Worksheet "CoS7"

Financial Year to which self-certification relates

Please complete the

2024/25

	Declaration required by Continuity of Service condition 7 of the	NHS provider	licence			
	The board are required to respond "Confirmed" or "Not confirmed" to the following statements (please select 'not confirme option). Explanatory information should be provided where required.	od' if confirming another				
1	Continuity of services condition 7 - Availability of Resources (FTs designated CRS only)					
la	After making enquiries the Directors of the Licensee have a reasonable expectation that the Licensee will have the Required Resources available to it after taking account distributions which might reasonably be expected to be declared or paid for the period of 12 months referred to in this certificate.		Please Respond			
	OR					
Ь	After making enquiries the Directors of the Licensee have a reasonable expectation, subject to what is explained below, that the Licensee will have the Required Resources available to it after taking into account in particular (but without limitation) any distribution which might reasonably be expected to be declared or paid for the period of 12 months referred to in this certificate. However, they would like to draw attention to the following factors (as described in the text box below) which may cast doubt on the ability of the Licensee to provide Commissioner Requested Services.	Confirmed	Please fill details in cell E2			
	OR	·				
с	In the opinion of the Directors of the Licensee, the Licensee will not have the Required Resources available to it for the period of 12 months referred to in this certificate.		Please Respond			
	Statement of main factors taken into account in making the above declaration In making the above declaration, the main factors which have been taken into account by the Board of Directors are as follows:					
	Locally, the Dorset Integrated Care System continues to operate under significant pressure, with high demand for urgent and emergency care services and a significant number of patients in acute hospitals who no longer meet the criteria to reside.					
	The Dorset ICS will submit a final operational plan which includes a financial deficit of £21m, within which the Trust has a planned break-even financial plan. There remains considerable risk within this plan reflecting the significant operational pressues together with the recurrent impact of not being able to achieve recurrent efficiencies due to numerous periods of Industrial Action during the current year.		E)			
	The risks to the availability of required resources consistent with operating within this context have been highlighted in the Trust's annual plan. These risks have been recorded in the Trust's risk register and are regularly monitored and reviewed together with the associated plans to mitigate these risks.					
	In approving its annual plan the Board of Directors has taken into account the reserves of the Trust, which would enable It to allocate additional resources as required, and the fact that it has provisional contract values agreed with commissioners.					
	It is recognised that this remains a draft plan and further work is being undertaken to mitigate financial risk and identify further opportunities to reduce the deficit further.					
	Signed on behalf of the board of directors, and, in the case of Foundation Trusts, having regard to the views of i	the governors				
	Signature	mek	21-			
	Name Rob Whiteman Name Slobhan Harrington	5				
	Capacity Chief Executive					
	Date 10/05/2020 Date 2524					

_	neet "Training of governors"	Financial Year to which self-certification relates	2023/24	Piesse Respond
iic	ation on training of governors (FTs only)			
7	"he Board are required to respond "Confirmed" or "Not confirmed" to U	he following statements. Explanatory information should be provided	d where required.	
т	raining of Governora			
G	The Board is satisfied that during the financial year most recently or sovemors, as required in a151(5) of the Health and Social Care Ac eed to undertake their role.	nded the Licensee has provided the necessary training to its ct, to ensure they are equipped with the skills and knowledge they	Confirmed	ox
s	igned on behalf of the Board of directors, and, in the case of Four	idation Trusts, having regard to the views of the governors		
	Signature	Signature SOBHOUT	andon	
	Name Rob Witteman	Name Stochten Hamington		
	Date 10 5 2024	Date		
Fi	urther explanatory information should be provided below where the	Reard has been unable to confirm dealarations under A4		
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