

## **BOARD DECLARATION IN RESPECT OF CONDITION G6 OF THE TRUST'S PROVIDER LICENCE**

Condition G6 of the Trust's Provider Licence requires the Trust to maintain systems to monitor compliance with the Provider Licence. Under Condition G6 of its Provider Licence the Trust is required to carry out a review, and to make a formal declaration for the most recently ended financial year that they are satisfied, in respect of that year, that the Trust 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 had regard to the NHS Constitution.

The Board carried out its review on 23<sup>rd</sup> May 2018, having regard to the following sources of evidence, summarised in a paper from the Senior Associate Director of Assurance and Compliance:

- The Board Assurance Framework (BAF), which includes principal objectives with respect to regulatory compliance, including compliance with the Trust's Provider Licence, and the achievement of access targets in line with the NHS Constitution. For each objective the BAF notes: the key controls in place to manage risks; sources of assurance with respect to the health of those controls and the outcomes from assurance work. Where the outcomes highlight deficiencies in controls or a lack of assurance, the BAF sets out action plans. The Board reviews the implementation of actions, and the level of risk associated with each objective every quarter, supported by more detailed reviews carried out by its sub-committees. In addition, the Board compares reductions in risk with its expectations, which are set out in the form of risk reduction trajectories over time.
- The results of an external assessment of the Trust against the Well-Led Framework set out by the Care Quality Commission and NHS Improvement, which found no major omissions with reference to the range of good practice indicators specified in the framework, together with the progress – reported to each Board meeting during the year – in implementing the resulting actions.
- The Annual Governance Statement, which was also considered in full on 23<sup>rd</sup> May 2018, having been reviewed in detail previously by the Audit Committee.
- The Head of Internal Audit's Annual Opinion and progress reports, reviewed by the Audit Committee. These include the results of specific internal audits of systems relevant to Provider Licence compliance, including data quality and financial governance.
- An annual risk assessment, completed with reference to Condition G6, by the Senior Associate Director of Assurance and Compliance.
- The Trust's Values and Behaviours Framework, which is aligned to the NHS Constitution.
- The Care Quality Commission's most recent inspection of the Trust, including the Trust-level well led review.

The Board noted the assurance obtained from each of the above sources of evidence, alongside other sources of evidence scrutinised routinely by the Board and its sub-committees during the year, and noted the actions in place to address areas for improvement. The Board acknowledged risk in respect of the need to: further embed its safety culture; continue to strengthen staff engagement and job satisfaction; improve systems to monitor and manage compliance with role-specific essential training; and ensure the consistent understanding of strategy throughout the organisation. However, the Board was also satisfied that robust action plans were in place to mitigate that risk.

**On the basis of the above review the Board can CONFIRM compliance with the following licence requirement:**

**“Following a review for the purpose of paragraph 2(b) of licence condition G6, the Directors of the Licensee are satisfied, as the case may be that, in the Financial Year most recently ended (2017/18), 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”**