

GGI06 V1 GROUP FIT AND PROPER PERSON TEST (FPPT) POLICY

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FIT AND PROPER PERSON TEST (FPPT) STANDARD OPERATING PROCEDURE

1.0 Procedure Statement

1.1 Introduction

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 ("the Regulations") introduced a 'fit and proper person requirement' (FPPT) for Directors and people 'performing the functions of, or functions equivalent or similar to the functions of, such a director' ("Directors").

The Regulations came into force for NHS bodies on 27 November 2014 and all care providers from 1st April 2015. Compliance with the FPPT is monitored and enforced by the Care Quality Commission (CQC) as part of the inspection regime, using specific lines of enquiry and prompts for the domains of 'safe' and 'well-led' to ensure compliance.

In 2019 the Kark Review, commissioned by the government in July 2018 to review the scope, operation, and purpose of the FPPT as it applied under the current Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Following the Kark Review (2019) the FPPT Framework was recommended to be extended in scope to demonstrate that Directors are fit and proper for their roles. The framework was implemented and further enhanced by extended guidance in 2024 including the requirement for additional checks and a process of formal references from employing organisations to include mandated information. The presence of the declarations and the system to support the requirements forms part of an Annual Declaration return to NHSe by the Chair.

It is the overall responsibility of the Board of Directors of the Trust to ensure that it complies with the Regulations by not having an unfit director in place. It is the responsibility of the Trust Chair to ensure that all directors meet the fitness test. https://www.england.nhs.uk/publication/guidance-for-chairs-on-implementation-of-the-fit-and-proper-person-test-for-board-members/

1.2 Purpose

The aim of the FPPT is to prioritise patient safety and good leadership within the Trust. It helps board members build a portfolio to support and provide assurance that they are a fit and proper person for the position they hold, and so demonstrably unfit board members are be prevented from moving between NHS organisations.

- To provide further guidance and training to all staff involved in the FPPT process.
- To define the standards for determining the fitness and propriety of individuals on appointment and on an ongoing basis.
- o To satisfy regulators how the Trust is complying with the Regulations.
- o To define the individuals and/or roles to which this procedure applies.
- To describe the procedure.
- To outline the evidence required to demonstrate compliance with statutory obligations.



In adhering to this procedure, all applicable aspects of the Conflicts-of-Interest Policy must be considered and addressed. In the case of any inconsistency, the Conflict-of-Interest Policy is to be considered as the primary and overriding policy.

2.0 Definitions

CQC – Care Quality Commission, FPPT – Fit and Proper Person Test, NHSe – NHS England

3.0 Accountability

- 3.1 It is the overall responsibility of the Board of Directors to ensure compliance with the Regulations. It is the ultimate responsibility of the Trust Chair to discharge the requirements.
- 3.2 It is the responsibility of NHSe to ensure that the voting Non-executive Directors including the Chair, meet the criteria of the FPPT. The Trust will confirm with NHSe that the FPPT criteria have been met upon appointment of new voting Non-executive Directors. The Trust will undertake annual FPPT reviews for the Executive and Non-Executive Directors using the self-attestation form. The Trust will undertake the checks in respect of Associate (Non-voting) Non-Executive Directors and special advisors/other very senior appointees..

4.0 Roles and Responsibilities

4.1 Chair

The Chair has overall responsibility for compliance with the FPPT procedure and that the desired culture of the Trust is maintained to support effective FPPT regime. The Chair's responsibilities are to:

- a) Ensure that the Trust has proper systems and processes in place so it can make the robust assessments required by the FPPT.
- b) Ensure that the results of the full FPPT, including the annual self-attestations for each board member, are retained by the employing NHS organisation.
- c) Ensure that the FPPT data fields within ESR are accurately maintained in a timely manner.
- d) Ensure that the board member references/pre-employment checks (where relevant) and full FPPT (including the annual self-attestation) are complete and adequate for each board member.
- e) Ensure an appropriate programme is in place to identify and monitor the development needs of board members.
- f) Ensure that on appointment of a new board member, consider the specific competence, skills, and knowledge of board members to carry out their activities, and how these fits with the overall board.
- g) Ensure that board members including the Chair are supported to perform their best and achieve the NHS Leadership Competency Framework (the framework) as outlined below:
 - Driving High-quality and sustainable outcomes
 - Setting strategy and delivering long-term transformation
 - Promoting equality and inclusion, and reducing health and workforceinequality
 - Promoting robust governance and assurance



- Creating a compassionate, just and positive culture
- Building trusted relationships with partners and communities
 Will be required to confirm to NHSe Annually and the CQC under Well-led that:
- h) The fitness of all Directors has been assessed in line with the Regulations; and
- i) Declare to NHSe in writing that they are satisfied that all Directors within the scope of FPPT have undertaken the necessary checks and meet the FPPT and are thus fit and proper individuals for their role.

4.2 Trust Board

The Trust Board is responsible for upholding compliance with this procedure. The following letter from NHSE published 2 August 2023 outlines the Fit and Proper Person Test Framework in response to the recommendations made by Tom Kark KC in his 2019 review of the FPPT for Executive and Non-Executive Directors. https://www.england.nhs.uk/long-read/fit-and-proper-person-test-for-board-members-letter-1/

This framework was updated in April 2025: https://www.england.nhs.uk/publication/nhs-england-fit-and-proper-person-test-framework-for-board-members/

4.3 Remuneration Committee of Trust Board

- Review this procedure to ensure it is fit for purpose:
- Receive an annual report on the application of the FPPT to ensure ongoing compliance.

4.4 National Health Service England (NHSE)

The NHSE has responsibility for seeking confirmation of the checks for nonexecutive directors of the Trust.

