



Report Title	<b>Provider Trust Capability Assessment</b>
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Accountable Director	David O'Brien, Director of Corporate Services and Company Secretary
Previous committees/groups	Trust Executive Group, 03 September 2025
Recommended action(s)	Information.
Purpose of the paper	This report provides information about the Provider Trust Capability Assessment recently introduced by NHS England

## Executive Summary

As part of the National Oversight Framework (NOF), and alongside the NOF metrics and segment scores, NHSE regional teams will assess the overall capability of provider trusts. The stated purpose of this capability assessment is to:

- Support NHSE to judge whether improvement actions or external support is appropriate at each trust.
- Support trust boards to be aware of the challenges faced by their organisation and the actions required to address these.
- Focus trust board attention on key expectations related to their core functions.
- Support an open culture of 'no surprises' between NHSE and trusts

Trusts are required to complete a self-assessment of their organisational capability. This self-assessment is organised around the six domains set out in the Insightful Provider Board framework:

1. Strategy, leadership, and planning
2. Quality of care
3. People and culture
4. Access and delivery of services
5. Productivity and value for money
6. Financial performance and oversight

Across these six domains there are 16 self-assessment criteria and 51 individual lines of enquiry. The completed self-assessment must be approved by the Board and submitted to NHSE. For each of the six domains the Board must confirm whether the self-assessment criteria have been fully met, partially met, or not met.

The corporate governance team is co-ordinating the collation, review, and assessment of the required evidence, the completion of the template, and the governance and approvals processes. Executive directors and their management teams are engaged with the corporate governance team regarding the provision, review, and assessment of evidence. For each of the six domains, one TEG member has been designated as the strategic 'lead assessor' for the corporate governance team to link with.

The Board-approved self-assessment template and supporting evidence must be submitted to the NHSE regional team by 5pm on **22 October**. This will require an additional Board meeting to be scheduled in order to secure sign-off of the Trust's submission. The proposed date for this additional Board meeting is 20 October.

Recommendation(s)	1. The Board notes the overview of the Provider Trust Capability Assessment and supports the approach taken by the Trust.	
Link to Board Assurance Framework Risks (board and level 2 committees only)	All BAF strategic risks	

**Board of Directors (in Public)**  
**25 September 2025**  
**Provider Trust Capability Assessment**

**1. INTRODUCTION**

- 1.1 This report provides information about the Provider Trust Capability Assessment recently introduced by NHS England (NHSE).

**2. BACKGROUND**

- 2.1 As part of the National Oversight Framework (NOF), and alongside the NOF metrics and segment scores, NHSE regional teams will assess the overall capability of provider trusts. The stated purpose of this capability assessment is to:
- Support NHSE to judge whether improvement actions or external support is appropriate at each trust.
  - Support trust boards to be aware of the challenges faced by their organisation and the actions required to address these.
  - Focus trust board attention on key expectations related to their core functions.
  - Support an open culture of 'no surprises' between NHSE and trusts.
- 2.2 Significant elements of the capability assessment derive from the Insightful Provider Board framework. However, it is important to note that this exercise is not an assessment of the board's capability; rather, it is an assessment for the board of the Trust's capability (although there are some links between the two).
- 2.3 The capability assessment is intended to be an annual cycle, not a one-off exercise. This should be built into annual planning and governance processes.
- 2.4 Information about the Provider Trust Capability Assessment can be found at the following link: <https://www.england.nhs.uk/long-read/assessing-provider-capability-guidance-for-nhs-trust-boards/>

**3. PROVIDER TRUST CAPABILITY**

Self Assessment

- 3.1 Trusts are required to complete a self-assessment of their organisational capability. The completed self-assessment must be approved by the Board and submitted to the NHSE regional oversight team along with supporting evidence.

3.2 The capability self-assessment is organised around the six domains set out in the Insightful Provider Board framework:

1. Strategy, leadership, and planning
2. Quality of care
3. People and culture
4. Access and delivery of services
5. Productivity and value for money
6. Financial performance and oversight

3.3 Across these six domains there are 16 self-assessment criteria (see Appendix A). Each of the 16 self-assessment criteria are supported by multiple lines of enquiry. There are 51 lines of enquiry in total. These are not reproduced in this paper but can be accessed via the link in 2.4 above.

#### Board Assurance Statement

3.4 For each of the six domains the Board must confirm whether the self-assessment criteria have been fully met, partially met, or not met. Appendix B sets out the Board Assurance Statement template issued for this purpose by NHS England.

