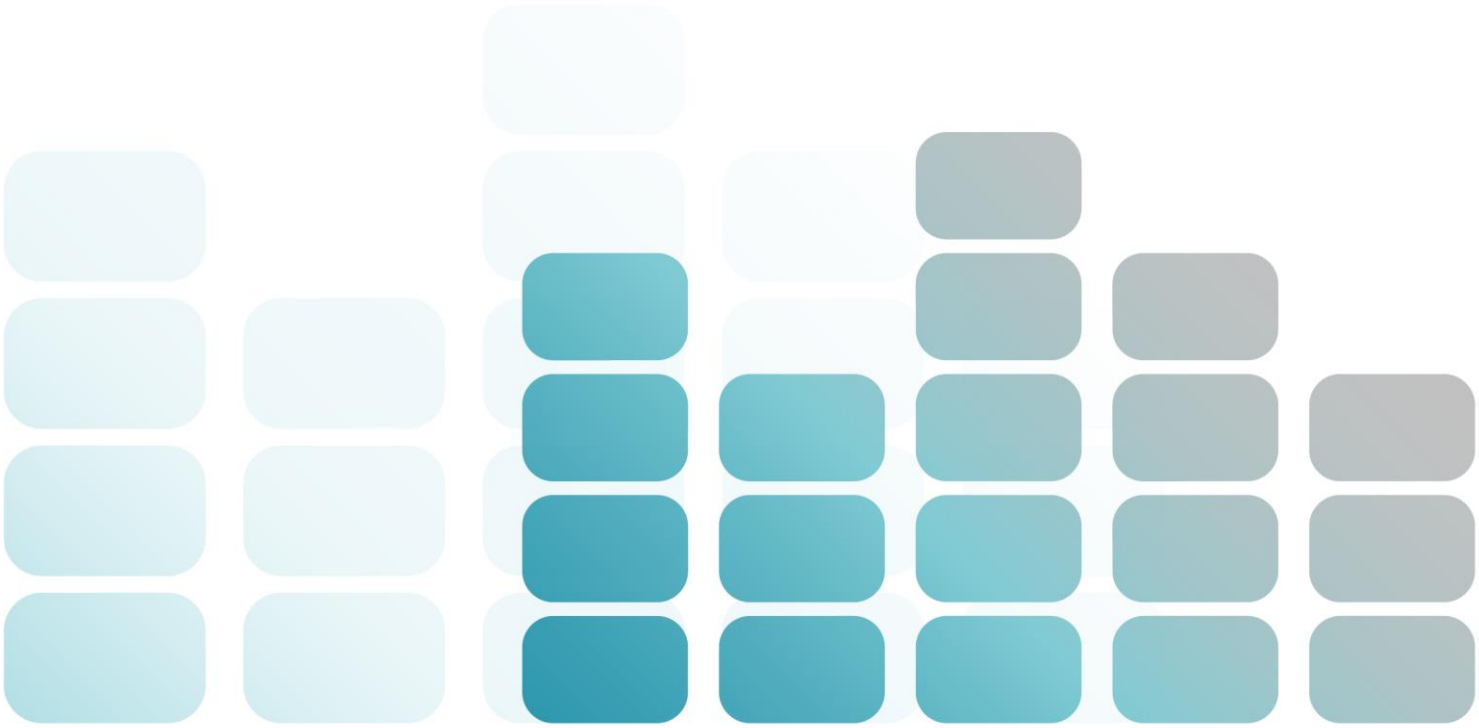
NHS Borders

Annual Audit Plan 2024/25



AUDIT SCOTLAND

Prepared for NHS Borders
March 2025

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Accessibility

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Introduction

Purpose of the Annual Audit Plan

1. The purpose of this Annual Audit Plan is to provide an overview of the planned scope and timing of the 2024/25 audit of NHS Borders' annual report and accounts. It outlines the audit work planned to meet the audit requirements set out in auditing standards and the Code of Audit Practice, including supplementary guidance.

Appointed auditor and independence

2. John Boyd, of Audit Scotland, has been appointed by the Auditor General for Scotland as external auditor of NHS Borders for the period from 2022/23 until 2026/27. The 2024/25 financial year is therefore the third of the five-year audit appointment.

3. John Boyd and the audit team are independent of NHS Borders in accordance with relevant ethical requirements, including the Financial Reporting Council's Ethical Standard. This standard imposes stringent rules to ensure the independence and objectivity of auditors. Audit Scotland has robust arrangements in place to ensure compliance with ethical standards. The arrangements are overseen by the Executive Director of Innovation and Quality, who serves as Audit Scotland's Ethics Partner.

4. The Ethical Standard requires auditors to communicate any relationships that may affect the independence and objectivity of the audit team. There are no such relationships pertaining to the audit of NHS Borders to communicate.

Audit scope and responsibilities

Scope of the audit

5. The audit is performed in accordance with the Code of Audit Practice, including supplementary guidance, International Standards on Auditing (UK), and relevant legislation. These set out the requirements for the scope of the audit which includes:

- An audit of the financial statements and an opinion on whether they give a true and fair view and are free from material misstatement, including the regularity of income and expenditure.
- An opinion on statutory other information published with the financial statements in the annual report and accounts, the Performance Report, and the Governance Statement, and an opinion on the audited part of the Remuneration and Staff Report.
- Conclusions on NHS Borders' arrangements in relation to the wider scope areas: Financial Management, Financial Sustainability, Vision, Leadership, and Governance, and Use of Resources to Improve Outcomes.
- Reporting on NHS Borders' arrangements for securing Best Value.
- Provision of an Annual Audit Report setting out significant matters identified from the audit of the annual report and accounts and the wider scope areas specified in the Code of Audit Practice.

Responsibilities

6. The Code of Audit Practice sets out the respective responsibilities of NHS Borders and the auditor. A summary of the key responsibilities is outlined below.

Auditor's responsibilities

7. The responsibilities of auditors in the public sector are established in the Public Finance and Accountability (Scotland) Act 2000. These include providing an independent opinion on the financial statements and other information reported within the annual report and accounts, and concluding on NHS Borders' arrangements in place for the wider scope areas.

NHS Borders' responsibilities

8. NHS Borders has primary responsibility for ensuring proper financial stewardship of public funds, compliance with relevant legislation and establishing effective arrangements for governance, propriety and regularity that enables it to successfully deliver its objectives. The features of proper financial stewardship include:

- Establishing arrangements to ensure the proper conduct of its affairs.
- Preparation of an annual report and accounts, comprising financial statements and other information that gives a true and fair view.
- Establishing arrangements for the prevention and detection of fraud, error and irregularities, and bribery and corruption.
- Implementing arrangements to ensure its financial position is soundly based.
- Making arrangements to secure Best Value.
- Establishing an internal audit function.

Audit of the annual report and accounts

Introduction

9. The audit of the annual report and accounts is driven by materiality and the risks of material misstatement in the financial statements, with greater attention being given to the significant risks of material misstatement. This chapter outlines materiality, the significant risks of material misstatement that have been identified, and the impact these have on the planned audit procedures.

Materiality

10. The concept of materiality is applied by auditors in planning and performing an audit, and in evaluating the effect of any uncorrected misstatements on the financial statements or other information reported in the annual report and accounts.

11. Broadly, the concept of materiality is to determine whether matters identified during the audit could reasonably be expected to influence the decisions of users of the financial statements. Auditors set a monetary threshold when determining materiality, although some issues may be considered material by their nature. Therefore, materiality is ultimately a matter of the auditor's professional judgement.

12. The materiality levels determined for the audit of NHS Borders and its group are outlined in Exhibit 1.

Exhibit 1
2024/25 Materiality levels for NHS Borders and its group

Materiality	Audited body	Group
Materiality – based on an assessment of the needs of users of the financial statements and the nature of NHS Borders' operations, the benchmark used to determine materiality is gross expenditure (less IJB contributions) based on the audited 2023/24 financial statements. Materiality has been set at 1.5% of the benchmark.	£5.3 million	£5.4 million

Materiality	Audited body	Group
Performance materiality – this acts as a trigger point. If the aggregate of misstatements identified during the audit exceeds performance materiality, this could indicate that further audit procedures are required. Using professional judgement, performance materiality has been set at 75% of planning materiality.	£3.97 million	£4.0 million
Reporting threshold – all misstatements greater than the reporting threshold will be reported.	£0.265 million	£0.27 million

Source: Audit Scotland

Significant risks of material misstatement to the financial statements

13. The risk assessment process draws on the audit team's cumulative knowledge of NHS Borders, including the nature of its operations and its significant transaction streams, the system of internal control, governance arrangements and processes, and developments that could impact on its financial reporting.