4.5 People Director

The People Director is responsible for:

- Administering the procedure
- Ensuring compliance with the recording keeping elements including ESR records and
- The request and provision of standard references when requested/required

4.6 Group Company Secretary

- Ensuring compliance with the relevant obligations described within the Regulations and any changes to the requirements and recommending the appropriate procedure amendments to the Remuneration Committee of the Trust Board; and
- Ensuring that all appropriate documentation is completed, stored and available to the Care Quality Commission for inspection upon request.
- Alerting the Deputy Chairs/Chair to any omissions and/or concerns regarding check and/or declarations/attestations



4.7 Individuals defined as requiring the FPPT- all elements

All board members (including Special Advisors and Interim/Fixed/Additional Board appointees) who fall within the procedure are responsible for:

- The provision of their consent to the checks described in the **Appendices** upon request for the purposes of this procedure
- The signing of the self-attestation form that they are a fit and proper person on appointment, which is to be completed on at least an annual basis and/or when there is a change to the attestation
- The provision of evidence of their qualifications, experience, and identity documents on appointment or upon request
- The identification of any issues which may affect their ability to meet the statutory requirements on appointment and on an ongoing basis, which must be brought to the immediate attention of the Group Company Secretary, Chief Executive and/or the Chairman
- Sign up to the privacy notice as part of the FPPT framework

4.7.1 Other Individuals defined as requiring completion of the FPPT elements*

Very Senior and Senior members of staff who fall within the following definitions are required to complete some elements of the FPPT

- Those Deputising for Group/Executive Board Members
- Those Trust Management Members who deputise for the MD, COO, CNO, CMO, Group Directors and Trust (Operational) Directors
- Those acting in a very Senior Capacity either for an Interim or Fixed Term period unless engaged through another employing party (periods > 1 month)

4.7.2 Members of Staff

Members of staff with any concerns about adherence to the FPPT should use the Raising Concerns at Work (Whistleblowing) Policy or directly to the Group Company Secretary.

5.0 Scope*

- **5.1** The Board has identified the following posts to be included within the scope of this procedure:
 - Associate Non-executive Directors
 - Designated Director equivalent Roles
 - Directors
 - Divisional Directors/Deputy COOs
 - Heads of Nursing
 - Interim Directors

This is not an exhaustive list. Anyone identified by an Executive Director as a senior leader may be included in this Group

- 5.2 Those falling within the scope above * will be required to undertake
 - An Annual FPPT attestation to their Executive Lead, retained by the Group Company Secretary
 - At least an Annual Declaration of Conflicts of Interest as a DecisionMaker



6.0 General Principles

6.1 What is a 'Fit and Proper Person?' - The Regulations

The Regulations place a duty on providers not to appoint a person or allow a person to continue to be a director unless they pass the FPPT by:

- having the qualifications, competence, skills, and experience which are necessary for the relevant office or position or work for which they are employed
- being 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
- being 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
- being 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
- ensuring none of the grounds of unfitness set out in Part 1 of Schedule 4apply.
- In addition, the Director must supply information as set out in Schedule 3 of the Regulations and as set out below:
- a) 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 30A (3) of the Safeguarding Vulnerable Groups Act 2006 (provision of barring information on request).
- b) Where required for the purposes of an exempted question in accordance with 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 the Act together with, where applicable, suitability information relating to children or vulnerable adults.
- c) 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 employment in that position ended.
- d) 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.
- e) A full employment history, together with a satisfactory written explanation of any gaps in employment.
- f) 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.

For the purpose of the 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 Commission.

'Suitability of information relating to children and vulnerable adults' means information specific in sections 113BA & 113BB respectively of the Police Act 1997.



6.2 Good Character and Unfit Person Tests

In 2014, the government introduced a 'fit and proper person' requirement, via Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (the 'Regulations'). The purpose of the FPPT is to ensure that appropriate systems and processes are in place to ensure that all new and existing Directors are and continue to be of good character in line with Regulation.

Regulation 5, (Part 2, Schedule 4) recognises that individuals who have authority in NHS organisations that deliver care are responsible for the overall quality and safety of that care. The regulation requirements are that:

- a) the individual is of good character.
- b) the individual has the qualifications, competence, skills, and experience that 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 that 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, contributed to or facilitated any serious misconduct or mismanagement (whether unlawful or not) while carrying out a regulated activity or providing a service elsewhere which, if provided in England, would be a regulated activity.
- e) none of the grounds of unfitness specified in part 1 of Schedule 4 apply to the individual.

The ground of unfitness is specified in Part 1, Schedule 4 to the Regulated Activities Regulations. A Director will be deemed unfit and prevented from holding the post and/or office of a director if:

- a) The person is an undischarged bankrupt or a person whose estate has had a 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 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 from carrying on the regulated activity, by or under any enactment.

Under Schedule 4, Part 2, a director will fail the 'good character' test if they:

- 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
- 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
- Have been erased, removed, or struck off a register of professionals maintained by a regulator of health care or social work professionals.

The Trust adopts a risk-based approach to assessing good character. Behaviours involving fraud, dishonesty, bribery, or corruption may indicate that an individual is not fit and proper, even if no conviction is present. Where such concerns arise, the LCFS must be consulted to support the assessment process and help ensure that any risks are appropriately considered and managed.

6.3 NHS Principles and Values

The seven guiding principles that govern the way the NHS operates and define how it seeks to achieve its purpose: These principles are outlined in **Appendix 1**. The Trust use the core NHS values as a basis on which to develop the Trust values. The NHS core values are integral to creating a culture where patients come first in everything we do. The six core values are outlined in **Appendix 2**.

6.4 Organisational Culture; The Nolan Principles

The CQC requires Directors to set the tone and culture of the Trust so that it leads to staff adopting a caring and compassionate attitude. It is important therefore that in making appointments Directors take account of the values of the Trust and the extent to which candidates provide a good fit with those values. This procedure therefore incorporates the Nolan Principles. Directors are required to promote and support these principles by leadership and example. (See Appendix 3: List of Nolan Principles).

7.0 Procedure Details

7.1 New Director Appointments

- **7.1.1** The People Director shall ensure appointment to new board members are made through a robust and thorough appointment process and complete any necessary recruitment checks and forms.
- **7.1.2** The Group Company Secretary will ensure that a Fit and Proper Person Test annual self-attestation, and Checklist Form as set out in **Appendix 4** and **Appendix 8** are completed for new Directors prior to an unconditional offer being made.
- **7.1.3** As such, no appointments should be made to the post of board member unless the appointee concerned can demonstrate they have met the FPPT requirements.
- **7.1.4** For the initial appointment of NHS Trust Chairs and voting board member references and completed approval will be sought from the NHS England Appointments Team before they commence their role by the Group Company Secretary.
- 7.1.5 All Directors must comply with the conditions of their offer of employment/engagement as detailed in Appendices 1 6 prior to confirmation of appointment. All relevant checks will be carried out prior to final checking and an unconditional offer being made. All conditional offers will be conditional on meeting the statutory requirements.

7.1.6 Joint appointment across different NHS Trusts



Where joint appointments of a board member can help foster joint decision-making, enhance local leadership, and improve the delivery of integrated care. Joint appointments may occur where:

- two or more NHS organisations want to create a combined role and/or
- two or more NHS organisations have entered a formal 'Group' or shared arrangement.
- two or more NHS organisations want to employ an individual to work across the different NHS organisations in the same role.

In the case of joint appointments, the full FPPT is to be completed by the designated host/employing organisation. The assessment for the appointee should be completed with input from the Chair of the other contracting organisation.

The host/employing organisation will then provide a 'letter of confirmation' to the other contracting organisation to confirm that the board member in question has met the requirements of the FPPT along with copies of the required paperwork to the Group Company Secretary's Office.

For the avoidance of doubt, where two or more organisations employ or appoint (in the case of a chair or NED) an individual for two or more separate roles at the same time, each organisation has a responsibility to complete the FPPT.

If the FPPT assessment at one organisation finds an individual not to be FPP, the Chair should update their counterpart of any other NHS organisation(s) where the individual has a board-level role and explain the reason. To note, the issue at one organisation may be one of role-specific competence, which may not necessarily mean the individual is not FPP at the other organisation.

7.1.7 Shared roles within the same NHS Organisation

Where two individuals share responsibility for the same board member role (e.g a job share) within the same NHS organisation, both individuals should be assessed against the FPPT requirements.

7.1.8 <u>Temporary Absence</u>

For the purpose of the FPPT process, a temporary absence is defined as leave for a period of six consecutive weeks or less (e.g sick leave, compassionate leave, or parental leave) and where the NHS organisation is leaving the role open for the same board member. As such there is no requirement to approve another permanent individual for the role of board member.

Where there is a temporary absence the People Director in liaison with the Chair and Chief Executive Officer will ensure temporary cover is provided. Where an individual is appointed as temporary/interim cover and is not already assessed as fit and proper, the Trust will ensure appropriate supervision by an existing board member.

A full FPPT assessment will be undertaken for an individual in an interim cover role exceeding six weeks. The full FPPT assessment will be commenced as soon as the Trust becomes aware of the extension.



- **7.1.9** A failure or refusal by a candidate for appointment to comply with any of the details set out in this procedure will immediately disqualify that person from the proposed appointment.
- 7.1.10 The Group Company Secretary will notify the People Director of any issues or impediment under the F&PPT to an appointment. They will notify any prospective candidate who has applied for a Director/Very Senior post, as soon as is practicable, should that individual be determined to be ineligible under the FPPT process and any conditional offer of employment or engagement will be withdrawn.

7.2 Existing Directors

- **7.2.1** The Trust will issue Directors with a Fit and Proper Person Test Self- attestation form on an annual basis as set out in **Appendix 4** and the office of the Group Company Secretary will ensure they are completed.
- 7.2.2 If a concern regarding an individual is brought to the attention of the Trust, an investigation will be carried out by an appropriate person/body dependent on the particular circumstances (usually the Group Company Secretary and, where appropriate, the Senior Independent Director (SID).

Where an individual's fitness to carry out their role is being investigated appropriate interim measures may be required. This may mean that an individual's duties need to be temporarily varied or closely supervised, and in some cases exclusion from duty may be warranted.

The Trust reserves the right to withhold pay at any stage during the period of exclusion if it believes that the individual is unreasonably delaying the investigation process or is in breach of the terms of the exclusion.

For individuals employed on contracts for service, the contract may be suspended, without payment of fees whilst the investigation takes place. Where it is considered appropriate, the investigation in the case of employed Directors will follow the principles set out in the Trust's disciplinary policy.

7.3 Evidence

NHSe requires certain information to be available as evidence in respect of Directors employed or appointed by the Trust is retained as part of their record of employment The information required is set out in Schedule 3 of the Regulations and section 4.1 of this procedure. A news starter/annual NHS FPPT Self Attestation Form and Checklist relating to this information (Appendix 4) and (Appendix 8) will be completed for each Director and placed on their personal file. At an inspection, the CQC can require sight of these records to confirm whether the F&PPT has been met.

7.4 Confidentiality

All information provided by a person in accordance with this procedure will be kept confidential in accordance with the Trust's confidentiality policy. However, a person seeking to demonstrate that they are a 'fit and proper person' in accordance with this procedure consents to the Trust disclosing to the regulators, to the extent that it is



necessary any personal information and confidential information for the purpose of undertaking the checks required by this procedure and for the related purposes of this procedure.

7.4.1 Personal Data

Personal data relating to the FPPT assessment will be retained in local record systems and specific data fields in the NHS Electronic Staff Record (ESR). The information contained in these records will not routinely be accessible beyond the Trust.

The Trust, NHS Business Services Authority will be responsible for data control for all trust board member data uploaded in ESR. For the purposes of Article 26 UK GDPR, the NHS England has put in place 'transparent arrangements' to set out its responsibilities in this respect. NHS England established the most lawful basis for processing the FPPT data contained in ESR as set out in Article 6(1)(e) UK GDPR. The trust would also rely on Article 9 (b) of GDPR as special category data would be used in connection with employment purposes.

7.4.2 Privacy Notice

Appendix 6 is a list of the data items that are collected for the FPPT assessment. The privacy notice is on the trust intranet http://trustnet.xrwh.nhs.uk/privacy-policy/

Processing of this data is necessary on the lawful basis set out in Article 6(1)(e) UK GDPR as the foundation for the database. This is because it relates to the processing of personal data which is necessary for the performance of the fit and proper person test which is carried out in the public interest and/or in the exercise of official authority vested in the controller.

For CQC-registered providers, ensuring directors are fit and proper is a legal requirement for the purposes of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and organisations are required to make information available.

8.0 Financial Risk Assessment

1	Does the implementation of this procedure require any additional Capital resources	No
2	Does the implementation revenue resources of this procedure require additional	No
3	Does the implementation of this procedure require additional manpower	No
4	Does the implementation of this procedure release any manpower costs through a change in practice	No
5	Are there additional staff training costs associated with implementing this procedure which cannot be delivered through current training programmes or allocated training times for staff	No

9.0 Equality Impact Assessment

An initial equality analysis has been carried out and it indicates that there is no likely adverse impact in relation to Personal Protected Characteristics as defined by the Equality Act 2010.

10.0 Maintenance

The People Director with the Group Company Secretary will ensure that document is kept up to date. The Resourcing Lead



will recommend to the Trust board any changes as and when is directed by regulatory bodies.

