

NHSI self-certification template for “Corporate Governance Statement”

The Board is required to respond “Confirmed” or not “Confirmed” to the following statements, setting out any risks and mitigating actions planned for each one

4	Corporate Governance Statement	Response	Risks and mitigating actions (including where Board is able to respond “Confirmed”)
1	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	
2	The Board has regard to such guidance on good corporate governance as may be issued by NHSI from time to time	Confirmed	
3	<p>The Board is satisfied that the Trust implements:</p> <ul style="list-style-type: none"> (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	<p>Board and Committee effectiveness considered in our self-assessment process and a positive assessment of Committee performance for 2020/21.</p> <p>Executive and Non-Executive Director have agreed portfolios and performance review processes are in place. There are clear reporting lines and accountabilities in place across the organisation.</p>
4	<p>The Board is satisfied that the Trust effectively implements systems and/or processes:</p> <ul style="list-style-type: none"> (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 	Confirmed	<p>Quality, performance and financial systems and processes are in place that allow for timely reporting and review through Committee and Board; and that deliver compliance with the duties, standards and legal requirements placed on the Trust.</p>

	<p>Licensee's ability to continue as a going concern);</p> <p>(e) To obtain and disseminate accurate, comprehensive, timely and up to date information for Board and Committee decision-making;</p> <p>(f) To identify and manage (including but not restricted to manage through forward plans) material risks to compliance with the Conditions of its Licence;</p> <p>(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</p> <p>(h) To ensure compliance with all applicable legal requirements.</p>		
5	<p>The Board is satisfied that the systems and/or processes referred to in paragraph 4 should include but not be restricted to systems and/or processes to ensure:</p> <p>(a) That there is sufficient capability at Board level to provide effective organisational leadership on the quality of care provided;</p> <p>(b) That the Board's planning and decision-making processes take timely and appropriate account of quality of care considerations;</p> <p>(c) The collection of accurate, comprehensive, timely and up to date information on quality of care;</p> <p>(d) That the Board receives and takes into account accurate, comprehensive, timely and up to date information on quality of care;</p> <p>(e) 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; and</p> <p>(f) 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.</p>	Confirmed	<p>Where we have recommendations for improvement identified through feedback from our staff and patients, external and internal audits, or our programmes of quality improvement, we develop agreed actions plans with identified leads to ensure that remedial measures are put in place. Actions plans are monitored through the relevant Trust Committees with escalation to the Board where required.</p>
6	<p>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.</p>	Confirmed	

Signed on behalf of the board of directors, and having



Name : Professor John Wallwork

Capacity : Chairman

Date : 03 June 2021



Name : Stephen Posey

Capacity : Chief Executive

Date : 03 June 2021