

# NHS TRUST DEVELOPMENT AUTHORITY

## 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.

### Yorkshire Ambulance Service NHS Trust

**Reporting Month:** August 2014

**Submission Date:** 30 September 2014

For <b>CLINICAL QUALITY</b> , that	YES/NO
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 model (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.	YES
The board is satisfied that plans in place are sufficient to ensure ongoing compliance with the Care Quality Commission's registration requirements. <i>Following an unannounced inspection by the CQC in July 2013 the Trust was advised that there were minor concerns in relation to Outcome 9 – Management of Medicines and Outcome 14 - Supporting Workers. The Trust has resolved the issues for Outcome 9 and, following CQCs unannounced visit w/c 21 April 2014, compliance was confirmed. Actions relating to outcome 14 have been completed and this was confirmed to CQC in August 2014. A further CQC inspection is anticipated following this, although a specific timescale for this is not yet known.</i>	YES
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.	YES
<b>For FINANCE</b> , that	
The board is satisfied that the trust shall at all times remain a going concern, as defined by the most up to date accounting standards in force from time to time.	YES
<b>For GOVERNANCE</b> , that	
The board will ensure that the trust remains at all times compliant with the NTDA accountability framework and shows regard to the NHS Constitution at all times.	YES
All current key risks to compliance with the NTDA's Accountability Framework have been identified (raised either internally or by external audit and assessment bodies) and addressed – or there are appropriate action plans in place to address the issues in a timely manner.	YES
The board has considered all likely future risks to compliance with the NTDA Accountability Framework and has reviewed appropriate evidence regarding the level of severity, likelihood of a breach occurring and the plans for mitigation of these risks to ensure continued compliance.	YES
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.	YES

Performance against the 8 minute Red target is currently below the required trajectory and therefore the Trust has put in place a two-stage quality monitoring arrangement to review delayed responses over a specific threshold. This approach and outcomes of the review process is reported weekly to the Trust Executive Group, which in turn provides regular reports to the Trust Board.	
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 ( <a href="http://www.hm-treasury.gov.uk">www.hm-treasury.gov.uk</a> )	<b>YES</b>
<b>For GOVERNANCE, that</b>	
The Board is satisfied that plans in place are sufficient to ensure ongoing compliance with all existing targets as set out in the NTDA oversight model; and a commitment to comply with all known targets going forward. Performance against the 8 minute Red target is currently below the required trajectory and national standard. The Trust is implementing a performance recovery plan and expects performance to improve in Q2. The cost of actions within the plan and loss of CQUIN income associated with CCG level performance mean that the Trust is no longer projecting to meet its planned financial out-turn.	<b>Risk</b>
The Board is satisfied that plans in place are sufficient to ensure ongoing compliance with all existing targets as set out in the NTDA oversight model; and a commitment to comply with all known targets going forward.	<b>YES</b>
The trust has achieved a minimum of Level 2 performance against the requirements of the Information Governance Toolkit.	<b>YES</b>
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.	<b>YES</b>
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	<b>YES</b>
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.	<b>YES</b>

Approved by:

On behalf of the Trust  
Board acting in the capacity of:

Date: