

## **Board of Directors Meeting in Public**

| Subject:  | Fit and Proper Person Requirement Annual Report                          |            |         | Date: 28 <sup>th</sup> June 2018 |                          |
|---|--|------------|---------|----------------------------------|--------------------------|
| Prepared By:  | Shirley A Higginbotham, Head of Corporate Affairs and Co Sec,            |            |         |                                  |                          |
| Approved By:  | Shirley A Higginbotham, Head of Corporate Affairs and Co Sec,            |            |         |                                  |                          |
| Presented By:   | Shirley A Higginbotham, Head of Corporate Affairs and Co Sec             |            |         |                                  |                          |
| Purpose   |  |            |         |                                  |                          |
| To provide assurance to the board regarding compliance with |  |            |         | Approval                         |                          |
| the Fit and Proper Person Requirement                       |  |            |         | Assurance                        | X                        |
|   |  |            |         | Update                           |                          |
|   |  |            |         | Consider                         |                          |
| Strategic Objectives  |  |            |         |                                  |                          |
| To provide  | To support each  | To inspire |         | get the most                     | To play a                |
| outstanding   | other to do a  | excellence | fre     | om our                           | leading role in          |
| care to our   | great job  |            | re      | sources                          | transforming             |
| patients  |  |            |         |                                  | health and care services |
| X   | Х  |            |         |                                  | Х                        |
| Overall Level of Assurance                                  |  |            |         |                                  |                          |
|   | Significant  | Sufficient | Limited |                                  | None                     |
|   |  | X          |         |                                  |                          |
| Risks/Issues  |  |            |         |                                  |                          |
| Financial   | N/A  |            |         |                                  |                          |
| Patient Impact  | N/A  |            |         |                                  |                          |
| Staff Impact  | N/A  |            |         |                                  |                          |
| Services  | N/A  |            |         |                                  |                          |
| Reputational  | Failure to comply with the regulations could significantly impact on the |            |         |                                  |                          |
|   | reputation of the Trust  |            |         |                                  |                          |
| Committees/groups where this item has been presented before |  |            |         |                                  |                          |
| N/A   |  |            |         |                                  |                          |

## **Executive Summary**

The Care Quality Commission Regulation 5: Fit and Proper Persons requirement came into force on 1<sup>st</sup> April 2015 and was revised in January 2018 to make explicit the requirement to undertake an enhanced DBS check for directors. The Trust was already doing this; therefore there is no requirement to revise our policy.

The Policy and Procedure for the Fit and Proper Person Requirements was approved by Trust Board in January 2017 and is due for review in January 2019.

The regulation applies to all directors, executive and non-executive, permanent, interim and associate positions, irrespective of their voting rights. The regulation does not apply to the Council of Governors.

The personal files of all directors are held in the Corporate Services office. An audit of the files is undertaken annually and the team keep a record of the documentation required these include DBS checks, insolvency checks and the annual self-declaration.

A review of the personal files of all directors noted the evidence required to meet the requirements.

