

Executive Summary

Title	Annual self-certification – NHS Provider Licence conditions
Summary	<p>Although NHS trusts are exempt from needing a Provider Licence, directions from the Secretary of State require NHS Improvement (NHSI) to ensure that NHS trusts comply with conditions equivalent to the licence as it deems appropriate.</p> <p>The Single Oversight Framework (SOF) bases its oversight on the NHS provider licence. NHS trusts are therefore legally subject to the equivalent of certain provider licence conditions (including Condition G6 and Condition FT4) and must self-certify under these licence provisions.</p> <p>Providers need to self-certify the following after the financial year-end:</p> <ul style="list-style-type: none"> • The provider has taken all precautions necessary to comply with the licence, NHS Acts and NHS Constitution (Condition G6(3)) • The provider has complied with required governance arrangements (Condition FT4(8)) <p>NHSI has provided templates for the declaring the Trust’s position against these licence conditions which are appended to this paper. The Trust Board is required to consider the Trust’s position in respect to the licence conditions and approve the self-certification statements, whereby the Accountable Officer is required to physically sign them off.</p> <p>NHSI has stipulated the following deadlines for sign-off:</p> <ol style="list-style-type: none"> a) G6/CoS7: 31 May 2017 b) FT4: 30 June 2017 <p>From July 2017 NHSI will audit select NHS Trusts, requiring evidence that they have self-certified together with relevant Board minutes recording sign-off.</p>
Context	NHS Trusts are required to self-certify that they can meet the obligations set out in the NHS provider licence (which itself includes requirements to comply with the National Health Service Act 2006, the Health and Social Care Act 2008, the Health Act 2009 and the Health and Social Care Act 2012, and to have regard to the NHS Constitution) and that they have complied with governance requirements.
Principle risk description	Failure to comply with licence conditions; self-certify under the provisions stated above <i>and</i> ; provide evidence of self-certification approval on demand may result in NHSI taking ‘enforcement action’ against the Trust.
Risk Score	9
Options	Relevant licence conditions to be approved annually by the Trust Board
Cost implications	None
Workforce implications	Assurance team to co-ordinate
Benefits	Trust can demonstrate compliance with provider licence conditions

Recommended option	APPROVE the Trust's status for 2016/17 with respect to the NHSI licence conditions
Residual risk score	3
Implications to Quality of Care	None
Link to Strategic Objectives	All
Link to Board Assurance Framework	All
Communication and consultation	For website publication
Additional information	<p>Appendix A – NHSI 'Self-certification: Guidance for NHS Trusts'</p> <p>Appendix B – Self-certification statements</p> <p>The full NHS Provider Licence can be found on the gov.uk website here: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/285008/ToPublishLicenceDoc14February.pdf</p>

Self-certification: guidance for NHS trusts

April 2017

Introduction

1. This is the first year NHS trusts must self-certify. Although NHS trusts are exempt from needing the provider licence, directions from the Secretary of State require the NHS Trust Development Authority to ensure that NHS trusts comply with conditions equivalent to the licence as it deems appropriate.
2. The Single Oversight Framework (SOF) bases its oversight on the NHS provider licence. NHS trusts are therefore legally subject to the equivalent of certain provider licence conditions (including Condition G6 and Condition FT4) and must self-certify under these licence provisions.
3. NHS trusts are required to self-certify that they can meet the obligations set out in the NHS provider licence (which itself includes requirements to comply with the National Health Service Act 2006, the Health and Social Care Act 2008, the Health Act 2009 and the Health and Social Care Act 2012, and to have regard to the NHS Constitution) and that they have complied with governance requirements. The self-certification requirement set out in CoS7(3) does not apply to NHS trusts.

What is required?

4. Providers need to self-certify the following after the financial year-end:

NHS provider licence condition
The provider has taken all precautions necessary to comply with the licence, NHS Acts and NHS Constitution (Condition G6(3))
The provider has complied with required governance arrangements (Condition FT4(8))

5. The aim of self-certification is for providers to carry out assurance that they are in compliance with the conditions.