3.5 For any assessment criteria that are not fully met the Trust must submit information to explain:

- The reasons why the criteria are not fully met and the extent to which any of these reasons have been outside the trust's control to address (for example, industrial action; system-wide factors).
- How long these reasons have persisted.
- Any mitigating actions the trust has taken or is taking.
- A high-level description of Trust plans to address the issue, how long this is likely to take and the information the Trust will use to assess progress.

#### Capability Rating

3.6 NHSE regional oversight teams will review the Trust's submitted self-assessment and supporting evidence alongside other considerations including the historical track record of the Trust, its recent regulatory history, and any relevant third-party information. The oversight team will then decide the organisation's capability rating and share this with the Trust, including the rationale for the rating. Four capability ratings are available:

Rating	Definition
Green	High confidence in the Trust management
Amber / Green	Some concerns or areas for the Trust to address
Amber / Red	Material issues to address; failure to address major concerns
Red	Significant concerns: poor delivery, governance, or other issues

## 4 THE YAS APPROACH

### Process

- 4.1 The corporate governance team is co-ordinating the collation, review, and assessment of the required evidence, the completion of the template, and the governance and approvals processes.
- 4.2 As far as possible the evidence will be derived from existing sources rather than requiring new information to be generated. In addition, the Trust will triangulate its internal evidence with relevant external sources where these are available, such as recent audit findings.
- 4.3 Executive directors and their management teams are engaged with the corporate governance team regarding the provision, review, and assessment of evidence. For each of the six domains, one TEG member has been designated as the strategic 'lead assessor' for the corporate governance team to link with.
- 4.4 Appropriate NEDs (for example Committee Chairs or other lead NED roles) may also be asked to participate in reviewing and assessing the evidence for the self-assessment.

### Timeline

- 4.5 The Board-approved self-assessment template and supporting evidence must be submitted to the NHSE regional team by 5pm on **22 October**. This will require an additional Board meeting to be scheduled in order to secure sign-off of the Trust's submission. The proposed date for this additional Board meeting is 20 October.
- 4.6 The high-level internal timeline for completion of this exercise is shown below

Date	Meeting	Purpose
03 September	TEG	Brief TEG and agree process and timeline
25 September	Board	Board item for information
08 October	TEG Strategy	Review self-assessment and supporting evidence
20 October	Board	Approve documentation for submission to NHSE

- 4.7 Appendix C presents a diagram that sets out the overall activity cycle for the capability assessment (note that the quality of the image is sub-optimal).

## 5. FINANCIAL IMPLICATIONS

- 5.1 This report has no direct financial implications.

## **6. RISK**

- 6.1 Failure to engage appropriately with the Provider Trust Capability Assessment may incur reputational or regulatory damage to the Trust.

## **7. RECOMMENDATIONS**

- 7.1 The Board notes the overview of the Provider Trust Capability Assessment and supports the approach taken by the Trust.

## **APPENDICES**

**Appendix A:** Self-Assessment Domains and Criteria

**Appendix B:** Board Assurance Statement Template

**Appendix C:** Capability Assessment Activity Cycle

**David O'Brien**

Director of Corporate Services and Company Secretary

September 2025

## APPENDIX A: PROVIDER TRUST CAPABILITY ASSESSMENT – DOMAINS AND ASSESSMENT CRITERIA

DOMAIN		ASSESSMENT CRITERIA	
1	Strategy, Leadership and Planning	1	The Trust's strategy reflects clear priorities for itself as well as shared objectives with system partners.
		2	The Trust is meeting and will continue to meet any requirements placed on it by ongoing enforcement action from NHS England.
		3	The board has the skills, capacity, and experience to lead the organisation.
		4	The Trust is working effectively and collaboratively with its system partners and NHS Trust collaborative for the overall good of the system(s) and population served.
2	Quality of Care	5	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.
		6	Systems are in place to monitor patient experience and there are clear paths to relay safety concerns to the board.
3	People and Culture	7	Staff feedback is used to improve the quality of care provided by the Trust.
		8	Staff have the relevant skills and capacity to undertake their roles, with training and development programmes in place at all levels.
		9	Staff can express concerns in an open and constructive environment.

