

Corporate Governance Framework

September 2023

Corporate Governance Framework

	Page
1. Introduction	3
2. Purpose and Role	4
3. Legislative Context	4
4. Accountability	5
5. Governance Arrangements	6
6. Key Roles in Governance	8
7. Key Governance Processes	12
8. Independent Assurance	15
9. Scrutiny and Oversight	16
ANNEXES to the Corporate Governance Framework	
ANNEX A: Key Governance Documents	17
ANNEX B: Statutory Disclosures and Statements	19

1. Introduction

This document sets out the responsibilities and procedures that we use to make sure we govern our organisation to a high standard.

Good corporate governance ensures that public bodies are run efficiently and economically, meet their objectives, are open and transparent, are effectively held to account and deliver value for money for the public purse. Good governance requires an organisation not only to have the right principles, processes and structures in place¹, but also the right behaviours. The Board and Chair need to demonstrate the organisation's values, providing challenge and support to management in delivering its obligations and setting the tone. Good governance also enables us to deliver our strategic purpose.

The key governance principles to which we subscribe are:

- We will demonstrate effective leadership and will set clear direction.
- We will be open, transparent and accessible in the way we conduct our business.
- Everyone will be clear about their roles and responsibilities and how these contribute to delivering the strategy.
- We will be accountable and will ensure that decisions are well made and effectively implemented.
- We will manage risk and performance effectively; and
- Everyone will demonstrate their commitment to our values and will behave with integrity.

The Corporate Governance Framework will be reviewed and updated periodically, and in any case, if our remit changes as a result of new or additional functions, or new requirements in the DHSC/CQC Framework agreement.

This is a publicly available document that will be published on the NGO website.

3

¹ See Report of the Financial Reporting Council on the UK Governance Code 2018

2. The National Guardian's Purpose and Role

The National Guardian is a non-statutory appointment by the CQC to lead cultural change in the NHS where the Freedom to Speak Up review has identified issues of concern and where improvements are needed. The role has been created as a result of recommendations made by Sir Robert Francis KC's Freedom to Speak Up review. The Government committed in Learning not Blaming, published in July 2015, to creating an independent national officer or National Guardian for the Freedom to Speak Up, based at the CQC on behalf of the CQC and NHSE.

The main purpose of the role is to:

- Develop and offer guidance and support to the network of Freedom to Speak Up Guardians.
- Offer guidance on good Freedom to Speak Up practice.
- Provide national leadership on issues relating to Freedom to Speak Up by NHS workers.
- Publish reports on the findings of the National Guardian, including laying an annual report before Parliament.
- Conduct Speak Up reviews across the system and/or where organisations appear to have failed to follow good Freedom to Speak Up practice and make recommendations on action.

3. Legislative Context

The National Guardian for Freedom to Speak Up (the National Guardian) and the National Guardian Office was set up as an independent office, but not as a regulator, within the CQC from 4 April 2016.

4. Accountability

At the heart of good governance is accountability and transparency. We make ourselves accountable in a number of ways, including through publications, regular engagement with stakeholders and public consultation.

DHSC's Permanent Secretary is the Principal Accounting Officer (PAO) and so is accountable in Parliament for the general performance of the health and care system in England, including the CQC and Healthwatch England as a statutory committee of the CQC and the National Guardian's Office. The PAO of the DHSC has designated the CQC's Chief Executive as the CQC Accounting Officer (AO).

4.1 Accountability to Parliament, the Department of Health and Social Care and CQC

The information provided to the DHSC in relation to the National Guardian includes an annual report laid in Parliament (following its presentation to CQC's board, NHS England's Board in common and the DHSC).

The processes in place to enable the DHSC and the CQC to review performance include:

- Regular accountability meetings. These will take place on a quarterly basis with half yearly meetings chaired by ministers and other meetings chaired by the Senior Departmental Sponsor (SDS) and will be attended by the CQC Chief Executive. The focus of the meeting will be on strategic issues and any issues of delivery which the SDS believes it is appropriate to bring to this meeting, including compliance with the framework agreement.
- These meetings will support the shared principles and will be structured to promote openness, constructive challenge and the identification and resolution of strategic issues. An annual formal accountability review will take place to review the past year's performance against objectives and look forward to the next year.
- Meetings between ministers and the Permanent Secretary, and the Chair and the Chief Executive of the CQC. These will vary in frequency depending on the burden of the regulatory and health and social care agenda but will not be less than annual.
- Regular informal dialogue between the Department and the CQC at official level.

