

Worksheet "FT4 declaration"

Corporate Governance Statement (FTs and NHS trusts)

The Board are required to respond "Confirmed" or "Not confirmed" to the following statements, setting out any risks and mitigating actions planned for each one

1 Corporate Governance Statement

	Response	Risks and Mitigating actions	
1 The Board is satisfied that the Licensee 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	The Trust Board provides appropriate oversight of governance across the Trust, overseen by the Audit Committee. This is described in the Annual Governance Statement which forms part of the Annual Report. The Trust Board reviews its list of risks on a regular basis.	Please complete Risks and Mitigating actions
2 The Board has regard to such guidance on good corporate governance as may be issued by NHS Improvement from time to time	Confirmed	The Trust regularly refreshes its policies and processes in line with NHSI and other guidance.	Please complete Risks and Mitigating actions
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	The Board Committee structure is reviewed regularly with Terms of Reference of committees being reviewed every year.	Please complete Risks and Mitigating actions
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	The Board receives an integrated performance, quality and finance report at each meeting and is sighted on key performance challenges. The Board Assurance Framework is presented at every other Board meeting, along with the Corporate Risk Register to ensure that Board members are sighted on the key risks to strategy and the operations of the Trust The Audit Committee oversees the governance framework for the Trust, including receiving reports from both Quality Governance Committee and Finance and Performance Committee on their respective effectiveness. This is then assessed and reported to the Board.	Please complete Risks and Mitigating actions
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	Remuneration Committee, which comprises all the non-executive directors and chaired by the Chairman, reviews the capacity and capability of the Board. It also receives reports relating to succession planning to assess the resilience, capability and capacity of the rest of the senior management cadre. The Quality Governance Committee oversees the quality governance aspects of the Trust and ensures that quality and safety are maintained, providing assurance to the Board. The Board receives patient stories at each meeting and non-executive directors and chief officers regularly participate in ward walk-rounds across the Trust.	Please complete Risks and Mitigating actions
6 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.	Confirmed	Remuneration Committee, which comprises all the non-executive directors and chaired by the Chairman, reviews the capacity and capability of the Board. It also receives reports relating to succession planning to assess the resilience, capability and capacity of the rest of the senior management cadre.	Please complete Risks and Mitigating actions

Signed on behalf of the Board of directors, and, in the case of Foundation Trusts, having regard to the views of the governors

Signature 

Signature 

Name Andrew Hardy

Name Andrew Meehan

Further explanatory information should be provided below where the Board has been unable to confirm declarations under FT4.

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Please Respond

