



# **Healthcare Improvement Scotland**

Planning report to the Audit Committee  
on the 2016/17 audit

22 February 2017

# Contents

## Our planning report

- 3 Director introduction
- 4 Our audit explained
- 5 An audit tailored to you
- 6 Scoping
- 8 Materiality
- 9 Significant risks
- 12 Wider scope requirements
- 14 Audit quality
- 15 Purpose of our report and responsibility statement

## Appendices

- 17 Prior year uncorrected misstatements and disclosure deficiencies
- 18 Fraud responsibilities and representations
- 20 Your audit team and timetable
- 22 Independence and fees
- 23 Our approach to quality

# Director introduction

## The key messages in this report

I have pleasure in presenting our planning report to the Audit Committee for the 2017 audit. I would like to draw your attention to the key messages of this paper:

Audit quality is our number one priority. We plan our audit to focus on audit quality and have set the following audit quality objectives for this audit:

A robust challenge of the key judgements taken in the preparation of the financial statements.

A strong understanding of your internal control environment.

A well planned and delivered audit that raises findings early with those charged with governance.

### Significant financial statement risks

- As with other public sector bodies, Healthcare Improvement Scotland continues to face financial challenges, due to uncertainty around future funding. As at 30 November 2016, Healthcare Improvement Scotland are showing an underspend of £116k against budget and is forecasting that it will meet its Revenue Resource Limit (RRL) target by year end. The achievement of a breakeven position will be a key focus of our audit.
- Under Auditing Standards, there is a presumed risk that revenue may be misstated due to the improper recognition of revenue. This presumption can be rebutted if the auditor concludes that there is no risk of material misstatement due to fraud relating to revenue recognition. Having considered the risk factors set out in Auditing Standards and the nature of the revenue streams at Healthcare Improvement Scotland, we have determined that the risk of fraud arising from revenue recognition can be rebutted. This is based on the fact that there is little incentive to manipulate revenue recognition, the majority of revenue is from the Scottish Government which can be agreed to confirmations supplied and the culture and ethical frameworks of the Board mean that all forms of fraud are seen as unacceptable.
- Other significant risks include management override of controls.

### Audit Dimensions

- The 2016 Code of Audit Practice sets our four audit dimensions which set a common framework for all public sector audits in Scotland. These are financial sustainability, financial management, governance and transparency and value for money. Due to the relative size and scale of the functions delivered by Healthcare Improvement Scotland, we have concluded that the full wider scope of audit is not appropriate. In accordance with paragraph 53 of the Code, our work in this area will therefore be restricted to concluding on:
  - the appropriateness of the disclosures in the governance statement; and
  - the financial sustainability of the board and the services that it delivers over the medium to longer term.

### Other wider scope work

- We will monitor the boards participation and progress with the National Fraud Initiative (NFI) during 2016/17 and complete an Audit Scotland audit questionnaire by 30 June 2017.
- In accordance with Audit Scotland guidance, we will be requested to provide information to support national performance audits and to inform wider analysis on the follow-up of Role of Boards report.