These arrangements will include consideration of the delivery the National Guardian's functions.

The CQC is responsible for the delivery of its objectives and the DHSC will limit the circumstances in which it will intervene in its activities. The following constraints do, however, apply:

All funds allocated to the CQC must be spent on the statutory functions
of the CQC which include those exercised by the National Guardian. If
any funds are spent outside the statutory functions of the CQC the
DHSC could seek adjustments to the grant-in-aid for running costs
(administration) to compensate.

The National Guardian will meet with Ministers twice yearly, as a minimum. The National Guardian should report at least once a year to the CQC Audit and Risk Assurance Committee and twice to the main Board to provide assurance over its processes which relate to the Chief Executive's role as Accounting Officer.

A Protocol for Public and Parliamentary Accountability has been agreed between DHSC, CQC, Healthwatch England and the National Guardian's Office. This sets out how the parties work together to secure the confidence of the public and parliament, and to maintain the service levels that MPs and the public have come to expect.

4.2 Accountability to stakeholders and the public

Freedom to Speak Up should be available to everyone in the healthcare system, irrespective of where they work.

Accountability to the public may be through the publication of information on CQC's or the National Guardian's website, as well as through responses to letters from the public and responses to requests under the Freedom of Information Act.

We produce an Annual Report which is presented the CQC Board, along with NHSE and to DHSC and laid in Parliament.

We also gather insight from people and organisations about Freedom to Speak Up on an ongoing basis and this insight comes from both within and outside the organisation. Information on our expenditure, contracts, and other information is published as part of CQC accounting in order to reflect the Government's agenda for increased transparency of public information.

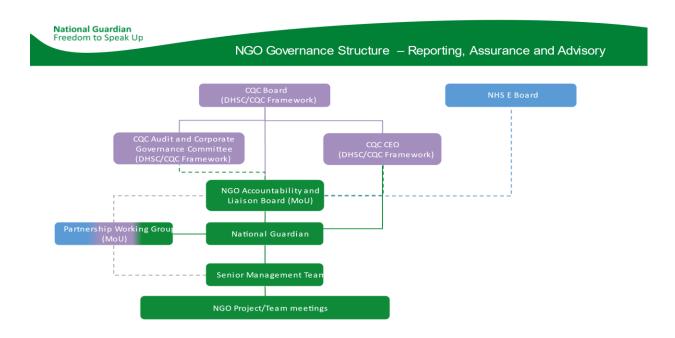
5. Governance arrangements

We receive our funding from the Department of Health via CQC and NHS England.

While our strategic framework, business plan and day-to-day decision making is our own, we comply with CQC requirements to ensure that there is proper accountability of how we are spending taxpayers' money.

We report via our Accountability and Liaison Board to CQC's CEO, Audit and Risk Assurance Committee and CQC's Board.

Key governance documents are set out at Annex A. Governance structure:



5.1 The Accountability and Liaison Board (ALB)

Purpose

- The overarching purpose of the ALB is to provide strategic advice to the National Guardian on all matters related to their work portfolio, acting as a link to the Boards of the Sponsoring organisations.
- To give assurance that the NGO operates in accordance with the DHSC/CQC Framework Agreement and relevant statutory obligations.
- To provide leadership and advice to the NGO to promote achievement of the NGO's purpose.
- To provide effective financial stewardship
- To oversee the implementation of the NGO's strategic framework and business plan.

Membership

Membership of the ALB consists of: the Independent Chair; a Non-Executive Director from NHS England; an Executive Board member from NHS England; a Non-Executive Director from the Care Quality Commission; an Executive Board member from the Care Quality Commission; a Deputy Director from the Department for Health and Social Care; and the National Guardian for the NHS.

