North Glamorgan NHS Trust

Foreword

These accounts for the year ended 31 March 2006 have been prepared by the North Glamorgan NHS Trust under section 98(2) of the National Health Service Act 1977 (as amended by section 24(2), schedule 2 of the National Health Service and Community Care Act 1990) in the form in which the National Assembly for Wales has, with the approval of Treasury, directed.

The main functions of the trust are to provide acute, community and mental health services to the people of Merthyr, Cynon and upper Rhymney valleys.

INCOME AND EXPENDITURE FOR THE YEAR ENDED 31 MARCH 2006

			2004-05
	Note	£000	£000
Income from activities	3	117,153	111,988
Other operating income	4	10,120	9,140
Total income		127,273	121,128
Operating expenses	5	(125,482)	(118,711)
Operating surplus/(deficit)		1,791	2,417
Costs of fundamental reorganisation/restructuring		0	0
Profit/(loss) on disposal of fixed assets	8	(66)	(9)
Surplus/(deficit) before interest		1,725	2,408
Interest receivable		239	277
Interest payable	9	(9)	0
Other finance costs	16	(288)	(305)
Surplus/(deficit) for the financial year		1,667	2,380
Public Dividend Capital dividends payable		(2,542)	(2,402)
Retained surplus/(deficit) for the year	17	(875)	(22)

STATEMENT OF TOTAL RECOGNISED GAINS AND LOSSES FOR THE YEAR ENDED 31 MARCH 2006

			2004-05
		£000	£000
	Note		
Surplus/(deficit) for the financial year before dividend payments		1,667	2,380
Fixed asset impairment losses	17	0	0
Unrealised surplus/(deficit) on fixed assets revaluations/indexation	17	2,424	4,854
Increases in the donated asset and government grant reserves due to			
receipt of donated and government grant finance assets	17	0	0
Reduction in the donated asset and government grant reserves due to the			
depreciation, impairment and disposal of donated and government			
grant financed assets	17	(30)	(38)
Additions/(reductions) in "other reserves"	17	0	0
Defined benefit scheme actuarial gains & losses		0	0
Total recognised gains and losses for the financial year		4,061	7,196
Prior period adjustment	17	0	0
Total gains and losses recognised in the financial year		4,061	7,196

BALANCE SHEET AS AT 31 MARCH 2006

	Note	£000	£000	31 March 2005 £000
Fixed assets				
Intangible assets	10	0		0
Tangible assets	11	84,345		79,316
		· -	84,345	79,316
Current assets				
Stocks and work-in-progress	12	875		892
Debtors	13	23,366		23,766
Investments	14	0		0
Cash at bank and in hand	18.3	165		78
Total current assets		_	24,406	24,736
Creditors: amounts falling due within 1 year	15	_	(11,343)	(10,493)
Net current assets/(liabilities)		_	13,063	14,243
Total assets less current liabilities			97,408	93,559
Creditors: amounts falling due				
after more than one year	15		0	0
Provisions for liabilities and charges	16	_	(23,433)	(23,387)
Total assets employed			73,975	70,172
Financed by: Taxpayer's equity				
Public dividend capital	23.2		47,056	44,772
Revaluation reserve	17		31,693	29,273
Donated asset reserve	17		251	277
Government grant reserve	17		0	0
Other reserves	17		0	0
Income and expenditure reserve	17		(5,025)	(4,150)
Total taxpayer's equity		_ _	73,975	70,172

Signed on behalf of the Board on
Chairman
Chief Executive
Adopted by the Board on

CASH FLOW STATEMENT FOR THE YEAR ENDED 31 MARCH 2006

				2004-05
	Note	£000	£000	£000
Operating activities				
Net cash inflow from operating activities	18.1		5,769	7,409
Returns on investments and servicing of finance				
Interest received		239		277
Interest paid		(9)		0
Interest element of finance leases		0	_	0
Net cash inflow/(outflow) from returns on investments and servicing of finance			230	277
Capital expenditure				
Payments to acquire tangible fixed assets		(7,801)		(4,043)
Receipts from sale of tangible fixed assets		0		52
Payments to acquire/ receipts from sale of intangible assets		0	_	0
Net each inflam//autilian) from conital amountiture			(7.004)	(2.004)
Net cash inflow/(outflow) from capital expenditure			(7,801)	(3,991)
Public dividend capital dividends paid			(2,402)	(2,744)
Management of liquid resources				
Purchase of current asset investments		0		0
Sale of investments		0	_	0
Net cash inflow/(outflow) from management of liquid reso	urces		0	0
Net cash inflow/(outflow) before financing			(4,204)	951
Financing				
Public dividend capital received		3,456		158
Public dividend capital repaid (not previously accrued)		(765)		(2,091)
Public dividend capital repaid (accrued in previous period)		0		0
Government loans received: short term		0		0
Government loans repaid: short term		0		0
Loan advances/brokerage received		2,600		1,000
Loan advances/brokerage repaid		(1,000)		0
Other capital receipts		0		0
Capital element of finance leases		0	_	0
Net cash inflow/(outflow) from financing		-	4,291	(933)
Increase/(decrease) in cash	18.2	-	87	18

Notes to the accounts

1. Accounting policies and other information

The National Assembly for Wales has directed that the financial statements of NHS trusts in Wales shall meet the accounting requirements of the NHS trust manual for accounts which shall be agreed with HM Treasury. The accounting policies contained in the manual follow UK generally accepted accounting practice for companies (UK GAAP) and HM Treasury's Resource Accounting Manual to the extent that they are meaningful and appropriate to the NHS, as determined by the National Assembly for Wales as approved by HM Treasury, which is advised by the Financial Reporting Advisory Board. The accounting policies have been applied consistently in dealing with items considered material in relation to the accounts. Standard accounting policies are laid down in the manual for accounts and the Draft Capital Accounting Manual, however may be varies with approval of the Assembly. If a change in accounting policy is made it will be disclosed and accounted for in accordance with FRS18 and FRS3.

1.1 Accounting convention

This account has been prepared under the historical costs convention, modified to account for the revaluation of fixed assets at their value to the business by reference to their current cost. NHS Trusts are not required to provide a reconciliation between current costs surpluses and deficits and historical cost surpluses and deficits.

1.2 Acquisitions and discontinued operations

Activities are considered to be 'acquired' only if they are acquired from outside the public sector. Activities are considered to be 'discontinued' only if they cease entirely. They are not considered to be 'discontinued' if they transfer outside the public sector.

1.3 Income recognition

Income is accounted for applying the accruals convention. The main source of income for the trust is from commissioners in respect of healthcare services provided under Service and Financial Framework agreements. Income for patient care provided for other NHS bodies is recognised in accordance with the terms and conditions of the NHS contracts. Where income is received for a specific activity which is to be delivered in the following financial year, that income is deferred.

1.4 Intangible fixed assets

Intangible assets are capitalised when they are capable of being used in a Trust's activities for more than one year; they can be valued and they have a cost of at least £5,000.

Intangible fixed assets held for operational use are valued at historical cost and are depreciated over the estimated life of the asset on a straight line basis. The carrying value of intangible assets is reviewed for impairment at the end of the first full year following acquisition and in other periods if events or changes in circumstances indicate the carrying value may not be recoverable.

Purchased computer software licences are capitalised as intangible fixed assets where expenditure of at least £5,000 is incurred. They are amortised over the shorter of the term of the licence and their useful economic lives.

1.5 Tangible fixed assets

i. Capitalisation

Tangible assets are capitalised if they are capable of being used for a period which exceeds one year and they:

- individually have a cost of at least £5,000; or
- collectively have a cost of at least £5,000, where the assets are functionally interdependent, they had broadly simultaneous purchase dates and are anticipated to have simultaneous disposal dates and are under single managerial control; or
- form part of an IT network which collectively has a cost more than £5000 and individually have a cost of more than £250; or
- form part of the initial equipping and setting up cost of a new building, ward or unit irrespective of their individual or collective cost.

ii. Valuation

Tangible fixed assets are stated at the lower of replacement cost and recoverable amount. On initial recognition they are measured at cost (for leased assets, fair value) including any costs such as installation directly attributable to bringing them into working condition. They are restated to current value each year. The carrying value of tangible fixed assets is reviewed for impairment in periods if events or changes in circumstances indicate that the carrying value may not be recoverable.

Land and buildings are restated to current value using professional valuations in accordance with FRS15 every five years and in the intervening years by the use of indices. The buildings index is based on the 'All in Tender Price Index' published by the Building Cost Information Service. The land index is based on the residential building land values reported in the Property Market Report published by the Valuation Office.

Valuations are carried out by the District Valuers of the Inland Revenue at 5 yearly intervals. The valuations are carried out in accordance with the Royal Institute of Chartered Surveyors Appraisal and Valuation Manual insofar as these terms are consistent with the agreed requirements of the Assembly and HM Treasury. The last asset valuations were carried out as at 30 September 2002 and were reflected in the 2002-03 balance sheet values.