11.0 Communication and Training

The procedure will be promoted via the Trust intranet for staff and through induction for new Directors.

12.0 Audit and Monitoring Process

Compliance with this procedure will be upheld and regularly monitored by the Trust Board. People Director and an audit of the annual check of the FPPT signed self- attestation from shall also take place.

Criterion	Lead	Monitoring method	Frequency	Committee
Competency Framework as criteria for appraisals for board members	Company Secretary Chair of the Trust	FPPT employment checks and data audit report from ESR data	Annually	Trust Board and NHS England
Annual self- attestation form completed by board members	Company Secretary	Annual Self attestation check list and compliance rate report.	Annually Appointment of News Starers	Trust Board and NHS England
Annual Return to NHSe	Chair of the Trust Company Secretary	Copy of return	Annual	External Audit Audit Committee
Internal CQC Well- led Assessments	Company Secretary	Copy of return	Bi-Annual	Quality Committee

13.0 References

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Fit and Proper Persons Test



Appendix 1 - NHS Guiding Principles

The seven guiding principles that govern the way the NHS operates, and define how it seeks to achieve its purpose:

- 1. The NHS provides a comprehensive service, available to all.
- 2. Access to NHS services is based on clinical need, not an individual's ability topay.
- 3. The NHS aspires to the highest standards of excellence and professionalism.
- 4. The patient will be at the heart of everything the NHS does.
- 5. The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities, and the wider population.
- 6. The NHS is committed to providing best value for taxpayers' money and the most effective, fair, and sustainable use of finite resources.
- 7. The NHS is accountable to the public, communities, and patients that it serves.



Appendix 2 - The NHS Core Values

These principles are underpinned by the core NHS values, which have been derived from extensive discussions with staff, patients, and the public. The values are integral to creating a culture where patients come first in everything the NHS does.

These values are not intended to be limiting. Individual NHS organisations should use them as a basis on which to develop their own values, adapting them to local circumstances. The values should be considered when developing services with partner NHS organisations, patients, the public and staff.

The six core values are:

- 1. Working together for patients.
- 2. Respect and dignity.
- 3. Commitment to quality of care.
- 4. Compassion.
- 5. Improving lives.
- 6. Everyone counts.



Appendix 3 - (Nolan) Principles of Conduct in Public Life

The Nolan Committee was established in 1994 to examine concerns about standards of conduct of all holders of public office, including arrangements relating to financial and commercial activities, and make recommendations as to any changes in arrangements which might be required to ensure the highest standards of propriety in public life. The Committee published 'Seven Principles of Public Life' (in Ministerial Code 2010, Annex A) to apply to all those operating in public service sector.

NHS board members, in their capacity as public office holders, are expected to abide by the 'Nolan Principles' as defined by the Committee on Standards in Public Life:

1. Selflessness

Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family, or their friends.

2. Integrity

Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships.

3. Objectivity

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.

4. Accountability

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.

5. Openness

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.

6. Honesty

Holders of public office should be truthful.

7. Leadership

Holders of public office should exhibit these principles in their own behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour wherever it occurs.



Appendix 4 - New Starter/Annual NHS FPPT Self-Attestation Form

"FIT AND PROPER PERSON TEST"

SELF-DECLARATION FORM AND EVIDENCE CHECKLIST

It is a condition of your employment/office, as well as a CQC requirement, that those holding director and director-equivalent ("Director") 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 and the Health and Social Care Act 2008 (Regulated Activities) Regulations 2008 ("the Regulated Activities Regulations").

This self-declaration requires you to provide a response against set criteria. The criteria fall into four distinct categories and assess "fitness" giving consideration to:

- Good character and the unfit person test
- Qualifications, Competence, Skills and Experience
- Health
- Serious misconduct or mismanagement in carrying out a regulated activity

You are therefore required to provide a response against each of the set criteria within 14 days of being sent this self-declaration form and, should you answer yes to any given criteria, **a full response must be given** using the spaces provided or, alternatively, by attaching a separate document.

The information that you provide in this declaration form will be processed in accordance with the Data Protection Act 2018 It will be used for the purpose of determining that you are a "Fit and Proper Person" in line with Regulated Activities Regulations and CQC requirements and a copy will be stored on your personal file.

The questions which appear in the table below must be answered upon appointment and on a yearly basis, save that DBS checks are carried out at three yearly intervals following appointment.



1. Good Character and Unfit PersonTest

No.	Criteria	For completion by Director	For completion by Group Company Secretary's Office
1.	Have you completed an Enhanced DBS check with Barred List information in the previous 3 years?		Yes □ No□ (NB – DBS checks are undertaken for eligible post-holders only and where required must be obtained upon appointment and at three yearly intervals. HR to confirm to the director whether a DBS check is required, and whether it is standard or enhanced)
1b	Are you 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 in Scotland or Northern Ireland?	Yes □ No□	
1c.	Have you 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?	Yes □ No□	
2.	Are you a disqualified director?	Yes □ No□	Attach search of disqualified directors register Is it clear?
3.	Have you been involved in a Parliamentary and Health Service Ombudsman investigation or report? If the answer is yes, please attach a copy of the report.	Yes □ No□	Attach website search Is it clear?
4.	Are you an undischarged bankrupt or a person whose estate has had sequestration awarded in respect of it and who has not been discharged?	Yes □ No□	Attach bankruptcy check Is it clear?
5.	Are you the subject of a bankruptcyrestrictions order, an interim bankruptcy restrictions order, or an order to like effect in Scotland or Northern Ireland?	Yes □ No□	Attach bankruptcy check Is it clear?
6.	Are you a person to whom a moratorium period under a debt relief order applies under Part VIIA (debt relief orders) of the Insolvency Act 1986?	Yes □ No□	Attach insolvency check Is it clear?