14. Based on the risk assessment process, significant risks of material misstatement to the financial statements have been identified and these are summarised in Exhibit 2, page 8. These are the risks which have the greatest impact on the planned audit approach, and the planned audit procedures in response to the risks are outlined in Exhibit 2.

15. The risk assessment process is an iterative and dynamic process. The assessment of risks set out in this Annual Audit Plan and Exhibit 2 may change as more information and evidence is obtained over the course of the audit. Where such changes occur, these will be reported to NHS Borders and those charged with governance, where relevant.

Exhibit 2
Significant risks of material misstatement to the financial statements

Risk of material misstatement	Planned audit response
1. Fraud caused by management override of controls Management is in a unique position to perpetrate fraud because of management's ability to override controls that otherwise appear to be operating effectively.	The audit team will: • Evaluate the design and implementation of controls over journal entry processing. • Make inquiries of individuals involved in the financial reporting process about inappropriate or unusual activity relating to the processing of journal entries. • Test journals entries, focusing on those that are assessed as higher risk. • Evaluate significant transactions outside the normal course of business. • Assess the adequacy of controls in place for identifying and disclosing related party relationships and transactions in the financial statements. • Assess changes to the methods and underlying assumptions used to prepare accounting estimates and assess these for evidence of management bias.
2. Risk of fraud in the completeness of expenditure In line with Practice Note 10: Audit of financial statements and regularity of public sector bodies in the United Kingdom, most public-sector bodies are net spending bodies therefore the risk of material misstatement due to fraud related to expenditure recognition may in some cases be greater than the risk relating to revenue recognition. Our audit focus is on transactions around the year end where we consider greatest incentive for management to understate expenditure due to significant pressure from stakeholders to breakeven.	The audit team will: • Make inquiries of individuals involved in the financial reporting process about inappropriate or unusual activity relating to the processing of non-pay expenditure transactions and other adjustments. • Detailed testing of completeness of non-pay expenditure transactions with a focus on significant risk areas, including year-end and post-close-down entries. • Evaluate any identified significant transactions outside the normal course of business, identified through audit testing of expenditure and accruals. • Review expenditure accruals for indication of understatement.

Risk of material misstatement	Planned audit response
3. Estimation in the valuation of property, plant and equipment NHS Borders held £150.9 million of property, plant, and equipment (PPE) at 31 March 2024, of which £132.8 million was land and building assets. NHS Borders is required to value land and building assets at existing use value where an active market exists for these assets. Where there is no active market, these assets are valued on a depreciated cost replacement (DRC) basis. As a result, there is a significant degree of subjectivity in these valuations which are based on specialist assumptions, and changes in the assumptions can result in material changes to valuations. A full revaluation is commissioned every five years or when NHS Borders considers there is a potential significant movement in year. The latest full revaluation was carried out at 31 March 2023. A full revaluation is not planned for 31 March 2025. The property adviser will identify a recommended indexation uplift for properties.	The audit team will: • Evaluate the design and implementation of controls over the valuation/indexation process. • Review the information provided to the external valuer and assess this for completeness and accuracy. • Evaluate the competence, capabilities, and objectivity of the external valuer. • Review reports from the external valuer to confirm overall asset valuation movements. • Obtain an understanding of management's involvement in the valuation process to assess if appropriate oversight has occurred. • Consider whether the valuation frequency is appropriate. • Review the completeness and accuracy of the key data used in the valuations and reasonableness of the assumptions used in the 2024/25 valuation process, and challenge these where required. • Review management's assessment that the value in the balance sheet of land and buildings assets not subject to a valuation process in 2024/25 is not materially different to current value at the year-end, and challenge this where required.

