcare delivery. Integrated Care Boards were formed on 1 July 2022, taking over commissioning responsibility from Clinical Commissioning Groups.

In their first full year of operation ICSs have continued to work to develop and embed governance arrangements both within the ICBs themselves and as systems.

LOCAL CONTEXT

- Bolton NHS Foundation Trust is an integrated care organisation providing a wide range of services at Royal Bolton Hospital, in addition to care and support in the community at over 20 health centres and clinics as well as services such as district nursing and health visiting. The Trust employs around 6,900 staff and has an annual income of around £480m.
- In 2023/24, the Trust recorded an adjusted deficit excluding impairments of £13.5m, compared to an initial plan deficit of £12.4m. In the previous year, 2022/23, the Trust recorded an adjusted deficit of £1.5m against an initial planned deficit of £7.1m.
- The Trust delivered on its 2023/24 efficiency plans, achieving total savings of £23.4m, ahead of its initially planned target of £19.3m. Actual savings comprised of £15.1m non-recurrent and £8.3m recurrent efficiencies. Pay savings made up the largest proportion – £10.3m – of these, with the largest share, £4.0m, coming through establishment reviews of current staffing structures. Amongst non-pay expenditure efficiencies delivered of £9.6m, non-clinical Procurement savings accounted for the largest share, £4.2m.
- Total capital expenditure amounted to £21.5m in 2023/24. Major capital schemes conducted during the year related to Theatres and the new Community Diagnostic Centre.
- During 2023/24, the Trust was placed in segment 2 of the NHS Oversight Framework, which reflects that the Trust's financial plans – while resulting in a forecast deficit for 2024/25 – have support of relevant system partners to address areas of financial challenge.
- The Trust has submitted a 2024/25 plan, the latest version of which contains a forecast deficit for 2024/25 of £10.4m and an adjusted deficit of £10.2m, assuming delivery of efficiency and productivity savings of £24.3m. At the time of preparing this report, £8m of these savings are regarded as 'low risk', £6.7m are regarded as 'medium risk' and the majority (£9.6m) is regarded as 'high risk'.

Financial Sustainability

How the Trust plans and manages its resources to ensure it can continue to deliver its services.

We have considered the following in our work:

- How the Trust ensures that it identifies all the significant financial pressures that are relevant to its short and medium-term plans and builds these into them;
- How the Trust plans to bridge its funding gaps and identifies achievable savings;
- How the Trust plans finances to support the sustainable delivery of services in accordance with strategic and statutory priorities;
- How the Trust ensures that its financial plan is consistent with other plans such as workforce, capital, investment, and other operational planning which may include working with other local public bodies as part of a wider system; and
- How the Trust identifies and manages risks to financial resilience, e.g. unplanned changes in demand, including challenge of the assumptions underlying its plans

The Trust presented its financial plan for 2023/24 to the Board of Directors for approval in May 2023, showing a planned deficit of £12.4m for the year. This position included a planned Cost Improvement Programme (CIP) target of 4% (£19.3m), of which the full amount was projected to be delivered recurrently.

As per the budget setting policy that was in place, the Trust used the final planning guidance from external partners including from the Greater Manchester system and ensured consistency between the financial plan set for 2023/24 and the workforce and operational plans by building in budgeted establishment reviews, vacancies and approved business cases. Greater Manchester ICB appointed PwC in 2023/24 to undertake a piece of work around the system-wide deficit, including detailed review of transaction reports for all providers. The Trust participated in this exercise fully, which was used to support identification of efficiency and productivity opportunities and the introduction of additional, tighter financial controls and reporting around financial performance during the year.

The Trust has an annual process in place to identify, plan and scope potential CIP schemes in readiness for a new financial year. The targets are developed as part of the annual budget setting process and are allocated to divisions based on discussions with operational managers, recurrent CIP delivery in the prior year and the divisions' share of the expenditure budget. Quality impact assessments (QIA) are required for each scheme, and we reviewed an example completed QIA for a scheme implemented in September 2023 to gain assurance that this process is implemented effectively. Schemes are monitored on a weekly and monthly basis at a trust and divisional level.