Responsibilities of ALB

- Endorse the NGO's financial and strategic objectives, including approval of the business plan.
- Receive Speak Up Review reports and recommendations following sign off from the National Guardian.
- Provide assurance that the NGO has adequate governance, assurance and risk management in place.
- Be involved with the appointment of the National Guardian and succession plan.
- Receive the NGO's Annual Report.
- Present an annual ALB Board report to CQC's ACGC.
- Monitor the performance of the NGO via the NGO's dashboard.
- Receive and consider high level reports on matters material to the NGO.
- Ensure the NGO promotes and safeguards the health and wellbeing of its workforce.
- Promote and support development of partnerships with other organisations in accordance with the NGOs values and strategic direction.
- Engage as appropriate with the NGO's funding bodies, attending CQC
 / NHSE Board meetings as required.
- Receive reports from the Partnership Working Group, and the NGO's Senior Management Team concerning work within their Terms of Reference.

Accountability

The Board reports to CQC's CEO, Audit and Risk Assurance Committee and CQC's Board via the National Guardian and the ALB Chair (see governance arrangements above).

ALB meetings

The ALB meets at least four times a year in private session. In addition to members and NGO staff supporting the meeting, it may, at times, be necessary for other officials or NGO staff to be invited to appear at Board meetings.

5.2 ALB Effectiveness

The Independent Chair of ALB is required to comply with rules governing use of public funds, and CQC's policy on gifts and hospitality; and to make an annual declaration of interests, as well as to declare interests on relevant issues at each meeting of the ALB. Other members of ALB are expected to comply with the rules and policies of their home organisation.

The Independent Chair of ALB receives an induction into their role and into the organisation. They are also able to take up opportunities to extend their knowledge and understanding of the organisation through training.

5.3 Committees of ALB

The ALB has no statutory or formal sub-committees, but the work of the ALB is supported by the National Guardian, the NGO Senior Management Team and other NGO colleagues and the Partnership Working Group.

6. Key roles in NGO's Governance

There are a number of roles which have specific responsibilities relevant to the Governance Framework, as detailed below.

6.1 The ALB Chair

Role

The ALB Chair's role is to:

- To provide an independent, objective voice for the NGO, with effective and productive challenge, ensuring the delivery of its core functions and responsibilities.
- To promote a collaborative approach to ensure that partner organisations cooperate and effectively safeguard and promote the Freedom to Speak Up agenda, calling partners to account when this is not achieved.

- To ensure that the voice of workers is heard through their participation and feedback in all work undertaken by the board and subcommittees.
- To oversee the development of the NGO's annual report and business plan. To ensure that there are regular updates to Board meetings on progress against plan. To ensure there are regular reports to the Board on the NGO's budget and funding arrangements.
- To ensure that all NGO minutes, plans and reports are produced to a high standard and endorsed by Board members.
- To maintain an overview of the work of the NGO's sub-committees, ensuring that key issues are reported to the NGO.
- To respect the confidentiality of sensitive information provided by NGOs partners.

Term of appointment

The ALB Chair is appointed by CQC for a period of 3 years, which may be renewed for a second term.

Main responsibilities

The ALB Chair's responsibilities are:

- Oversight of NGO strategy.
- Ensuring that the ALB, in reaching decisions, takes proper account of relevant guidance.
- Promoting the efficient and effective use of staff and other resources.
- Delivering high standards of regularity and propriety.
- Representing the views of the ALB to the general public.

The Chair has particular responsibility for setting the ALB agenda, ensuring that ALB conducts its business in an open and transparent manner, that all members are able to participate fully in discussions and decisions taken by ALB and ensuring constructive relations between all participants.

Accountability

The Chair is accountable to the Chair of CQC

6.2 ALB Members

Role

ALB Members, with the Chair, have responsibility for providing strategic advice to the National Guardian; providing assurance that the NGO operates in accordance with the Framework Agreement and relevant statutory obligations; providing leadership and advice to the NGO to promote achievement of the NGO's purpose direction; and overseeing implementation of the NGO's strategic framework and business plan (see 5.1 above).

