<u>Self-Certification Template - Condition FT4</u> The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust



Foundation Trusts and NHS trusts are required to make the following declarations to NHS Improvement:

Corporate Governance Statement - in accordance with Foundation Trust condition 4 (Foundations Trusts and NHS trusts)

Certification on training of Governors - in accordance with s151(5) of the Health and Social Care Act (Foundation Trusts only)

These Declarations are set out in this template.

How to use this template

- 1) Save this file to your Local Network or Computer.
- 2) Enter responses and information into the yellow data-entry cells as appropriate.
- 3) Once the data has been entered, add signatures to the document.

Worksheet "FT4 declaration"

Corporate Governance Statement (FTs and NHS trusts)

(h) To ensure compliance with all applicable legal requirements.

	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	See table - Appendix A		
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2	The Board has regard to such guidance on good corporate governance as may be issued by NHS Improvement from time to time	Confirmed	See table - Appendix A		
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	See table - Appendix A		
4	The Board is satisfied that the Licensee has established and effectively implements systems and/or processes:	Confirmed	See table - Appendix A		
	(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				

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:	Confirmed	See table - Appendix A
	 (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	See table. Appeading A
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	See table - Appendix A
	Signed on behalf of the Board of directors, and, in the case of Foundation Trusts, having regard to the	e views of the governors	
	Signature Cris Lawrence Signature Hulb.	-	
	Name Chair Name CEO		
	Further explanatory information should be provided below where the Board has been unable to confir	m declarations under FT4.	
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Worksheet "Training of governors"

Certification on training of governors (FTs only)

	The Board are required to respond "Confirmed" or "Not c	nfirmed" to the following statements. Explanatory information should be provided where required.	
2	Training of Governors		
1	The Board is satisfied that during the financial year the necessary training to its Governors, as required ensure they are equipped with the skills and knowle	s151(5) of the Health and Social Care Act, to	
	Signed on behalf of the Board of directors, and, in the	case of Foundation Trusts, having regard to the views of the governors	
	Signature (m) Lawrence	Signature Allebo.	
	Name Chris Lawrence	Name Alice Webster	
	Capacity Chair	Capacity CEO	
	Date 07 June 2023	Date 07 June 2023	
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		der s151(5) of the Health and Socia	