We found that the budget monitoring and control processes were able to identify and incorporate significant pressures into the financial plan to ensure it was achievable and realistic. The initial draft budgets were constructed based on appropriate local and national planning assumptions and had appropriate review and sign off by the relevant budget holders.

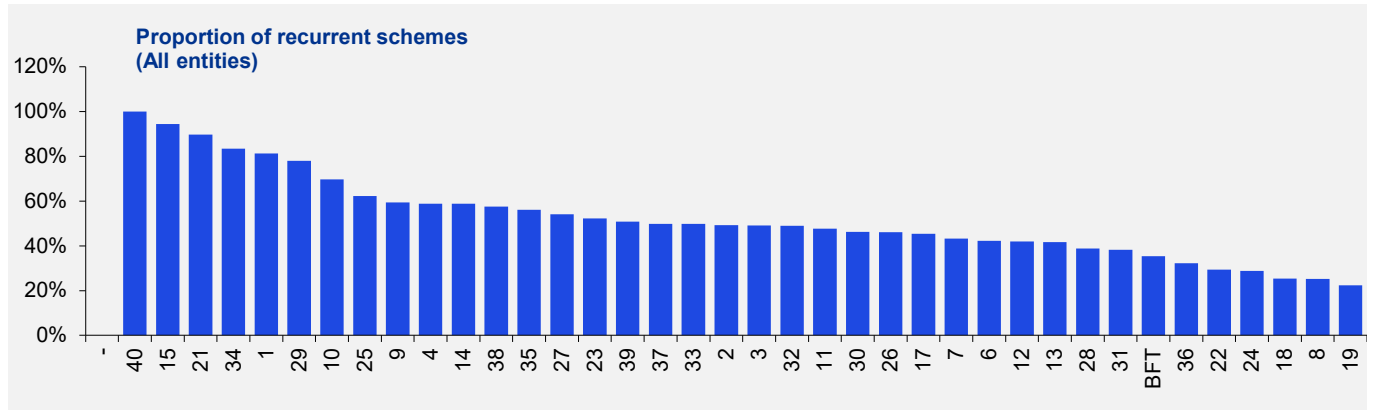
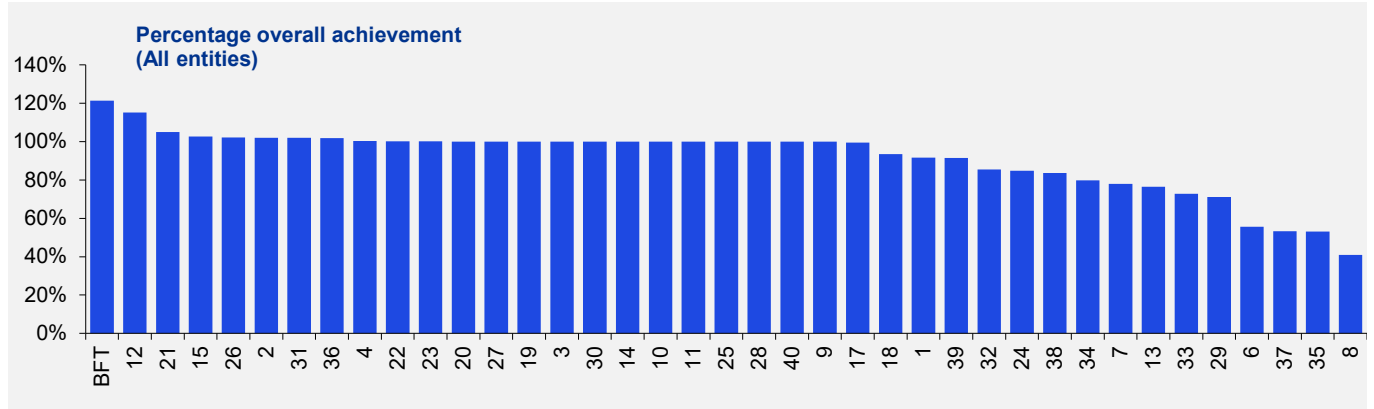
Cost pressures identified during the planning process arise through a variety of sources, and have been identified throughout the year via regular review of month end positions, for example agency costs as a percentage of total pay costs was higher than expected at Month 8. This was then tracked and monitored more closely for the remainder of the year. Intelligence around cost pressures are captured by Finance Business Partners through their regular interactions with budget holders and others across the Trust; we have seen evidence of this process identifying unexpected variation to budget, through our review of a sample of monthly budget holder statements. We reviewed the process by which monthly budget statements are produced, discussed and challenged and found this process to be designed effectively.

