

Yorkshire Ambulance Service NHS Trust

MEETING TITLE			MEETING DATE			
Public Trust Boar	d	,		21 May 20		
TITLE of PAPER		Board Stateme	ents: Updated	PAPER R	EF	5.3
STRATEGIC OBJECTIVE		Continuously improving patient care				
PURPOSE OF THE PAPER		This report provides an update on the Board Memorandum on Quality Governance and other Board governance statements required as part of the Foundation Trust authorisation process.				
For Approval		\boxtimes	For Assurance			
For Decision			Discussion/Infor	mation	tion 🗆	
AUTHOR / LEAD	Steve Page Executive D Standards a Compliance	Director for and	ACCOUNTABLE DIRECTOR	Execut Standa	Steve Page Executive Director for Standards and Compliance	
PREVIOUSLY CONSIDERED BY		Committee/Group: Quality Committee		Date:		
RECOMMENDAT	ΓΙΟΝ	 It is recommended that the Board: notes and approves the updated Board Memorandum on Quality Governance and confirms its assurance with regard to the updated statements in the Foundation Trust Applicants Guide April 2013. 				
RISK ASSESSM	ENT				Yes	No
Corporate Risk Register and/or Board Assurance Framework amended						
Resource Implications (Financial, Workforce, other - specify)						
Legal implications/Regulatory requirements						
Quality and Diversity Implications						
ASSURANCE/COMPLIANCE						
Care Quality Commission Registration Outcome(s)						
NHSLA Risk Management Standards for Ambulance Trusts			All			

BOARD GOVERNANCE STATEMENTS

1. PURPOSE

1.1 This report provides an update on the Board Memorandum on Quality Governance and other Board governance statements required as part of the Foundation Trust authorisation process.

2. BACKGROUND

- 2.1 As part of the Foundation Trust application process, Trusts are required to confirm and evidence that they have robust governance arrangements in place.
- 2.2 The Guide for Applicants contains model statements in two appendices: The self-certification statement and Board Memorandum on Quality Governance and 14 additional statements relating to Board assurance on a range of other governance issues.
- 2.3 The Guide to Applicants was updated in April 2013. The template for the Board Memorandum on Quality Governance was unchanged as part of this update, although there are formatting changes and a number of amendments to the content of the 14 additional statements to reflect changes arising from the Provider Licence:
 - Removal of a statement about quality governance which duplicates the content of the Board Memorandum.
 - Change of statement relating to registration and revalidation of medical practitioners, to include all registered health care professionals
 - Expansion of statements relating to planning, performance management and risk management processes
 - Removal of reference to the Board operating within its constitution and to governor elections
 - Expansion of statement relating to adequacy of management structure

3. CURRENT POSITION

Board Memorandum on Quality Governance

- 3.1 The Trust commissioned Deloitte to undertake an external assessment of Trust quality governance arrangements in relation to the framework set out by Monitor. The initial exercise was completed in July 2011, giving an overall score of 5.5 (3.5 or below is a compliant score). An action plan was agreed and implementation has since been monitored via the Quality Committee.
- 3.2 Deloitte subsequently completed two further reviews in February 2012 and July 2012, to give external assurance on progress against the agreed action plan. The scores arising from these exercises were 4.0 and 3.5 respectively.

- 3.3 A final assessment by Deloitte was completed in February 2013, taking as its starting point the current Board Memorandum on Quality Governance, which was updated as part of this exercise to ensure its currency and comprehensiveness. The assessment was based on an entirely fresh review of documentary evidence supplied in January/February to substantiate each statement made in the Memorandum. The final assessed score for this exercise was 3.0 (a further improvement on the July 2012 position).
- 3.4 A small number of recommendations were been made in the report. These are captured in the Quality Governance action plan and monitored via reports to the Quality Committee.
- 3.5 The updated version of the Board Memorandum on Quality Governance is attached as Appendix 1.

Additional governance statements

- 3.6 The 14 additional governance statements (Appendix 2) are a development of existing statements signed off by the Board. They also reflect the statements signed by Chairman and Chief Executive in the monthly Foundation Trust Standard Operating Model return.
- 3.7 The changes in the current version do not highlight any specific areas of concern in relation to the Trust's governance arrangements.
- 3.8 Evidence is being collated on an ongoing basis to underpin each of the statements, in anticipation of the NHS Trust Development Authority and Monitor review processes.

4. NEXT STEPS

- 4.1 Subject to Board agreement, the Board Memorandum on Quality Governance, additional statements and associated evidence will be made available to the NHS Trust Development Authority as part of the next phase of assessment.
- 4.2 The Standards and Compliance team will continue to collate underpinning evidence in relation to all statements.
- 4.3 Progress on the Quality Governance action plan will be reviewed at each meeting of the Quality Committee. This plan has also been reviewed and updated in light of the recommendations from the Public Inquiry into the Mid-Staffordshire NHS Foundation Trust (see paper 5.4).
- 4.4 It is anticipated that the Monitor guidance and statement may be further amended during the year in the light of the recommendations of the Public Inquiry into the Mid-Staffordshire NHS Foundation Trust. The Trust will therefore need to undertake a further internal review at this stage.

5. **RECOMMENDATION**

- 5.1 It is recommended that the Board:
 - notes and approves the updated Board Memorandum on Quality Governance and
 - confirms its assurance with regard to the updated statements in the Foundation Trust Applicants Guide April 2013.

6. APPENDICES

- 6.1 Appendix 1 Board Memorandum on Quality Governance
- 6.2 Appendix 2 Additional governance statements