**Our survey on the NHS provider licence for NHS foundation trusts**

**About this survey**

Please share your views on the NHS provider licence through this questionnaire. We're grateful for any insights and evidence you can offer. The questionnaire will be available to complete between June and September 2014.   
  
We will then communicate out what we’ve heard, alongside any proposed next steps, in Autumn 2014. Depending on your feedback, the next steps may involve more detailed research.   
  
In addition, we will be holding a series of workshops with the sector. Find out more at the end of this survey. If you prefer, you can complete an online version of this survey [here](https://www.research.net/s/KBBMH25).

**Impact of the licence**

1. **Has the NHS provider licence had an impact on how your organisation is led and governed?**

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| --- | --- |
|  | No |
|  | Yes |

If yes, please tell us how

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1. **Are there any aspects of the licence which are problematic for your organisation?**

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| --- | --- |
|  | No |
|  | Yes |

If yes, please tell us how

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1. **Has CRS designation raised any issues for your trust?**

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| --- | --- |
|  | No |
|  | Yes |

If yes, please explain

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1. **In terms of CRS designation, what proportion of your trusts services have been reviewed so far?**

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1. **What more could Monitor do to support commissioners and foundation trusts with the process of CRS designation?**

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**The licence conditions**

Of the following licence conditions, what impact – positive, negative or neutral – have they had on patient care and also on how your organisation operates? Please elaborate on those that have had a positive or negative impact:

1. **The general conditions**Including:

* Provision of information
* Fit and proper persons
* Monitor guidance
* Systems for compliance with licence conditions and related obligations
* Registration with the Care Quality Commission
* Patient eligibility and selection criteria
* Application of continuity of services

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1. **The pricing conditions**Including:

* Recording of information
* Provision of information
* Assurance report on submissions to Monitor
* Compliance with the national tariff
* Constructive engagement concerning local tariff modifications

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1. **Choice and competition conditions**Including:

* The right of patients to make choices
* Competition oversight

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1. **The integrated care condition**Including:

* Provision of integrated care

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1. **Continuity of services conditions**

Including:

* Continuing provision of Commissioner Requested Services
* Restriction on the disposal of assets
* Standards of corporate governance and financial management
* Co-operation in the event of financial stress
* Availability of resources

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1. **NHS foundation trust conditions**Including:

* Information to update the register of NHS foundation trusts
* Provision of information to advisory panel
* NHS foundation trust governance arrangements

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1. **Are there any licence conditions that you believe offer little direct or indirect benefit to patients?**

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| --- | --- |
|  | No |
|  | Yes |

If yes, please explain which conditions and why?

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1. **Did your organisation seek any help on understanding the licence and its implications?**

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| --- | --- |
|  | No |
|  | Yes |

If yes, please explain which conditions and why?

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**Final thoughts on the licence**

1. **How do you think we could improve the operation of the licence alongside the Care Quality Commission processes?**

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1. **Could Monitor provide any further guidance that would help clarify how the licence works?**

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1. **Are there any other major concerns or insights you wish to raise about the NHS provider licence?**

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1. **We will be holding a series of workshops on the NHS provider licence.**

To find out more or to express an interest in attending, please let us know below or email us at [licencesurvey@monitor.gov.uk](mailto:licencesurvey@monitor.gov.uk)

|  |  |
| --- | --- |
| Yes, I’d like to attend a workshop |  |
| I’d like to know more about the workshops |  |
| Email address: |  |

1. **Please confirm your organisation and contact details.**

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| --- | --- |
| Name |  |
| Organisation |  |
| Are you a foundation trust? |  |
| Are you an NHS trust – aspiring to become a foundation trust? |  |
| Other |  |
| Email address: |  |
| Phone number: |  |

Thank you for your time.

If you have any questions please email [licencesurvey@monitor.gov.uk](mailto:licencesurvey@monitor.gov.uk)