

ANNUAL SELF-CERTIFICATION PROVIDER LICENCE CONDITIONS

1. Introduction

- 1.1 NHS Foundation Trusts are required to self-certify whether or not they have complied with the conditions of the NHS provider licence (which itself includes requirements to comply with the National Health Service Act 2006, the Health and Social Care Act 2008, the Health Act 2009, and the Health and Social Care Act 2012, and have regard to the NHS Constitution), have the required resources available if providing commissioner requested services, and have complied with governance requirements.
- 1.2 The aim of self-certification is for providers to carry out assurance that they are in compliance with the conditions and it is up to providers to how they carry out this process.

2. Discussion

- 2.1 *Compliance with General Condition 6 and Continuity of Service Condition 7 of the NHS Provider Licence*

- 2.3 The Board will make two declarations, these are:

Following a review for the purpose of paragraph 2(b) of licence condition G6, the Directors of the Licensee are satisfied that, in the financial year most recently ended, the Licensee took all such precautions as were necessary in order to comply with the conditions of the licence, any requirements imposed on it under the NHS Acts and have had regard to the NHS Constitution.

After making enquiries the Directors of the Licensee have a reasonable expectation that the Licensee will have the Required Resources available to it after taking account distributions which might reasonably be expected to be declared or paid for the period of 12 months referred to it in this certificate.

Governance arrangements (Condition FT4(8))

- 2.4 Under the governance condition, NHS Foundation Trusts submit a corporate governance statement within three months of the end of each financial year. The governance condition requires Board to confirm:

The Board is satisfied that there are systems to ensure that the Licensee has in place personnel on the Board, reporting to the Board and within the rest of the

organisation who are sufficient in number and appropriately qualified to ensure compliance with the conditions of its NHS Provider Licence.

The Board is satisfied that during the financial year most recently ended the Licensee has provided the necessary training to its Governors, as required in s151(5) of the Health and Social Care Act, to ensure they are equipped with the skills and knowledge they need to undertake their role.

- 2.5 There is no set process for assurance or how conditions are met and how this is done is at the Provider's discretion. However, what is important is that the Board understands and can sign off the stated compliance. Furthermore, there is no formal requirement now to make a return to NHS Improvement though it may spot check the process followed at selected trusts to ensure they have carried out the self-certification process. Providers will be required to supply the information they have used or provide any documentary evidence, such as Board minutes, papers etc.
- 2.6 Appendix 1 sets out a detailed self-assessment against the requirements of Condition FT4 which underpin the Trust's overall compliance with Condition G6.
- 2.7 In support of the evidence provided in Appendix 1, and the for the purpose of self-certification against Condition G6 and Condition 7, the Board took account of the additional following sources of evidence:
- Relevant papers presented to the Board of Directors
 - Relevant papers presented to the Board sub-committees: Quality and Assurance Committee, Finance, Performance and Digital Committee, People Committee, Building a Brighter Future Committee (previously named HIP2 Committee) and the Audit Committee
 - The Risk Management Strategy, Board Assurance Framework and Corporate Risk Register
 - CQC Registration, and 'GOOD' overall and recognised as well-led
 - Accreditation with the NHS Resolution (previously NHS Litigation Authority)
 - NHS Improvement Oversight Framework
 - Opinions on assurance from the Trust's Internal Audit Programme
- 2.8 For the purposes of self-certification for Condition G6, the Board took in to account the following sources of assurance:
- Chief People Officers' reports to the Board – covering all workforce KPIs including workforce numbers
 - Integrated Performance Report – covering KPIs and workforce plan
 - Trust Talks
 - NHSI workforce establishment returns – monthly part of financial reporting
- 2.9 For the purposes of training, governors participated in the following:
- Council of Governors - quarterly meetings included presentations by Executive Directors and Non-Executive Directors

- Board to Council meetings – bi-annual meetings included presentations and interactive workshops covering forward strategic planning and participation
- Bespoke training session covering the Governor role and duties facilitated by NHS Providers
- Attendance by several Governors at the National Governors Conference hosted by NHS Providers
- Monthly network meetings with the Chairman covering Chair's briefing from the private session of Board meetings, presentations by the Executive Team on topical subjects and by staff members on matters of interest chosen by Governors
- For new Governors, induction programme comprising meetings with the Chairman, Company Secretary and members of the Membership Office, information packs covering the duties and responsibilities of Governors
- Fortnightly newsletter issued to Governors containing briefings, information and media coverage on a wide range of subject matters, including the Trust's response to the Covid pandemic
- Annual Members Meeting in which the annual report and accounts was presented by the Chief Executive and Chief Finance Officer, and included presentation of the Auditor's Report by the External Auditor

3 Conclusion

- 3.1 Based on the evidence stated on Appendix 1 and above, the Board approved '*confirmed*' statements against each of the conditions can be declared and authorised the Chairman and Chief Executive to sign the self-declaration statement (see appendix 1).