



## Report Cover Sheet

Report to:	Trust Board	
Date of the Meeting:	24 April 2019	
Agenda Item:	P1-079-19	
Title:	Fit and Proper Person Requirement Policy	
Report prepared by:	Angela Wendzicha, Associate Director of Corporate Governance	
Executive Lead:	Jayne Shaw, Director of Workforce and Organisational Development	
Status of the Report:	Public	Private
	X	

Paper previously considered by:	Not applicable
Date & Decision:	Not applicable

Executive summary/key points for discussion:	<p>In accordance with Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, the Trust is required to ensure that individuals who have authority in organisations that deliver care are fit and proper to carry out this role.</p> <p>The Policy has been developed in line with the current Trust framework and Standing Operating Procedure in addition to recent guidance published by the Care Quality Commission.</p> <p>The Policy sets out the requirement established in legislation and how the Trust will ensure compliance with the same.</p>
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Action Required:	Discuss		Receive	
	Approve	√	Note	

Next steps:	Following approval the Register of Fit and Proper Person Requirements will be presented to Trust Board in May 2019.
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*The paper links to the following strategic priorities (please tick)*

Deliver <b>outstanding care locally</b>	√	Collaborative system <b>leadership</b> to <b>deliver better</b> patient <b>care</b>	
<b>Retain</b> and <b>develop outstanding staff</b>	√	Be <b>enterprising</b>	
<b>Invest in research &amp; innovation</b> to deliver <b>excellent</b> patient <b>care</b> in the future		Maintain <b>excellent</b> quality, operational and financial <b>performance</b>	√

BAF Risk	Please Tick
1. If we do not optimise quality outcomes we will not be able to provide outstanding care	√
2. If we do not prioritise the costs of the delivering the Transforming Cancer Care Programme we will not be able to maintain our long-term financial strength and make appropriate strategic investments.	
3.If we do not have the right infrastructure (estate, communication & engagement, information and technology) we will be unable to deliver care close to home.	√
4. If we do not have the right innovative workforce solutions including education and development, we will not have the right skills, in the right place, at the right time to deliver the outstanding care.	
5. If we do not have an organisational culture that promotes positive staff engagement and excellent health and well-being we will not be able to retain and attract the right workforce.	√
6. If we fail to implement and optimise digital technology we will not deliver optimal patient outcomes and operational effectiveness.	
7. If we fail to position the organisation as a credible research partner we will limit patient access to clinical trials and affect our reputation as a specialist centre delivering excellent patient care in the future.	
8. If we do not retain system-side leadership, for example, SRO for Cancer Alliance and influence the National Cancer Policy, we will not have the right influence on the strategic direction to deliver outstanding cancer services for the population of Cheshire & Merseyside.	
9. If we do not support and invest in entrepreneurial ideas and adapt to changes in national priorities and market conditions we will stifle innovative cancer services for the future.	
10. If we do not continually support, lead and prioritise improved quality, operational and financial performance, we will not provide safe, efficient and effective cancer services.	√

Equality & Diversity Impact Assessment		
Are there concerns that the policy/service could have an adverse impact on:	YES	NO
Age		X
Disability		X
Gender		X
Race		X
Sexual Orientation		X
Gender Reassignment		X
Religion/Belief		X
Pregnancy and Maternity		X

If YES to one or more of the above please add further detail and identify if a full impact assessment is required.

**Corporate Governance**

**Fit and Proper Person Requirement Policy**

**DOCUMENT REF:  
(Version No. 1.0)**

Name and designation of policy author(s)	<i>Angela Wendzicha, Associate Director Corporate Governance</i>
Approved by (committee, group, manager)	<i>To be completed by author &amp; DCM</i>
Approving signature	<i>TO BE OBTAINED BY AUTHOR (SEE "DOCUMENT CONTROL PROCEDURE" FOR EVIDENCE REQUIRED)</i>
Date approved	
Review date	<i>March 2022</i>
Review type (annual, three yearly)	<i>Three yearly</i>
Target audience	<i>All Executive and Non-Executive Directors, Workforce and Corporate Governance</i>
Links to other strategies, policies, procedures	<i>Recruitment and Selection Policy Disciplinary Policy</i>
Protective Marking Classification	
This document replaces	<i>Fit and Proper Person SOP Guidance and Assurance Framework – Fit and Proper Persons</i>