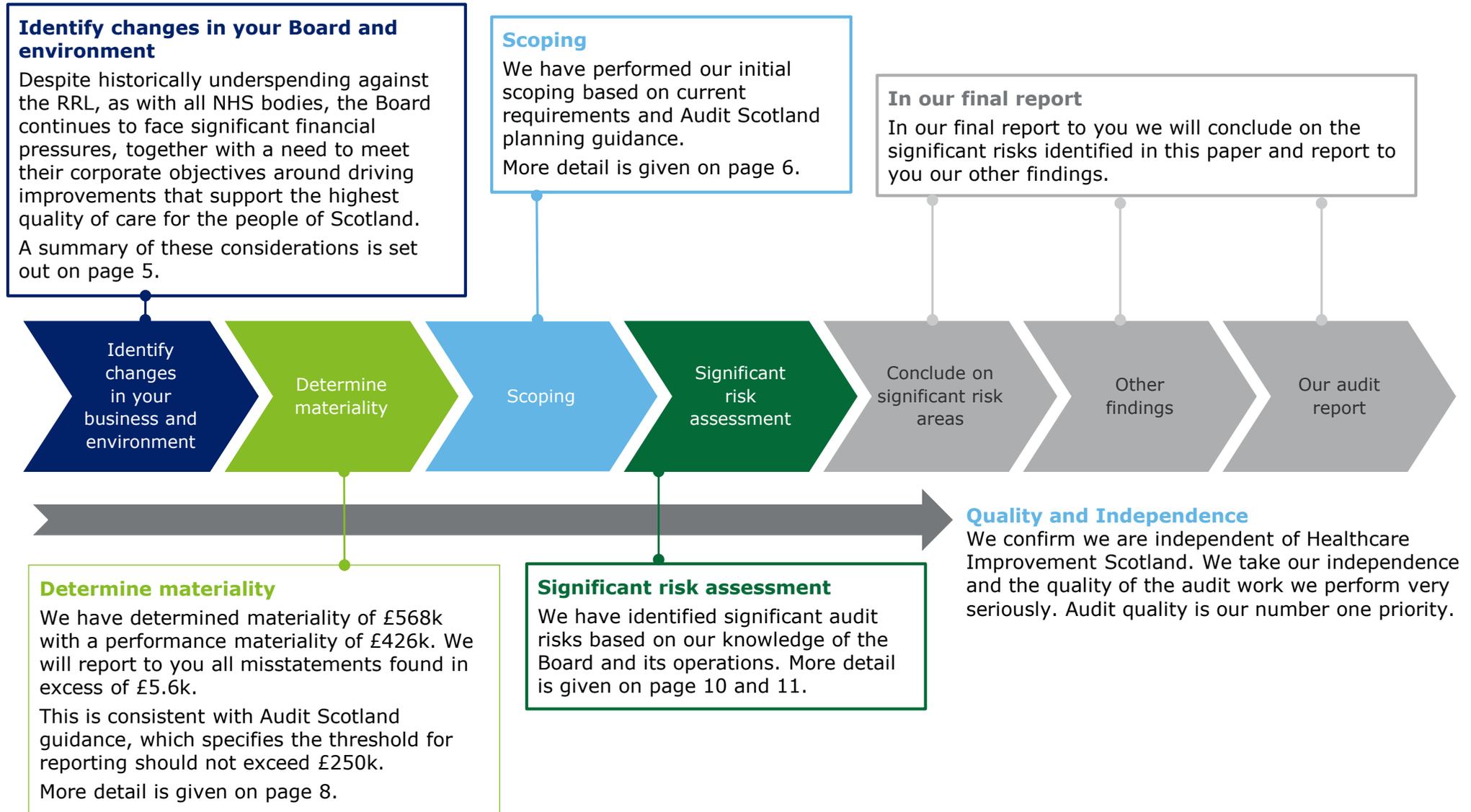
### Our commitment to quality

- We are committed to providing the highest quality audit, with input from our market leading specialists, sophisticated data analytics and our wealth of experience. Further information is presented on page 14.

**Pat Kenny**  
Audit Director

# Our audit explained

We tailor our audit to your business and your strategy



# An audit tailored to you

## Focusing on your business and strategy

### Impact on our audit

Performance against expenditure resource limit



There is a financial duty for Healthcare Improvement Scotland to comply with its RRL. As at 30 November 2016, Healthcare Improvement Scotland is showing an underspend of £116k against budget and they are forecasting to meet their RRL target by year end.

We will consider the Board's financial sustainability in the medium to longer term and consider whether it is planning effectively to continue to deliver its services on a sustainable basis.

Increase in Baseline Budget



Healthcare Improvement Scotland's budget has increased by just over £9m compared with last year. This increase largely relates to the Integrated Improvement Programme. On 1 April 2016, a new improvement resource to support Health and Social Care Partnerships, the Improvement Hub (ihub) was launched.

Healthcare Improvement Scotland has identified that there is a risk that the organisation will not manage its increased resources to a balanced budget by 31 March 2017 because of a delay in recruiting the necessary people to deliver the increased work. Action is being taken to direct internal resources to the organisation's key priority areas.

We will consider the impact of staff vacancies on the Board's ability to meet its financial targets.

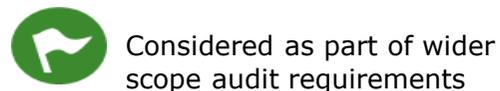
Registration of Independent Clinics



On 1 April 2016, Healthcare Improvement Scotland started regulating independent clinics in Scotland. All independent clinics must be registered by 31 March 2017. Each clinic must pay a fee of £1,990 upon registering, with an annual fee thereafter. As at 10 October 2016, only 60 out of a possible 400 clinics had provided completed registration forms.

The Board continues to engage with these private healthcare providers to progress these registrations and has amended their budget to take this delay and a number of exemptions from registration into consideration.

We will consider the continuing work in this area, and the impact on Healthcare Improvement Scotland's income as part of our audit.