No.	Criteria	For completion by Director	For completion by Group Company Secretary's Office
7.	Are you a person who has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it?	Yes □ No□	
8.	As a skilled professional do you hold registration/membership of the relevant statutory or professional body? If so which body?	Yes □ No□	Attach search of professional register
9.	Do you/have you had any limitations on this registration/membership or has your fitness to practice ever been subject to investigation?	Yes □ No□	Are there any conditions on registration or membership?
10.	Have you been erased, removed or struck-off a register of professionals maintained by a regulator of health care of social work professionals?	Yes □ No□	
11.	Are you prohibited from holding the position you hold, or from carrying out the regulated activity, by or under any enactment?	Yes □ No□	
12.	Are you currently under investigation for, or have you ever found to have committed any act of fraud, bribery, theft, or financial misconduct, whether or not this has resulted in a criminal conviction?	Yes □ No□	
13.	I confirm receipt of, and my agreement to abide by the Code of Conduct for Trust Boards and the Trust Standing Orders	Yes □ No□	
tional i —	nformation from Director:		



2. Qualifications, Competence, Skills and Experience

No.	Criteria	For completion by Director	For completion by Group Company Secretary's Office
1.	Do you have the necessary qualifications, competence, skills and experience to perform your role?	Yes □ No□	
2.	Have you provided documentary evidence of your qualifications?	Yes □ No□	Check original certificates and attach copies confirming checked against originals
3.	If applicable, are you registered with the relevant professional regulator?	Yes □ No□	
4.	Have you provided a copy of your up-to-date CV which sets out your full employment history, including a written explanation for any employment gaps?	Yes □ No□	Check copy CV and attach [this will be obtained upon appointment]
5.	Do you consider that you share the values of the organisation and have a caring and compassionate nature?	Yes □ No□	
6.	Do you have access to appropriate ongoing development and support? Have you had an appraisal?	Yes □ No□	Date of appraisal:

Addition	al information from	Director:		
				·



3. Health

No		by Director	For completion by Group Company Secretary's Office
1.	Do you have a health condition or disability that requires adjustments in the workplace to enable you to undertake your role, or requires restrictions to your role? If so, please provide details below.		Attach Occupational Health Clearance and details of any adjustments

dditiona	al informatio	n from Di	rector:			
-						
<u>-</u>						
-						

4. Serious Misconduct or Mismanagement

No	Criteria	For completion by Director	For completion by Group Company Secretary's Office
1.	Have you been responsible for, been privy to, contributed to, or facilitated any serious misconduct or mismanagement (whether unlawful or not) in the course of carrying out a regulated activity in the UK, or an equivalent service overseas? Please provide details below or attach a separate document detailing any serious misconduct or mismanagement issues.	Yes □ No□	Ensure that reference request template covers off this question
2.	Have you or any of your previous employers had any notable issues highlighted as a result of CQC inspections? Please provide any further information below.	Yes □ No□	

Additional	al information fr	om Director:		
_				
_				



5. Further Information CQC has Right to Require

	Criteria	For completion by Director	For completion by Group Company Secretary's Office
1.	Have you provided two forms of photographic personal identification and one document confirming your address, or one form of photographic personal identification and two documents confirming your address?		Yes □ No□
2.	Have you provided proof of your right to work in the United Kingdom?		Yes □ No□

6. Other names used, aliases, registrations under maiden or other names*

Initial	Choose which applies and initial as appropriate						
	I have no other names under which I am known Or						
	I have other names under which I am known. They are listed below:						

As part of the Fit and Proper Persons requirements, the Trust has to undertake searches relating to Directors. It is therefore important that if you are known by and/or conduct business under another name, that it is declared.

*Other names include identities used on Social Media accounts eg. Twitter, Instagram, Facebook et al. If the name is linked to a Social Media presence also include the Social Medial Channel, eg. Twitter, Facebook et al. Add any further names below:

Name 1	
Name 2	
Name 3	
Name 4	



Name 5		
Name 6		
Name 7		
Other com	pany names at	a different registered address*
Initial	Choose which app	plies and initial as appropriate
	I have no othe	r companies or interests registered elsewhere
	or	
	I have other co	ompanies or interests registered elsewhere. They are listed below.
Trading name)	Registered Company Address (if other than home address*)
time to tir carry out information employments	ne) regarding the my role at the or on may lead to th ent or engageme g obligation to in nd Proper Perso	I from time to time) and CQC guidance/information (as amended from a Fit and Proper Persons test, and that I am a Fit and Proper Person rganisation. I understand that the provision of any false or misleading ne offer of my employment or engagement being withdrawn or my ent being terminated, without further notice to me. I confirm my form the organisation of any circumstances which may affect my state on or any other grounds which impact upon my employment or
Name:		Signed:
Position:		Date:
Please re	turn this comple	ted form to Group Company Secretary's Office:
<u>jaswinder</u>	.toor2@nhs.net	for WHT and <u>Suneta.banga1@nhs.net</u> for RWT
checklist	has been compl	Proper Persons self-declaration form for directors and the evidence leted Signed:
ivallic		oigned

Position: Group Company Secretary

Date:



Appendix 5 - Fit and Proper Person Test - Procedural Steps

Clauses and Declarations

- 1. FPPT clause in contracts of employment and interim contracts for service.

 "It is a condition of your continuing employment that you remain a fit and proper person as required by the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and the guidance issued by Monitor and the Care Quality Commission as amended from time to time.
- 2. FPPT self-attestation from to be signed upon appointment and annually.

Process Steps - Upon Appointment

- 1) All initial checks undertaken by the Resourcing Department.
- 2) Directors asked to sign the employment contract with the FPPT clause and self-attestation.
- 3) The supplying company signs the contract for service that incorporates the FPPT clause; the actual individual being supplied signs the self-attestation form at **Appendix 4**.
- 4) The FPPT checklist **(Appendix 8)** is maintained/ticked for each individual, which the Group Company Secretary signs when all checks have been made to their satisfaction (the Chief People Officer does this for the People Director).
- 5) The People Director will consider gaps in employment etc. In general, the reason for leaving a previous position.
- 6) Completed FPPT processes for Directors will be reported to the Remuneration and Terms of Service Committee.
- 7) Completed FPPT processes for Non-Executive Directors is undertaken by the Trust Development Authority and reported to the Remuneration and Terms of Service Committee.
- 8) Any concerns or unacceptably incomplete data for Non-Executive Directors will be discussed by the Chair with the Trust Development Authority and the outcome reported to the Remuneration and Terms of Service Committee. In the case of the Chair, the Chief Executive will undertake the discussion with the Trust Development Authority and the outcome will be reported to the Remuneration and Terms of Service Committee.
- 9) Any concerns or unacceptably incomplete data for other Directors not referred to in paragraph 8 above will be discussed with the Chief Executive (Chair in the case of the Chief Executive). The People Director or the Chief Executive will make a recommendation as to next steps and where this is the case, it will be reported to the Remuneration and Terms of Service Committee for information.