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**Consultation:**

	<b>Authorised by</b>	<b>Date Authorised</b>	<b>Comments</b>
Impact Assessment	<i>To be completed by DCM</i>	<i>To be completed by DCM</i>	<i>To be completed by DCM</i>
Fraud Assessment	<i>To be completed by DCM</i>	<i>To be completed by DCM</i>	<i>To be completed by DCM</i>

**Circulation/Dissemination:**

<b>Date added into Q-Pulse</b>	<i>To be completed by DCM</i>
<b>Date notice posted in the Team Brief</b>	<i>To be completed by DCM</i>
<b>Date document posted on the intranet</b>	<i>To be completed by DCM</i>

**Version History:**

<b>Date</b>	<b>Version</b>	<b>Author name and designation</b>	<b>Summary of main changes</b>
April 2019	1	Angela Wendzicha, Associate Director of Corporate Governance	The policy replaces the current Guidance and Assurance Framework – Fit and Proper Persons and Standard Operating Procedure: Fit and Proper Persons

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## 1.0 Introduction

1.1 Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (“the 2014 Regulations”) was introduced to ensure that all Board level appointments of NHS Foundation Trusts (and NHS Trusts) are fit for their role and to ensure that appropriate steps have been taken to ensure they are of good character, are physically and mentally fit, have the necessary qualifications, skills and experience for the role.

1.2 The Care Quality Commission published guidance in January 2018 around meeting the requirements of the legislation referred to above. The Care Quality Commission has the right, under Schedule 3 of the above 2014 Regulations to require the provision of information as described within the aforementioned Schedule 3 (**Appendix 1**).

## 2.0 Purpose

2.1 The purpose of this policy is to ensure that the Trust complies with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Regulation 5: Fit and Proper Persons Requirement.

## 3.0 Scope

3.1 The Fit and Proper Person Requirement Policy applies to the appointment of new directors and the continuance of existing Directors or individuals performing the functions of, or functions equivalent to those of directors. It includes executive, non-executive, permanent and interim directors irrespective of voting rights.

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## 4.0 Responsibilities

### 4.1 Chair

It is the overall responsibility of the Chair of the Trust to discharge the Fit and Proper Person Requirement and be in a position to declare that the Trust complies with the requirements of Regulation 5.

### 4.2 Senior Independent Director

The Senior Independent Director has responsibility for:

- a) Overseeing the outcome of the Fit and Proper Person Requirement for the Chair
- b) With support from the Associate Director of Corporate Governance undertake investigations into any concerns raised about the Chair, including where the Chair has notified the Senior Independent Director they may no longer comply with the Fit and Proper Persons Requirements.

### 4.3 Director of Workforce and Organisational Development

The Director of Workforce and Organisational Development is responsible for:

- a) Advising the Chair and the Board of Directors on the process necessary to ensure the Trust has robust systems in place which comply with Regulation 5 of the 2014 Regulations (in addition to any guidance issued by the Care Quality Commission).
- b) Ensuring that any Fit and Proper Persons Requirements undertaken comply with the process as described within this policy, bringing any non-compliance to the attention of the Chair, Senior Independent Director and Associate Director of Corporate Governance.

### 4.4 Associate Director of Corporate Governance

The Associate Director of Corporate Governance is responsible for:

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- a) Ensuring any existing directors declare annually that they are fit and proper persons pursuant to Regulation 5.
- b) Maintaining the Register for Fit and Proper Person Requirement, updating the same on an annual basis and assisting the Chair in providing the annual report in relation to Trust compliance with Regulation 5.

#### 4.5 Representative from Workforce

A representative from the Workforce Department will support the Associate Director of Corporate Governance with the compliance check related to the Fit and Proper Persons Requirement in relation to the annual checks and for new appointments.

### 5.0 Laws & Regulations

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Safeguarding Vulnerable Groups Act 2006 (as amended)
- Police Act 1997
- Insolvency Act 1986

### 6.0 Definitions

There are no specific definitions other than those explained within the body of the Policy.

