

Trust Board Paper V

To:	Trust Board										
From:	Stephen Ward, Director of Corporate & Legal Affairs										
Date:	28 th November 2013										
CQC regulation:	N/A										
Title:	NHS trust oversight self certification										
Author/Responsible Director: Helen Harrison, FT Programme Manager / Stephen Ward, Director of Corporate & Legal Affairs											
Purpose of the Report: At the beginning of April 2013, the NHS Trust Development Authority (NTDA) published a single set of systems, policies and processes governing all aspects of its interactions with NHS trusts in the form of ‘ <i>Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards</i> ’. In accordance with the Accountability Framework, the Trust is required to complete two self certifications in relation to the Foundation Trust application process. Draft copies of these are attached as Appendix A and B.											
The Report is provided to the Board for:											
<table border="1"> <tr> <td>Decision</td> <td>X</td> </tr> <tr> <td>Assurance</td> <td></td> </tr> </table>		Decision	X	Assurance		<table border="1"> <tr> <td>Discussion</td> <td></td> </tr> <tr> <td>Endorsement</td> <td></td> </tr> </table>		Discussion		Endorsement	
Decision	X										
Assurance											
Discussion											
Endorsement											
Summary / Key Points:											
<ul style="list-style-type: none"> As agreed at the October 2013 Trust Board meeting, the Trust will be carrying out a re-forecast of its financial position for 2013/14 during November 2013 and will review its position at the Trust Board meeting to be held on the 28th November 2013 The Trust is working towards sustainable compliance with the ED target. An Emergency Care Improvement Hub has been established, which brings together partners from across health and social care. Whilst the Hub is focussing on delivering the short-term actions longer-term and more strategic actions are being taken forward by the Urgent Care Board An initial RTT action plan was submitted to commissioners on 14th August 2013 and a revised plan was subsequently submitted on 11th September 2013. Formal agreement of a plan by commissioners remains outstanding 											
Recommendations:											
The Trust Board is asked to approve the Monitor Licensing Requirements and Trust Board Statements self certifications for October (attached as Appendix A and Appendix B)											
Previously considered at another corporate UHL Committee? No											
Strategic Risk Register: No		Performance KPIs year to date: N/A									
Resource Implications (eg Financial, HR): No											
Assurance Implications: Yes											
Patient and Public Involvement (PPI) Implications: No											
Stakeholder Engagement Implications: No											

Equality Impact: None

Information exempt from Disclosure: None

Requirement for further review? All future trust oversight self certifications will be presented to the Trust Board for approval

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: Trust Board
DATE: 28th November 2013
REPORT FROM: Stephen Ward, Director of Corporate & Legal Affairs
SUBJECT: NHS trust oversight self certification

1) Introduction

At the beginning of April 2013, the NHS Trust Development Authority (NTDA) published a single set of systems, policies and processes governing all aspects of its interactions with NHS trusts in the form of '*Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards*'.

In accordance with the Accountability Framework, the Trust is required to complete two self certifications in relation to the Foundation Trust application process. Draft copies of these are attached as Appendix A and B.

2) Key points to note

Appendix B:-

- As agreed at the October 2013 Trust Board meeting, the Trust will be carrying out a re-forecast of its financial position for 2013/14 during November 2013 and will review its position at the Trust Board meeting to be held on the 28th November 2013
- The Trust is working towards sustainable compliance with the ED target. An Emergency Care Improvement Hub has been established, which brings together partners from across health and social care. Whilst the Hub is focussing on delivering the short-term actions longer-term and more strategic actions are being taken forward by the Urgent Care Board
- An initial RTT action plan was submitted to commissioners on 14th August 2013 and a revised plan was subsequently submitted on 11th September 2013. Formal agreement of a plan by commissioners remains outstanding

3) Recommendations

The Trust Board is asked to **approve** the Monitor Licensing Requirements and Trust Board Statements self certifications for November 2013 (attached as Appendix A and Appendix B)

OVERSIGHT: Monthly self-certification requirements - Compliance Monitor Monthly Data.

CONTACT INFORMATION:



Enter Your Name:

Enter Your Email Address:

Full Telephone Number: Tel Extension:

SELF-CERTIFICATION DETAILS:



Select Your Trust:

Submission Date: Reporting Year:

Select the Month

<input type="radio"/> April	<input type="radio"/> May	<input type="radio"/> June
<input type="radio"/> July	<input type="radio"/> August	<input type="radio"/> September
<input checked="" type="radio"/> October	<input type="radio"/> November	<input type="radio"/> December
<input type="radio"/> January	<input type="radio"/> February	<input type="radio"/> March

COMPLIANCE WITH MONITOR LICENCE REQUIREMENTS FOR NHS TRUSTS:



- 1. **Condition G4** – Fit and proper persons as Governors and Directors (also applicable to those performing equivalent or similar functions).
- 2. **Condition G5** – Having regard to monitor Guidance.
- 3. **Condition G7** – Registration with the Care Quality Commission.
- 4. **Condition G8** – Patient eligibility and selection criteria.

- 5. **Condition P1** – Recording of information.
- 6. **Condition P2** – Provision of information.
- 7. **Condition P3** – Assurance report on submissions to Monitor.
- 8. **Condition P4** – Compliance with the National Tariff.
- 9. **Condition P5** – Constructive engagement concerning local tariff modifications.

- 10. **Condition C1** – The right of patients to make choices.
- 11. **Condition C2** – Competition oversight.

- 12. **Condition IC1** – Provision of integrated care.

Further guidance can be found in Monitor's response to the statutory consultation on the new NHS provider licence: [The new NHS Provider Licence](#)

COMPLIANCE WITH MONITOR LICENCE REQUIREMENTS FOR NHS TRUSTS:



	Yes	Comment where non-compliant or at risk of non-compliance
1. Condition G4 Fit and proper persons as Governors and Directors.	<input type="text" value="Yes"/>	<input type="text"/> Timescale for compliance: <input type="text"/>
2. Condition G5 Having regard to monitor Guidance.	<input type="text" value="Yes"/>	<input type="text"/> Timescale for compliance: <input type="text"/>
3. Condition G7 Registration with the Care Quality Commission.	<input type="text" value="Yes"/>	<input type="text"/> Timescale for compliance: <input type="text"/>
		Comment where non-compliant or at risk of non-compliance
4. Condition G8 Patient eligibility and selection criteria.	<input type="text" value="Yes"/>	<input type="text"/> Timescale for compliance: <input type="text"/>

5. Condition P1
Recording of information.

Yes

Comment where non-compliant or
at risk of non-compliance

Timescale for compliance:

6. Condition P2
Provision of information.

Yes

Timescale for compliance:

7. Condition P3
Assurance report on
submissions to Monitor.

Yes

Timescale for compliance:

8. Condition P4
Compliance with the
National Tariff.

Yes

Timescale for compliance:

Comment where non-compliant or
at risk of non-compliance

9. Condition P5
Constructive engagement
concerning local tariff
modifications.

Yes

Timescale for compliance:

Comment where non-compliant or at risk of non-compliance

10. Condition C1
The right of patients to make choices.

Yes

Timescale for compliance:

11. Condition C2
Competition oversight.

Yes

Timescale for compliance:

12. Condition IC1
Provision of integrated care.

Yes

Timescale for compliance:

OVERSIGHT: Monthly self-certification requirements - Board Statements Monthly Data.

CONTACT INFORMATION:



Enter Your Name:

Enter Your Email Address

Full Telephone Number: Tel Extension:

SELF-CERTIFICATION DETAILS:



Select Your Trust:

Submission Date: Reporting Year:

Select the Month

<input type="radio"/> April	<input type="radio"/> May	<input type="radio"/> June
<input type="radio"/> July	<input type="radio"/> August	<input type="radio"/> September
<input checked="" type="radio"/> October	<input type="radio"/> November	<input type="radio"/> December
<input type="radio"/> January	<input type="radio"/> February	<input type="radio"/> March

BOARD STATEMENTS:



The NHS TDA's role is to ensure, on behalf of the Secretary of State, that aspirant FTs are ready to proceed for assessment by Monitor. As such, the processes outlined here replace those previously undertaken by both SHAs and the Department of Health.

In line with the recommendations of the Mid Staffordshire Public Inquiry, the achievement of FT status will only be possible for NHS Trusts that are delivering the key fundamentals of clinical quality, good patient experience, and national and local standards and targets, within the available financial envelope.

