



Report Cover Sheet

Report to:	Trust Board	
Date of the Meeting:	29 May 2019	
Agenda Item:	P1/0108/19	
Title:	Annual Register of Fit and Proper Person Requirement	
Report prepared by:	Angela Wendzicha, Associate Director of Corporate Governance	
Executive Lead:	Jayne Shaw, Director of Workforce and OD	
Status of the Report:	Public	Private
	X	

Paper previously considered by:	Not previously considered
Date & Decision:	N/A

Executive summary/key points for discussion:	<p>Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was introduced to ensure that all Board level appointments of NHS organisations are fit for their role and to ensure that appropriate steps have been taken to ensure they are of good character.</p> <p>In order to ensure ongoing compliance with the above Regulations, an annual self-declaration and review will be undertaken and the Register will be presented to the Board. The Associate Director of Corporate Governance will hold the Register.</p> <p>The purpose of the paper is to update the Board on the annual fit and proper person self-declaration and process regarding the Board of Directors.</p> <p>The self-declarations have been completed and a hard copy retained on individuals' personal files. All returns have been reviewed and no issues have been identified that may impact on the individual's ability to perform their role as a member of the Board.</p>
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Action Required:	Discuss		Receive	√
	Approve	√	Note	

Next steps:	The Register of Fit and Proper Person Requirement review will continue on an annual basis or exception basis.
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The paper links to the following strategic priorities (please tick)

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

The paper relates to the following Board Assurance Framework (BAF) Risks

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.

Register for Fit and Proper Person Requirement (2019/2020)							
	Recruitment checks completed with evidence in HR file	Professional Body Registration	DBS Check (if applicable)	Date of Appraisal	Date of Annual Declaration	Date Companies House check Disqualified Director Register	Date Insolvency Register checked
Non-Executive Directors							
Kathy Doran, Chair	Checks completed by Consultancy held on file	N/A	08/03/2019 Ref: [REDACTED]	New starter April 2019	Dec 2018	13/5/2019 - Clean	13/5/2019 - Clean
Alison Hastings (NED /SID)	Checks completed - held on file	N/A	26/09/2018 Ref: [REDACTED]	Apr-19	May-19	13/5/2019 - Clean	13/5/2019 - Clean
David Teale, NED	Checks completed - held on file	N/A	04/02/2019 Ref: [REDACTED]	Apr-19	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean
Mark Baker, NED	Checks completed - held on file	N/A	08/02/2019 Ref: [REDACTED]	May-19	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean
Mark Tattersall, NED	Checks completed - held on file	N/A	06/02/2019 Ref: [REDACTED]	Apr-19	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean
Geoff Broadhead, Associate NED	Checks completed - held on file	N/A	06/02/2019 Ref: [REDACTED]	Apr-19	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean
Executive Directors							
Liz Bishop, CEO	Checks completed - held on file	N/A	05/09/2018 Ref: [REDACTED]	New in post (3 July 2019)	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean
James Thomson, Director of Finance	Checks completed - held on file	CIPFA Register	26/01/2019 Ref: [REDACTED]	New in post (21 June 2019)	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean
Sheen Khundari, Medical Director	Checks completed - held on file	GMC Ref: 4368436, Specialist Registrar, No restrictions	11/10/2017 Ref: [REDACTED]	7 August 2018	May-19	13/5/2019 - Clean	13/5/2019 - Clean
Sheila Lloyd, Director of Nursing & Quality	Checks completed - held on file	NMC 88E1537E, No restrictions	07/12/2017 Ref: [REDACTED]	31 May 2019	May-19	13/5/2019 - Clean	13/5/2019 - Clean
Jayne Shaw, Director of Workforce & OD	Checks completed - held on file	N/A	17/12/2018 Ref: [REDACTED]	New in Post (15 July 2019)	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean
Joan Spencer, Interim Director of Operations	Checks completed - held on file	NMC 86K0511E, No restrictions	03/01/2014 Ref: [REDACTED]	2 July 2019	Apr-19	13/5/2019 - Clean	13/5/2019 - Clean