Financial Sustainability

Efficiency Programme benchmarking

We have benchmarked the Trust's CIP performance in 2023/24 against KPMG's other NHS provider audited entities.

- The Trust was one of only twelve providers in the dataset to deliver efficiencies in excess of its plan for 2023/24. As can be seen in the first graph, Bolton NHS FT had the largest achievement as a percentage of original plan.
- The second graph demonstrates, however, that the Trust was in the lower half of the provider comparator group in terms of the percentage of savings delivered recurrently. Reduced efficiencies delivered on a recurrent basis creates additional pressures in the following financial year.



Financial Sustainability

Monthly finance reports are presented to the Finance and Investment Committee. We reviewed these reports throughout the year, which evidenced that the Committee is sufficiently sighted on performance throughout the year in terms of surplus/deficit, achievement of CIP and emerging cost pressures resulting in unexpected or unwarranted variation to plan. The finance reports are sufficiently detailed to enable proper scrutiny and the reports and surrounding discussions ensure the Committee is briefed adequately as to the reasons for key variances.

At the time of writing, we have reviewed the latest financial plan for 2024/25. This shows an adjusted financial performance deficit of £10.2m planned for 2024/25 and an efficiency target of £24.3m which is a significant increase (26%) compared with the prior year target. The Trust has strong processes in place around management of CIP delivery, with a highly detailed CIP tracker and robust monitoring arrangements. However the scale of the efficiencies needed in 2024/25 will create a significant financial challenge, especially given the level of non-recurrent savings delivered in 2023/24 which creates an additional pressure in the following year. Furthermore, year-on-year the opportunity and ability to draw upon non-recurrent savings inevitably reduces.

Within the plan, the cashflow shows a reduction in cash in 2024/25 of £15m, which will reduce the Trust's cash balances further. The Trust has an appropriate plan in place to access cash support from the Department should the need arise.

We reviewed the systems and processes for identifying, escalating and monitoring risks (including financial risks) and determined that these arrangements have been designed and implemented effectively during 2023/24. Financial risks continued to be escalated through the Trust's risk management systems and processes. As an example, the January 2024 Risk Management Committee considered two new Finance risks relating to the impact of derecognition of the Trust's Deferred Tax Asset and the Trust's asset management software, both of which were reported and escalated through the risk management process in a timely way as they arose.

Monthly finance reports are presented to each Finance and Investment Committee and they include details on the financial risks that are facing the Trust. Finance risks along with other strategic risks associated with corporate objectives are included on the Board Assurance Framework (BAF) that is reported to Board three times a year, and the BAF is reported to the appropriate sub-committees prior to being presented to Board.

Conclusion

It is clear that the Trust's 2024/25 financial plan is highly challenging, with a significant proportion of savings programmes described by the Trust as 'high risk' in terms of delivery. However, based on the findings above we have not identified any significant weaknesses in the Trust's arrangements associated with financial sustainability.

Key financial and performance metrics:	2023-24	2022-23
Planned surplus/(deficit)	(£12.5m)	(£7.2m)
Actual adjusted surplus/(deficit) (excl. impairments)	(£13.5m)	(£1.5m)
Planned CIP		
- Recurrent	£19.3m	£12.3m
- Non-recurrent	-	£8.2m
Actual CIP		
- Recurrent	£8.3m	£4.2m
- Non-recurrent	£15.1m	£18.0m
Year-end cash position	£15.9m	£58.2m

Governance

How the Trust ensures that it makes informed decisions and properly manages its risks.