6. It is up to providers how they do this. Any process should ensure that the provider's board understands clearly whether or not the provider can confirm compliance. To aid this process, we have provided templates which boards can use if they find it helpful.
7. This note helps trusts understand what each condition means and, if needed, how to use the templates. Because it is up to providers how they go about self-certification, the guidance is necessarily high level and should be read alongside:
 - a. the templates
 - b. [NHS provider licence \(last updated 14 February 2013\)](#)
 - c. [single oversight framework \(September 2016\)](#).
8. If you have any questions not addressed in this note or in any of the additional documents referred to, please contact your regional lead.

Condition G6

9. Condition G6(2) requires NHS trusts to have processes and systems that:
 - a. identify risks to compliance
 - b. take reasonable mitigating actions to prevent those risks and a failure to comply from occurring.

Providers must annually review whether these processes and systems are effective.
10. Providers must publish their G6 self-certification within one month following the deadline for sign-off (as set out in Condition G6(4)).

Using the template?

11. Providers should choose 'confirmed' or 'not confirmed' as appropriate for the declaration. Providers choosing 'not confirmed' should explain why in the free text box provided.

Condition FT4

12. NHS trusts must self-certify under Condition FT4(8).
 13. Providers should review whether their governance systems achieve the objectives set out in the licence condition. The standards set out in FT4 are similar to the standards of governance set out in the TDA general objective.
 14. There is no set approach to these standards and objectives but we expect any compliant approach to involve effective board and committee structures, reporting lines and performance and risk management systems.
 15. Trusts can find further information on governance by referring to:
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- a. [well-led framework for governance reviews \(April 2015\)](#)
- b. [Single Oversight Framework \(September 2016\)](#).

Using the template?

16. Providers must select 'confirmed' or 'not confirmed' for each declaration as appropriate and set out relevant risks and mitigating actions in each case. Where providers choose 'not confirmed' for any declaration, they should explain why in the free text box provided.

Sign off

17. The board must sign off on self-certification.

Deadlines

18. Boards must sign off on self-certification no later than:

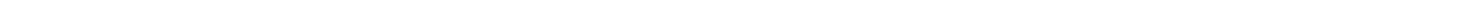
- a. G6/CoS7: 31 May 2017
- b. FT4: 30 June 2017.

Audits

19. From July, NHS Improvement will contact a select number of NHS trusts and foundation trusts to ask for evidence that they have self-certified. This can either be through providing the templates if they have used them, or by providing relevant Board minutes and papers recording sign-off.

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Self-Certification Template - Conditions G6 and CoS7
Shrewsbury and Telford Hospital NHS Trust



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

Systems or compliance with licence conditions - in accordance with General condition 6 of the NHS provider licence

Availability of resources and accompanying statement - in accordance with Continuity of Services condition 7 of the NHS provider licence (Foundation Trusts designated CRS providers only)

These Declarations are set out in this template.

Templates should be returned via the Trust portal.

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 "G6 & CoS7"

Declarations required by General condition 6 and Continuity of Service condition 7 of the NHS provider licence

The board are required to respond "Confirmed" or "Not confirmed" to the following statements (please select 'not confirmed' if confirming another option). Explanatory information should be provided where required.

1 & 2 General condition 6 - Systems for compliance with license conditions (FTs and NHS trusts)

- 1 Following a review for the purpose of paragraph 2(b) of licence condition G6, the Directors of the Licensee are satisfied that, in the Financial Year most recently ended, 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.

Confirmed OK

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:

Name:

Capacity:

Capacity:

Date:

Date:

Further explanatory information should be provided below where the Board has been unable to confirm declarations under G6.

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Self-Certification Template - Condition FT4 **Shrewsbury and Telford Hospital NHS 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)

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	Including where the Board is able to respond 'Confirmed'
2	The Board has regard to such guidance on good corporate governance as may be issued by NHS Improvement from time to time	Confirmed	Including where the Board is able to respond 'Confirmed'
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	Including where the Board is able to respond 'Confirmed'
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	Including where the Board is able to respond 'Confirmed'
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	Including where the Board is able to respond 'Confirmed'
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	Including where the Board is able to respond 'Confirmed'

Please complete Risks and Mitigating actions

Please complete Risks and Mitigating actions

Please complete Risks and Mitigating actions

Please complete Risks and Mitigating actions

Please complete Risks and Mitigating actions

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

Name

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

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Please Respond