In the case of a candidate for a director appointment if the recommendation is still to support the appointment of the individual, this must be referred to the Remuneration and Terms of Service Committee for the final decision.

Annual Checks

- Annual checks will be completed during January each year, co-ordinated by the People Director.
- 2) Individuals (employees, contractors, and non-executive directors) will be required to sign the FPPT self-attestation form.
- 3) The FPPT checklist is maintained/ticked for each Director, which the People Director signs when all checks have been made to their satisfaction. The Chief Executive does this for the People Director Completed annual FPPT checks will be reported to the Remuneration and Terms of Service Committee (usually in March).
- 4) Any concerns about Directors, will be discussed with the Chief Executive or Chair, as appropriate and referred to the Remuneration and Terms of Service Committee for a decision about next steps. The Remuneration and Terms of Service Committee will consider what employment processes need to be followed if any.



Appendix 6 - Types of personal Information & Consent to retain on Electronic Staff Record (ESR)

The type of personal information we collect is in relation to the FPPT for board members and is described below, much of which is already collected and processed for other purposes than the FPPT: Additional consent is required to enter and retain non-standard/additional information as per the national Guidance for the purposes of inclusion as required in standard references as and when requested.

- 1) Name, position title (unless this changes
- 2) Employment history This would include detail of all job titles, organisation, departments, dates, and role descriptions.
- 3) References.
- 4) Job description and person specification in their previous role.
- 5) Date of medical clearance.
- 6) Qualifications.
- 7) Record of training and development in application/CV.
- 8) Training and development in the last year.
- 9) Appraisal incorporating the leadership competency framework has been completed.
- 10) Record of any upheld, ongoing, or discontinued disciplinary, complaint, grievance, adverse employee behaviour or whistle-blow findings.
- 11) DBS status.
- 12) Registration/revalidation status where required.
- 13) Insolvency check.
- 14)A search of the Companies House registers to ensure that no board member is disqualified as a director.
- 15) A search of the Charity Commission's register of removed trustees.
- 16) A check with the CQC, NHS England and relevant professional bodies where appropriate.
- 17) Social media check.
- 18) Employment tribunal judgement check.
- 19) Exit reference completed (where applicable).
- 20)Annual self-attestation signed, including confirmation (as appropriate) that there have been no changes.

I do/do not (delete as appropriate) consent to the additional information described above being added to my Electronic Staff Record.

Signed (name)	l itle	Date

In cases where consent is not given, the information will be held in the physical file record retained

in line with the national guidance.



Appendix 7 - Board Member Reference Request

Standard Request: - To be used only AFTER a conditional offer of appointment has been Made:

[Date]

Human resources officer/name of referee

Resourcing Officer

External/NHS organisation receiving request

HR Department initiating request.

Dear [HR officer's/referee's name]

Re: [applicant's name] - [ref. number] - [Board Member position]

The above-named person has been offered the board member position of [post title] at the [name of the NHS organisation initiating request]. This is a high-profile and public facing role which carries a high level of responsibility. The purpose of NHS boards is to govern effectively, and in so doing build patient, staff, public and stakeholder confidence that the public's health and the provision of healthcare are in safe hands.

Taking this into account, I would be grateful if you could complete the attached confirmation of the employment request as comprehensively as possible and return it to me as soon as practically possible to ensure timely recruitment.

Please note that under data protection laws and other access regimes, applicants may be entitled to information that is held on them.

Thank you in advance for your assistance in this matter.

Yours sincerely

[Recruitment officer's name]



Board Member Reference To be used only AFTER a Information provided in the	conditional off is reference re	er of appointment ha	s been mad						
time the request was fulfilled. 1. Name of the applicant (1)									
2. National Insurance number or date of birth									
3. Please confirm emp			dates in	oach provious role					
A:(if you are completing this ret NHS, you may not have this int your organisation) B: (As part of exit reference and	ference for pre-en formation, please	nployment request for son state if this is the case ar	meone currei nd provide rei	ntly employed outside the levant dates of all roles within					
Job Title	Date From		Date To						
4. Please confirm the applicant's current/most recent job title and essential job functions (if possible, please attach the Job Description or Person Specification as Appendix A): (This is for Executive Director board positions only, for a Non-Executive Director, please just confirm current job title)									
5. Please confirm Appremuneration in curre question only applies to Execute board positions applied for)	nt role (this	Starting:		Current:					
6. Please confirm all L (this question only applies to E.				during employment:					
7. How many days about than annual leave) has the appethe last two years of their employment how many episodes? (only applicable if being request conditional offer of employment.	olicant had over loyment, and in	Days Absent:		Absence Episodes:					



8. Confirmation of reason for leaving:						
9. Please provide details of when	ou last complete	d a check with th	e Disclosure			
and Barring Service (DBS) (This question is for Executive Director appointn already a current member of an NHS Board)	nts and non-Executive D	Director appointments w	here they are			
Date DBS check was last	Date:					
completed.						
Please indicate the level of DBS check undertaken	Level:					
(basic/standard/enhanced without barred list/or						
enhanced with barred list)	Adults					
If an enhanced with barred list check was undertaken, please	Children					
indicate which barred list this	Both					
applies to 10. Did the check return any						
information that required further	Yes □	No				
investigation? If yes, please provide a summary of	ny follow up action	s that need to/are	e still heina			
actioned:		TO triat rioda to/art				
44 Diagon confirms if all annual						
11. Please confirm if all annual appraisals have been						
undertaken and completed	Yes □	No				
(This question is for Executive Director appointments and non-Executive Director						
appointments where they are already a current member of an NHS Board)						
Please provide a summary of the ou appraisals:	come and actions t	to be undertaken i	for the last 3			
12. Is there any relevant inform	tion					
regarding any outstanding, uphel discontinued complaint(s) or other	or					
matters tantamount to gross						
misconduct or serious misconduc	-					
mismanagement including grieva		□ No				
or complaint(s) under any of the I policies and procedures (for exan						
under the Trust's Equal Opportun						
Policy)?						
(For applicants from outside the NHS please cor	DIETE AS					