We have considered the following in our work:

- how the Trust monitors and assesses risk and how the body gains assurance over the effective operation of internal controls, including arrangements to prevent and detect fraud;
- how the Trust approaches and carries out its annual budget setting process;
- how the Trust ensures effective processes and systems are in place to ensure budgetary control; to communicate relevant, accurate and timely management information (including non-financial information where appropriate); supports its statutory financial reporting requirements; and ensures corrective action is taken where needed, including in relation to significant partnerships;
- how the Trust ensures it makes properly informed decisions, supported by appropriate evidence and allowing for challenge and transparency; and
- how the body monitors and ensures appropriate standards, such as meeting legislative/regulatory requirements and standards in terms of management or Board members' behaviour

We consider the Trust to have effective processes in place to monitor and assess risk. Strategic risks are recorded and identified using the Board Assurance Framework (BAF), and any identified risks are reported to the appropriate sub-committee. The BAF document embodies many good practice areas including identifying the Trust's risk appetite, target scores, enabling monitoring of changing risk scores over time, and clearly articulating gaps in controls and assurances. Our review of the risk register found this was also sufficiently detailed to effectively manage key risks.

The Trust has a Risk Management Framework in place last updated in 2019 that is currently under review. We raised a performance improvement observation in the prior year as this document was in draft and had an expired review date of October 2022. The Risk Management Policy document is up to date and we consider the Trust's overall risk management approach to be robust, however further delay to the review and assessment of whether the Framework is up to date and remains fit for purpose does create a risk that practice won't fully reflect the Trust's circumstances and best practice in the sector.

The Trust has adequate controls in place to prevent and detect fraud such as the Freedom to Speak Up (FTSU) policy, network of FTSU guardians and the Local Counter Fraud Specialist who provides a progress report to each Audit Committee. This includes a programme of proactive work to encourage individuals to speak up and promote a healthy reporting culture across the Trust.

The Trust presented its financial plan for 2023/24 to the Board of Directors for approval in May 2023. Financial risks continued to be escalated through the Trust's risk management systems and processes as outlined on the previous page.

We found there to be appropriate scrutiny and challenge of the budgets and appropriate approval through the budget holders and the F&I Committee.

Reviews of compliance with laws & regulations, staff code of conduct and the Trust's constitution are completed through Board meetings, Quality Assurance Committee, Audit Committee and other governance structures. Declarations are obtained by the Trust from all appropriate staff and board members.

The Trust has an appointed internal auditor to monitor controls in key areas to ensure the Board is able to take appropriate assurance that controls are designed, implemented and operating effectively.

Governance

The Trust has ensured appropriate scrutiny, challenge and transparency on decision making. The Standing Financial Instructions and Scheme of Delegation are in place, which is an appropriate framework for making and approving key decisions. The Trust guarantees key decisions are appropriately challenged and scrutinised by representatives of a number of different functions such as Finance, HR and Risk through a clear business case process.

Business cases are presented to the Board where required due to their size, and no specific business cases were presented to Board for approval during 2023/24. We understand that there are only two capital schemes totalling over £1m, each ongoing in 23/24. We reviewed these business cases last year to evidence that they were sufficiently detailed to allow appropriate scrutiny and decision making. We also reviewed the corresponding Board and F&I Committee minutes which evidenced that appropriate challenge and scrutiny is provided over business cases.

We have reviewed the recent CQC report published in October 2023 and note that the CQC gave an overall rating of 'Requires Improvement' for the 'Well Led' domain. We have reviewed the Well Led improvement plan from the November 2023 Board papers and note that there is a detailed plan in place to address the actions. Based on the information reviewed, we consider that this area is not indicative of wider governance issues that could lead to a significant VFM weakness.