### 7.0 Fit and Proper Person Requirement

7.1 Regulation 5 sets out the criteria a director or equivalent must meet, specifically they:

- i. Must be of good character

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- ii. Have the necessary qualifications, competence, skills, and experience which are necessary for the relevant office or position or the work for which they are employed.
- iii. Must be able, by reason of their health, after reasonable adjustments are made, of properly performing tasks which are intrinsic to the office or position for which they are appointed or to the work for which they are employed.
- iv. Must not have been responsible for, been privy to, contributed to or facilitated any serious misconduct or mismanagement (whether unlawful or not; see section 7.4) in the course of carrying out a regulated activity or providing services elsewhere which, if provided in England, would be a regulated activity, and
- v. None of the grounds of unfitness specified in Schedule 4, Part 1 of the 2014 Regulations apply to the individual (see below).

## 7.2 Grounds for a Director or equivalent to be deemed 'Unfit'

In accordance with Schedule 4, Part 1 of the 2014 Regulations, a person will be deemed to be 'unfit' if they:

- i are an undischarged bankrupt or a person whose estate has had sequestration awarded in respect of it and who has not been discharged
- ii are the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland.
- iii are a person to whom a moratorium period under a debt relief order applies under Part VII (debt relief orders) of the Insolvency Act 1986.
- iv have made a composition or arrangement with, or granted a trust deed for creditors and not been discharged in respect of it.
- v are included in the children's barred list or the adult's barred list maintained under section 2 of the safeguarding Vulnerable Groups Act 2006 (as

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amended), or in any corresponding list maintained under an equivalent enactment in force in Scotland and Northern Ireland.

vi are prohibited from holding the relevant office or position, or in the case of an individual, from carrying on the regulated activity, by or under any other enactment.

### 7.3 Good Character

A person will not be of good character if they:

- i have been convicted in the United Kingdom of any offence or been convicted elsewhere of any offence which, if committed in any part of the United Kingdom, would constitute an offence; and or
- ii have been erased, removed or struck off a register of professionals maintained by a regulator of health care or social work professionals.

### 7.4 Determining Misconduct and Mismanagement

Determining whether there has been serious misconduct or mismanagement is a matter for the Trust who will reach a decision as to whether any facts that are alleged reach the threshold of being “serious misconduct or mismanagement.” The CQC in their 2018 guidance provided further information to assist organisations in defining misconduct and mismanagement for the purposes of the Fit and Proper Persons Requirement.

#### a) Misconduct

Misconduct means conduct that breaches a legal or contractual obligation imposed on the director. It could mean acting in breach of an employment contract, breaching relevant regulatory requirements (such as mandatory health and safety requirements), breaching the criminal law or engaging in activities that are likely to undermine public trust and confidence.

#### b) Mismanagement

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Mismanagement means being involved in the management of an organisation or part of an organisation in such a way that the quality of decision making and actions of the managers falls below any reasonable standard of competent management. The following is a non-exhaustive list of examples of behaviour that may amount to mismanagement:

- Transmitting to a public authority, or any other person, inaccurate information without taking reasonably competent steps to ensure it was correct
- Failing to interpret data in an appropriate way
- Suppressing reports where the findings may be compromising for the organisation
- Failing to have an effective system in place to protect staff who have raised concerns
- Failing to learn from incidents, complaints and when things go wrong
- Failing to model and promote standards of behaviour expected of those in public life, including protecting personal reputation, or the interests of another individual, over the interests of people who use a service, staff or the public.
- Failing to implement quality, safety and/or process improvements in a timely way where there are recommendations or where the need is obvious.

## 8.0 Process

### 8.1 On Appointment

Where a post is subject to the Fit and Proper Persons Requirement, candidates will be notified as part of the Trust's normal recruitment processes in addition to completion of the Self Declaration Form (**Appendix 2**).

