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NHS Blackburn with Darwen CCG statement of compliance with the Mental Health Investment Standard (MHIS) 2021/2022:

All CCGs were required to plan to achieve the Mental Health Investment Standard in 2021/2022 and CCGs were required to spend greater than or equal to the 2021/2022 target spend number provided by NHS England and Improvement.

As the Accountable Officer of NHS Lancashire and South Cumbria Integrated Care Board (the successor body of NHS Blackburn with Darwen CCG), I am responsible for the year ended 31 March 2022 and for the financial information that forms the basis of the calculation on which the Statement is derived. This includes the design, implementation and maintenance of internal controls relevant to the preparation of the Statement to ensure that mental health expenditure is correctly classified and included in the calculations, and that the Statement is free from material mis-statement, whether due to fraud or error.

To the best of my knowledge and belief I have properly discharged my responsibilities with regard to reporting against the Mental Health Investment Standard.

I consider that NHS Blackburn with Darwen CCG complied with the requirements of the Mental Health Investment Standard for 2021/2022. The 2021/2022 target spend was £34.225m and the actual spend was £34.328m.

Kevin Lavery
Chief Executive
NHS Lancashire and South Cumbria Integrated Care Board

Independent Assurance Report in connection with the 2021/22 MHIS compliance statement to the board of NHS Lancashire and South Cumbria ICB (the successor body of NHS Blackburn with Darwen CCG and NHS England and NHS Improvement for the year ended 31 March 2022.

To: The Board of NHS Lancashire and South Cumbria ICB (the successor body of NHS Blackburn with Darwen CCG and NHS England and NHS Improvement.

This reasonable assurance report (the "Report") is made in accordance with the terms of our engagement letter dated 11th October 2022 (the "Engagement Letter") for the purpose of reporting to the Board of NHS Blackburn with Darwen CCG ("the ICB")(the successor body of NHS Lancashire and South Cumbria ICB(the "CCG") and NHS England in connection with the ICB's Mental Health Investment Standard compliance statement dated for the year ended 31 March 2022 (the "Statement"), which is attached. As a result, this Report may not be suitable for another purpose.

Responsibilities of the ICB (successor body of the CCG)

The planning guidance for 2021/22 issued by NHS England and NHS Improvement stated that: "CCGs must continue to increase investment in mental health services, in line with the Mental Health Investment Standard (MHIS). For 2021/22 the standard requires CCGs to increase spend by at least their overall programme allocation growth plus an additional percentage increment to reflect the additional mental health funding included in CCG allocations for 2021/22..... in every case will be subject to independent auditor review."

ICBs as successor bodies to CCGs are required to publish a statement after the end of the financial year to state whether they consider that their predecessor CCGs have met their obligations with regard to the MHIS (the "Statement"). The format and content of the Statement should be in line with the specified wording in the Assurance Engagement of the Mental Health Investment Standard 2021/22 – Briefing Guidance (the "Guidance") issued by NHS England and NHS Improvement.

The ICB's Accountable Officer is responsible for the preparation of the Statement(s) for the ICB's predecessor CCG(s) for the year ended 31 March 2022 and for the completeness and accuracy of the accounting records and calculations (the "Relevant Information") that forms the basis for the preparation of the Statement. This includes the design, implementation and maintenance of internal controls relevant to the preparation of the Statement to ensure that mental health expenditure is correctly classified and included in the calculations and that the Statement is free from material misstatement, whether due to fraud or error.

Relevant Information to be used in the preparation of the Statement

The Relevant Information to be used in the preparation of the Statement is set out in the Guidance. This includes:

- Total expenditure on mental health in the year ended 31 March 2022, which is consistent with the definitions used for programme budgeting, as set out in the guidance
- The CCG's target spend for the year, as confirmed by NHS England and NHS Improvement.
- The guidance sets out what constitutes eligible mental health expenditure for the purpose of the MHIS and the Statement.

The ICB's accountable officer (as successor body of the CCG) was required to provide us with:

- Access to all information of which management is aware that is relevant to the preparation of the Statement, including procuring any such records held by a third party so they were made available to us
- Additional information that we requested from management for the purpose of the engagement
- Unrestricted access to persons within the ICB from whom we determined it necessary to obtain evidence.

Practitioner's responsibilities

Our responsibilities are to express a conclusion on the accompanying Statement. We conducted our engagement in accordance with *International Standard on Assurance Engagements (UK) 3000 (July 2020): Assurance engagements other than audits or reviews of historical financial information*. ISAE (UK) 3000 (July 2020) requires us to form an opinion as to whether the Statement has been properly prepared, in all material respects, in accordance with the Criteria set out in the Guidance.

We apply International Standard on Quality Control (UK) 1 (Revised June 2016) and accordingly maintain a comprehensive system of quality control including documented policies and procedures regarding compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

We have complied with the independence and other ethical requirements of the ICAEW Code of Ethics and the IESBA Code of Ethics which are founded on fundamental principles of integrity, objectivity, professional competence and due care, confidentiality and professional behaviour.