# Scoping

## Our key areas of responsibility under the Code of Audit Practice



### Core audit

Our core audit work as defined by Audit Scotland comprises:

- providing the **Independent Auditor's Report** on the annual accounts (and any assurance statement on consolidation packs);
- providing the **annual report** on the audit addressed to the Board and the Auditor General for Scotland;
- communicating **audit plans** to those charged with governance;
- providing **reports to management**, as appropriate, in respect of the auditor's corporate governance responsibilities in the Code (including auditors' involvement in the NFI exercise);
- Preparing and submitting **fraud returns**, including nil returns, to Audit Scotland where appropriate;
- Identifying significant matters arising from the audit, alert the Auditor General for Scotland and support Audit Scotland in producing statutory reports as required; and
- undertaking work requested by Audit Scotland or local performance audit work.

### Wider scope requirements

The Code of Audit Practice sets out four audit dimensions which set a common framework for all public sector audits in Scotland:

- **Financial sustainability** – looking forward to the medium and longer term to consider whether the body is planning effectively to continue to deliver its services or the way in which they should be delivered.
- **Financial management** – financial capacity, sound budgetary processes and whether the control environment and internal controls are operating effectively.
- **Governance and transparency** – the effectiveness of scrutiny and governance arrangements, leadership and decision making, and transparent reporting of financial and performance information.
- **Value for money** - using resources effectively and continually improving services.

Due to the relative size and scale of the functions delivered by Healthcare Improvement Scotland, we have concluded that the full wider scope of audit is not appropriate. In accordance with paragraph 53 of the Code, our work in this area will therefore be restricted to concluding on:

- the appropriateness of the disclosures in the governance statement; and
- The financial sustainability of the board and the services that it delivers over the medium to longer term.

# Scoping (continued)

## Our approach



### Liaison with internal audit

The Auditing Standards Board's version of ISA (UK and Ireland) 610 "Using the work of internal auditors" prohibits use of internal audit to provide "direct assistance" to the audit. Our approach to the use of the work of Internal Audit has been designed to be compatible with these requirements.

We have reviewed the internal audit plan for 2016/17. We will review their reports and meet with them to discuss their work. We will also discuss the work where they have identified specific material deficiencies in the control environment and we will consider adjusting our testing so that the audit risk is covered by our work.

Using these discussions to inform our risk assessment, we will work together with internal audit to develop an approach that avoids inefficiencies and overlaps, therefore avoiding any unnecessary duplication of audit requirements on the Board's staff.

Obtain an understanding of the Board and its environment including the identification of relevant controls.

Identify risks and controls that address those risks.

Carry out "design and implementation" work on relevant controls.

If considered necessary, test the operating effectiveness of selected controls

Design and perform a combination of substantive analytical procedures and tests of details that are most responsive to the assessed risks.

### Approach to controls testing

Our risk assessment procedures will include obtaining an understanding of controls considered to be 'relevant to the audit'. This involves evaluating the design of the controls and determining whether they have been implemented ("D & I").

The results of our work in obtaining an understanding of controls and any subsequent testing of the operational effectiveness of controls will be collated and the impact on the extent of substantive audit testing required will be considered.

### Promoting high quality reporting to stakeholders

We view the audit role as going beyond reactively checking compliance with requirements: we seek to provide advice on evolving good practice to promote high quality reporting.

Audit Scotland has published good practice guides in relation the Annual Report and the Governance Statement to support the Board in preparing high quality drafts of the Annual Report and financial statements, which we would recommend the Board consider during drafting.

# Materiality

## Approach to materiality



### Basis of materiality – benchmark



- The audit director has determined materiality as £568k and a performance materiality of £426k, based on professional judgement, the requirements of auditing standards and the financial measures most relevant to users of the financial statements.
- We have used 2% of forecast gross expenditure as the benchmark for determining materiality.
- Our approach to determining the materiality benchmark is consistent with Audit Scotland guidance which states that the threshold for clearly trivial above which we should accumulate misstatements for reporting and correction to audit committees must not exceed £250k.

### Reporting to those charged with governance

Under the current materiality level based on gross expenditure, we will report to you all misstatements found in excess of £5.6k. This equates to 1% of materiality.

We will report to you misstatements below this threshold if we consider them to be material by nature.

### Our audit report

We will:

- Report the materiality benchmark applied in the audit of the Board;
- Provide comparative data and explain any changes in materiality, compared to prior year, if appropriate; and
- Explain any normalised or adjusted benchmarks we use, if appropriate.

Although materiality is the judgement of the audit director, the Audit Committee must satisfy themselves that the level of materiality chosen is appropriate for the scope of the audit.

# Significant risks

# Management override of controls

## We will use computer assisted audit techniques to support our work on the risk of management override

### Nature of risk

International Standards on Auditing requires auditors to identify a presumed risk of management override of control. This presumed risk cannot be rebutted by the auditor. This recognises that management may be able to override controls that are in place to present inaccurate or even fraudulent financial reports.