The valuations are carried out primarily on the basis of depreciated replacement cost for specialised operational property and existing use value for non-specialised operational property. The value of land for existing use purposes is assessed at existing use value. For non-operational properties, including surplus land, the valuations are carried out at open market value.

All adjustments arising from indexation and five-yearly revaluations are taken to the Revaluation Reserve. All impairments resulting from price changes are charged to the Statement of Total Recognised Gains and Losses. Falls in value when newly constructed assets are brought into use are also charged there. These falls in value result from the adoption of ideal conditions as the basis for depreciated replacement cost valuations.

Additional alternative Open Market Value figures have only been supplied for operational assets scheduled for imminent closure. subsequent disposal and taken out of operational use.

Assets in the course of construction are valued at current cost using indices as for land and buildings, as above. These assets include any existing land or buildings under the control of a contractor.

Residual interests in off-balance sheet Private Finance Initiative properties are included in tangible fixed assets as 'assets under construction and payments on account' where the PFI contract specifies the amount, or a nil value, at which the assets will be transferred to the Trust at the end of the contract. The residual interest is built up, on an actuarial basis, during the life of the contract by capitalising part of the unitary charge so that at the end of the contract the balance sheet value of the residual value plus the specified amount equal the expected fair value of the residual asset at the end of the contract. The estimated fair value of the asset on reversion is determined by the District Valuer. The District Valuer should provide an estimate of the anticipated fair value of the assets on the same basis as the District Valuer values the NHS Trusts estate.

Operational equipment is valued at net current replacement cost through annual uplift by the change in the value of the GDP deflator. Equipment surplus to requirements is valued at net recoverable amount.

iii. Depreciation

Tangible fixed assets are depreciated at rates calculated to write them down to estimated residual value on a straight line basis over their estimated useful lives. No depreciation is provided on freehold land, assets in the course of construction and assets surplus to requirements.

Assets in the course of construction and residual interests in off-balance sheet PFI contract assets are not depreciated until the asset is brought into use or reverts to the Trust, respectively.

Buildings, installations and fittings are depreciated on their current value over the estimated remaining life of the asset as advised by the District Valuer. Leaseholds are depreciated over the primary lease term. Equipment is depreciated on current cost evenly over the estimated life of the asset.

Impairment losses resulting from short-term changes in price that are considered to be recoverable in the longer term are taken in full to the revaluation reserve. These include impairments resulting from the revaluation of fixed assets from their cost to their value in existing use when they become operational. This may lead to a negative revaluation reserve in certain instances.

Where the useful economic life of an asset is reduced from that initially estimated due to the revaluation of an asset for sale, depreciation is charged to bring the value of the asset to its value at the point of sale. Useful asset lives are not included in the proforma accounts and should be included. Where there have been any significant changes to the useful economic life or residual values of assets, the reason and effect should be disclosed in the year of change. Where, under Financial Reporting Standard 11 a fixed asset impairment is charged to the Income and Expenditure account, offsetting income is paid by the Assembly via the Trust's main commissioner, to offset the charge. The income is used to repay Public Dividend Capital.

1.6 Cash Bank and Overdrafts

Cash, Bank and Overdrafts are recorded at current values and are only set-off where a formal agreement exists with the bank. Interest earned on bank accounts and interest charged on overdrafts are recorded as, respectively, 'Interest receivable' and 'Interest Payable' in the periods to which they relate. Bank charges are recorded as operating expenditure in the periods to which they relate."

1.7 Donated fixed assets

Donated fixed assets are capitalised at their current value on receipt and this value is credited to the donated asset reserve. Donated assets are valued and depreciated as described above for purchased assets. Gains and losses on revaluation are also taken to the donated asset reserve and each year, an amount equal to the depreciation charge is released from this reserve to the Income and Expenditure account. Similarly, any impairment on donated assets charged to the Income and Expenditure account is matched by a transfer from the donated asset reserve. On sale of donated assets, the value of the sale proceeds is transferred from the Donated Asset Reserve to the Income and Expenditure Reserve.

1.8 Government grants

Government grants are grants from government bodies other than funds from NHS bodies or funds awarded by Parliamentary Vote. The government grants reserve is maintained at a level equal to the net book value of the assets which it has financed.

1.9 Leases

Where substantially all risks and rewards of ownership of a leased asset are borne by the trust, the asset is recorded as a tangible fixed asset and a debt is recorded to the lessor of the minimum lease payments discounted by the interest rate implicit in the lease. The interest element of the finance lease payment is charged to the Income and Expenditure Account over the period of the lease at a constant rate in relation to the balance outstanding. Other leases are regarded as operating leases and the rentals are charged to the Income and Expenditure Account on a straight-line basis over the term of the lease.

1.10 Private Finance Initiative

The NHS follows HM Treasury's 'Technical Note 1 (Revised) How to account for PFI transactions' which provides practical guidance for the application of the FRS5 amendment. PFI schemes are schemes under which the PFI operator receives an annual payment from the Trust for the services provided by the PFI operator in operating a property and for access to the property itself.

Where the balance of risks and rewards of ownership is borne by the PFI operator, the PFI payments are recorded as an operating expense. Where the trust has contributed assets, a prepayment for their fair value is recognised and amortised over the life of the PFI contract by a charge to the Income and

Expenditure account. Where, at the end of the PFI contract, a property reverts to the trust, the difference between the expected fair value of the residual on reversion and any agreed payment on reversion is built up over the life of the contract by capitalising part of the unitary charge each year, as a tangible fixed asset.

Where the balance of risks and rewards of ownership of the PFI property are borne by the trust, it is recognised as a fixed asset along with the liability to pay for it which is accounted for as a finance lease. Contract payments are apportioned between an imputed finance lease charge and a service charge.

1.11 Stocks and work-in-progress

Stocks and work-in-progress are valued at the lower of cost and net realisable value. This is considered to be a reasonable approximation to the current cost due to the high turnover of stocks. Work-in-progress comprises goods in intermediate stages of production. Partially completed contracts for patient services are not accounted for as work-in-progress.

1.12 Research and development

Expenditure on research is not capitalised. Expenditure on development is capitalised if it meets the following criteria:

- * there is a clearly defined project;
- * the related expenditure is separately identifiable;
- * the outcome of the project has been assessed with reasonable certainty as to:
 - * its technical feasibility;
 - * its resulting in a product or service which will eventually be brought into use;
- * adequate resources exist, or are reasonably expected to be available, to enable the project to be completed and to provide any consequential increases in working capital.

Expenditure so deferred is limited to the value of future benefits expected and is amortised through the income and expenditure account on a systematic basis over the period expected to benefit from the project. It is revalued on the basis of current cost. The amortisation charge is calculated on the same basis as used for depreciation i.e. on a quarterly basis. Expenditure which does not meet the criteria for capitalisation is treated as an operating cost in the year in which it is incurred. The trust is unable to disclose the total amount of research and development expenditure charged in the income and expenditure account (a requirement of SSAP 13) because some research and development activity cannot be separated from patient care activity.

Fixed assets acquired for use in research and development are amortised over the life of the associated project.

1.13 Provisions

The trust provides for legal or constructive obligations that are of uncertain timing or amount at the balance sheet date on the basis of the best estimate of the expenditure required to settle the obligation. In accordance with FRS 12 provisions are only recognised where the transfer of economic benefit is probable, and the amount can be reasonably estimated. Where the effect of the time value of money is significant, the estimated risk-adjusted cash flows are discounted using the Treasury's discount rate of 2.2% in real terms. The effect of the change is to increase the carrying value of the provision and this is shown in the Income and Expenditure Account and at Note 16.

1.14 Contingent Liabilities

Contingent liabilities are recognised where the NHS Trust has

- A possible obligation arising from past events whose existence will be confirmed by the occurrence of future events not wholly within the Trust's control;
- A present obligation arising from past events for which it is not probable that a transfer of economic benefits will be required to settle the obligation; or
- A present obligation where the amount of the obligation cannot be measured with sufficient accuracy.

Contingent liabilities are not disclosed where the probability of them becoming liabilities is considered to be remote.

Contingent assets are disclosed where a possible asset exists as a result of past events whose existence will be confirmed only by the occurrence of one or more uncertain future events not wholly within the NHS Trust's control". Contingent assets are disclosed only where the future outflow of economic benefit is considered to be probable".

1.15 Losses and special payments

Losses and special payments are items that the National Assembly for Wales would not have contemplated when it agreed funds for the health service or passed legislation. By their nature they are items that ideally should not arise. They are therefore subject to special control procedures compared with the generality of payments. They are divided into different categories, which govern the way each individual case is handled.

Losses and special payments are charged to the income and expenditure account on an accruals basis. However, note 22 is compiled directly from the losses and compensations register which is compared with the generality of payments. They are divided into different categories, which govern the way each individual case is handled.

Losses and special payments are charged to the income and expenditure account on an accruals basis. However, note 22 is compiled directly from the losses and compensations register which is prepared on a cash basis.