Term of appointment

The ALB Chair is appointed by CQC for a period of 3 years, which may be renewed for a second term. Each of the funding organisations represented on the Board (CQC, NHS E and DHSC) shall appoint a person to the Board. The National Guardian shall be a member of the Board during their period of appointment.

Main responsibilities

See responsibilities set out at section 5.1.

Accountability

ALB Members are accountable via the Chair.

6.3 The National Guardian

The National Guardian's Office (NGO) and the role of the National Guardian were created in response to recommendations made in Sir Robert Francis QC's report 'Freedom to Speak Up' (2015). The NGO is hosted by CQC and funded by CQC and NHSE.

The National Guardian is appointed by the Chief Executive of CQC on behalf of the CQC Board in consultation with NHSE. The NGO has a distinct role and operational independence from CQC. An Accountability and Liaison Board comprising non-executive and executive representation from NHSE, CQC and DHSC, with an Independent Chair, acts as a critical friend for the NGO, providing input and guidance on strategic plans and development.

Role

The National Guardian, a senior CQC member of staff but not a member of the Executive Team, leads the NGO in enabling those in the healthcare sector who need support to speak up.

Responsibilities

The National Guardian leads and inspires the NGO to deliver against the strategic framework, developing and communicating the strategic vision for Freedom to Speak Up. The National Guardian is responsible for controlling, monitoring and reviewing expenditure against a set budget, ensuring that spending is managed within budget and that prompt and appropriate action is taken to tackle any variances.

Accountability

The National Guardian is line managed by the CQC Chief Executive, though sets their own priorities and speaks independently of the funding bodies. CQC is accountable to DHSC for the performance and delivery of the NGO.

6.4 The Caldicott Guardian

Role

In accordance with the 1997 Caldicott Report, a CQC Board Member has been appointed as the Caldicott Guardian and is registered as such with the

DHSC. The NGO does not have its own Caldicott Guardian but refers to CQC's as required.

6.5 Senior Information Risk Owner

Role

The role of Senior Information Risk Owner (SIRO) is mandated as an Executive Director level role by the UK Government Security Policy Framework. The NGO does not have its own Senior Information Risk Owner but refers to CQC's as required.

6.6 Director of Operations and Strategy

Role

The Director of Operations and Strategy is responsible for leading on delivery of all aspects of the role of the NGO.

Responsibilities

The Director of Operations and Strategy supports the National Guardian to deliver their role by:

- Establish the role, functions and processes of the independent Office of the National Guardian and providing leadership and direction to the team.
- Building and supporting a network of FTSU guardians to help embed a set of common standards in the role and to share and reinforce good practice in the handling of staff concern.
- Overseeing a memorandum of understanding between the Office of the National Guardian and the CQC, and NHS England, to agree ways of working and support in leveraging their regulatory powers to help ensure that the National Guardian's recommendations are acted upon.
- Overseeing the development of a stakeholder engagement and communications strategy to build awareness of the National Guardian's role and highlight good practice in enabling staff to speak up safely.
- Leading the development of best practice guidance, tools, and resources to support local guardians and NHS providers in creating the right environment to ensure that staff can speak up safely; and to help signpost staff towards appropriate sources of advice and support.
- Developing a monitoring and evaluation framework to measure the benefits and impact of the work of the National Guardian's Office and reporting progress and performance through the agreed governance framework.
- Ensuring compliance of the National Guardian's Office with the CQC's core management, risk and accounting policies including information security.
- Building a capable and resilient team and demonstrating appropriate leadership behaviours to engender the values that are consistent with the role of the National Guardian.

6.7 The Senior Management Team (SMT)

Purpose

The SMT has responsibility for providing clear and focused leadership of the organisation and ensuring financial sustainability. The National Guardian leads the SMT.

Membership

The SMT comprises: the National Guardian; Director of Operations and Strategy; National Lead for Corporate and Governance; National Lead for Intelligence and Learning; National Lead for Guardian Support and Policy; and National Lead for Communications and Engagement.