## APPENDIX A: PROVIDER TRUST CAPABILITY ASSESSMENT – DOMAINS AND ASSESSMENT CRITERIA

DOMAIN		ASSESSMENT CRITERIA	
4	Access and Delivery of Services	10	Plans are in place to improve performance against the relevant access and waiting times standards.
		11	The Trust can identify and address inequalities in access/waiting times to NHS services across its patients.
		12	Appropriate population health targets have been agreed with the integrated care board.
5	Productivity and Value for Money	13	Plans are in place to deliver productivity improvements as referenced in the NHS Model Health System guidance, the Insightful board and other guidance as relevant.
6	Financial Performance and Oversight	14	The Trust has a robust financial governance framework and appropriate contract management arrangements.
		15	Financial risk is managed effectively and financial considerations (for example, efficiency programmes) do not adversely affect patient care and outcomes.
		16	The Trust engages with its system partners on the optimal use of NHS resources and supports the overall system in delivering its planned financial outturn.



## APPENDIX B: PROVIDER TRUST CAPABILITY ASSESSMENT – BOARD ASSURANCE TEMPLATE

### Provider Capability - Self-Assessment Template

<b>The Board is satisfied that...</b>		<b>(Mitigating/contextual factors where boards cannot confirm or where further information is helpful)</b>	
<b>Strategy, leadership and planning</b>	<ul style="list-style-type: none"> <li>The trust's strategy reflects clear priorities for itself as well as shared objectives with system partners</li> <li>The trust is meeting and will continue to meet any requirements placed on it by ongoing enforcement action from NHSE</li> <li>The board has the skills, capacity and experience to lead the organisation</li> <li>The trust is working effectively and collaboratively with its system partners and provider collaborative for the overall good of the system(s) and population served</li> </ul>	Confirmed	If the Board cannot make the relevant certifications in this domain, reasons why should be described here, as well as actions the board is taking to address them and relevant factors that NHSE, as regulator, needs to know:
<b>Quality of care</b>	<ul style="list-style-type: none"> <li>Having had regard to relevant NHS England guidance (supported by Care Quality Commission information, its own information on patient safety incidents, patterns of complaints and 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</li> <li>Systems are in place to monitor patient experience and there are clear paths to relay safety concerns to the board</li> </ul>	Confirmed	If the Board cannot make the relevant certifications in this domain, reasons why should be described here, as well as actions the board is taking to address them and relevant factors that NHSE, as regulator, needs to know:
<b>People and Culture</b>	<ul style="list-style-type: none"> <li>Staff feedback is used to improve the quality of care provided by the trust</li> <li>Staff have the relevant skills and capacity to undertake their roles, with training and development programmes in place at all levels</li> <li>Staff can express concerns in an open and constructive environment</li> </ul>	Confirmed	If the Board cannot make the relevant certifications in this domain, reasons why should be described here, as well as actions the board is taking to address them and relevant factors that NHSE, as regulator, needs to know:
<b>Access and delivery of services</b>	<ul style="list-style-type: none"> <li>Plans are in place to improve performance against the relevant access and waiting times standards</li> <li>The trust can identify and address inequalities in access/waiting times to NHS services across its patients</li> <li>Appropriate population health targets have been agreed with the ICB</li> </ul>	Confirmed	If the Board cannot make the relevant certifications in this domain, reasons why should be described here, as well as actions the board is taking to address them and relevant factors that NHSE, as regulator, needs to know:
<b>Productivity and value for money</b>	<ul style="list-style-type: none"> <li>Plans are in place to deliver productivity improvements as referenced in the NHS Model Health System guidance, the Insightful board and other guidance as relevant</li> </ul>	Confirmed	If the Board cannot make the relevant certifications in this domain, reasons why should be described here, as well as actions the board is taking to address them and relevant factors that NHSE, as regulator, needs to know:
<b>Financial performance and oversight</b>	<ul style="list-style-type: none"> <li>The trust has a robust financial governance framework and appropriate contract management arrangements</li> <li>Financial risk is managed effectively and financial considerations (for example, efficiency programmes) do not adversely affect patient care and outcomes</li> <li>The trust engages with its system partners on the optimal use of NHS resources and supports the overall system in delivering its planned financial outcome</li> </ul>	Confirmed	If the Board cannot make the relevant certifications in this domain, reasons why should be described here, as well as actions the board is taking to address them and relevant factors that NHSE, as regulator, needs to know:
<b>In addition, the board confirms that it has not received any relevant third-party information contradicting or undermining the information underpinning the disclosures above.</b>		Confirmed	If the Board cannot make this certification, reasons why should be described here, as well as actions the board is taking to address them and relevant factors that NHSE, as regulator, needs to know:

## APPENDIX C: PROVIDER TRUST CAPABILITY ASSESSMENT CYCLE