### 8.2 Compliance checks

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The table below illustrates how the Trust carries out compliance checks in accordance with the Fit and Proper Persons Requirement:

<b>Fit and Proper Person Requirement</b>	<b>Check</b>	<b>Regularity</b>
The individual is of good character	Interview	At recruitment stage
	References	At appointment stage
	DBS	At appointment stage where the position and role meet the eligibility criteria
	Web Search of the individual	At appointment and annually
The individual has the qualifications, competence, skills and experience which are necessary for the relevant office or position or the work for which they are employed	Application	At recruitment stage
	Interview	At recruitment stage
	References	On appointment
	Qualifications	On appointment
	Professional registration (where applicable)	On appointment and annually thereafter
The individual is able by reason of their health, following any reasonable adjustments (if necessary) of properly performing tasks which are intrinsic to the office or position for which they are appointed or to the work for which they are employed	Occupational Health Assessment	On appointment

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The individual has not been responsible for, been privy to, contributed to or facilitated any serious misconduct or mismanagement (whether unlawful or not) in the course of carrying on a regulated activity or providing a service elsewhere which, if provided in England would be a regulated activity	References	On appointment
	DBS	On appointment where the person and the role meet the eligibility criteria
	Search of registers relating to: Companies House Disqualified Directors Insolvency/Bankruptcy Registers Removed Trustees	All on appointment and annually thereafter
	Director Code of Conduct Self Declaration	On appointment and annually thereafter
	Fit and Proper Persons Self-Declaration	On appointment and annually thereafter
	Annual appraisal	Annually by the relevant line manager

### 8.3 Managing an Unfit Outcome

#### 8.3.1 At appointment stage

If during the pre-employment screening and employment checks stage it emerges that a Director equivalent role is not likely to meet the requirements relating to the Fit and Proper Persons Regulations, the offer should be withdrawn on the basis that the person concerned did not meet the criteria laid out in the Fit and Proper Persons Requirement and that confirmation of appointment was subject to meeting those requirements.

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### 8.3.2 Concerns regarding an Individual's Continued Compliance with Fit and Proper Person's Requirement

In the event that issues are raised that cause concerns relating to an individual being fit and proper to carry out their role, the Chair will, with support from the Associate Director of Corporate Governance and the Director of Workforce, address this in the most appropriate, relevant and proportionate way decided on a case by case basis.

Circumstances may arise that concerns are raised about the Fit and Proper Person status of an individual as a result of:

- A self-declaration
- Concerns raised via internal escalation processes
- Concerns raised externally to the Trust by an individual, organisation or regulator

Where it is necessary to investigate or take action, this will be in line with the Trust's current processes.

Where the individual concerned is a Non-Executive Director, the matter will be brought to the attention of the Council of Governors by the Chair or Senior Independent Director.

Where an individual is registered with a professional regulator (General Medical Council, Nursing and Midwifery Council) and no longer meets the Fit and Proper Person's Requirement, the Trust must inform the relevant regulator.

## 8.4 Annual Review

The Trust is responsible for ensuring the continued 'fitness' of those individuals subject to the fit and Proper Person Requirement.

The Trust will discharge this responsibility through an annual review process as detailed in the table above. The Register for Fit and Proper Persons Requirement will be presented to Board on an annual basis in May.

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## 9.0 Training

There is no mandatory training associated with this policy. Training sessions will be delivered on an ad hoc basis by the Associate Director of Corporate Governance based on individual training needs.

## 10.0 Audit

Compliance with this policy will be monitored internally by completion of the annual review and completion of the Fit and Proper Person Register on an annual basis.

In addition, the Trust may undertake additional monitoring of the policy and this additional monitoring could include:

- Commissioned audits and reviews by Internal Audit

Compliance with the policy will be monitored by the Trust Board on annual presentation of the Fit and Proper Person Register.

The findings of Internal Audit will be presented to the Audit Committee.

## 11.0 References

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 5.

Care Quality Commission (January 2018) Regulation 5: Fit and Proper Persons: Directors, Guidance for Providers and CQC Inspectors

NHS providers (February 2018) Fit and Proper Persons Regulations in the NHS: What do providers need to Know?