Source: Audit Scotland

Key audit matters

16. The Code of Audit Practice requires public sector auditors to communicate key audit matters. Key audit matters are those matters, that in the auditor's professional judgement, are of most significance to the audit of the financial statements and require most attention when performing the audit.

17. In determining key audit matters, auditors consider:

- Areas of higher or significant risk of material misstatement.
- Areas where significant judgement is required, including accounting estimates that are subject to a high degree of estimation uncertainty.

- Significant events or transactions that occurred during the year.

18. The matters determined to be key audit matters will be communicated in the Annual Audit Report. Exhibit 2 outlines the significant risks of material misstatement to the financial statements that have been identified, including those that have greatest impact on the planned audit procedures and require most attention when performing the audit.

Group audit

19. NHS Borders is part of a group and prepares group financial statements. The group is made up of three components, including NHS Borders which is the parent of the group. Risk assessment procedures have been performed on the group audit to identify if there are any risks of material misstatement to the group financial statements, or any components where audit procedures are required for the purposes of the group audit. The outcome of the risk assessment procedures on the group audit are outlined in Exhibit 3.

Exhibit 3
Outcome of risk assessment procedures on the group audit

Group component	Accounting treatment	Risk of material misstatement	Audit procedures required	Auditor
NHS Borders	Consolidated on a line-by-line basis	Yes – Exhibit 2	Yes – full scope audit.	Audit Scotland
Borders Health Board Endowment Funds (“the Difference”)	Consolidated on a line-by-line basis	No, but is material to group financial statements.	Yes – risk assessment questionnaire issued and analytical procedures at group level.	Thomson Cooper
Scottish Borders Integration Joint Board	Accounted for on equity basis	No, and is not material to group financial statements.	No specific procedures required.	Audit Scotland

Source: Audit Scotland

20. Where specific audit procedures are required on a component's financial statements, and the component auditor is different to NHS Borders appointed auditor, group audit instructions will be issued to the component auditor outlining expectations and requirements in performing these audit procedures.

Wider scope and Best Value

Introduction

21. Reflecting the fact that public money is involved, the Code of Audit Practice requires that public audit is planned and undertaken from a wider perspective than in the private sector. The wider scope audit set out by the Code of Audit Practice broadens the audit of the annual report and accounts to include consideration of additional aspects or risks in four wider scope areas, which are summarised below:

- **Financial Management** – this means having sound budgetary processes. Factors that can impact on NHS Borders being able to secure sound financial management include the strength of the financial management culture, accountability, and arrangements to prevent and detect fraud, error and other irregularities, bribery and corruption.
- **Financial Sustainability** – this means looking forward over the medium and longer term in planning the services to be delivered and how they will be delivered effectively. This is assessed by considering NHS Borders' medium- to longer-term planning for service delivery.
- **Vision, Leadership and Governance** – this means having a clear vision and strategy, with set priorities within the vision and strategy. This is assessed by considering the clarity of plans in place to deliver the vision and strategy and the effectiveness of the governance arrangements to support delivery.
- **Use of Resources to Improve Outcomes** – this means using resources to meet stated outcomes and improvement objectives through effective planning and working with partners and communities. This is assessed by considering NHS Borders' arrangements for ensuring resources are deployed to improve strategic outcomes, meet the needs of service users, and deliver continuous improvement.

22. A conclusion on the effectiveness and appropriateness of arrangements NHS Borders has in place for each of the wider scope areas will be reported in the Annual Audit Report.

Duty of Best Value

23. The Scottish Public Finance Manual (SPFM) explains that Accountable Officers have a specific responsibility to ensure that arrangements have

been made to secure Best Value. Best Value in public services: guidance for Accountable Officers is issued by Scottish Ministers and sets out their duty to ensure that arrangements are in place to secure Best Value in public services.

24. Consideration of the arrangements NHS Borders has in place to secure Best Value will be carried out alongside the wider scope audit, and a conclusion on the arrangements NHS Borders has in place will be reported in the Annual Audit Report.