### The key judgement areas, its potential impact on the financial statements and our planned audit challenge

Our work will focus on:

- assessing the controls in relation to the financial reporting process posting of journals;
- the testing of journals, using data analytics to focus our testing on higher risk journals;
- significant accounting estimates. In addition to these estimates, we will also consider any other provisions and accruals; and
- any unusual transactions or one-off transactions, including those with related parties.

Our wider response to the risk of fraud is set out in the Appendix of this report.

In considering the risk of management override, we will:

- assess the overall position taken in respect of key judgements and estimates;
- consider the sensitivity of the financial statements with respect to the achieving financial performance targets including Core Revenue Resource Limits (RRL) thresholds;
- consider remuneration plans and linkage with key management judgements; and
- consider our view on the overall control environment and 'tone at the top'.

### Deloitte comment

We have not identified to date in our planning work any transactions which appear unusual or outside the normal course of business

# Core Expenditure Resource Limits

## Key focus for management

### Nature of risk

There is a key financial duty for Healthcare Improvement Scotland to comply with the Revenue Resource Limit set by the Scottish Government.

The risk is therefore that the Healthcare Improvement Scotland materially misstates expenditure in relation to year end transactions, in an attempt to achieve a breakeven position.

### The key judgement areas, its potential impact on the financial statements and our planned audit challenge

We will evaluate the results of our audit testing in the context of the achievement of the target set by the Scottish Government.

Our work in this area will include the following:

- obtain an understanding of the design and implementation of the key controls in place in relation to recording year end expenditure;
- assessing whether expenditure is correctly classified between revenue and capital and whether it has been incurred in accordance with Scottish Government's guidance;
- performing focused cut-off testing of expenditure; and
- obtain independent confirmation of the resource limits allocated to Healthcare Improvement Scotland by the Scottish Government.

### Deloitte comment

The Board underspent by £405k against its RRL in 2015/16, however this was made up of a carry forward of £239k in relation to the change fund, agreed with the SGHSCD, and a year to date surplus of £166k.

As at 30 November 2016, Healthcare Improvement Scotland is reporting an underspend against the RRL budget of £116k and is forecasting to breakeven against the RRL at year end.

# Wider scope requirements

## Audit dimensions

The Code of Audit Practice sets our four audit dimensions which set a common framework for all public sector audits in Scotland. These are financial sustainability, financial management, governance and transparency and value for money. Due to the relative size and scale of the functions delivered by Health Improvement Scotland, we have concluded that the full wider scope of audit is not appropriate. In accordance with paragraph 53 of the Code, our work in this area will therefore be restricted to concluding following:

Audit dimension	Areas to be considered	Impact on the 2017 Audit
The appropriateness of the disclosures in the <b>governance statement</b> .	<ul style="list-style-type: none"><li>• The completeness of the disclosures in meeting the requirements of the essential features, as specified in the SPFM.</li><li>• Inconsistencies between the disclosures or between the disclosures and audit knowledge.</li></ul>	We will review the draft governance statement and assess whether there are any inconsistencies or omissions based on other audit evidence obtained throughout the audit.
<b>Financial sustainability</b> looks forward to the medium and longer term to consider whether the body is planning effectively to continue to deliver its services or the way in which they should be delivered.	<ul style="list-style-type: none"><li>• The financial planning systems in place across the shorter and longer terms</li><li>• The arrangements to address any identified funding gaps</li><li>• The affordability and effectiveness of funding and investment decisions made</li></ul>	We will monitor the Board's actions in respect of its short, medium and longer term financial plans.

# Wider scope requirements (continued)

## NFI and Performance audits

### National Fraud Initiative (NFI)

All health boards, except for the Mental Welfare Commission, are participating in the NFI 2016/17. All data was submitted in October 2016 and boards received matches for investigation in January 2017.

In the Board's 2015/16 annual report, PwC concluded that the Board actively investigated NFI matches and that there were no issues of concern regarding the 2014/15 exercise.

In accordance with Audit Scotland planning guidance, we are required to monitor the Board's participation and progress during 2016/17 and complete an NFI audit questionnaire by 30 June 2017. The information contained in this questionnaire will be used for Audit Scotland's NFI report to be published in June 2018.

### Performance audits

In accordance with Audit Scotland planning guidance, we will be requested to provide information to support performance audits and to inform wider analysis on the following subjects during the year:

Purpose	Date
Contribute to report on Health and Social care integration: part 2	Spring 2017
Contribute to follow up Role of Boards	30 June 2017

# Audit quality

## Our commitment to audit quality

Our objective is to deliver a distinctive, quality audit to you. Every member of the engagement team will contribute, to achieve the highest standard of professional excellence.

