

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**Trust Board Bulletin – 7 May 2015**

The following reports are attached to this Bulletin as items for noting, and are circulated to UHL Trust Board members and recipients of public Trust Board papers accordingly:-

- **Annual Updated Declarations of Interest** – Lead contact point Mr S Ward, Director of Corporate and Legal Affairs (0116 258 8721) – **paper 1**;
- **NHS Trust Over-Sight Self Certification return for the period ended 28 February (as submitted to the NTDA on 31 March 2015)** – Lead contact point Mr S Ward, Director of Corporate and Legal Affairs (0116 258 8721) – **paper 2**, and
- **Quarterly Sealings Report** – Lead contact point Mr S Ward, Director of Corporate and Legal Affairs (0116 258 8721) – **paper 3**.

**It is intended that these papers will not be discussed at the formal Trust Board meeting on 7 May 2015, unless members wish to raise specific points on the reports.**

This approach was agreed by the Trust Board on 10 June 2004 (point 7 of paper Q). Any queries should be directed to the specified lead contact point in the first instance. In the event of any further outstanding issues, these may be raised at the Trust Board meeting with the prior agreement of the Chairman.

## Annual Update of Trust Board declarations of interest – 2015-16

NAME	POSITION	INTEREST(S) DECLARED
Mr K Singh	Trust Chairman	Trustee – Joseph Rowntree Foundation, Trustee – Joseph Rowntree Housing Trust, Council Member of Justice, family member working in locum position with Lakeside Consortium, Northamptonshire.
Mr R Moore	Non-Executive Director	Director of the following companies: Momentum Advisers Ltd, Momentum 002 Ltd (trading as Soccer City), Momentum 003 Ltd (trading as Lutterworth Soccer Centre), Momentum 004 Ltd, 555 Fussball Projekt GmbH (Germany), SoccerWorld China Ltd (Hong Kong), SoccerWorld Shanghai Ltd (China), Peppercorn Serviced Offices Ltd, EAI 555 Ltd.
Mr M Traynor (updated)	Non-Executive Director	Partner – Traynor Consulting & Training LLP, Non-Executive Chairman – The Forest Experience Ltd, Non-Executive Chairman – King Richard III Visitor Centre Trust Ltd, Non-Executive Director – Leicestershire Promotions Ltd, Trustee – The National Forest Charitable Trust Ltd, Trustee – Leicestershire Rural Community Council Ltd, Trustee – Menphys, Member – HM Govt's Regulatory Policy Committee. <b>Resigned as a Trustee/Director of LOROS Ltd on 23 April 2015.</b>
Dr R Palin	LLR CCG Representative	GP, Partner at Bushloe Surgery, Wigston, Vice Chair, East Leicestershire and Rutland CCG, Clinical Director for Prisons, Leicestershire Partnership NHS Trust.
Ms K Shields	Director of Strategy	None to declare
Mr M Wightman	Director of Marketing and Communications	None to declare

## **Trust Board Bulletin 7 May 2015 – Paper 2**

### **NHS Trust Oversight Self-Certification**

In accordance with the Accountability Framework, the Trust is required to complete self certifications in relation to the Foundation Trust application process. A copy of the performance self-certification submitted in March 2015 (February 2015 position) is attached.

Stephen Ward  
Director of Corporate and Legal Affairs

# NHS TRUST DEVELOPMENT AUTHORITY



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: \*

University Hospitals Of Leicester NHS Trust

Submission Date: \*



Reporting Year: \*

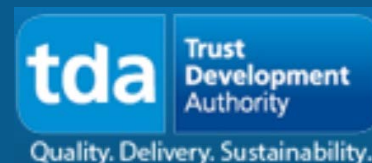
2014/15

Select the Month \*

- |         |          |           |
|---------|----------|-----------|
| April   | May      | June      |
| July    | August   | September |
| October | November | December  |
| January | February | March     |

NB: The next report produced will be for **January 2014/15**

# NHS TRUST DEVELOPMENT AUTHORITY



## BOARD STATEMENTS:



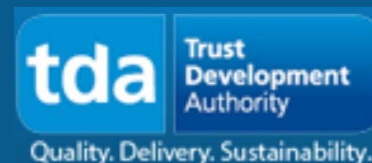
CLINICAL QUALITY  
FINANCE  
GOVERNANCE

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.



# NHS TRUST DEVELOPMENT AUTHORITY



## 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 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.

**1. CLINICAL QUALITY**      Yes  
Indicate compliance. \*



# NHS TRUST DEVELOPMENT AUTHORITY



## 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. \*

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22% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## 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.

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28% Complete





# NHS TRUST DEVELOPMENT AUTHORITY



## BOARD STATEMENTS:



For **FINANCE**, that

4. 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.