For the purpose of the engagement we have been provided by the ICB with a copy of their predecessor CCG's draft MHIS compliance statement showing the predecessor CCG's eligible MHIS expenditure and target spend for 2021/22, together with a more detailed expenditure summary. The Accountable Officer of the ICB remains solely responsible for the Statement.

We performed a reasonable assurance engagement as defined in ISAE (UK) 3000. The objective of a reasonable assurance engagement is to perform such procedures [on a sample basis] as to obtain information and explanations which we consider necessary in order to provide us with sufficient appropriate evidence to express a positive conclusion on the Statement.

A summary of the work that we performed is as follows:

- Ascertained the method of compilation of the Statement;
- Considered the internal controls applied by the CCG over the preparation of the Statement and the actual and target MHIS spend figures included therein, and evaluated the design of those controls relevant to the engagement to determine whether they had been implemented;
- Identified and assessed the risks of material misstatement in the Statement as a basis for designing and performing procedures to respond to the assessed risks;
- Verified the 2021/22 target spend to figures issued by NHSE&I;
- Agree the actual spend to the CCG's expenditure summary and supporting records;
- Carried out testing on the actual spend to check whether it met the definition of mental health spend properly incurred, as set out in the relevant Group Accounting Manual and the Guidance.; and
- Verified the factual accuracy of the compliance statement and whether the total spend is equal to or above the target spend based on the results of the procedures set out above.

We have examined the records of the predecessor CCG held by the ICB, performing such procedures on a sample basis so as to obtain information and explanations which we considered necessary having regard to the guidance issued by NHS England and NHS Improvement and received such explanations from the management of the ICB in order to provide us with sufficient appropriate evidence to form our conclusion on the Statement.

The scope of our testing covered the total MHIS expenditure included in the Statement only and does not cover the reporting of spend against individual service lines in the expenditure summary.

Our work was directed to those matters which, in our view, materially affect the Statement and was not directed to the discovery of errors or misstatements that we consider to be immaterial. While we perform our work with reasonable skill and care, it should not be relied upon to disclose all misstatements, fraud or errors that might exist.

Inherent Limitations

Our audit work on the financial statements of the CCG is carried out in accordance with our statutory obligations and is subject to separate terms and conditions. This engagement will not be treated as having any effect on our separate duties and responsibilities as the CCG's external auditors. Our audit report on the financial statements is intended for the sole benefit of the members of the Board of the successor ICB, as a body, in accordance with Part 5 of the Local Audit and Accountability Act 2014.

It is not expected for accountants to review clinical opinions.

Our audit work has been undertaken so that we might state to the members of the Board of the CCG's successor ICB those matters we are required to state to them in an auditor's report and for no other purpose. Our audits of the CCG's financial statements are not planned or conducted to address or reflect matters in which anyone other than such members of the Board of the successor ICB may be interested in such purpose. In these circumstances, to the fullest extent permitted by law, we do not accept or assume any responsibility to anyone other than the successor ICB and the members of the Board of the successor ICB for our audit work, for our audit reports, or for the opinions we have formed in respect of those audits.

To the fullest extent permitted by law we do not and will not, by virtue of our reports or otherwise, assume or accept any duty of care or liability under this engagement to its successor ICB and the members of the Board of the successor ICB, or NHS

England or to any other party, whether in contract, negligence or otherwise in relation to our statutory audits of the CCG's financial statements.

Conclusion

We have undertaken our review of the CCG's Statement of Compliance having regard to the criteria set out by NHS England and NHS Improvement in its *Assurance engagement of the Mental Health Investment Standard 2021/22 - Briefing for clinical commissioning groups*. Our conclusion has been formed on the basis of, and is subject to, the matters outlined in this report.

Except for, the target spend was revised by the NHSE from £34,225 to £34,216 and the CCG have chosen not to change this on their compliance statement as their 2022-23 planning was based on the initial targets, in our opinion NHS Blackburn and Darwen CCG's Mental Health Investment Standard compliance statement has been properly prepared, in all material aspects, in accordance with the criteria set out in the Assurance Engagement of the Mental Health Investment Standard 2021/22 - Briefing Guidance published by NHS England and NHS Improvement.

Use of our report

This report is made solely to the Board of the ICB successor to the CCG, as a body, and NHSE, as a body, in accordance with the terms of our tripartite agreement and solely for the purpose of reporting in connection with the 2021/22 Mental Health Investment Standard Compliance Statement of NHS Blackburn and Darwen CCG. Our work has been undertaken so that we might state to the Board of the ICB successor to the CCG, and NHSE those matters we are required to state to them in a reasonable assurance report and for no other purposes. Our report must not be made available, copied or recited to any other party without our express written permission. To the fullest extent permitted by law, we do not accept or assume responsibility or accept any duty of care to anyone other than the ICB successor of the CCG and the members of the Board of the ICB, as a body, and NHSE, as a body, for our work, for this report or for the conclusions we have formed. We specifically disclaim any liability for any loss, damage or expense of whatsoever nature, which is caused by reliance on our report by any other party who may receive our report.

Grant Thornton UK LLP

Grant Thornton UK LLP

London
26 April 2023