In particular, for your audit, we consider that the following steps will contribute to the overall quality:

- We will apply professional scepticism on the material issues and significant judgements identified, by using our expertise in the health sector and elsewhere to provide robust challenge to management;
- We will obtain a deep understanding of your Board, its environment and of your processes in key areas – such as income recognition, payroll expenditure, and capital expenditure - enabling us to develop a risk-focused approach tailored to the Board;
- Our engagement team is selected to ensure that we have the right subject matter expertise and industry knowledge. We will involve specialists to support the audit team in our work, leading to high quality understanding and challenge; and
- In order to deliver a quality audit to you, each member of the core audit team has received tailored training to develop their expertise in audit skills which includes local Engagement Team Based Learning. This is a partner led programme encouraging teams from across our practice to engage and discuss current sector and audit issues, sharing best practice and expertise. This is in addition to a practice wide health training day held prior to the end of the financial year to share key issues from across the country, to update on regulatory changes and provide early warning of issues other teams may have faced at the interim testing phase.

### Engagement Quality Control Review

We have developed a tailored Engagement Quality Control approach. Our dedicated Professional Standards Review (PSR) function will provide a 'hot' review before any audit or other opinion is signed. PSR is operationally independent of the audit team, and supports our high standards of professional scepticism and audit quality by providing a rigorous independent challenge.

# Purpose of our report and responsibility statement

## Our report is designed to help you meet your governance duties

### What we report

Our report is designed to establish our respective responsibilities in relation to the financial statements audit, to agree our audit plan and to take the opportunity to ask you questions at the planning stage of our audit.

Our report includes our audit plan, including key audit judgements and the planned scope.

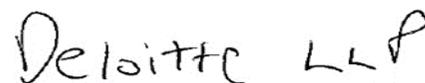
### What we don't report

- As you will be aware, our audit is not designed to identify all matters that may be relevant to the Audit Committee.
- Also, there will be further information you need to discharge your governance responsibilities, such as matters reported on by management or by other specialist advisers.
- Finally, the views on internal controls and business risk assessment in our final report should not be taken as comprehensive or as an opinion on effectiveness since they will be based solely on the audit procedures performed in the audit of the financial statements and the other procedures performed in fulfilling our audit plan.

### Other relevant communications

- This report should be read alongside the supplementary "Briefing on audit matters" circulated separately.
- We will update you if there are any significant changes to the audit plan.

We welcome the opportunity to discuss our report with you and receive your feedback.



**Deloitte LLP**

Chartered Accountants

Glasgow

22 February 2017

This report has been prepared for the Audit Committee, as a body, and we therefore accept responsibility to you alone for its contents. We accept no duty, responsibility or liability to any other parties, since this report has not been prepared, and is not intended, for any other purpose.

# Appendices

# Uncorrected misstatements and disclosure deficiencies

Prior year



There were no uncorrected misstatements identified by the previous auditors during the course of the prior year audit.

There were no disclosure deficiencies noted by the previous auditors during the prior year audit.

# Fraud responsibilities and representations

## Responsibilities explained



### Your responsibilities

- The primary responsibility for the prevention and detection of fraud rests with management and those charged with governance, including establishing and maintaining internal controls over the reliability of financial reporting, effectiveness and efficiency of operations and compliance with applicable laws and regulations.

### Our responsibilities

- We are required to obtain representations from your management regarding internal controls, assessment of risk and any known or suspected fraud or misstatement.
- As auditors, we obtain reasonable, but not absolute, assurance that the financial statements as a whole are free from material misstatement, whether caused by fraud or error.
- As set out in the significant risks section of this document, we have identified management override of controls as a key audit risk for your organisation.

### Fraud characteristics

- Misstatements in the financial statements can arise from either fraud or error. The distinguishing factor between fraud and error is whether the underlying action that results in the misstatement of the financial statements is intentional or unintentional.
- Two types of intentional misstatements are relevant to us as auditors – misstatements resulting from fraudulent financial reporting and misstatements resulting from misappropriation of assets.

## We will request the following to be stated in the representation letter signed on behalf of the Board:

- We acknowledge our responsibilities for the design, implementation and maintenance of internal control to prevent and detect fraud and error.
- We have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.
- We are not aware of any fraud or suspected fraud / We have disclosed to you all information in relation to fraud or suspected fraud that we are aware of and that affects the entity or group and involves:  
(i) management; (ii) employees who have significant roles in internal control; or (iii) others where the fraud could have a material effect on the financial statements.
- We have disclosed to you all information in relation to allegations of fraud, or suspected fraud, affecting the entity's financial statements communicated by employees, former employees, analysts, regulators or others.

