

TRUST BOARD

25 MAY 2017

DECLARATIONS REQUIRED BY GENERAL CONDITION 6 AND CONTINUITY OF SERVICE CONDITION 7 OF THE NHS PROVIDER LICENCE AND THE CERTIFICATION ON TRAINING OF GOVERNORS

INTRODUCTION

As part of the annual reporting process, Taunton and Somerset NHS Foundation Trust is required to self-certify whether or not we 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.
- Complied with governance requirements.

DECLARATIONS

At its Part B meeting on 25 May 2017, the Board **"confirmed"** the following statements:

Sources of Evidence (main factors taken into account in making the declarations)

- Well-led reviews (3 years)
- Review of Board and committee effectiveness (annual)
- Committee terms of reference
- Constitutional documents (standing orders, standing financial instructions, scheme of reservation and delegation)
- Governance framework
- Internal audit plan, reports and opinion
- Counter fraud work plan and reports
- Risk management processes (including corporate risk register and board assurance framework)
- Regular Board and committee meetings' cycle (Audit Committee, Governance

Committee, Finance Committee oversight)

- Operational plan
- Integrated performance reports to the Board (monthly) – including HR and quality
- Financial performance report to the Board (monthly)
- Performance assurance framework process and review by the directorates
- Annual report, quality report and annual accounts
- CQC inspection report (“good” overall) and action plan
- Going concern statement to the Audit Committee and Board
- Training for governors (Trust induction, ward visits and meet-and-greet, South West Governance Exchange Network, training on role provided by PwC – external auditors)

FT4 Declaration - Corporate Governance Statement

- (1) The Board is satisfied that the Licensee (the Trust) applies those principles, systems and standards of good corporate governance which reasonably would be regarded as appropriate for a supplier of health care services to the NHS.

Confirmed

- (2) The Board has regard to such guidance on good corporate governance as may be issued by NHS Improvement from time to time

Confirmed

- (3) The Board is satisfied that the Licensee has established and implements:
- (a) Effective board and committee structures;
 - (b) Clear responsibilities for its Board, for committees reporting to the Board and for staff reporting to the Board and those committees; and
 - (c) Clear reporting lines and accountabilities throughout its organisation.

Confirmed

- (4) The Board is satisfied that the Licensee has established and effectively implements systems and/or processes:

- (a) To ensure compliance with the Licensee’s duty to operate efficiently, economically and effectively;
- (b) For timely and effective scrutiny and oversight by the Board of the Licensee’s operations;
- (c) To ensure compliance with health care standards binding on the Licensee including but not restricted to standards specified by the Secretary of State, the Care Quality Commission, the NHS Commissioning Board and statutory regulators of health care professions;
- (d) For effective financial decision-making, management and control (including but not restricted to appropriate systems and/or processes to ensure the Licensee’s ability to continue as a going concern);
- (e) To obtain and disseminate accurate, comprehensive, timely and up to date information for Board and Committee decision-making;
- (f) To identify and manage (including but not restricted to manage through

- forward plans) material risks to compliance with the Conditions of its Licence;
- (g) To generate and monitor delivery of business plans (including any changes to such plans) and to receive internal and where appropriate external assurance on such plans and their delivery; and
- (h) To ensure compliance with all applicable legal requirements.

Confirmed

- (5) The Board is satisfied that the systems and/or processes referred to in paragraph 4 (above) should include but not be restricted to systems and/or processes to ensure:
- (a) That there is sufficient capability at Board level to provide effective organisational leadership on the quality of care provided;
 - (b) That the Board's planning and decision-making processes take timely and appropriate account of quality of care considerations;
 - (c) The collection of accurate, comprehensive, timely and up to date information on quality of care;
 - (d) That the Board receives and takes into account accurate, comprehensive, timely and up to date information on quality of care;
 - (e) That the Licensee, including its Board, actively engages on quality of care with patients, staff and other relevant stakeholders and takes into account as appropriate views and information from these sources; and
 - (f) That there is clear accountability for quality of care throughout the Licensee including but not restricted to systems and/or processes for escalating and resolving quality issues including escalating them to the Board where appropriate.

Confirmed

Training of governors

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.

Confirmed

1 & 2 General condition 6 - Systems for compliance with license conditions

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.

Confirmed

Continuity of Services Condition 7 - Availability of Resources

EITHER:

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 in this certificate.

Confirmed

OR

After making enquiries the Directors of the Licensee have a reasonable expectation, subject to what is explained below, that the Licensee will have the Required Resources available to it after taking into account in particular (but without limitation) any distribution which might reasonably be expected to be declared or paid for the period of 12 months referred to in this certificate. However, they would like to draw attention to the following factors (as described in the text box below) which may cast doubt on the ability of the Licensee to provide Commissioner Requested Services.

Not Confirmed

OR

In the opinion of the Directors of the Licensee, the Licensee will not have the Required Resources available to it for the period of 12 months referred to in this certificate.

Not Confirmed