**Proposed Declarations**

|  | Statement | Declaration |
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| G6(3) | 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 compliant 2018/19 |
| CoS(7) | 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 for 2019/20  |
| FT4(8) | The Board is satisfied that 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 compliant 2018/19 |
| FT4(8) | The Board has regard to such guidance on good corporate governance as may be issued by NHS Improvement from time to time | Confirmed compliant 2018/19 |
| FT4(8) | The Board is satisfied that the Trust implements: 1. Effective board and committee structures
2. Clear responsibilities for its Board, for committees reporting to the Board and for staff reporting to the Board and those committees
3. Clear reporting lines and accountabilities throughout its organisation
 | Confirmed compliant 2018/19 |
| FT4(8) | The Board is satisfied that the Trust effectively implements systems and/or processes:1. To ensure compliance with the Licensee’s duty to operate efficiently, economically and effectively
2. For timely and effective scrutiny and oversight by the Board of the Licensee’s operations
3. 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
4. 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)
5. To obtain and disseminate accurate, comprehensive, timely and up to date information for Board and Committee decision-making
6. To identify and manage (including but not restricted to manage through forward plans) material risks to compliance with the Conditions of its Licence
7. 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
8. To ensure compliance with all applicable legal requirements.
 | Confirmed compliant 2018/19 |
| FT4(8) | 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:1. That there is sufficient capability at Board level to provide effective organisational leadership on the quality of care provided
2. That the Board’s planning and decision-making processes take timely and appropriate account of quality of care considerations;
3. The collection of accurate, comprehensive, timely and up to date information on quality of care
4. That the Board receives and takes into account accurate, comprehensive, timely and up to date information on quality of care
5. That the Trust, 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
6. That there is clear accountability for quality of care throughout the Trust including but not restricted to systems and/or processes for escalating and resolving quality issues including escalating them to the Board where appropriate.
 | Confirmed compliant 2018/19Although it is recognised that with the implementation of the new patient records’ system (CareDirector) there could be a temporary dip in the information available. This is being managed through robust testing and contingency plans are in place.With regard to engaging with service users and carers it is recognised that much work is going on in the Trust to strengthen these arrangements, including recruitment to the Patient Experience Team. |
| FT4(8) | The Board is satisfied that there are systems to ensure that the Trust 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.  | Confirmed compliant 2018/19The Board acknowledges that there are challenges around recruitment due to shortages across nursing and Junior Doctors in some specialities. These shortages are being actively monitored and managed. |
| Governor training | The Board is satisfied that during the financial year most recently ended the Trust 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 compliant 2018/19The Board acknowledges that there is work ongoing to develop the training programme.  |