**4. FINANCE**  
Indicate compliance. ▪

Yes

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34% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## BOARD STATEMENTS:



For **GOVERNANCE**, that

5. 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.

**5. GOVERNANCE**  
Indicate compliance. \*

Yes

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40% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## BOARD STATEMENTS:



For **GOVERNANCE**, that

6. 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.

**6. GOVERNANCE** Yes  
Indicate compliance. \*

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46% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## BOARD STATEMENTS:



For **GOVERNANCE**, that

7. 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.

**7. GOVERNANCE**  
Indicate compliance. \*

Yes

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52% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## 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

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58% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## 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. \*

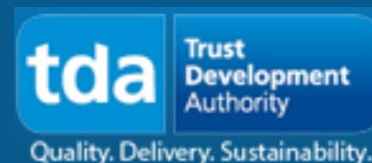
Yes

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64% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## BOARD STATEMENTS:



For **GOVERNANCE**, that

10. 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.

**10. GOVERNANCE**  
Indicate compliance. \*

Risk

Timescale for compliance: \*



RESPONSE:

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



# NHS TRUST DEVELOPMENT AUTHORITY



## 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**  
Indicate compliance. \*

Yes

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76% Complete





# NHS TRUST DEVELOPMENT AUTHORITY



## 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. \*

Yes

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82% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## 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. \*

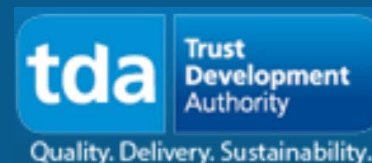
Yes

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88% Complete



# NHS TRUST DEVELOPMENT AUTHORITY



## 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. \*

Yes

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**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**REPORT TO:** TRUST BOARD  
**DATE:** 7 MAY 2015  
**REPORT BY:** DIRECTOR OF CORPORATE AND LEGAL AFFAIRS  
**SUBJECT:** SEALING OF DOCUMENTS

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1. The Trust's Standing Orders (Standing Order 12) set out the approved arrangements for custody of the Trust's seal and the sealing of documents.
2. Appended to this report is a table setting out details of the Trust sealings for the 2014-15 financial year to date (by quarter).
3. The Trust Board is invited to receive and note this information.
4. Reports on Trust sealings will continue to be submitted to the Trust Board on a quarterly basis.

Stephen Ward  
**Director of Corporate and Legal Affairs**

**List of Trust Sealings for Quarter 4, 2014/15**

<b>Date of Sealing</b>	<b>Nature of Document</b>	<b>Date of Authority and Minute Reference</b>	<b>Sealed by</b>	<b>Remarks</b>
26/01/15	Deed of Variation of Contract between (1) UHL and (2) Asterol (Leicester 2) Limited and (3) Asterol Holdings Limited, dated 30 October 2014.	Trust Board – 24/04/15 Minute 105/14	Chairman/ Assistant Director – Head of Legal Services	Originals handed to Helen Seth. 26.1.15.
26/01/15	Funders Direct Agreement between (1) UHL, (2) Asterol (Leicester 2) Limited, (3) Asterol Limited (as ~Agent) (4) Asterol Limited (as Security Trustee, dated 14 October 2014.	Trust Board – 22/12/14 Minute 331/14	Chairman/ Assistant Director – Head of Legal Services	Originals handed to Helen Seth. 26.1.15.
26/01/15	Guarantor Deed of Novation between (1) UHL, (2) Asterol (Leicester 2) Limited, (3) Asterol Holdings (COOP MES) Limited (4) Brook Henderson Group Limited (5) Asterol Limited (as Security Trusts) (6) Asterol Holdings Limited (as Successor Gurantor).	Trust Board – 22/12/14 Minute 331/14	Chairman/ Assistant Director – Head of Legal Services	Originals handed to Helen Seth. 26.1.15.
26/01/15	Deed of Undertaking between (1) Asterol Limited (2) Asterol (Leicester 2) Limited (3) UHL dated 14 October 2014.	Trust Board – 22/12/14 Minute 331/14	Chairman/ Assistant Director – Head of Legal Services	Originals handed to Helen Seth. 26.1.15.
23/02/15	Deed of Surrender between (1) UHL and (2) Lloyds Pharmacy Limited relating to Rooms at LRI	Trust Board – 27/03/14 Minute 77/14	Chairman/ Assistant Director – Head of Legal Services	Originals handed to A.Middleton 23.2.15.
23/02/15	Lease of Property at LRI between (1) UHL and (2) Lloyds Pharmacy Limited.	Trust Board – 27/03/14 Minute 77/14	Chairman/ Assistant Director – Head of Legal Services	Originals handed to A.Middleton 23.2.15.