## 12.0 Internet

e.g <http://www.legislation.gov.uk/ukdsi/2014/9780111117613/contents>

## 13.0 Appendices

Appendix 1 – Schedule 3 of the 2014 Regulations

Appendix 2 – Fit and Proper Person Self Declaration Form

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## Appendix 1

**Schedule 3 of the 2014 Regulations**

1. The Care Quality Commission has the right to require the provision of information set out in Schedule 3 of the 2014 Regulations in addition to any other information held by the organisation that is relevant to an individual as follows:
  - a) Proof of identity including a recent photograph
  - b) Where required for the purpose of an exempted question in accordance with Section 113A(2)(b) of the Police Act 1997, a copy of a criminal record certificate issued under Section 113A of that Act together with, after the appointed day and where applicable, the information mentioned in Section 30(A)(3) of the Safeguarding Vulnerable Groups Act 2006 (as amended).
  - c) Where required for the purposes of an exempted question asked for a prescribed purpose under Section 113B(2)(b) of the Police Act 1997, a copy of an enhanced criminal record certificate issued under Section 113B of that Act together with, where applicable, suitability information relating to children and vulnerable adults.
  - d) Satisfactory evidence of conduct in previous employment concerned with the provision of services relating to:
    - Health or social care, or,
    - Children or vulnerable adults
  - e) Where a person has been previously employed in a position whose duties involved work with children or vulnerable adults, satisfactory verification, so far as reasonably practicable, of the reason why the person's employment in that position ended.
  - f) In so far as it is reasonably practicable to obtain, satisfactory documentary evidence of any qualification relevant to the duties for which the person is employed or appointed to perform
  - g) A full employment history, together with satisfactory written explanation of any gaps in employment
  - h) Satisfactory information about any physical or mental health conditions which are relevant to the person's capability, after reasonable adjustments are made, to properly perform tasks which are intrinsic to their employment or appointment for the purposes of the regulated activity
  - i) For the purposes of this Schedule:
    - 'the appointed day' means the day on which Section 30A of the Safeguarding Vulnerable Groups Act 2006 comes into force
    - 'satisfactory' means satisfactory in the opinion of the CQC
    - 'suitability information relating to children or vulnerable adults' means the information specified in Sections 113BA and 113BB respectively of the Police Act 1997.

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## Appendix 2

### THE CLATTERBRIDGE CANCER CENTRE NHS FOUNDATION TRUST (“the Trust”)

#### “FIT AND PROPER PERSON” DECLARATION

1. It is a condition of employment that those holding director and director-equivalent posts provide confirmation in writing, on appointment and thereafter on demand, of their fitness to hold such posts. Your post has been designated as being such a post. Fitness to hold such a post is determined in a number of ways, including (but not exclusively) by the Trust’s provider licence, the Health and Social Care Act 2008 (Regulated Activities) Regulations 2008 (“the Regulated Activities Regulations”) and the Trust’s constitution.
2. By signing the declaration below, you are confirming that you do not fall within the definition of an “unfit person” or any other criteria set out below, and that you are not aware of any pending proceedings or matters which may call such a declaration into question.

#### Provider licence

3. Condition G4(2) of The Clatterbridge Cancer Centre NHS Foundation Trust’s Provider Licence (“the Licence”) provides that the Licensee shall not appoint as a director any person who is an unfit person, except with the approval in writing of Monitor.
4. Licence Condition G4(3) requires the Licensee to ensure that its contracts of service with its directors contain a provision permitting summary termination in the event of a director being or becoming an unfit person. The Licence also requires the Licensee to enforce that provision promptly upon discovering any director to be an unfit person, except with the approval in writing of Monitor.
5. An “unfit person” is defined at condition G4(5) of the Licence as:
  - (a) an individual:
    - (i) who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged; or
    - (ii) who has made a composition or arrangement with, or granted a trust deed for, his creditors and has not been discharged in respect of it; or
    - (iii) who within the preceding five years has been convicted in the British Islands of any offence and a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on him; or

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- (iv) who is subject to an unexpired disqualification order made under the Company Directors' Disqualification Act 1986; or
- (b) a body corporate, or a body corporate with a parent body corporate:
  - (i) where one or more of the Directors of the body corporate or of its parent body corporate is an unfit person under the provisions of sub-paragraph (a) of this paragraph, or
  - (ii) in relation to which a voluntary arrangement is proposed under section 1 of the Insolvency Act 1986, or
  - (iii) which has a receiver (including an administrative receiver within the meaning of section 29(2) of the 1986 Act) appointed for the whole or any material part of its assets or undertaking, or
  - (iv) which has an administrator appointed to manage its affairs, business and property in accordance with Schedule B1 to the 1986 Act, or
  - (v) which passes any resolution for winding up, or
  - (vi) which becomes subject to an order of a Court for winding up.