The Trust accounts for all losses and special payments gross (including assistance from the Welsh Risk Pool). The Trust accrues or provides for the best estimate of its future payouts for certain or probable or liabilities and discloses all other potential payments as contingent liabilities, unless the probability of the liabilities becoming payable is remote.

All claims for losses and special payments are provided for, where the probability of settlement of an individual claim is over 50%. Where reliable estimates can be made, incidents of clinical negligence against which a claim has not, as yet, been received are provided in the same way. Expected reimbursements from the Welsh Risk Pool are included in debtors. For those claims where the probability of settlement is below 50%, the liability is disclosed as a contingent liability.

1.16 Pension costs

Past and present employees are covered by the provisions of the NHS Pension Scheme. The Scheme is an unfunded, defined benefit scheme that covers NHS employers, general practices and other bodies, allowed under the direction of the Secretary of State. As a consequence it is not possible for the trust to identify its share of the underlying scheme assets and liabilities. Therefore, the scheme is accounted for as a defined contribution scheme and the cost of the scheme is equal to the contributions payable to the scheme for the accounting period. The total employer contribution payable in 2005-06 was £9,322,359 (£8,403,257 for 2004-05).

The Scheme is subject to a full valuation for FRS17 purposes every four years. The last valuation took place as at 31 March 2003. The scheme is also subject to a full valuation by the Government Actuary to assess the scheme's assets and liabilities to allow a review of the employers contribution rates, this valuation took place as at 31 March 2004 and has yet to be finalised. The last published valuation on which on which contributions are based covered the period 1 April 1994 to 31 March 1999. Between valuations, the Government Actuary provides an update of the scheme liabilities. The latest assessment of the liabilities of the Scheme is contained in the Scheme Actuary report, which forms part of the annual NHS Pension Scheme (England and Wales) Resource Account, published annually. These accounts can be viewed on the NHS pensions Agency website at www.nhspa.gov.uk. Copies can also be obtained from The Stationery Office.

The conclusion from the 1999 valuation was that the scheme continues to operate on a sound financial basis and the notional surplus of the scheme is £1.1 billion. It was recommended that employers' contributions were set at 14% of pensionable pay from 1 April 2003. On advice from the actuary the contribution may be varied from time to time to reflect changes in the scheme's liabilities. Employees pay contributions of 6% (manual staff 5%) of their pensionable pay.

NHS bodies are directed by the Secretary of State to charge employer's pension cost contributions to operating expenses as and when they become due.

The Scheme is a "final salary" scheme. Annual pensions are normally based on 1/80th of the best of the last 3 years pensionable pay for each year of service. A lump sum normally equivalent to 3 years pension is payable on retirement. Annual increases are applied to pension payments at rates defined by the Pensions (Increase) Act 1971, and are based on changes in retail prices in the twelve months ending 30 September in the previous calendar year. On death, a pension of 50% of the member's pension is normally payable to the surviving spouse.

Early payment of a pension, with enhancement, is available to members of the Scheme who are permanently incapable of fulfilling their duties effectively through illness or infirmity. A death gratuity of twice final year's pensionable pay for death in service, and up to five times their annual pension for death after retirement, less pension already paid, subject to a maximum amount equal to twice the member's final year's pensionable pay less their retirement lump sum for those who die after retirement, is payable.

Additional pension liabilities arising from early retirements are not funded by the scheme except where the retirement is due to ill-health. For early retirements not funded by the scheme, the full amount of the liability for the additional costs is charged to the income and expenditure account at the time the Trust commits itself to the retirement, regardless of the method of payment.

The Scheme provides the opportunity to members to increase their benefits through money purchase Additional Voluntary Contributions (AVCs) provided by an approved panel of life companies. Under the arrangement the employee/member can make contributions to enhance an employee's pension benefits. The benefits payable relate directly to the value of the investments made.

[Where the NHS Trust has employees who are members of pension schemes other than the NHS pension scheme described above, additional disclosure will be required to give details of those schemes, e.g. stakeholder pensions.]

1.17 Liquid resources

Deposits and other investments that are readily convertible into known amounts of cash at or close to their carrying amounts are treated as liquid resources in the cashflow statement. The Trust does not hold any investments with maturity dates exceeding one year from the date of purchase.

1.18 Value added tax

Most of the activities of the Trust are outside the scope of VAT and, in general, output tax does not apply and input tax on purchases is not recoverable. Irrecoverable VAT is charged to the relevant expenditure category or included in the capitalised purchase cost of fixed assets. Where output tax is charged or input VAT is recoverable, the amounts are stated net of VAT.

1.19 Foreign Exchange

Transactions that are denominated in a foreign currency are translated into sterling at the exchange rate ruling on the dates of the transactions. Resulting exchange gains and losses are taken to the Income and Expenditure Account.

1.20 Third party assets

Assets belonging to third parties (such as money held on behalf of Patients) are not recognised in the accounts since the Trust has no beneficial interest in them. Details of third party assets are given in note 28 to the accounts.

1.21 Public Dividend Capital Dividends

A charge, reflecting the forecast cost of capital utilised by the NHS Trust, is paid over as public dividend capital dividend. The charge is calculated at the real rate set by HM Treasury (currently 3.5%) on the forecast average carrying amount of all assets less liabilities, except for donated assets and cash with the Office of the Paymaster General.

1.22 Pooled budgets

The Trust has no pooled budgets.

2. Segmental reporting

The Trust has no business segments as defined in SSAP25 - Segmental Reporting.

3. Income from activities		2004-05
	£000	£000
		400.007
Local health boards	110,567	103,667
Health Commission Wales	258	283
NHS trusts	638	616
Strategic health authorities and primary care trusts	0	0
Foundation Trusts	0	0
Local authorities	615	402
National Assembly for Wales	2,904	5,301
Non NHS:		
Private patient income	52	35
Overseas patients (non-reciprocal)	9	4
Road Traffic Act charges	824	671
Other income from activities	1,286	1,009
Total	117,153	111,988

RTA income is subject to a provision for doubtful debts of 8.7% to reflect expected rates of collection.

Income from National Assembly for Wales includes £nil (2004-05 £nil)in respect of a funding adjustment to off-set the effect of FRS11 on the accounts.

4. Other operating income		2004-05
93	000	£000
Patient transport services	0	0
Education, training and research 3,2	42	2,922
Charitable and other contributions to expenditure	98	104
Transfer from the donated asset reserve	30	38
Transfer from the government grant reserve	0	0
Non-patient care income generation schemes 4	79	505
Other income:		
Provision of laundry, pathology, payroll services	32	133
Accommodation and catering charges 1,2	71	1,166
Mortuary fees	51	51
Staff payments for use of cars	86	183
Business unit (Welsh Health Estates) 2,6	49	2,364
Other 1,7	82	1,674
Total	20	9,140
Other income of £1,782k includes the following sources:		
Interest on Rate Rebate	0	363
Total	0	363

5. Operating expenses

5.1 Operating expenses comprise		2004-05
	£000	£000
Goods and services from other NHS bodies	2,208	2,100
Goods and services from other NHS Foundation Trusts	0	0
Purchase of healthcare from non-NHS bodies	0	0
Directors' costs	953	694
Staff costs	96,036	88,158
Supplies and services - clinical	11,338	11,332
Supplies and services - general	1,702	1,685
Establishment	3,232	3,471
Transport	203	180
Premises	4,313	3,916
Depreciation and amortisation	4,441	4,153
Fixed asset impairments and reversals	0	545
Audit fees	120	108
Other auditors' remuneration	0	0
Losses, special payments and irrecoverable debts	(114)	1,204
Other operating expenses	1,050	1,165
Total	125,482	118,711

5.2 Losses, special payments and irrecoverable debts: charges to operating expenses

		2004-05
Increase/decrease in provision for future payments:	£000	£000
Clinical negligence	2,994	6,203
Personal injury	(154)	413
All other losses and special payments	(394)	414
Defence legal fees and other administrative costs	88	(148)
Gross increase/decrease in provision for future payments	2,534	6,882
Contribution to Welsh Risk Pool	0	0
Premium for other insurance arrangements	0	0
Irrecoverable debts	84	81
Less: income received/ due from Welsh Risk Pool	(2,732)	(5,759)
Total charge	(114)	1,204

Personal injury includes £(94,113) (2004-05 £243,100) in respect of permanent injury benefits

^{*} Contribution to Welsh Risk Pool not payable directly by Trusts from 01.04.04

5.3 Commitments under non-cancellable operating leases

	Land and I	Land and buildings		Other leases	
	2000	2004-05	5000	2004-05	
Operating leases which expire:	0003	£000	£000	£000	
Within 1 year	0	0	38	59	
Between 1 and 5 years	0	0	774	860	
After 5 years	0	0	1,412	1,412	
Total	0	0	2,224	2,331	

Operating expenses include £554,963 for operating lease rentals (2004-05 £574,640). and £184,876 for hire of plant/machinery (2004-05 £199,305)

5.4 Directors' remuneration	Remuneration as Director £000	Other remuneration £000	Total £000	2004-05 £000
Non-executive directors' remuneration	81	0	81	73
Executive directors' remuneration:				
basic salaries	612	34	646	525
benefits	5	0	5	20
performance related bonuses	0	0	0	0
pension contributions paid	63	0	63	76
Sub-total	761	34	795	694
Compensation for loss of office	0	0	0	0
Pensions for directors and former directors	0	31	31	32
(other than from the NHS pension scheme)				
Total	761	65	826	726

No performance related bonuses were paid to any Director of the Trust during the financial year 2005-06.