Accountability

The SMT is accountable to the National Guardian and the National Guardian is accountable as set out above (see 6.3).

6.8 Head of Internal Audit

Role

The Head of Internal Audit is responsible for establishing and maintaining an independent and objective internal audit function that meets Public Sector Internal Audit Standards. As the NGO is hosted by CQC, we are subject to CQC's Internal Audit function.

7. Key governance processes

We have a number of processes and policies which support delivery of good governance. Setting strategy, business planning, performance management and risk management go hand in hand to enable our objectives to be delivered. The contribution which each process makes to good governance is described below.

7.1 Strategy setting

Our Strategic Framework was published in July 2021. Our strategic direction is to build on the improvements that Freedom to Speak Up has already made, ensuring that speaking up arrangements work consistently well. Freedom to speak up should be available to everyone in the healthcare system, irrespective of where they work. Our strategy is reviewed annually. The Accountability and Liaison Board is responsible for approving strategic priorities, the delivery priorities, and the targets against which performance will be monitored. It also considers risks which might impact on the achievement of the priorities.

7.2 Business planning and programme oversight

Our Strategic Framework has shaped our business plan which is signed off by the Accountability and Liaison Board. It is the responsibility of the Senior Management Team to approve, monitor and report progress against the annual business plan which supports delivery of the Strategic Framework.

Each SMT member is also responsible for developing their own section of the business plan demonstrating how the objectives of their team support the strategic framework, and that these cascade into individual colleagues' objectives and work-plans.

The business plan is reviewed every 6 months with the content refreshed, based on our priorities, annually. Our budgets align to our business plan activity.

7.3 Corporate Performance reporting

As part of strategic and business planning, measures have been developed which monitor our performance on key deliverables. Progress against these measures is reported monthly to the Senior Management Team, to ALB as part of management reporting to each meeting, and at least once a year by the National Guardian to the CQC and NHSE Boards.

7.4 Risk Management

The identification and effective management of risk is critical if we are to discharge our responsibilities. An effective risk management system which can anticipate risks and identify opportunities means that we can more effectively deliver our strategic priorities within budget and on time. Risks are therefore identified proactively as a core part of strategy setting and business planning processes as well as performance monitoring to ensure that risks are being managed effectively.

NGO uses CQC's risk management policies and procedures. The oversight of systems of control, especially those for managing risk, is one of the SMT's main responsibilities. The SMT (meeting as the Senior Management Board [SMB]) monitors the management of strategic risks reviewing the risk register at its monthly meetings and with a focused risk session each quarter. This system of reviewing and monitoring by the SMT ensures that there is awareness of the most significant risks and there is opportunity to make recommendations about improvements in control. Risks are discussed with CQC's CEO as part of the quarterly NGO's assurance meetings. As appropriate, risks are escalated to the ALB who receive the risk register on a quarterly basis.

Under the DHSC/CQC Framework the NGO provides assurance over its processes which relate to the Chief Executive's role as Accounting Officer:

- Annually to the CQC's Audit and Corporate Governance Committee
- Quarterly to Accountability and Liaison Board

7.5 Management Assurance Framework

Management assurance is about management gathering the necessary evidence that there are effective routine controls, proportionate to the identified risk, in place to regulate day to day business and to manage risks and prevent failures occurring; and providing assurance on this through the management chain. An effective management assurance process ensures that the controls needed to mitigate potential risks are in place and operating effectively. The NGO uses CQC's management assurance process.

7.6 Information Governance policy

The NGO follows CQC's Information Governance policies. The regulation of all information, including that which will identify individuals, is governed by a legal and governance framework set out in these policies. The purpose of the policies is to ensure that we manage information in such a way as to meet our legal obligations, protect privacy and confidentiality and maintain public trust. This includes access to information, confidentiality and data protection, assurance and risk management of information, and records and document management.

The Senior Information Risk Owner (SIRO) has responsibility for managing information risk across the organisation and for providing assurance to the Board that the data and information assets are identified, processed, transmitted, stored, and used in line with the principles of good information governance and in compliance with our legal, statutory and organisational requirements. As the NGO is hosted by CQC, our SIRO is the same as for CQC.