# Fraud responsibilities and representations (continued)



We will make the following inquiries regarding fraud:

Management	Internal Audit & Local Counter Fraud Specialist	Those charged with governance
<p>Management's assessment of the risk that the financial statements may be materially misstated due to fraud, including the nature, extent and frequency of such assessments.</p> <p>Management's process for identifying and responding to the risks of fraud in the entity.</p> <p>Management's communication, if any, to those charged with governance regarding its processes for identifying and responding to the risks of fraud in the entity.</p> <p>Management's communication, if any, to employees regarding its views on business practices and ethical behaviour.</p> <p>Whether management has knowledge of any actual, suspected or alleged fraud affecting the entity.</p> <p>We plan to involve management from outside the finance function in our inquiries.</p>	<p>Whether internal audit and the Local Counter Fraud Specialist has knowledge of any actual, suspected or alleged fraud affecting the entity, and to obtain its views about the risks of fraud.</p>	<p>How those charged with governance exercise oversight of management's processes for identifying and responding to the risks of fraud in the entity and the internal control that management has established to mitigate these risks.</p> <p>Whether those charged with governance have knowledge of any actual, suspected or alleged fraud affecting the entity.</p> <p>The views of those charged with governance on the most significant fraud risk factors affecting the entity.</p>

We will also perform procedures in relation to the National Fraud Initiative as set out on page 13.

# Your audit team and timetable

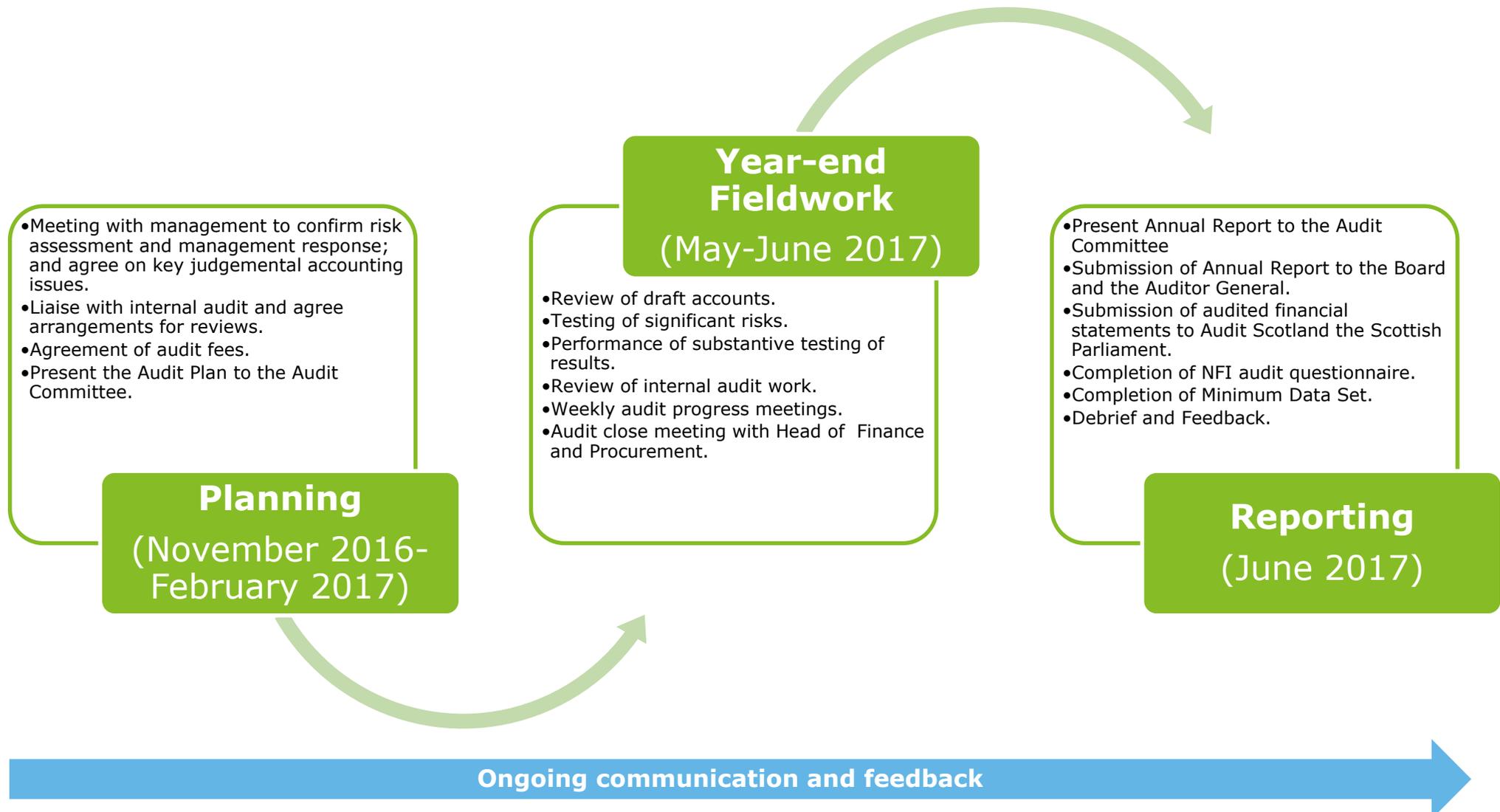
We have a highly experienced audit team

We set out below our audit engagement team. We manage our audit on a basis that draws on the expertise of our public sector group.