£nil was waived by directors and £nil allowances were paid in lieu.

Pensions for directors and former directors (other than from the NHS pension scheme)

Within the financial year ended March 31st 2003 the retiring Chief Executive applied for, and was granted, Permanent Injury Benefit by the NHS Pensions Agency. The payments made in 2005/2006 represent an ongoing annual payment of £31k.

Permanent injury benefits are determined, awarded and paid by the NHS Pensions Agency to compensate for work related illness. The award takes the form of one lump sum payment and an annual sum paid over the life of the recipient. These are then charged, by the NHS Pensions Agency to the former employing Trust of the recipient. They are assessed by the Pensions Agency on the level of incapacity suffered by the individual and the provision for the costs of payment are calculated on an actuarial basis over the individual's lifetime.

5.4 Directors' remuneration (continued):

The remuneration of the chairman, chief executive and (where the chief executive is not the highest paid member) the highest paid director is as follows:

Chairman	Remuneration as director £000	Other remuneration £000	Total £000	2004-05 £000
Basic remuneration	39	0	39	34
Benefits	0	0	0	0
	39	0	39	34
Chief Executive				
Basic salaries	196	0	196	108
Benefits	4	0	4	5
Performance related bonuses	0	0	0	0
	200	0	200	113
Pension contributions	16	0	16	15
	216	0	216	128
Highest paid director*				
Basic salaries	0	0	0	149
Benefits	0	0	0	1
Performance related bonuses	0	0	0	0
	0	0	0	150
Pension contributions	0	0	0	21
Total	0	0	0	171

^{*} The aggregate remuneration of both Chief Executives made the Chief Executive the highest paid Director during the financial year 2005-06.

The remuneration of the substantive Chief Executive was £132k The remuneration of the Interim Chief Executive was £84k

6. Employee costs and numbers

6.1 Employee costs	Permanent Staff	Staff on inward second- ment	Agency temporary and cont- ract staff	Total	2004-05
	£000	£000	£000	£000	£000
Salaries and wages	78,901	288	1,843	81,032	74,620
Social security costs	6,547	0	0	6,547	5,750
Pension costs	9,322	0	0	9,322	8,403
Other pension costs	0	0	0	0	0
Total	94,770	288	1,843	96,901	88,773

6.2 Average number of employees

0.2 Average number of employees	Permanent Staff Number		Agency temporary and cont- ract staff Number	Total Number	2004-05 Number
Medical and dental	229	3	12	244	234
Ambulance staff	0	0	0	0	0
Administrative and estates	609	6	2	617	586
Healthcare assistants and					
other support staff	291	0	0	291	275
Nursing, midwifery and health					
visiting staff	1,329	0	8	1,337	1,277
Nursing, midwifery and health					
visiting learners	0	0	0	0	0
Scientific, therapeutic and					
technical staff	392	0	9	401	389
Social care staff	0	0	0	0	0
Other	0	0	0	0 _	0
Total	2,850	9	31	2,890	2,761

6.3 Employee benefits

The Trust does not have an employee benefit scheme.

6.4 Trust management costs	2004-05			
		Percentage		Percentage
		of total		of total
	£000	income	£000	income
Trust management costs	5,453	4.3%	5,149	4.3%
Income	127,273		120,613	

This cost information is collected using the definition for Trust management costs from WHC(2000)113.

6.5 Retirement costs due to ill-health

During 2005-06 (prior year 2004-05) there were 11 (16) early retirements from the Trust agreed on the grounds of ill-health. The estimated additional pension costs of these ill-health retirements (calculated on an average basis and borne by the NHS Pension Scheme) will be £547,802 (£680,860).

7. Public Sector Payment Policy - Measure of Compliance

7.1 Prompt payment code - measure of compliance

The Assembly requires that Trusts pay all their trade creditors in accordance with the CBI prompt payment code and Government Accounting rules. The Assembly has set as part of the Trust financial targets a requirement to pay 95% of the number of non-NHS creditors within 30 days of delivery or receipt of a valid invoice, whichever is the sooner.

			2004-05
	Number	£000	£000
NHS			
Total bills paid 2005-06	1,204	5,462	5,479
Total bills paid within target	1,163	5,380	5,437
Percentage of bills paid within target	96.6%	98.5%	99.2%
Non-NHS			
Total bills paid 2005-06	39,387	32,428	36,368
Total bills paid within target	37,671	31,093	35,130
Percentage of bills paid within target	95.6%	95.9%	96.6%
Total			
Total bills paid 2005-06	40,591	37,890	41,847
Total bills paid within target	38,834	36,473	40,567
Percentage of bills paid within target	95.7%	96.3%	96.9%
7.2 The Late Payment of Commercial Debts (Interest) Ac	t 1998		2004-05
, ,		£	£
Amounts included within Interest Payable (note 9) arising from made under this legislation and compensation paid to cover or recovery costs.		0	0

8. Profit (loss) on disposal of fixed assets

Profit / (loss) on the disposal of fixed assets is made as follows:		2004-05
	£000	£000
Profit on disposal of land and buildings	0	4
Loss on disposal of land and buildings	0	0
Profit on disposal of plant and equipment	0	2
Loss on disposal of plant and equipment	(66)	(15)
Profit on disposal of intangible fixed assets	0	0
Loss on disposal of intangible fixed assets	0	0
	(66)	(9)

9. Interest payable		2004-05
	£000	£000
Government borrowing	0	0
Finance leases and PFI schemes	0	0
Other	9	0
	9	0

10. Intangible fixed assets	Software	Licenses and			
	licences	trademarks	Patents	expenditure	Total
	£000	£000	£000	£000	£000
Gross cost at 1 April	0	0	0	0	0
Indexation	0	0	0	0	0
Impairments	0	0	0	0	0
Reclassifications	0	0	0	0	0
Other revaluations	0	0	0	0	0
Additions	0	0	0	0	0
Disposals	0	0	0	0	0
Gross cost at 31 March	0	0	0	0	0
Accumulated amortisation at 1 April	0	0	0	0	0
Indexation	0	0	0	0	0
Impairments	0	0	0	0	0
Reclassifications	0	0	0	0	0
Other revaluations	0	0	0	0	0
Provided during the year	0	0	0	0	0
Disposals	0	0	0	0	0
Accumulated amortisation at 31 March	0	0	0	0	0
Net book value at 1 April	0	0	0	0	0
Net book value at 31 March	0	0	0	0	0

11. Tangible fixed assets

	Land	Buildings, excluding dwellings		under construction nd payments on account	Plant and machinery	Transport equipment	Information technology	Furniture and fittings	Tota
Cost or valuation	£000	£000	£000	£000	£000	£000	£000	£000	£000
At 1 April 2005	4,445	74,083	2,256	2,938	9,764	22	1,051	57	94,616
Indexation Additions	197	1,276	39	40	215	0	0	1	1,768
- purchased	0	2,318	2	4,445	149	0	198	0	7,112
- donated	0	0	0	0	0	0	0	0	0
- government granted	0	0	0	0	0	0	0	0	0
Reclassifications	0	7	0	(525)	509	0	9	0	0
Impairments	0	0	0	0	0	0	0	0	0
Other in-year revaluations	895	0	0	0	0	0	0	0	895
Disposals	0	0	0	0	(1,261)	0	(24)	0	(1,285
At 31 March 2006	5,537	77,684	2,297	6,898	9,376	22	1,234	58	103,106
Depreciation									
At 1 April 2005	0	8,260	143	88	6,361	15	394	39	15,300
Indexation									
- purchased	0	142	2	2	125	0	0	1	272
- donated	0	0	0	0	9	0	0	0	9
- government granted	0	0	0	0	0	0	0	0	0
Reclassifications	0	0	0	0	0	0	0	0	0
Impairments	0	0	0	0	0	0	0	0	0
Reversal of impairments	0	0	0	0	0	0	0	0	0
Other in-year revaluations	(42)	0	0	0	0	0	0	0	(42
Disposals	0	0	0	0	(1,195)	0	(24)	0	(1,219
Provided during the year	0	3,488	59	0	701	3	184	6	4,441
At 31 March 2005	(42)	11,890	204	90	6,001	18	554	46	18,761
Net book value									
at 1 April 2005	4,445	65,823	2,113	2,850	3,403	7	657	18	79,316
Net book value									
at 31 March 2006	5,579	65,794	2,093	6,808	3,375	4	680	12	84,345
Net book value of assets	s held und	er finance	leases an	d hire purch	ase contra	cts			
Total	6	41	0	0	0	0	0	0	47

Of the totals at 31 March 2006, £1,500,000 related to land valued at open market value and £nil related to buildings, installations and fittings valued at open market value. This relates to the former Mardy Hospital, and the District Valuer's valuation is based upon certain assumptions, which include obtaining planning permssion the process for which is ongoing.

