Ashford and St. Peter's Hospitals NHS Foundation Trust

| COUNCIL OF GOVERNORS | | | |
|---|---|---|---|
| **Date of meeting** | 11 September 2025 | **Agenda Item** | 8.1 |
| **Author(s)** | Jo Fanning, Chief People Officer, Sal Maughan, Associate Director of Corporate Affairs and Governance | **Confidential** | NO |
| **Exec Sponsor** | Jo Fanning, Chief People Officer | **Date submitted** | 4 Sept 2025 |
| **Title of paper** | Fit and Proper Persons Declaration 2025 | | |
| **Presented by** | Jane Dickson, Non-Executive Director and Mark Roland, Chief Medical Officer | | |

**Committee(s) where paper has been discussed previously and outcome of discussion:**

This paper was previously shared with Trust Board on 14 August 2025.

**Strategic Objective(s)**

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| **Quality of Care** | | **People** | x | **Modern Healthcare** | | **Digital** | | **Collaborate** | |

**Executive Summary**

NHS England developed a Fit and Proper Person Test (FPPT) Framework in response to recommendations made by Tom Kark KC in his 2019 review of the FPPT (the Kark Review). This also considers the requirements of the Care Quality Commission (CQC) in relation to directors being fit and proper for their roles. The framework is a means of retaining information relating to testing the requirements of the FPPT for individual directors, a set of standard competencies for all board directors, a new way of completing references with additional content whenever a director leaves an NHS board, and extension of the applicability to some other organisations, including NHS England and the CQC.

In 2024 NHS England introduced the Leadership Competency Framework for Board members to be used as part of the FPPT.

This paper summarises the current frameworks and provides assurance of compliance for the Trust.

| | |
|---|---|
| **Recommendation** | For: Decision ☐ Discussion ☐ Information ☒ |
| **Key issues: State impact/implications and mitigation** | |
| Quality, safety & patient impact | |
| Employee | |
| Other stakeholder(s) | |
| Equality, diversity & inclusion | |

| | |
|---|---|
| Finance | |
| Legal | |
| **Risk(s) Identified (include link to Corporate Risk Register / Strategic (Board Assurance Framework) Risks:** | |
| N/A | |

Ashford and St. Peter's Hospitals
NHS Foundation Trust

| TRUST BOARD | | | |
|---|---|---|---|
| **Date of meeting** | 14 August 2025 | **Agenda Item** | 7.2 |
| **Author(s)** | Jo Fanning, Chief People Officer, Sal Maughan, Associate Director of Corporate Affairs and Governance | **Confidential** | NO |
| **Exec Sponsor** | Jo Fanning, Chief People Officer | **Date submitted** | |
| **Title of paper** | Fit & Proper Persons Declaration 2025 | | |
| **Presented by** | Jo Fanning, Chief People Officer | | |

**Committee(s) where paper has been discussed previously and outcome of discussion:**

n/a

**Strategic Objective(s)**

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Quality Of Care | | People | x | Modern Healthcare | | Digital | | Collaborate | |

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| | |
|---|---|
| Recommendation | For: Decision ☐ Discussion ☐ Information ☒ |
| Key issues: State impact/implications and mitigation (detailed info should be in the report) | |
| Quality, safety & patient impact | NHSE states the aim of the enhanced framework is to strengthen patient safety and good leadership in the NHS. |
| Employee | Well-led NHS organisations and better-led teams with both strong teamwork and strong governance translate into greater staff wellbeing and better clinical care. This requires accountable Board members. |
| Other stakeholder(s) | There are services who support the implementation and governance of the FPPT framework and these areas have been involved in the submission and recording of the declaration information. |

| | |
|---|---|
| Equality, diversity & inclusion | The leadership competency framework sets out the importance of EDI as one of the 6 key domains. |
| Finance | There are no costs related with the implementation of the FPPT framework. |
| Legal | Compliance with the Fit and Proper Person Test is a requirement under Section 5 of the Health and Social Care Act |
| Risk(s) Identified (include link to Corporate Risk Register / Strategic (Board Assurance Framework) Risks: | |
| N/a | |

# Fit and Proper Persons Test

## 1. INTRODUCTION

1.1. The Kark Review (2019) was commissioned by the government in July 2018 to review the scope, operation and purpose of the Fit and Proper Person Test (FPPT) as it applies under the current Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This included looking at how effective the FPPT is: "… in preventing unsuitable staff from being redeployed or re-employed in the NHS, clinical commissioning groups, and independent healthcare and adult social care sectors."

1.2. The review highlighted areas that needed improvement to strengthen the existing regime and of the seven recommendations made by Tom Kark KC, five were taken forward under a new FPPT Framework which became effective from 30th September 2023.

1.3. The framework outlines the checks to be undertaken when new Board members are appointed and an annual checking process for existing Board members.

1.4. The Trust is required to complete an annual return to NHS England, signed by the Chair to confirm all FPPT checks have been carried out in line with the framework. This has been completed for the financial year 2024/25.

## 2. FRAMEWORK PRINCIPLES

2.1. The FPPT is applicable to all board members: Executive and Non-executive, interim and permanent, and voting and non-voting. The FPPT is carried out on an individual board member basis, and in the annual submission to the NHS England regional director, the chair provides the overall summary of the FPPT outcome for their board.