25. Auditors may also carry out specific audit work covering the seven Best Value characteristics set out in the SPFM. The risks assessment process did not identify a need to carry out specific audit work on any of the characteristics. However, auditors are required to carry out a review of the 'fairness and equality' characteristic at least once during the audit appointment, and this will be carried out during the 2024/25 audit.

Significant wider scope and Best Value risks

26. The risk assessment process has identified significant risks in the wider scope areas and Best Value as outlined in Exhibit 4, and this includes the planned audit procedures in response to the risks.

Exhibit 4
Significant wider scope and Best Value risks

Description of risk	Planned audit response
1. Financial management NHS Borders, whilst having the required three-year financial plan, is not able to set a balanced budget over this period. The 2024/25 forecast at period 8 was forecasting a £21 million overspend for the financial year (after expected in year savings). This was in excess of the £14.8 million brokerage cap set by the Scottish Government at the start of the year. The Scottish Government will now provide additional brokerage to cover up to a £21.1 million year-end overspend. Planned efficiency savings cannot close the predicted financial gap in 2024/25 and budget pressures continue to impact NHS Borders, leaving the board unable to deliver a balanced outturn.	The audit team will: • Discuss the development of financial plans with NHS Borders and progress towards setting balanced budgets. • Assessing the extent to which NHS Borders has an understanding around its underlying cost base and the extent to which cost control measures have been implemented in year to meet financial targets. • Review the 2024/25 financial outturn and achievement of savings.

2. Financial sustainability

In previous years, £42 million of brokerage has been provided to NHS Borders by the Scottish Government.

Further brokerage of up to £21 million will be provided in 2024/25. This is in excess of the brokerage gap agreed at the start of 2024/25 (see above)

The medium-term financial plan estimates a cumulative deficit of £64.2 million over the three years 2024/25 - 2026/27. This would bring the brokerage total to over £100 million in the medium term.

NHS Borders continues to work with the Scottish Government to address the sustainability challenges. However, it is unclear how the Board will return to a breakeven position or how this level of brokerage will be repaid.

The Board has also experienced challenges in meeting performance targets. With the current level of financial pressures, the Board faces significant challenges in maintaining or improving service delivery in a financially sustainable way.

The audit team will:

- Monitor NHS Borders' financial position and plans, including underlying savings plans, as reported to the board / relevant committees.
- Assess the measures put in place by the board to establish grip and control of both financial and non-financial performance.
- Review any assessment of NHS Borders' future financial position (including outputs from the financial improvement programme and recovery plans).
- Discussions with senior finance staff on financial position and what scenario planning has been undertaken to inform strategic planning.
- Assess progress made by NHS Borders in implementing sustainable transformational change to address financial targets while meeting performance targets.

Source: Audit Scotland

Reporting arrangements, timetable and audit fee

Audit outputs

27. The outputs from the 2024/25 audit include:

- This Annual Audit Plan.
- An Independent Auditor's Report to NHS Borders, the Auditor General for Scotland, and the Scottish Parliament setting out opinions on the annual report and accounts.
- An Annual Audit Report to NHS Borders and the Auditor General for Scotland setting out significant matters identified from the audit of the annual report and accounts, conclusions from the wider scope and Best Value audit, and recommendations, where required.

28. The matters to be reported in the outputs will be discussed with NHS Borders for factual accuracy before they are issued. All outputs from the audit will be published on Audit Scotland's website, apart from the Independent Auditor's Report, which is included in the audited annual report and accounts.

29. Target dates for the audit outputs are set by the Auditor General for Scotland. In setting the target dates for the audit outputs, consideration is given to the target date for approving the annual report and accounts, which is 30 June 2025 for NHS bodies.

30. The Independent Auditor's Report and Annual Audit Report are planned to be issued by the target date of 30 June 2025.

Audit timetable

31. Achieving the timetable for production of the annual report and accounts, supported by complete and accurate working papers, is critical to delivery of the audit to agreed target dates. Exhibit 5 includes a timetable for the audit, which has been agreed with management. Agreed target dates will be kept under review as the audit progresses, and any changes required, and their potential impact, will be discussed with NHS Borders and reported to those charged with governance, where required.