0

0

0

9

Figures for freehold land and buildings are given gross with separate accumulated depreciation.

11.2 Fixed asset investments at the balance sheet included in fixed assets comprise:

The Trust had no fixed asset investments at the balance sheet date.

held under finance leases and hire purchase contracts:

Total

11.3 The net book value of land and buildings at the balance sheet date comprise:		
	£000	£000
Freehold	73,419	72,327
Long leasehold	47	54
Short leasehold	0	0
Total	73,466	72,381
12. Stocks and work-in-progress		31 March
·		2005
	£000	£000
Raw materials and consumables	875	892
Work-in-progress	0	0
Finished processed goods	0	0
Total	875	892
13. Debtors		31 March
		2005
Amounts falling due within one year:	£000	£000
Welsh Risk Pool	16,048	15,687
NHS debtors	1,690	3,195
PDC dividend debtors	44	184
Other debtors	1,555	1,531
Provision for irrecoverable debts	(133)	(238)
Other prepayments and accrued income	445	706
Sub-total	19,649	21,065
Amounts falling due after more than one year:		
Welsh Risk Pool	3,319	2,319
NHS debtors	0	0
Other prepayments and accrued income	0	0
Other debtors	398	382
Sub-total	3,717	2,701
Total	23,366	23,766

14. Investments	£000	31 March 2005 £000
Government securities	0	0
Local authorities	0	0
Other	0	0
Total	0	0

15. Creditors

15.1 Creditors at the balance sheet date are made up of:		31 March
		2005
Amount falls a bound the annual	0000	2000
Amounts falling due within one year:	£000	£000
Bank overdrafts	0	0
Interest payable	0	0
Loan advance/brokerage	2,600	1,000
Payments received on account	0	0
NHS creditors	767	477
Non-NHS trade creditors - revenue	1,581	3,242
Non-NHS trade creditors - capital	125	850
Non-NHS trade creditors - losses and special payments	0	0
Tax and social security costs	2,151	1,916
PDC dividend payable	0	0
Obligations under finance leases and hire purchase contracts	0	0
Obligations under PFI schemes	0	0
Other creditors - superannuation	1,138	1,021
Other creditors - all other creditors	0	0
Accruals	2,981	1,987
Deferred income	0	0
Sub-total Sub-total	11,343	10,493
Amounts falling due after more than one year:		
Loan advance/brokerage	0	0
Obligations under finance leases and hire purchase contracts	0	0
Obligations under PFI schemes	0	0
NHS creditors	0	0
Non-NHS trade creditors - losses and special payments	0	0
Deferred income	0	0
Other	0	0
Sub-total Sub-total	0	0
Total	11,343	10,493

NHS creditors include:

£nil for payments due in future years under arrangements to buy out the liability for early retirements over 5 instalments; and

£nil outstanding pensions contributions at 31 March 2006 (£nil at 31 March 2005).

15.2 Loan advance/strategic assistance funding		31 March 2005
Amounts falling due:	£000	£000
In one year or less	2,600	1,000
Between one and two years	0	0
Between two and five years	0	0
In five years or more	0	0
Sub-total	2,600	1,000
Wholly repayable within five years	2,600	1,000
Wholly repayable after five years, not by instalments	0	0
Wholly or partially repayable after five years by instalments	0	0
Sub-total	2,600	1,000
Total repayable after five		
years by instalments	0	0

Details of loan/brokerage:

The Trust received £2.6m of PDC Brokerage from the Welsh Assembly Government in March 2006.

15.3 Finance lease obligations		31 March
	Total	2005
Payable:	£000	£000
Within one year	0	0
Between one and two years	0	0
Between two and five years	0	0
After five years	0	0
Sub-total	0	0
Less finance charges allocated to future periods	0	0
Total	0	0

15.4 Finance lease commitments

The Trust has no finance lease commitments.

16. Provisions for liabilities and charges

		Structured						
		settlement	Transfer					
		cases trans	of prov-	Arising		Utilised	Unwinding	At
	At 1 April	-ferred to	isions to	during	Reversed	during	of	31 March
	2005	Risk Pool	creditors	the year	unused	the year	discount	2006
	£000	£000	£000	£000	£000	£000	£000	£000
Clinical negligence	17,147	0	0	5,479	(2,485)	(1,652)	0	18,489
Personal injury	1,768	0	0	668	(822)	(301)	74	1,387
All other losses and								
special payments	651	0	0	38	(432)	(8)	0	249
Defence legal fees								
and other								
administration	963	0	0	498	(410)	(210)		841
Sub-total	20,529	0	0	6,683	(4,149)	(2,171)	74	20,966
Pensions relating to:								
former directors	0			0	0	0	0	0
other staff	1,995			0	0	(149)	214	2,060
Restructurings	0			0	0	0		0
Other	863			407	0	(863)		407
Total	23,387	0	0	7,090	(4,149)	(3,183)	288	23,433

Expected timing of cash flows:	Between			
	Within	2 and 5	After 5	
	1 year	years	years	Totals
	£000	£000	£000	£000
Clinical negligence	15,195	3,294	0	18,489
Personal injury	325	296	766	1,387
All other losses and special payments	30	219	0	249
Defence legal fees and other administration	505	336	0	841
Pensions - former directors	0	0	0	0
Pensions - other staff	149	596	1,315	2,060
Restructuring	0	0	0	0
Other	407	0	0	407
Total	16,611	4,741	2,081	23,433

£406,946 of the provision movement relates to the change in discount rate from 3.5% to 2.2% on the 1 April 2005.

17. Movements on reserves

Movements on reserves in the year comprised the following:

	Revaluation reserve	Donated asset reserve £000	Govern- ment grant reserve £000	Other reserves £000	Income & expenditure reserve £000	Total £000
At 1 April 2005 as previously stated	29,273	277	0	0	(4,150)	25,400
Prior period adjustment					0	0
At 1 April 2005 as restated	29,273	277	0	0	(4,150)	25,400
Transfer from income and expenditure account					(875)	(875)
Impairments	0	0	0			0
Surplus (deficit) on revaluation / indexation of fixed assets	2,420	4	0			2,424
Transfer of realised profits/ (losses)	0	0	0		0	0
Receipt of donated/government granted assets		0	0			0
Depreciation, impairment and disposal of donated/government granted assets		(30)	0			(30)
Other transfers between reserves	0	0	0	0	0	0
Other reserve movements				0		0
At 31 March 2006	31,693	251	0	0	(5,025)	26,919

18. Notes to the cash flow statement

18.1 Reconciliation of operating surplus to net cash		2004-05
inflow from operating activities:	£000	£000
-		
Total operating surplus/(deficit)	1,791	2,417
Depreciation charge	4,441	4,153
Fixed asset impairment and reversals	0	545
Transfer from the donated asset reserve	(30)	(38)
Transfer from the government grant reserve	0	0
(Increase)/decrease in stocks	17	(15)
(Increase)/decrease in debtors	261	(5,205)
Increase/(decrease) in creditors	(757)	466
Increase/(decrease) in provisions	46	5,086
Net cash inflow from operating activities		
before restructuring costs	5,769	7,409
Payments in respect of fundamental		
reorganisation/restructuring	0	0
Net cash inflow from operating activities	5,769	7,409

18.2 Reconciliation of net cash flow to movement in net debt		2004-05
	£000	£000
Increase/(decrease) in cash in the period	87	18
Cash inflow from new debt	0	0
Cash inflow from loan advance/brokerage	(2,600)	(1,000)
Cash outflow from debt repaid and finance lease		
capital payments	1,000	0
Cash (inflow)/outflow from (decrease)/increase		
in liquid resources	0	0
Change in net debt resulting from cash flows	(1,513)	(982)
Non-cash changes in debt	0	0
Net debt at 1 April	(922)	60
Net debt at 31 March	(2,435)	(922)

18.3 Analysis of changes in net debt

	At 1 April 2005	Cash flows	Non-cash changes	At 31 March 2006
	£000	£000	2000	£000
Cash at OPG bank	59	508		567
Cash at commercial bank and in hand	19	(421)		(402)
Bank overdrafts	0	0		0
Debt due within one year	0	0	0	0
Debt due after one year	0	0	0	0
Debt due from loan advance/brokerage	(1,000)	(1,600)	0	(2,600)
Finance leases	0	0	0	0
Current asset investments	0	0	0	0
	(922)	(1,513)	0	(2,435)

19. Capital commitments

Commitments under capital expenditure contracts at the balance sheet date were £ 427,000 (and in 2004-05 were £ 2,667,125).

20. Post balance sheet events

The Trust had no post balance sheet events having a material effect on the accounts.

