

Whittington Health Trust Board

27 November 2013

<b>Title:</b>		<b>NHS Trust Development Authority (TDA) – Self-Certification</b>					
<b>Agenda item:</b>		<b>13/159</b>		<b>Paper</b>		<b>10</b>	
<b>Action requested:</b>		<b><i>For approval</i></b>					
<b>Executive Summary:</b>		The NHS TDA has published their Accountability Framework for NHS Trust Boards which details a clear set of rules and principles under which NHS Trusts should all operate. Within the framework, the NHS TDA describe their monthly self-certification process which is based on compliance to a number of the conditions within Monitor's Provider Licence and a set of Board Statements.					
<b>Summary of recommendations:</b>		Under the new NHS TDA process, a self certification submission is required for November 2013. Therefore, this month, the Board is asked to retrospectively sign-off the return for November 2013 which was submitted to the TDA by the 22 <sup>nd</sup> November 2013 deadline.  The Trust Board is also asked to discuss and agree any issues in anticipation of future returns.					
<b>Fit with WH strategy:</b>							
<b>Reference to related / other documents:</b>							
<b>Date paper completed:</b>		21 November 2013					
<b>Author name and title:</b>		Simon Wombwell Interim CFO		<b>Director name and title:</b>		Dr Yi Mien Koh Chief Executive	
<b>Date paper seen by EC</b>	11/6/13	<b>Equality Impact Assessment complete?</b>	n/a	<b>Risk assessment undertaken?</b>	n/a	<b>Legal advice received?</b>	No



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

### CONTACT INFORMATION:



Enter Your Name:

simon wombwell

Enter Your Email Address

simon.wombwell@nhs.net

Full Telephone Number:

0207 2883406

Tel Extension:

### SELF-CERTIFICATION DETAILS:



Select Your Trust:

The Whittington Hospital NHS Trust

Submission Date:

22/11/2013

Reporting Year:

2013/14

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 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 G7** – Registration with the Care Quality Commission.
3. **Condition G8** – Patient eligibility and selection criteria.
4. **Condition P1** – Recording of information.
5. **Condition P2** – Provision of information.
6. **Condition P3** – Assurance report on submissions to Monitor.
7. **Condition P4** – Compliance with the National Tariff.
8. **Condition P5** – Constructive engagement concerning local tariff modifications.
9. **Condition C1** – The right of patients to make choices.
10. **Condition C2** – Competition oversight.
11. **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:



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

<b>1. Condition G4</b> Fit and proper persons as Governors and Directors.	<input type="text" value="Yes"/>	<input type="text" value="n/a"/>
		Timescale for compliance: <input type="text" value="22/11/2013"/>
<b>2. Condition G7</b> Registration with the Care Quality Commission.	<input type="text" value="Yes"/>	<input type="text" value="n/a"/>
		Timescale for compliance: <input type="text" value="22/11/2013"/>
<b>3. Condition G8</b> Patient eligibility and selection criteria.	<input type="text" value="Yes"/>	<input type="text" value="n/a"/>
		Timescale for compliance: <input type="text" value="22/11/2013"/>
Comment where non-compliant or at risk of non-compliance		
<b>4. Condition P1</b> Recording of information.	<input type="text" value="Yes"/>	<input type="text" value="n/a"/>
		Timescale for compliance: <input type="text" value="22/11/2013"/>

**5. Condition P2**  
Provision of information.

Yes

n/a

Timescale for compliance: 22/11/2013

**6. Condition P3**  
Assurance report on submissions to Monitor.

Yes

n/a

Timescale for compliance: 22/11/2013

**7. Condition P4**  
Compliance with the National Tariff.

Yes

n/a

Timescale for compliance: 22/11/2013

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

**8. Condition P5**  
Constructive engagement concerning local tariff modifications.

Yes

n/a

Timescale for compliance: 22/11/2013

**9. Condition C1**  
The right of patients to make choices.

Yes

n/a

Timescale for compliance: 22/11/2013

**10. Condition C2**  
Competition oversight.

Yes

n/a

Timescale for compliance: 22/11/2013

**11. Condition IC1**  
Provision of integrated care.

Yes

n/a

Timescale for compliance: 22/11/2013

## 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 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:



CLINICAL QUALITY  
FINANCE  
GOVERNANCE

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 (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

Yes

Indicate compliance.

Timescale for compliance:

22/11/2013

RESPONSE:

n/a

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**

Yes

Indicate compliance.

Timescale for compliance:

22/11/2013

RESPONSE:

n/a

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**

Yes

Indicate compliance.

Timescale for compliance:

22/11/2013

RESPONSE:

n/a

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 relevant accounting standards in force from time to time.

**4. FINANCE**

Indicate compliance.

Yes

Timescale for compliance:

22/11/2013

RESPONSE:

n/a

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 has regard to the NHS Constitution.

**5. GOVERNANCE**

Indicate compliance.

Yes

Timescale for compliance:

22/11/2013

RESPONSE:

n/a

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

**BOARD STATEMENTS:**





For GOVERNANCE, that

6. All current key risks have been identified (raised either internally or by external audit and assessment bodies) and addressed – or there are appropriate.

**6. GOVERNANCE**

Indicate compliance.

Yes

Timescale for compliance:

22/11/2013

RESPONSE:

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

n/a

**BOARD STATEMENTS:**



For GOVERNANCE, that

7. The board has considered all likely future risks and has reviewed appropriate evidence regarding the level of severity, likelihood of it occurring and the plans.

**7. GOVERNANCE**

Indicate compliance.

Yes

Timescale for compliance:

22/11/2013

RESPONSE:

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

n/a

**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:

22/11/2013

RESPONSE:

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

n/a

**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](http://www.hm-treasury.gov.uk)).

**9. GOVERNANCE**

Indicate compliance.

Yes

Timescale for compliance:

22/11/2013

RESPONSE:

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

n/a

**BOARD STATEMENTS:**



For GOVERNANCE, that

10. The board is satisfied that plans in place are sufficient to ensure ongoing compliance with all existing targets (after the application of thresholds) as set out in the relevant TDA quality and governance indicators; and a commitment to comply with all known targets going forwards.

10. GOVERNANCE

Risk

Indicate compliance.

Timescale for compliance:

31/12/2013

RESPONSE:

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

RTT Performance in quarters one and two did not meet all indicators. Action plans are in place to ensure ongoing compliance with targets going forward. Second quarter ED target not achieved. Actions plans to recover by third quarter are in place.

Following the implementation of a new EPR system in September, we are experiencing reporting issues. A fix is expected in early December, however current reporting relies upon a manual process.

In relation to finance the Trust is carrying risks in relation to transfer of community estate and the agreement of SLAs following commissioning changes. Each of these risks have been escalated with action plans being agreed.

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

Risk

Indicate compliance.

Timescale for compliance:

31/03/2014

RESPONSE:

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

Recruitment for a health records manager has progressed and one is now in place for clinical records. Corporate records have named Executive leads and are overseen by a Records Committee.

IG Training is not currently achieving the target 95% coverage and additional measures are being employed to improve upon current performance of 73%

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.

Risk

Timescale for compliance:

31/03/2014

**RESPONSE:**

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

Current vacancies include Chairman, Audit Chair, CFO and Director of OD. Recruitment plans in place for each post.

**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:

22/11/2013

**RESPONSE:**

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

n/a

**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.

**Risk**

Timescale for compliance:

**31/03/2014**

**RESPONSE:**

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

**The pace and scale of change required to deliver the annual plan is challenging the capacity and capability of the management team. Plans are in place to recruit substantively to posts, support team building and succession planning.**