Exhibit 5
2024/25 audit timetable

Audit activity	NHS Borders target date	Audit team target date	Relevant committee date
Issue of Annual Audit Plan		6 March 2025	24 March 2025
Annual report and accounts:			
• Consideration of unaudited annual report and accounts by those charged with governance	7 May 2025		19 June 2025
• Submission of unaudited annual report and accounts and all working papers to audit team	7 May 2025		
• Latest date for audit clearance meeting	10 June 2025	10 June 2025	
• Issue of draft Letter of Representation, proposed Independent Auditor's Report, and proposed Annual Audit Report		12 June 2025	19 June 2025
• Agreement of audited and unsigned annual report and accounts	12 June 2025	12 June 2025	
• Approval by those charged with governance and signing of audited annual report and accounts	26 June 2025		26 June 2025
• Signing of Independent Auditor's Report and issue of Annual Audit Report		30 June 2025	

Source: Audit Scotland

Audit fee

32. NHS Borders' audit fee is determined in line with Audit Scotland's fee setting arrangements. The agreed audit fee for the 2024/25 audit is set out in Exhibit 6.

33. In setting the audit fee, it is assumed that NHS Borders has effective governance arrangements in place and the complete annual report and

accounts will be provided for audit in line with the agreed timetable. The audit fee assumes there will be no significant changes to the planned scope of the audit. Where the audit cannot proceed as planned, for example, due to incomplete or inadequate working papers, the audit fee may need to be increased.

Exhibit 6
Audit fee (including VAT)

Fee component[1]	Fee (£)
External auditor remuneration, limited to sectoral cap increase	154,830
Pooled costs, such as travel and subsistence costs	16,800
Contribution to audit support costs, including technical guidance and support to auditors	0
Total 2024/25 fee	**171,630**

Source: Audit Scotland

[1] Information on the components that make up the total fee can be found in Audit Scotland's Audit management and quality guidance.

Other matters

Internal audit

34. NHS Borders is responsible for establishing an internal audit function as part of an effective system of internal control. As part of the audit, the audit team will obtain an understanding of internal audit, including its nature, responsibilities, and activities.

35. While internal audit and external audit have differing roles and responsibilities, external auditors may seek to rely on the work of internal audit where it is considered appropriate. A review of internal audit's 2024/25 audit plan was carried out to identify if there were any areas where the audit team could rely on its work. The audit team concluded it will not rely on internal audit's work. However, the audit team will review internal audit's reports and assess if there is any impact on the audit.

Audit quality

36. Audit Scotland is committed to the consistent delivery of high-quality audit. Audit quality requires ongoing attention and improvement to keep pace with external and internal changes. Details of the arrangements in place for the delivery of high-quality audits is available from the Audit Scotland website.

37. The International Standards on Quality Management (ISQM) applicable to Audit Scotland for 2024/25 audits are:

- ISQM (UK) 1, which deals with an audit organisation's responsibilities to design, implement, and operate a system of quality management (SoQM) for audits. Audit Scotland's SoQM consists of a variety of components, such as: governance arrangements and culture to support audit quality, compliance with ethical requirements, ensuring Audit Scotland is dedicated to high-quality audit through engagement performance and resourcing arrangements, and ensuring there are robust quality monitoring arrangements in place. Audit Scotland carries out an annual evaluation of its SoQM and has concluded it complies with this standard.

- ISQM (UK) 2, which sets out arrangements for conducting engagement quality reviews, which are performed by senior management not involved in an audit, to review significant judgements and conclusions reached by the audit team, and the appropriateness of proposed audit opinions on high-risk audits.

38. To monitor quality at an individual audit level, Audit Scotland carries out internal quality reviews on a sample of audits. Additionally, the Institute of Chartered Accountants of England and Wales (ICAEW) carries out independent quality reviews on a sample of audits.

39. Actions to address deficiencies identified by internal and external quality reviews are included in a rolling Quality Improvement Action Plan, which is used to support continuous improvement. Progress with implementing planned actions is monitors on a regular basis by Audit Scotland's Quality and Ethics Committee.

40. Audit Scotland may periodically seek the views of NHS Borders on the quality of audit services provided. The audit team would also welcome feedback at any time.

NHS Borders

Annual Audit Plan 2024/25

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