Conclusion

Based on the findings above we have not identified any significant weaknesses in the Trust's arrangements associated with governance.

	2024	2023
Control deficiencies reported in the Annual Governance Statement	No significant internal control issues	No significant internal control issues
Head of Internal Audit Opinion	Substantial assurance	Reasonable / Moderate assurance
Oversight Framework segmentation	Segment 2	Segment 2
Overall Care Quality Commission rating	Good (October 2023)	Good (April 2019)

Improving economy, efficiency and effectiveness

How the Trust uses information about its costs and performance to improve the way it manages and delivers its services

We have considered the following in our work:

- how financial and performance information has been used to assess performance to identify areas for improvement;
- how the Trust evaluates the services it provides to assess performance and identify areas for improvement;
- how the Trust ensures it delivers its role within significant partnerships and engages with stakeholders it has identified, in order to assess whether it is meeting its objectives; and
- where the Trust commissions or procures services, how it assesses whether it is realising the expected benefits.

The Trust has an annual process in place to identify, plan and scope potential CIP schemes in readiness for a new financial year and schemes are monitored regularly at a Trust and divisional level. Quality impact assessments are required for each scheme and we have seen evidence that the use and challenge of quality impact assessments is robust and embedded within the Trust.

In 2023/24, recurrent savings of £8.3m plus non-recurrent savings of £15.1m have been delivered in the year, which exceeded the total year to date CIP target by £4.1m. Given that a large proportion of the savings delivered are non-recurrent (65%), but the total CIP target for 2023/24 of £19.3m was projected to be delivered recurrently, this will add significant pressure to the financial position going forward. However, the Trust has strong processes in place with a detailed CIP tracker and regular monitoring to support the £24.3m target for 2024/25. The latest finance report shows that £8m of these savings are regarded as 'low risk', £6.7m are regarded as 'medium risk' and the majority (£9.6m) is regarded as 'high risk'.

An Integrated Performance Report is presented to each meeting of the Trust Board in order to report on all areas of performance, and both financial and non-financial performance is discussed and challenged at Board, allowing the Trust to appropriately assess its quality and safety, workforce, operational performance and financial performance, and ultimately to provide assurance internally over economy, efficiency and effectiveness of operations. This allows the Board to monitor the performance of services and focus attention on areas of underperformance, for which actions would be identified and further monitoring would take place.

Integrated performance meetings also take place monthly for each division, and we have seen evidence that divisional integrated performance dashboards are reviewed, discussed and challenged at these meetings.

The Trust engages in a number of partnerships at the Greater Manchester (GM) level, including participating in system discussions which take place on a regular basis. Discussions related to the system take place at the fortnightly CEOs' and Executive Directors' meetings and actions are reported through the Trust's regular schedule of meetings and escalated to the Board as required. The Trust has been involved in the GM Sustainable Services programme and the GM Pathology Network programme during 2023/24.

The Board receives regular reporting on partnerships through the CEO's update at each monthly Board meeting. Where a decision is required, the Board will receive a formal paper outlining the issue, rationale and proposed decision. The Trust is currently refreshing the Strategy and the 2024-29 Strategy is due to be published in June 2024. We understand that partnerships will continue to be a key area of the Trust's Strategy.

Improving economy, efficiency and effectiveness

The Trust has a benchmarking strategy in place and the Finance & Intelligence Group has been responsible for reviewing benchmarking information in 2023/24; we have seen evidence of this strategy in action from our review of example papers to Board and sub-Committees, including Model Hospital benchmarking being used to identify opportunities, and corporate benchmarking against other Greater Manchester providers. We understand that this group is changing to become the Elective Programme and Productivity Group in order to combine monitoring of progress against elective recovery targets and productivity. Specialities produce improvement plans where they are identified as outliers against national and local peers and progress is tracked and reported through this group.

Conclusion

Based on the findings above we have not identified any significant weaknesses in the Trust's arrangements associated with improving economy, efficiency and effectiveness.



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