BOARD STATEMENTS:



For **CLINICAL QUALITY**, that

1. The Board is satisfied that, to the best of its knowledge and using its own processes and having had regard to the TDA's oversight model (supported by Care Quality Commission information, its own information on serious incidents, patterns of complaints, and including any further metrics it chooses to adopt), the trust has, and will keep in place, effective arrangements for the purpose of monitoring and continually improving the quality of healthcare provided to its patients.

1. **CLINICAL QUALITY**

Indicate compliance.

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For CLINICAL QUALITY, that

2. The board is satisfied that plans in place are sufficient to ensure ongoing compliance with the Care Quality Commission's registration requirements.

2. CLINICAL QUALITY

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For CLINICAL QUALITY, that

3. The board is satisfied that processes and procedures are in place to ensure all medical practitioners providing care on behalf of the trust have met the relevant registration and revalidation requirements.

3. CLINICAL QUALITY

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For FINANCE, that

4. The board is satisfied that the trust shall at all times remain a going concern, as defined by the most up to date accounting standards in force from time to time.

4. FINANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

5. The board will ensure that the trust remains at all times compliant with the NTDA accountability framework and shows regard to the NHS Constitution at all times.

5. GOVERNANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

6. All current key risks to compliance with the NTDA's Accountability Framework have been identified (raised either internally or by external audit and assessment bodies) and addressed – or there are appropriate action plans in place to address the issues in a timely manner.

6. GOVERNANCE
Indicate compliance.

Risk

Timescale for compliance:

28/11/2013

RESPONSE:

Comment where non-compliant or at risk of non-compliance

As agreed at the October 2013 Trust Board meeting, the Trust will be carrying out a re-forecast of its financial position for 2013/14 during November 2013 and will review its position at the Trust Board meeting to be held on the 28th November 2013.

BOARD STATEMENTS:



For GOVERNANCE, that

7. The board has considered all likely future risks to compliance with the NTDA Accountability Framework and has reviewed appropriate evidence regarding the level of severity, likelihood of a breach occurring and the plans for mitigation of these risks to ensure continued compliance.

7. GOVERNANCE
Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

8. The necessary planning, performance management and corporate and clinical risk management processes and mitigation plans are in place to deliver the annual operating plan, including that all audit committee recommendations accepted by the board are implemented satisfactorily.

8. GOVERNANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

9. An Annual Governance Statement is in place, and the trust is compliant with the risk management and assurance framework requirements that support the Statement pursuant to the most up to date guidance from HM Treasury (www.hm-treasury.gov.uk).

9. GOVERNANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

10. The Board is satisfied that plans in place are sufficient to ensure ongoing compliance with all existing targets as set out in the NTDA oversight model; and a commitment to comply with all known targets going forward.

10. GOVERNANCE

Indicate compliance.

No

Timescale for compliance:

30/11/2013

RESPONSE:

Comment where non-compliant or at risk of non-compliance

UHL is currently non compliant with the ED 4 hour wait target and the Referral to Treatment (RTT) - admitted and non-admitted targets. The Trust is working towards sustainable compliance with the ED target. An Emergency Care Improvement Hub has been established, which brings together partners from across health and social care. Whilst the Hub is focussing on delivering the short-term actions longer-term and more strategic actions are being taken forward by the Urgent Care Board. The Trust is aiming for compliance by November 2013. An initial RTT action plan was submitted to commissioners on 14th August 2013 and a revised plan was subsequently submitted on 11th September 2013. The formal agreement of a plan by commissioners remains outstanding.

BOARD STATEMENTS:



For GOVERNANCE, that

11. The trust has achieved a minimum of Level 2 performance against the requirements of the Information Governance Toolkit.

11. GOVERNANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

12. The board will ensure that the trust will at all times operate effectively. This includes maintaining its register of interests, ensuring that there are no material conflicts of interest in the board of directors; and that all board positions are filled, or plans are in place to fill any vacancies.

12. GOVERNANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

13. The board is satisfied that all executive and non-executive directors have the appropriate qualifications, experience and skills to discharge their functions effectively, including setting strategy, monitoring and managing performance and risks, and ensuring management capacity and capability.

13. GOVERNANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance

BOARD STATEMENTS:



For GOVERNANCE, that

14. The board is satisfied that: the management team has the capacity, capability and experience necessary to deliver the annual operating plan; and the management structure in place is adequate to deliver the annual operating plan.

14. GOVERNANCE

Indicate compliance.

Yes

Timescale for compliance:

RESPONSE:

Comment where non-compliant or at risk of non-compliance