

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

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 Confirmed OK

3 Continuity of services condition 7 - Availability of Resources (FTs designated CRS only)

3a After making enquiries the Directors of the Licensee have a reasonable expectation that the Licensee will have the Required Confirmed Please fill details in cell E22

3b After making enquiries the Directors of the Licensee have a reasonable expectation, subject to what is explained below, that the

3c In the opinion of the Directors of the Licensee, the Licensee will not have the Required Resources available to it for the period of 12


Statement of main factors taken into account in making the above declaration


In making the above declaration, the main factors which have been taken into account by the Board of Directors are as follows:

Risk 1
 Reach Out is expected to move out of its pilot phase to become "business as usual" in 2018/19. It was not clear at the May 2017 Board, how this would be accounted for in 2017/18 and therefore how it would impact on the Use of Resources measures. Clarity has been agreed with NHSE on a net accounting treatment in 2017/18 and this has been reviewed and accepted by the external auditor. There is no material impact on the Use of Resources measures. There is the potential for this approach to be varied in future years in line with New Care Models becoming accepted as the new approach.

Mitigation

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

Signature 
 Name John Short
 Capacity CEO
 Date 06 June 2018

Signature 
 Name Sue Davis
 Capacity Chair
 Date 06 June 2018

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

A:

C:

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	As listed below
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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	
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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	Clear lines of accountability. Strong governance structure in place. TORs reviewed annually and annual committee effectiveness reviews undertaken. Annual Governance Statement in place. Annual committee self assessments taking place.
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Please complete Risks and Mitigating actions

4 The Board is satisfied that the Licensee has established and effectively implements systems and/or processes:

Confirmed	<ul style="list-style-type: none"> Head of Internal Audit Opinion 2017-18 - substantial assurance. Board Assurance Framework - 2017/18 Internal audit provided reasonable assurance regarding design and application of the BAF Top risks discussed at least quarterly at Board and sub-Committees At least annually the Audit Committee reviews the BAF and the effectiveness of related processes Any risks identified as part of the self-certification process are reflected in the BAF Trust reviewed its BAF with representatives of COC and NHSI in May and good progress was noted The Trust has bettered the financial control total for 2017/18 as required by NHSI and agreed the control total for 2018/19 Finance and use of resources - overall score 2 (scores are 1 - 4 with 1 being the strongest performance). We ended the financial year 2017/18 with a single oversight framework score of 2 in line with our operating plan The Operating Plan is considered and approved by the Board with formal delegation to the Chief Executive to submit to NHSI Finance reports are received each month by the Board with detailed discussions taking place at FPP on financial performance, the medium term financial outlook, savings and capital plan Detailed reports are received through the Board committees in particular the Finance Performance and Productivity Committee and Integrated Quality Committee in respect of financial, estate, ICT and people issues and the Trust Board in the reports by Directors. Monthly submissions to NHSI include detail to confirm ongoing compliance and quarterly governance commentaries for the SOF requirements. QFS submissions
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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:

Confirmed	<ul style="list-style-type: none"> Quality receives significant discussion at Board and in IQC. Regular detailed reporting received. Quality Account and Quality Goals widely consulted upon including with Governors. Quality Impact Assessments taking place. Will be new integrated reporting system in 2018/19. Continually increasing transparency on local data and on triangulation and system of integrated reporting is being developed in this financial year. service user and staff story received at the start of every Board meeting
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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	Rem Com overview for Executives, all have had annual reviews including feedback from peers and governors.
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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 John Short Signature Sue Davis
 Name John Short, CEO Name Sue Davis, Chair

Further explanatory information should be provided below where the Board has been unable to

A Please Respond



Worksheet "Training of governors"

Certification on training of governors (FTs only)

The Board are required to respond "Confirmed" or "Not confirmed" to the following statements. Explanatory information should be provided where the Board is unable to confirm declarations under s151(5) of the Health and Social Care Act 2008.

- | 2 | Certification on AHSCs and governance | Response |
|---|---|---|
| | For NHS foundation trusts:
The Board is satisfied it has or continues to: | <input type="text"/> |
| 2 | Training of Governors | |
| 1 | The Board is satisfied that during the financial year most recently ended the | <input type="text" value="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	<input type="text" value="John Short"/>	Name	<input type="text" value="Sus Davis"/>
Capacity	<input type="text" value="CEO"/>	Capacity	<input type="text" value="Chair"/>
Date	<input type="text" value="04 June 2018"/>	Date	<input type="text" value="04 June 2018"/>

Further explanatory information should be provided below where the Board has been unable to confirm declarations under s151(5) of the Health and Social Care Act

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