21. Contingencies

Contingent Liabilities

Provision has not been made in the 2005-06 accounts for the following amounts:		
		2005
	£000	£000
Legal claims for alleged medical or employer negligence	9,298	5,118
Doubtful debts	0	0
Other	3	8
Total value of disputed claims	9,301	5,126
Amount recovered under insurance arrangements in the event of		
these claims being successful	(7,993)	(3,669)
Net contingent liability	1,308	1,457

Other litigation claims could arise in the future due to known incidents. The expenditure which may arise from such claims cannot be determined and no provision has been made for them.

22. Losses and special payments

Losses and special payments are items that the National Assembly for Wales would not have contemplated when it agreed funds for the health service or passed legislation. By their nature they are items that ideally should not arise. They are therefore subject to special control procedures compared with the generality of payments. They are divided into different categories, which govern the way each individual case is handled.

Losses and special payments are charged to the income and expenditure account in accordance with UK GAAP but are recorded in the losses and special payments register when payment is made. Therefore this note is compiled on a cash basis.

Gross loss to the Exchequer

Number of cases and associated amounts paid out or written-off during the financial year

	Amounts paid out in year		Approved to wr	ite-off in year	
	Number	£	Number	lumber £	
Clinical negligence	32	1,651,808	13	457,051	
Personal injury	22	301,257	18	74,541	
All other losses and special payments	33	7,970	38	7,684	
Total	87	1,961,035	69	539,276	

Analysis of cases which exceed £250,000 and all other cases

	Amounts paid out in year	Cumulative amount	Approved to write-off in year
	£	£	£
Cases exceeding £250,000			
01RRSEM0001	0	375,987	0
02RRSMN0019	1,000	262,335	0
02RRSMN0027	50,000	841,427	0
03RRSMN0006	264,620	450,438	0
04RRSMN0007	320,000	320,350	0
Sub-total	635,620	2,250,537	0
All other cases	1,325,415	3,617,751	539,276
Total cases	1,961,035	5,868,288	539,276

23.1 Movements in Government funds	2004-05
£000£	£000
Surplus/(deficit) for the financial year 1,667	2,380
Public dividend capital dividends (2,542) Subtotal (875)	(2,402)
,	(22)
Gains/(losses) from revaluation/indexation of purchased fixed assets 2,420	4,836
·	
	0
·	(2.004)
Public dividend capital repaid (765)	(2,091)
Public dividend capital repayable (407) New loans from Government 2,600	0 1,000
Government loans repaid (1,000)	1,000
Transfers from the donated asset reserve 0	0
	•
The same terms are the same terms and the same terms are the same term	0
	3,723
Net addition/(reduction) to Government funds 5,429 Opening Government funds at 1 April 70,737	3,723 67,014
•	•
Before deducting prior period adjustment of 0	70.727
Closing Government funds 76,166	70,737
23.2 Movements in public dividend capital	
	2004-05
£000	£000
At 1 April 2005 44,772	46,863
New PDC issued in year 3,456	0
PDC due but not issued 0	0
PDC repaid in year (765)	(2,091)
PDC repayable (407)	0
At 31 March 2006 47,056	44,772

24. Financial performance targets

The Trust has met 2 out of its 3 of its financial targets. Details are given below:

24.1 Breakeven

In November 2005 the Trust identified a forecast financial deficit for the 2005-06 Financial Year. Accordingly the Director of Health & Social Services sent a letter to the Trust dated the 20th December 2005 requesting the preparation of a Strategic Change and Efficiency Plan (SCEP), to ensure that the Trust and Local Health Economy returned to financial balance at the earliest possible date.

Although significant progress has since been made by the Local Health Economy to agree a SCEP, there remain some outstanding issues that need finalisation before the Regional Office can recommend approval to the Director of Resources, Department for Health & Social Services. As such the Trust has failed its breakeven duty for 2005/06 as its deficit of £0.875m has not been approved and it is in excess of the £0.500m deficit permitted.

The total potential financial problem for 2006/07 that has been identified by the Trust and the Local Health Economy equals £7.4m. This is inclusive of all potential financial risks for 2006/07 including wage awards and Welsh Assembly Government targets.

The Trust has prepared as plan for the achievement of £3.1m savings on a recurring basis from 2006/07 increasing to £3.4m in 2007-08 for 3 years in order to repay the 2005/06 deficit position of £0.875m. It is currently intended that the residual financial risk of £4.3m will be resolved by the Local Health Economy though a combination of "in year" financial assistance and a review of services within the Local Health Economy.

24.2 External financing			31 March
The Trust is given an external financing limit which it is pe	rmitted to undershoot		2005
	£000	£000	£000
External financing limit set by the Assembly		4,291	(933)
Cash flow financing	4,204		(951)
Finance leases taken out in the year	0		0
Other capital receipts	0		0
External financing requirement		4,204	(951)
Undershoot (overshoot)		87	18

The Trust has achieved its external financing limit.

24.3 Creditor payment

The Trust is required to pay 95% of the number of non-NHS bills within 30 days of receipt of good	ds or
a valid invoice (whichever is the later). The Trust has achieved the following results:	2005-06
Total number of non-NHS bills paid 2005-06	39,387
Total number of non-NHS bills paid within target	37,671
Percentage of non-NHS bills paid within target	95.6%

25. Related Party transactions

The Trust is a body corporate established by order of the Secretary of State.

During the year none of the board members or members of the key management staff or parties related to them has undertaken any material transactions with the Trust

The Assembly is regarded as a related party. During the year the Trust has had a significant number of material transactions with the Assembly and with other entities for which the Assembly is responsible.

Welsh Assembly Government	INCOME RECEIVED/DUE £'000 2005-06 6,905	INCOME RECEIVED/DUE £'000 2004-05
Health Commission Wales	258	
Bro Morgannwg NHS Trust Cardiff & Vale NHS Trust Carmarthenshire NHS Trust Ceredigion & Mid Wales NHS Trust Conwy & Denbighshire NHS Trust Conwy & Denbighshire NHS Trust Gwent Healthcare NHS Trust North East Wales NHS Trust North West Wales NHS Trust Pembrokeshire & Derwen NHS Trust Pembrokeshire & Derwen NHS Trust Pontypridd & Rhondda NHS Trust Powys Healthcare NHS Trust Swansea NHS Trust Velindre NHS Trust Wales Ambulance NHS Trust Welsh Risk Pool	507 169 1 5 170 25 0 0 0 394 68 51 688 25	1,254 4,957
	•	,
University of Wales College of Medicine	0	165
LHB's/BSC	111,451	
TOTAL	122,202	
LHB's/BSC with income received/due greater than £	1m	
Merthyr LHB Rhondda Cynon Taf LHB Caerphilly LHB	46,399 47,438 15,684	44,379 43,653 14,498

The Trust has also received revenue and capital payments totalling £298,406 from the North Glamorgan NHS Trust Charitable Fund, the Trustees of which are also the members of the North Glamorgan NHS Trust Board.

26. Other/ Private finance transactions

26.1 PFI Operational Schemes deemed to be off balance sheet

£000
979
0
979

The Trust is committed to make the following payments during the next year.

PFI scheme which expires:	£000
Within one year	0
Years 2-5 (inclusive)	0
Years 6-10 (inclusive)	0
Years 11-15 (inclusive)	0
Years 16-20 (inclusive)	0
Years 21-25 (inclusive)	979
Years 26-30 (inclusive)	0
etc.	

The estimated annual payments in future years are not expected to be materially different from those which the trust is committed to make during the next year.

Estimated capital value of the PFI scheme	£000 995
Contract start date:	1-Apr-04
Contract end date:	31-Mar-29

The contract is for the installation ,operation ,maintenance and ownership of Combined Heat and Power Plant and the complete management and operation of a central boiler plant installation, lighting fittings and building management system on the Prince Charles Hospital site.

The contract includes performance guarantees for the supply of hot water ,and electricity.

The charging structure requires the Trust to pay for heat (in the form of hot water) created from the electricity generated by the Combined Heat & Power plant being supplied free of charge to the Trust.

26.2 "Service" element of PFI schemes deemed to be on-balance sheet

The Trust had no PFI schemes deemed to be on-balance sheet.

27. Third party assets

The Trust held £13,270 cash at bank and in hand at 31 March 2006 (31 March 2005: £6,217) which relates to monies held by the Trust on behalf of patients.

28. Financial instruments

FRS 13, Derivatives and Other Financial Instruments, requires disclosure of the role that financial instruments have had during the period in creating or changing the risks an entity faces in undertaking its activities. Because of the continuing service provider relationships that the NHS Trust has previously had with Health Authorities and now with Health Commission Wales and Local Health Boards, and the way those Health bodies are financed, the NHS Trusts are not exposed to the degree of financial risk faced by business entities.

Also financial instruments play a much more limited role in creating or changing risk than would be typical of the listed companies to which FRS 13 mainly applies. NHS Trusts have limited powers to borrow or invest surplus funds and financial assets and liabilities are generated by day to day operational activities rather than being held to change the risks facing NHS Trusts in undertaking its activities.