far as possible considering the arrangements and policy within the applicant's current organisation and position)							
If yes, please provide a summary of the posi-	•	nt) any findings and					
any remedial actions and resolution of those actions:							
13. Is there any outstanding, upheld or							
discontinued disciplinary action under							
the Trust's Disciplinary Procedures							
including the issue of a formal written							
warning, disciplinary suspension, or	Yes	No 🗆					
dismissal tantamount to gross or							
serious misconduct that can include but							
not be limited to:							
Criminal convictions for offences leading to a contange of imprisonment							
leading to a sentence of imprisonment or incompatible with service in the NHS							
Dishonesty							
Bullying							
, ,							
Discrimination, harassment, or							
victimisation							
Sexual harassment							
Suppression of speaking up							
 Accumulative misconduct 							
(For applicants from outside the NHS please complete as							
far as possible considering the arrangements and policy within the applicant's current organisation and position)							
If yes, please provide a summary of the posi	tion and (where releva	nt) any findings and					
any remedial actions and resolution of those	actions:	, ,					
14. Please provide any further information							
fitness and propriety, not previously cover	•	-					
Person Test to fulfil the role as a director,							
Alternatively state Not Applicable. (Please		the CQC definition					
of good characteristics as a reference poi		Commission					
Regulation 5: Fit and proper persons: dire (cqc.org.uk)	ectors - Care Quality (<u> </u>					
The Health and Social Care Act 2008 (Reg	ulated Activities) Rec	ulations 2014					
(legislation.gov.uk)		10.0010110 EV 1T					



15. The facts and dates referred to in the answers good faith and are correct and true to the best of	•
Referee name (please print):	. Signature:
Referee Position Held:	
Email address:	Telephone number:
Date:	
<u>Data Protection:</u>	
This form contains personal data as defined by the D implementation of the General Data Protection Regul requested by the Human Resources/ Workforce Deparecruitment and compliance with the Fit and Proper P healthcare bodies. It must not be used for any incomp Resources/Workforce Department must protect any it form and ensure that it is not passed to anyone who i information.	lation). This data has been artment for the purpose of Person requirements applicable to patible purposes. The Human nformation disclosed within this





Appendix 8

Fit and Proper Person Checklist

FPPT Area	Record in ESR	Local evidence folder	Recruitment Test	Annual Test	ED	NED	Source	Notes
First Name	√	✓	✓	x – unless change	√	√		
Second Name/Surname	√	✓	√	x – unless change	√	√		Recruitment team to populate ESR.
Organisation (i.e., current employer)	√	х	✓	N/A	√	✓	Application and	For NHS-to-NHS moves via ESR / Inter-Authority
Staff Group	√	Х	√	x – unless change	✓	✓	recruitment process.	Transfer/ NHS Jobs. For non-NHS – from
Job Title Current Job Description	√	✓	√	x – unless change	√	√		application – whether recruited by NHS
Occupation Code	√	Х	√	x – unless change	✓	√		England, in-house or through a recruitment
Position Title	√	х	✓	x – unless change	✓	√		agency.



FPPT Area	Record in ESR	Local evidence folder	Recruitment Test	Annual Test	ED	NED	Source	Notes
Employment History Including: • job titles • organisation/ departments • dates and role descriptions gaps in employment	√	х	√	x	✓	*	Application and recruitment process, CV, etc.	Any gaps that are because of any protected characteristics, as defined in the Equality Act 2010, do not need to be explained. The period for which information should be recorded is for local determination, taking into account relevance to the person and the role. It is suggested that a career history of no less than six years and covering at least two roles would be the minimum. Where there have been gaps in employment, this period should be extended accordingly.
References Available references from previous employers	✓	✓	✓	х	✓	✓	Recruitment process	Including references where the individual resigned or retired from a previous role
Last Appraisal and Date	✓	√	✓	√	✓	*	Recruitment process and annual update following appraisal	* For NEDs, information about appraisals is only required from their appointment date forward. No information about appraisals in previous roles is required.
Disciplinary Findings That is, any upheld finding pursuant to any NHS organisation policies or procedures concerning employee behaviour, such as misconduct or mismanagement	√	√	✓	√	✓	✓	Reference request (question on the new Board Member Reference).	The new BMR includes a request for information relating to investigations into disciplinary matters/ complaints/ grievances and speak-ups against the board member. This includes information in relation to open/ ongoing investigations, upheld findings and discontinued investigations that are relevant to FPPT. This question is applicable to board members recruited both from inside and outside the NHS.
Grievance against the board member	√	\	✓	√	√	√	ESR record (high level)/local	
Whistleblowing claim(s) against the board member	✓	→	✓	√	√	√	case management	
Behaviour not in accordance with organisational values and behaviours or related local policies	✓	√	✓	✓	✓	✓	system as appropriate.	
Type of DBS Disclosed	√	√	√	√	✓	✓	ESR and DBS response.	Frequency and level of DBS in accordance with local policy for board members. Check annually whether the DBS needs to be reapplied for. Maintain a confidential local file note on any matters applicable to FPPT where a finding from the DBS needed further discussion with the board member and the resulting conclusion and any actions taken/required.
Date DBS Received	✓	✓	✓	✓	✓	√	ESR	Date DBS Received
Date of Medical Clearance*	✓	Х	✓		✓	✓	Local	Date of Medical Clearance* (including confirmation of OHA)

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/:	1		1	1		1		T
(including confirmation of OHA)				x – unless			arrangements	
OTIA)				change				
Date of Professional Register Check (e.g membership of professional bodies)	√	X	✓	√	✓	Х	E.g NMC, GMC, accountancy bodies.	Date of Professional Register Check (e.g membership of professional bodies)
Insolvency Check	V	√	√	√	√	V	Bankruptcy and Insolvency register	Keep a screenshot of check as local evidence of check completed.
Disqualified Directors Register Check	√	√	√	√	√	~	Companies House	
Disqualification from being a Charity Trustee Check	✓	✓	✓	✓	✓	✓	<u>Charities</u> <u>Commission</u>	
Employment Tribunal Judgement Check	√	✓	√	√	√	✓	Employment Tribunal Decisions	
Social Media Check	√	√	√	√	✓	✓	Various – Google, Facebook, Instagram, etc.	
Self-Attestation Form Signed	√	✓	√	√	√	✓		Appendix 4
Sign-off by Chair/CEO	✓	х	✓	✓	✓	✓		Includes free text to conclude in ESR fit and proper or not. Any mitigations should be evidence locally.
Other Templates to be Complete	ed					1	T =	
Board Member Reference	✓	✓	X	X	✓	✓	Template BMR	To be completed when any board member leaves for whatever reason and retained career-long or 75th birthday whichever latest. Appendix 2 in Framework.
Letter of Confirmation	Х	✓	✓	✓	✓	√	Template	For joint appointments only - Appendix 4 in Framework.
Annual Submission Form	Х	✓	√	√	✓	✓	Template	Annual summary to Regional Director - Appendix 4 in Framework.
Privacy Notice	Х	√	х	Х	√	✓	Template	Board members should be made aware of the proposed use of their data for FPPT – Example in Appendix 6.
Settlement Agreements	x	✓	*	~	✓	✓	Board member reference at recruitment/any other information that comes to light ongoing.	Chair guidance describes this in more detail. It is acknowledged that details may not be known/disclosed where there are confidentiality clauses.