# Your audit team and timetable (continued)

Set out below is the approximate expected timing of our reporting and communication with Healthcare Improvement Scotland.



# Independence and fees



As part of our obligations under International Standards on Auditing (UK and Ireland), we are required to report to you on the matters listed below:

## Independence confirmation

We confirm we are independent of the Board and will reconfirm our independence and objectivity to the Audit Committee for the year ending 31 March 2017 in our final report to the Audit Committee.

## Fees

A fee range for the 2016/17 audit was provided by Audit Scotland in late December 2016. Our proposed fee for Healthcare Improvement Scotland, subject to Committee approval, is £28,976 (inclusive of Audit Scotland fixed charges) analysed below. This reflects a maximum 10% uplift on the expected fee to reflect the higher input required in year 1 of our appointment which will be offset by reduced fees in future years on a like for like basis:

	£
Auditor remuneration	23,276
Audit Scotland fixed charges:	
Pooled costs	3,400
Performance Audit & Best Value	1,080
Audit support costs	1,220
<b>Total proposed fee</b>	<b>28,976</b>

Details of all non-audit services fees for the period will be presented in our final report.

## Non-audit services

In our opinion there are no inconsistencies between APB Ethical Standards for Auditors and the company's policy for the supply of non-audit services or any apparent breach of that policy. We continue to review our independence and ensure that appropriate safeguards are in place including, but not limited to, the rotation of senior partners and professional staff and the involvement of additional partners and professional staff to carry out reviews of the work performed and to otherwise advise as necessary.

# Our approach to quality

## AQR team report and findings

### Audit quality and regulation

We pride ourselves on our commitment to quality and our quality control procedures. We have an unyielding pursuit of quality in order to deliver consistent, objective and insightful assurance.

In May 2016 the Financial Reporting Council ("FRC") issued individual reports on each of the six largest firms, including Deloitte, on Audit Quality Inspections which provides a summary of the findings of its Audit Quality Review ("AQR") team for the year ended 31 March 2016. We adopt an open and communicative approach with the regulator and their report is an accurate reflection of our efforts to improve audit quality across our practice over a number of years.

The review performed by the AQR forms an important part of our overall inspection process. We perform causal factor analysis on each significant finding arising from both our own internal quality review and those of our regulators to identify the underlying cause. This then drives our careful consideration of each of the FRC's comments and recommendations, as well as findings arising from our own reviews to provide further impetus to our quality agenda.

18 of the audits reviewed by the AQR were performed to a good standard with limited improvements required and four audits required improvements. No audits were assessed as requiring significant improvements. We have already taken action to respond to the key themes of the report and will continue to undertake further inputs to our audit quality improvement programmes to embed the changes into our practice.

### The AQR's conclusion on Deloitte

"We reviewed selected aspects of 22 individual audits in 2015/16. In selecting which aspects of an audit to inspect, we take account of those areas identified to be of higher risk by the auditors and Audit Committees, our knowledge and experience of audits of similar entities and the significance of an area in the context of the audited financial statements.

In response to our last inspection report, the firm has made a number of improvements to its policies and procedures:

- The firm's guidance regarding the testing of journals has been enhanced.
- Additional sector-specific training was provided for individuals involved in financial services audits, together with additional training on internal controls for all audit staff.
- The firm has made a number of improvements to its internal monitoring process, including the development of a moderation process in order to increase consistency.

Our key findings in the current year requiring action by the firm are that the firm should:

- Improve the extent of challenge of management in relation to areas of judgment, in particular for impairment reviews and judgmental valuations.
- Improve aspects of its audit approach in the areas of revenue and inventory.
- Ensure high quality reporting to Audit Committees is achieved on a consistent basis.
- Strengthen its audit approach in relation to defined benefit pension scheme balances and disclosures.
- Strengthen its policies and procedures regarding the engagement quality control review process."