2.2 The Framework sets out:

- When the full FPPT assessment is needed, which includes self-attestations
- New appointment considerations
- Additional considerations in specific situations such as joint appointments, shared roles and temporary absences
- The role of the chair in overseeing the FPPT
- The FPPT core elements to be considered in evaluating board members
- The circumstances in which there will be breaches to the core elements of the FPPT (regulation 5)
- The requirements for a board member reference check
- The requirements for accurately maintaining FPPT information on each board member in the ESR record
- The record retention requirements
- Dispute resolution
- Quality assurance over the Framework

2.3 Ultimate accountability for adhering to this framework resides with the chair of an NHS organisation, who is required to make an annual return to NHS England.

2.4 The Trust has a Fit and Proper Persons Test policy, ratified in May 2025, that outlines the roles and responsibilities and processes involved in complying with the framework.

**3. Leadership Competency Framework**

3.1 The Kark review of the FPPT included a recommendation for 'the design of a set of specific core elements of competence, which all directors should be able to meet and against which they can be assessed'. The NHS Leadership Competency Framework for Board Members responds to that recommendation and forms part of the FPPT.

3.2 The framework was published in 2024 and is for chairs, chief executives and all board members in NHS systems and providers, as well as serving as a guide for aspiring leaders of the future. It is designed to:

- support the appointment of diverse, skilled and proficient leaders
- support the delivery of high-quality, equitable care and the best outcomes for patients, service users, communities and our workforce
- help organisations to develop and appraise all board members
- support individual board members to self-assess against the six competency domains and identify development needs.

3.3 The framework sets out six domains of competency that all Board members should be assessed against at appointment and appraisal:

- Driving high-quality and sustainable outcomes
- Setting strategy and delivering long-term transformation
- Promoting equality and inclusion, and reducing health and workforce inequalities
- Providing robust governance and assurance
- Creating a compassionate, just and positive culture
- Building a trusted relationship with partners and communities

3.4 The framework included an optional scoring guide for Board members to use to support the use of the competencies within recruitment and appraisal.

3.5 In April 2025 new guidance was issued for the completion of Board member appraisals. It outlines NHS England's expectations and recommendations in the completion of board member appraisals. It has been developed in service of board effectiveness and to ensure a consistent and standard approach to appraisal whether the appraisee is an executive or non-executive director.

3.6 NHS England expects a board member appraisal:

- is a compilation of mid-year reviews, check-ins and ongoing dialogue about performance and development from throughout the previous year
- incorporates the six domains of the NHS Leadership Competency Framework (LCF) in assessment, discussion and documentation.
- looks forward to the forthcoming year, including objectives and development incorporates annual multi-source feedback
- has objectives that:
    - clearly link personal objectives to organisational priorities
    - are SMART (Specific, Measurable, Achievable, Relevant, Timebound) considering the context of the appraisee's operating environment and any factors outside of their control
    - include an EDI-specific objective (as outlined in the NHS Equality, Diversity, and Inclusion Improvement plan) and are documented and reviewed.
- takes a developmental approach, which includes development opportunities identified considering the Leadership Competency Framework (LCF), Healthcare Leadership Model, values and behaviours, as well as opportunities to build on strengths
- for chairs and CEOs – the relationship between these two roles is pivotal to the success of an organisation and regular assessment of the relationship is important. The annual appraisal process for both post holders should include a clear reflection on how the partnership is progressing. In conducting/ facilitating the chair appraisal, the Senior Independent Director (SID) should draw upon views to assess the overall dynamic.

**4. Implementation of frameworks**

4.1 The Trust has carried out the required checks on new Board appointments since it was introduced in 2023. There has been some learning as the process has become embedded with some checks being initially missed in relation to internal appointments, but these have now been addressed.

4.2 The Trust has carried out an annual rechecking process in line with the requirements for 2023/24 and 2024/25. This includes the completion of individual self-attestations from all Board members. The records of checks are held within the Electronic Staff Record, as required by the framework.

4.3. Board member references are held in line with the framework for all Directors who have left the Trust since the introduction of the framework.

4.4 The Trust has introduced the Leadership Competency framework into appraisals since its introduction, with Board member self-reflection and 360 feedback utilising the competencies.

4.5 The new Board member appraisal template has been partially introduced, with some appraisal preparation already commenced, since its introduction in April 2025. There

has been some feedback from those who have used it that that the framework is complicated and that the format could detract from the quality of conversation.

4.6 The appraisal template will be fully implemented for the next appraisal cycle, following review of how the format may be streamlined, where possible.

4.7 The Chair submits a return to NHS England by 30 June each year confirming they have reviewed the FPPT information for all Board members and is satisfied that the appropriate checks have been undertaken. A requirement of this return is to also confirm the Leadership competency framework has been utilised.

4.8 The returns have been submitted with no concerns around compliance for 2023/24 and 2024/25.

4.9 The Trust is currently undertaking an internal audit of our compliance with the FPPT.

**5. Conclusions**

5.1 The frameworks introduced provide a level of consistency and transparency to the oversight of Board members within the NHS. The report demonstrates the ongoing development of the frameworks and the Trust compliance.

5.2 Further governance for Board members is expected through the introduction of regulation of senior managers within the NHS. Details of this are expected later in 2025.

5.3 The Board is asked to note this paper.