As allowed by FRS 13, debtors and creditors that are due to mature or become payable within 12 months from the balance sheet date have been omitted from all disclosures other than the currency profile. Provisions are shown gross. Any amount expected in reimbursement against a provision and included in debtors, is separately disclosed.

Liquidity Risk

NHS trusts' net operating costs are incurred under annual service agreements with various Health bodies, which are financed from resources voted annually by parliament. NHS Trusts also largely finance their capital expenditure from funds made available from Government under agreed borrowing limits. NHS Trusts are not, therefore, exposed to significant liquidity risks.

Interest-rate risks

0% of the Trust's financial assets and 0% of its financial liabilities carry nil or fixed rates of interest. The NHS Trust is not, therefore, exposed to significant interest-rate risk.

Foreign currency risk

The NHS Trust have no/negligible foreign currency income or expenditure.

29. Intra Government balances

	Debtors:	Debtors: Amounts	Creditors:	Creditors: Amounts
	Amounts	falling due	Amounts	falling due
	falling due	after more	falling due	after more
	within one	than one	within one	than one
	year	year	year	year
	£000	£000	£000	£000
National Assembly for Wales	925	0	3007	0
Welsh Local Health Boards	621	0	29	0
Welsh NHS Trusts	16272	3319	319	0
Health Commission Wales	38	0	0	0
All English Health Bodies	1	0	12	0
All N. Ireland Health Bodies	0	0	0	0
All Scottish Health Bodies	0	0	0	0
Miscellaneous	0	0	0	0
Credit note provision	-75	0	0	0
Sub total	17,782	3,319	3,367	0
Other Central Government Bodies				
Other Government Departments*	0	0	2047	0
Revenue & Customs	134	0	2695	0
Local Authorities	122	0	97	0
Balances with Public Corporations and trading func	0	0	30	0
Balances with bodies external to Government	1611	398	3107	0
TOTAL	19,649	3,717	11,343	0

^{*} Other Government Departments with Balances > £1,000k

Please specify:

NHS Pensions Agency 1138k

30. Pooled budgets

The Trust has no pooled budgets.

31. Other

STATEMENT OF THE CHIEF EXECUTIVE'S RESPONSIBILITIES AS ACCOUNTABLE OFFICER OF THE TRUST

The National Assembly for Wales has directed that the Chief Executive should be the Accountable Officer to the Trust. The relevant responsibilities of Accountable Officers, including their responsibility for the propriety and regularity of the public finances for which they are answerable, and for the keeping of proper records, are set out in the Accountable Officer's Memorandum issued by the Assembly.

To the best of my knowledge and belief, I have properly discharged the responsibilities set out in my letter of appointment as an Accountable Officer.

Date: 2006	Chief	Executive
Date:	 \mathbf{O}	

By Order of the Board

STATEMENT OF DIRECTORS' RESPONSIBILITIES IN RESPECT OF THE ACCOUNTS

The directors are required under the National Health Service Act 1977 to prepare accounts for each financial year. The National Assembly for Wales, with the approval of the Treasury, directs that these accounts give a true and fair view of the state of affairs of the Trust and of the income and expenditure of the Trust for that period. In preparing those accounts, the directors are required to:

- apply on a consistent basis accounting policies laid down by the Assembly with the approval of the Treasury;
- make judgements and estimates which are responsible and prudent;
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the account.

The directors confirm they have complied with the above requirements in preparing the accounts.

The directors are responsible for keeping proper accounting records which disclose with reasonable accuracy at any time the financial position of the Trust and to enable them to ensure that the accounts comply with requirements outlined in the above mentioned direction by the Assembly.

PROFORMA STATEMENT ON INTERNAL CONTROL

1. Scope of responsibility

The Board is accountable for internal control. As Accountable Officer and Chief Executive for this Board, I have the responsibility for maintaining a sound system of internal control that supports achievement of the organisation's policies, aims and objectives, whilst safeguarding the public funds and this organisation's assets for which I am personally responsible, in accordance with the responsibilities assigned by the Accounting Officer of NHS Wales.

Trust Chief Executives' performance in the discharge of these personal responsibilities is assessed by the Director NHS Wales. In addition, the Trust's performance across a range of associated areas, including the management of risk, governance, financial and non-financial control, are monitored by the Welsh Assembly Government.

2. The purpose of the system of internal control

The system of internal control is designed to manage risk to a reasonable level rather than to eliminate all risk of failure to achieve policies, aims and objectives; it can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of organisational policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically. The system of internal control has been in place in the organisation for the year ended 31 March 2006 and up to the date of approval of the annual report and accounts, and accords with Welsh Assembly Government guidance.

3. Capacity to handle risk

The Trust Board has overall responsibility and authority for the risk management programme through the receipt and evaluation of annual summary reports indicating the status and progress of Trust-wide risk management activities. The Clinical and Risk Governance Committee, comprising a number of both non-executive and executive directors, plus representatives from Local Health Boards, oversees the Trust risk management arrangements and makes recommendations for change as appropriate. Operational responsibility in terms of regularly monitoring progress with specific risks has been delegated at a strategic level to the Clinical and Risk Governance Review Group, which comprises Executive Directors plus directorate representatives, and specialist Risk Managers.

3. Capacity to handle risk (cont)

The Trust's Risk Management Policy reinforces the principle that effective risk management practice is dependent upon ownership of the management of risks throughout the whole of the organisation. Staff are encouraged to take a proactive role in the identification and reporting of risks, with an emphasis on not apportioning blame, but rather to promote a learning culture within the Trust. The Policy clearly defines the respective roles and responsibilities of the Trust Board, sub-committees, managers and staff.

Staff awareness of the need to manage risks is encouraged through the provision of regular and on-going training programmes.

4. The risk and control framework

The results of the current year's self-assessment of the five core standards are consistent with prior years, and are a reflection of the Trust's continuing compliance with best practice. The scores, which have been validated by the Internal Auditors, are as follows:

- · Standard 1 Risk Management Policy & Strategy 100% (Welsh Risk Pool assessment 99%)
- · Standard 2 Risk Assessment & Treatment 91% (Welsh Risk Pool assessment 100%)
- · Standard 3 Incident & Hazard Reporting 100% (Welsh Risk Pool assessment 96%)
- · Standard 37 Governance 95% (No Welsh Risk Pool assessment required)
- · Standard 38 Financial Management 94% (No Welsh Risk Pool assessment required)

The Trust's approach to the management of its risks is articulated in the Risk Management Strategy. These include the following specific measures:

- · Committee structures have been established to ensure that risk management is regularly reviewed at a strategic level;
- · Risk Co-ordinators have been appointed in all departments and directorates with the responsibility for communicating and facilitating the risk management agenda in their own area;
- · Risk Registers are documented and maintained and are updated and monitored on a regular basis;
- · Action plans are developed at departmental, directorate and trust level to allocate responsibility and resources for improving controls and reducing risks;
- · Progress against action plans is regularly reviewed and risk profiles revised accordingly;
- The Trust Board receive an annual report charting the progress made during the year in the management of the key clinical risks, as well as regular reports outlining the position against other risks (eg finance risks); and
- . The operational approach to risk management is supported by appropriate training and guidance for all staff.

The process outlined in the Strategy is applied to a broad spectrum of risk including clinical, non-clinical, corporate, business, environmental and health & safety related risks.

The Trust also works closely with its external stakeholders to minimise the wider impact of any significant potential risks, and includes both patient and LHB representatives in its committee structure.

5. Review of effectiveness

As Accountable Officer, I have responsibility for reviewing the effectiveness of the system of internal control. My review of the effectiveness of the system of internal control is informed by the work of the internal auditors and the executive officers within the organisation who have responsibility for the development and maintenance of the internal control framework, and comments made by the external auditors in their management letter and other reports.

5. Review of effectiveness (cont)

I have been advised on the implications of the result of my review of the effectiveness of the system of internal control by the Board, the Audit Committee, and the Clinical and Risk Governance Committee, and a plan to address weaknesses and ensure continuous improvement of the system is in place.

The scrutiny of these arrangements is in part informed through the internal mechanisms already referred to, but also through the independent and impartial views and opinions expressed by a range of bodies which are external to the Trust. These include:

- · Welsh Assembly Government;
- · External Audit;
- · Welsh Risk Pool;
- · CHAI:
- · Healthcare Inspectorate Wales (HIW);
- · Accredited Bodies:
- · Health & Safety Executive; and
- · Royal Colleges and other Academic bodies.

An important element of this external scrutiny is the annual Welsh Risk Pool assessment, and the Trust achieved an overall assessment against all Welsh Risk Pool standards of 77%, which exceeds the target of 75%.