### 2015/16 Audit Quality Inspection Report on Deloitte LLP

# Our approach to quality

## AQR team report and findings

### Review of individual audits

The following chart provides a summary of the AQR's assessment of the quality of our individual audits inspected in 2015/16, with comparatives for the previous 4 years. The chart also shows the 5 year average of Deloitte and the 5 year average of the 6 largest firms inspected by the AQR (which comprises Deloitte LLP, Ernst & Young LLP, KPMG LLP, PricewaterhouseCoopers LLP, BDO LLP and Grant Thornton UK LLP).

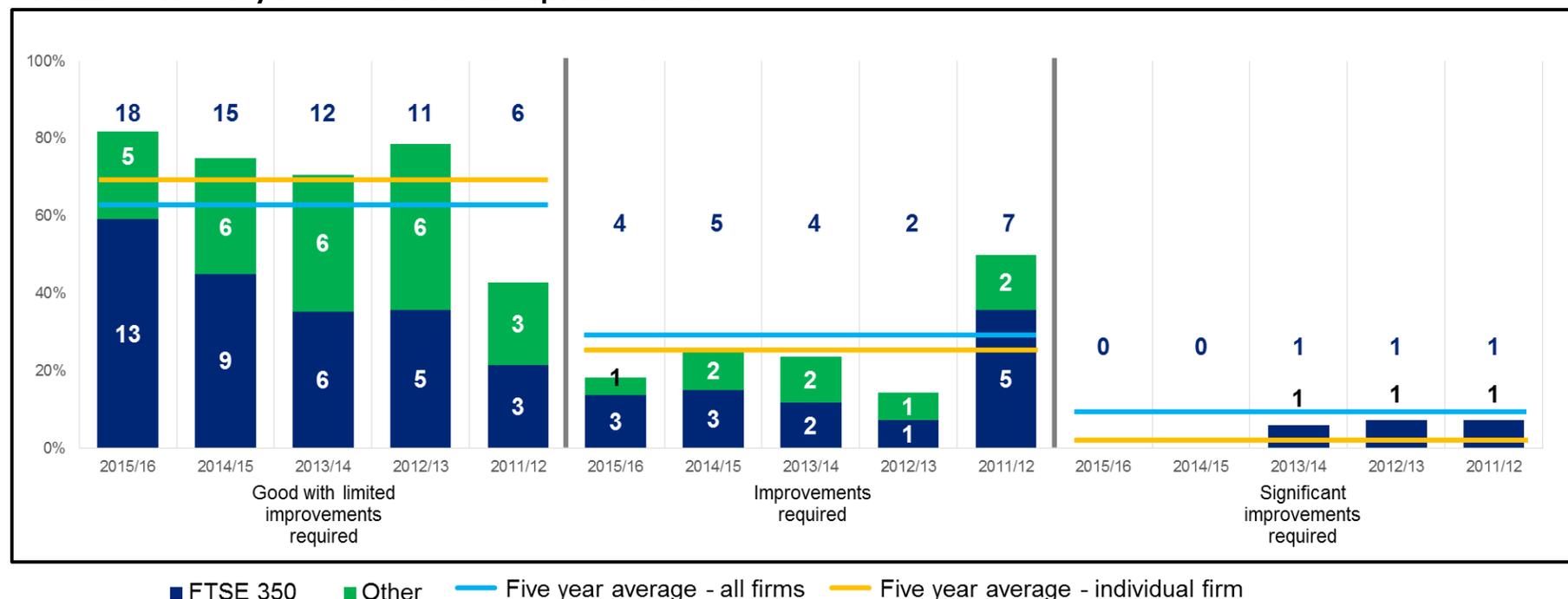
The AQR categorises audits as either:

- Good with limited improvements required
- Improvements required
- Significant improvements required

Changes to the proportion of audits reviewed falling within each grade from year to year reflect a wide range of factors, which may include the size, complexity and risk of the individual audits selected for review and the scope of the individual reviews. For this reason, and given the sample sizes involved, changes in gradings from one year to the next are not necessarily indicative of any overall change in audit quality at the firm.

All the AQR public reports on individual firms are available on its website <https://www.frc.org.uk/Our-Work/Conduct/Audit-Quality-Review/Audit-firm-specific-reports.aspx>

### Deloitte LLP summary of individual audits inspected results





Other than as stated below, this document is confidential and prepared solely for your information and that of other beneficiaries of our advice listed in our engagement letter. Therefore you should not, refer to or use our name or this document for any other purpose, disclose them or refer to them in any prospectus or other document, or make them available or communicate them to any other party. If this document contains details of an arrangement that could result in a tax or National Insurance saving, no such conditions of confidentiality apply to the details of that arrangement (for example, for the purpose of discussion with tax authorities). In any event, no other party is entitled to rely on our document for any purpose whatsoever and thus we accept no liability to any other party who is shown or gains access to this document.

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