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Appendix 9 - Regional Director Annual NHS FPPT Submission Form

NAME OF ORGANISATION	NAME OF CHAIR	FIT AND PROPER PERSON TEST PERIOD / DATE OF AD HOC TEST:

Part 1: FPPT outcome for board members including starters and leavers in period

Name	Date of appointment	Position	Confirmed	d as fit and proper?		Leavers only
			Yes/No	Add 'Yes' only if issues have been identified and an action plan and timescale to complete it has been agreed	Date of leaving and reason	Board member reference completed and retained? Yes/No

Part 2: FPPT reviews / inspections

Use this section to record any reviews or inspections of the FPPT process, including CQC, internal audit, board effectiveness reviews, etc.

Reviewer / inspector	Date	Outcome	Outline of key actions required	Date actions completed
CQC				
Other, e.g internal				



audit, review board, etc.		
Part 3:		

art J.						
DELARATION FOR WAL	SALL HEALTHCA	RE NH	S TRUST – INSE	ERT YEAR		
For the SID/deputy cha	ir to complete:					
						Fit and proper?
	Completed by (role	e)	Name	Da	ate	Yes/No
FPPT for the chair (as board member)						
Have all board members	been tested and	Yes/N	lo	<u>.</u>	If 'no', provide detail:	
concluded as being fit an	nd proper?					
Are any issues arising fro	om the FPPT	Yes/No		If 'no', provide detail:		
being managed for any board member						
who is considered fit and proper?						
		declar	e that the FPPT s	submission is	complete, and the	conclusion drawn is based on
testing as detailed in the	FPPT framework.					
Chair signature:						
Date signed:						
For Regional Director to	o complete					
Name						
Signature						
Date						



Part A - Document Control

Procedure number and	Procedu	re Title:	Status:	Author: Vivian Brobbey
version: GGI06 V1	Group Fit a	and Proper	Final	Resourcing Lead
	Policy			Keith Wilshere Group Company Secretary Chief Officer Sponsor:
				Clair Bond People Director
				Keith Wilshere Group Company Secretary Chair
Version /	Version	Date	Author	Reason
Amendment History WHT Version	1.0	24/09/2015	Linday Storey, Trust Interim Secretary	First Version/New Policy
	1.1	June 2022	Wendy James	Extension until 30/09/2022. TMC Ref 284/22
	1.2	17/10/2023	Vivian Brobbey- Sarpong, Resourcing Lead	Amendments following Regulatory Body recommendations and guidelines
GGI06 V1	1.0	22/04/2025	As above plus Keith Wilshere, Group Company secretary	Revisions in line with recently published National guidance

Intended Recipients:

All directors and people performing the functions of or functions equivalent or similar to the functions of a director.

Those individuals who by virtue of their profession are members of other professional registers, such as the General Medical Council (GMC) or Nursing and Midwifery Council (NMC).

- Associate Medical Directors
- Designated Director equivalent roles appointed from time to time.
- Both executive and non-executive directors (NED) irrespective of voting rights
- Director of informatics
- Director of Place
- Group Chief People Officer
- Group Medical Director
- Head of Nursing
- Individuals who are called 'directors within Regulation 5 of the Health and Care Act 2008 (Regulated Activities) Regulation 2014.
- Interim (contractual forms) as well as permanent appointments to the above roles

Consultation Group / Role Titles and Date:			
People and Organisational Development	17th September 2015		
Committee			
Board Nominations and	24th September 2015		
Remuneration Committee	•		



Trust Policy Management Core Group Trust Policy Group	12 th May 2025 9 th June 2025
Trust Policy Management Core Group Trust Policy Group	12th May 2025 9 th June 2025
Date of procedure issue	12/6/2025
Review Date and Frequency (standard review frequency is 3 yearly unless otherwise indicated.	9/6/2028 Every 3 years or as and when there are regulatory changes that require further amendments.

Training and Dissemination:

The procedure will be promoted via the Trust intranet page and through induction for new directors and upon promotion.

Communicated via the Trust daily those.

Training provided to the Chair as the overseer for FPPT.

Training provided to the Resourcing Team and ESR team who will be involved in the employment checks and reporting on for staff group that this procedure applies to.

Publishing Requirements: Can this document be published on the Trust's public page: Yes

If yes, you must ensure that you have read and have fully considered it meets the requirements outlined in sections 1.9, 3.7 and 3.9 of OP01, Governance of Trust-wide

Strategy/Policy/Procedure/Guidelines and Local Procedure and Guidelines, as well as considering any redactions that will be required prior to publication.

To be read in conjunction with:

Capability Policy

Disciplinary Policy

Dispute and Resolution Policy

Employment Checks Policy

Equality, Diversity, and Inclusion Policy

Raising Concerns at work (Whistleblowing) Policy

Recruitment and Selection Policy

	· · · · · · · · · · · · · · · · · · ·			
Initial Equality Impact Assessment(all policies): Yes				
Monitoring	The monitoring report will cover:			
arrangements	FPPT employment checks and data audit report from ESR data.			
and	Annual Self attestation check list and compliance rate report.			
Committee	The report will be submitted to the Trust Board and NHS England			
	annually and as and when required.			

Document summary/key issues covered.

To set out how the Trust will meet its regulatory requirements to ensure that all Directors and people 'performing the functions of, or functions equivalent or similar to the functions of, such a director' are, and continue to be, fit and proper persons to carry out their roles.

To support the establishment and implementation of the Fit and Propper Person Test Framework following the Kark Review.

Appropriate systems and processes to ensure compliance with The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Fit and Proper Persons provisions.

Key words for intranet searching purposes	FPPT, Fit, Proper Person