### **Regulated Activities Regulations**

6. Regulation 5 of the Regulated Activities Regulations states that the Trust must not appoint or have in place an individual as a director, or performing the functions of or equivalent or similar to the functions of, such a director, if they do not satisfy all the requirements set out in paragraph 3 of that Regulation.
7. The requirements of paragraph 3 of Regulation 5 of the Regulated Activities Regulations are that:
  - (a) the individual is of good character;
  - (b) the individual has the qualifications, competence, skills and experience which are necessary for the relevant office or position or the work for which they are employed;
  - (c) the individual is able by reason of their health, after reasonable adjustments are made, of properly performing tasks which are intrinsic to the office or position for which they are appointed or to the work for which they are employed;
  - (d) the individual has not been responsible for, privy to, contributed to or facilitated any serious misconduct or mismanagement (whether unlawful or not) in the course of carrying on a regulated activity or providing a service elsewhere which, if provided in England, would be a regulated activity; and
  - (e) none of the grounds of unfitness specified in Part 1 of Schedule 4 apply to the individual.

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8. The grounds of unfitness specified in Part 1 of Schedule 4 to the Regulated Activities Regulations are:
- (a) the person is an undischarged bankrupt or a person whose estate has had sequestration awarded in respect of it and who has not been discharged;
  - (b) the person is the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland;
  - (c) the person is a person to whom a moratorium period under a debt relief order applies under Part VIIA (debt relief orders) of the Insolvency Act 1986;
  - (d) the person has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it;
  - (e) the person is included in the children's barred list or the adults' barred list maintained under section 2 of the Safeguarding Vulnerable Groups Act 2006, or in any corresponding list maintained under an equivalent enactment in force in Scotland or Northern Ireland;
  - (f) the person is prohibited from holding the relevant office or position, or in the case of an individual for carrying on the regulated activity, by or under any enactment.

### **Trust's constitution**

9. The Trust's constitution places a number of restrictions on an individual's ability to become or continue as a director. A person may not become or continue as a director of the Trust if:
- a) They are a member of the Council of Governors, or a governor or director of a health service body;
  - b) they are the spouse, partner, parent or child of a member of the Board of Directors of the Trust;
  - c) they are a member of a committee of a local authority that has any role in scrutinising health matters;
  - d) they are subject to a sex offender order;
  - e) they have been adjudged bankrupt or their estate has been sequestrated and in either case they have not been discharged;
  - f) they are a person in relation to whom a moratorium period under a debt relief order applies (under Part 8A of the Insolvency Act 1986);

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- g) they have made a composition or arrangement with, or granted a trust deed for, their creditors and have not been discharged in respect of it;
- h) they have within the preceding five years been convicted in the British Islands of any offence, and a sentence of imprisonment (whether suspended or not) for a period of three months or more (without the option of a fine) was imposed;
- i) they are the subject of a disqualification order made under the Company Directors Disqualification Act 1986;
- j) in the case of a non-executive Director, they are no longer a member of one of the public constituencies;
- k) they are a person whose tenure of office as a Chair or as a member or director of a health service body has been terminated on the grounds that their appointment is not in the interests of the health service, for non-attendance at meetings, or for non-disclosure of a pecuniary interest;
- l) they have within the preceding two years been dismissed, otherwise than by reason of redundancy, from any paid employment;
- m) in the case of a non-executive Director they have refused without reasonable cause to fulfil any training requirement established by the Board of Directors; or
- n) they have refused to sign and deliver to the Secretary a statement in the form required by the Board of Directors confirming acceptance of the code of conduct for Directors.

I acknowledge the extracts from the provider licence, Regulated Activities Regulations and the Trust's constitution above. I confirm that I do not fit within the definition of an "unfit person" as listed above and that there are no other grounds under which I would be ineligible to continue in post. I undertake to notify the Trust immediately if I no longer satisfy the criteria to be a "fit and proper person" or other grounds under which I would be ineligible to continue in post come to my attention.

Name: **[Name]**

Signed: \_\_\_\_\_

Position: **[Position]**

Date: \_\_\_\_\_

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