The Trust Board is informed on the effectiveness of the systems of internal control by its Executive Directors and formal committees, and in particular the Clinical and Risk Governance Committee. The Board takes additional assurance from the detailed scrutiny undertaken by its Audit Committee, which is in turn advised by both internal and external audit. In addition, the following in year actions were taken to seek to further strengthen the systems of internal control:-

- · A Corporate Governance Group was established, with terms of reference agreed in December. The remit of this group includes a responsibility to ensure that all audit reports are acted upon in a timely and appropriate manner, and in this respect assurances can be provided (confirmed by internal audit) that significant progress has been made in addressing the concerns and system weaknesses evident during 2005/06, raised as a result of the Ordering, Receipting and Procurement internal audit;
- · A Financial Control Group was established, with its terms of reference also agreed in December;
- · A review of the terms of reference of the Audit Committee was commenced, to ensure full compliance with WHC (2006) 007 issued in February;
- · A facilitated Integrated Governance training session was held for the Board; and
- The current Standing Orders were confirmed as extant by the Board in March, with a review of the Scheme of Delegation commenced.

The main aim of these additional measures is to ensure that the Trust's Governance arrangements, policies and procedures are entirely fit for purpose, thereby ensuring that control arrangements are fully sustainable in the future regardless of changes in personnel.

6. Significant Internal Control Problems

During the 2005/06 financial year the Trust experienced significant instability amongst a number of its senior management positions and particularly at Chief Executive and Director of Finance level. Interim Directors were appointed through secondment arrangement to both positions in the autumn of 2005 to lead the Trust through this period of uncertainty and both appointees are still in post. Although this gave rise to the potential for internal control mechanisms to operate in a less than optimum manner, the measures highlighted above were implemented to prevent any such loss of control.

Also during the year the Trust was informed by the Welsh Assembly Government that, as a result of its forecast income and expenditure and cash deficit positions, it was required to formally produce a Strategic Change and Efficiency Plan (SCEP), to demonstrate how it would recover the forecast positions and return to financial balance. In order to do so the health community, being the Trust and its main Local Health Board commissioners, formed a SCEP Project Board, which has resulted in the production and submission of draft SCEP's and good progress towards achieving Welsh Assembly Government approval of a final SCEP. However, as formal SCEP approval is not yet in place the Trust has not achieved its break even duty for 2005/06.

Signed:	Date:
Chief Executive	

(on behalf of board)

NATIONAL HEALTH SERVICE ACT 1977 THE NATIONAL HEALTH SERVICE TRUSTS (WALES) ACCOUNTS DIRECTIONS

The National Assembly for Wales, in pursuance of Section 98(2) of the National Health Service Act 1977 with the approval of the Treasury, hereby gives the following directions:

1. In these directions, unless the context otherwise requires:

"the Act" means the National Health Service Act 1977;

"Trust" means each and every NHS Trust in Wales.

FORM OF ACCOUNTS

2. The accounts required by Section 98(2) of the Act to be prepared by the Trust in respect of the financial year ended 31 March 1997 and subsequent years shall be as set out in the following paragraphs and Schedules.

ACCOUNTS OF THE TRUST

- 3. The accounts in respect of the funds attributable to the performance of functions by the Trust shall comprise:
- a. a foreword;
- b. an income and expenditure account;
- c. a balance sheet:
- d. a cash flow statement;
- e. a statement of total recognised gains and losses; and
- f. such notes as may be necessary for the purposes referred to in paragraph 4 below.
- 4. The accounts shall give a true and fair view of the income and expenditure and cash flow for the year, and the state of affairs as at the end of the financial year. Subject to the foregoing requirement, the accounts shall also, without limiting the information given and as described in the Schedule, meet:
- a. the accounting and disclosure requirements of the Companies Act. The disclosure exemptions permitted by the Companies Act will not apply unless specifically authorised by the Assembly with the approval of the Treasury;
- b. best commercial accounting practice including accounting standards issued or adopted by the Accounting Standards Board, with the exception of the requirement contained in FRS 3 for the inclusion of a note showing historical cost profits and losses;
- c. all relevant guidance given in "Government Accounting" and in "Trading Accounts: A Guide for the Government Departments and Non-Departmental Public Bodies" and in "The NHS Trust Manual for Accounts":
- d. any disclosure and accounting requirements which the Assembly or Treasury may issue from time to time;

insofar as these are appropriate to the Trust and are in force for the financial period for which the accounts are to be prepared.

Member of the Senior Civil Service	
Signed	
Signed by the authority of the National Assembly for Wales	
Dated	
reference to current costs.	

5. The income and expenditure account and balance sheet shall be prepared under the historical

cost convention, modified by the inclusion of fixed assets at their value to the business by

SCHEDULE

Foreword

- 1. The foreword shall include a statement that the accounts have been prepared in accordance with these Directions given by the National Assembly for Wales.
- 2. The foreword shall describe the statutory background and main functions of the Trust.

Income and Expenditure Account and Balance Sheet

3. The income and expenditure account and balance sheet shall follow the prescribed format shown in Annex C to the "Trading Accounts" booklet, modified as appropriate.

Cash Flow Statement

4. The recommendations of Financial Reporting Standard No. 1 (revised) shall be followed in preparing the cash flow statement.

Notes to the Account

- 5. The notes to the account shall, inter alia, include details of the accounting policies adopted.
- 6. Notes providing further explanations of figures in the account shall be made where it is considered appropriate for a proper understanding of the account.
- 7. The account shall be signed and dated by the Chief Executive and Chairman of the Trust.
- 8. The accounts direction shall be reproduced as an appendix to the account.

The Certificate and Report of the Auditor General for Wales to the Members of the National Assembly for Wales

I certify that I have audited the financial statements on pages 2 to 34 under Section 61 of the Public Audit (Wales) Act 2004. These financial statements have been prepared under the accounting policies set out on pages 6 to 11.

Respective responsibilities of Directors, the Chief Executive and Auditor

As described on page 36 the Directors and the Chief Executive are responsible for the preparation of the financial statements in accordance with Section 98(2) of the National Health Service Act 1977 and National Assembly for Wales directions made thereunder and for ensuring the regularity of financial transactions. The Directors and the Chief Executive are also responsible for the preparation of the Foreword and the contents of the Annual Report. My responsibilities, as independent auditor, are established by statute and I have regard to the standards and guidance issued by the Auditing Practices Board and the ethical guidance applicable to the auditing profession.

I report my opinion to you as to whether the financial statements give a true and fair view and whether the financial statements and part of the remuneration report to be audited are properly prepared in accordance with the National Health Service Act 1977 and National Assembly for Wales directions made thereunder, and whether in all material respects the expenditure and income have been applied to the purposes intended by the National Assembly for Wales and the financial transactions conform to the authorities which govern them. I also report if, in my opinion, the Foreword is not consistent with the financial statements, if the Trust has not kept proper accounting records, if I have not received all the information and explanations I require for my audit, or if information specified by relevant authorities regarding remuneration and other transactions is not disclosed.

I have been unable to read the other information contained in the Annual Report and consider whether it was consistent with the financial statements as it was not available at the time of my audit.

I review whether the statement on pages 37 to 40 reflects the Trust's compliance with the Treasury and Assembly's guidance on the Statement on Internal Control and I report if is does not, or if it is misleading or inconsistent with other information I am aware of from my audit of the financial statements. I am not required to consider, nor have I considered whether the Statement on Internal Control covers all risks and controls. I am also not required to form

an opinion on the effectiveness of the Trust's corporate governance procedures or its risk and control procedures.

Basis of audit opinion

I conducted my audit in accordance with International Standards on Auditing (UK and Ireland) issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts, disclosures and regularity of financial transactions included in the financial statements and that part of the remuneration report to be audited. It also includes an assessment of the significant estimates and judgements made by the Directors and the Chief Executive in the preparation of the financial statements, and of whether the accounting policies are appropriate to the Trust's circumstances, consistently applied and adequately disclosed.

I planned and performed my audit so as to obtain all the information and explanations which I considered necessary in order to provide me with sufficient evidence to give reasonable assurance that the financial statements that part of the remuneration report to be audited are free from material misstatement, whether caused by fraud or other irregularity or error and that, in all material respects, the expenditure and income have been applied to the purposes intended by the National Assembly for Wales and the financial transactions conform to the authorities which govern them. In forming my opinion I have also evaluated the overall adequacy of the presentation of information in the financial statements that comprise that part of the remuneration report to be audited.

Without qualifying my opinion, I draw your attention to note 24.1, which sets out the financial position of the Trust and the actions being taken to achieve financial balance.

Opinion

In my opinion:

- the financial statements give a true and fair view of the state of affairs of North Glamorgan NHS Trust as at 31 March 2006 and of its surplus/deficit, total recognised gains and losses and cash flows for the year then ended and have been properly prepared in accordance with the National Health Service Act 1977 and directions made thereunder by the National Assembly for Wales;
- the financial statements have been properly prepared in accordance with the National Health Service Act 1977 and directions made thereunder by the National Assembly for Wales, however I am unable to express an opinion on the proper preparation of that part of the remuneration report to be audited as it has not been finalised;

 in all material respects, the expenditure and income have been applied to the purposes intended by the National Assembly for Wales and the financial transactions conform to the authorities which govern them.

Jeremy Colman Auditor General for Wales 6th July 2006

Wales Audit Office 2 – 4 Park Grove Deri House Cardiff