7.7 Complaints

About the NGO and the National Guardian respectively - CQC provide support to handle and respond to complaints about the NGO and National Guardian. The Memorandum of Understanding between the NGO, CQC and NHS England sets out the agreement to liaise and consult as appropriate in order to assist with the handling of, and response to, complaints made to the National Guardian.

About other organisations - We do not have the power to investigate individual matters of complaint, but we carry out reviews where we have information indicating barriers to speaking up.

7.8 Freedom to Speak Up policy

One of the important indicators of openness and transparency in an organisation is the way in which it allows people to raise concerns. We expect all staff who have concerns about wrongdoing at work to come forward and voice those concerns. People can speak up about anything that gets in the

way of their work or affects their working life, including concerns about wrongdoing. The policy reassures colleagues that if they raise a genuine concern about a dangerous, illegal or improper activity at work under the policy, they will not risk losing their job or suffer from any retribution. As the NGO is hosted by the CQC, we follow CQC's Freedom to Speak Up policy. There is a separate appendix to CQC's policy which sets out a speaking up framework specific to the NGO.

The policy is not for people with concerns about their employment that affects only them, which is managed under the CQC's Conflict Resolution policy.

7.9. Partnership arrangements

We need to work effectively with our partners. A Memorandum of Understanding (MoU) has been agreed between us, CQC and NHS England for the support and funding of the NGO. The MoU provides a common understanding between the parties of the support required by the NGO over a three-year period. It sets out how the arrangements between the parties will operate on a day-to-day basis.

The MoU is overseen by the Partnership Working Group (PWG). PWG meet quarterly and, in addition to overseeing the MoU, they provide advice and guidance on emerging priorities and are a liaison point within the funding organisations, ensuring that activities align and that commitment to continually support the NGO and its work is gained. The membership of PWG consists of Executive leads from CQC, NHSE and DHSC.

8. Independent Assurance

CQC's Assurance Framework provides independent assurance that the processes which we have in place to exercise control are sufficient and effective. The role of management assurance and risk management are discussed above.

8.1 Internal audit

The role of internal audit is to provide independent assurance that CQC's risk management, governance and internal control processes are operating effectively. The Head of Internal Audit produces an annual report on governance and control. As NGO is hosted by CQC, we are subject to CQC Internal Audit planning and processes.

8.2 External audit

As a public body, CQC's statutory financial statements are audited by the Comptroller and Audit General (C&AG) to ensure that they give a true and fair view of our financial position and performance, have been prepared in accordance with the directions of the Secretary of State and that income and expenditure recorded in the financial statements can be confirmed as a true

and fair view for the authorities that govern us. Our financial position is included within CQC's statutory annual reporting.

9. Scrutiny and oversight

9.1 DHSC / CQC Framework Agreement

The National Guardian's Office is covered by the DHSC / CQC Framework Agreement which sets out the framework within which CQC operates. Our business and ways of working are covered by the Agreement.

9.2 DHSC Performance and capability reviews

DHSC can undertake interim reviews should the need arise. In 2012, DHSC published the first Performance and Capability Review of CQC, following on from reports in 2011 to the Health Select Committee and the National Audit Office. The purpose of the review was to provide challenge and reassurance to the public, DHSC and Parliament that we were improving our performance and that action would be taken to build and sustain our capability for the future.

9.3 External scrutiny

As a public body accountable to Parliament, CQC is subject to external scrutiny by a range of bodies including:

- Parliamentary select committees, principally the Public Accounts Committee and the Health and Social Care Select Committee.
- The Parliamentary and Health Service Ombudsman who is responsible for investigating complaints that the NHS, government departments, agencies and other public bodies have not acted properly or fairly or have provided a poor service.
- The National Audit Office, which in addition to any audit functions can undertake efficiency and effectiveness reviews.
- The Information Commissioner, which upholds information rights in the public interest, promotes openness by public bodies and data privacy for individuals. It advises on the operation of the Freedom of Information Act 2000 and can overrule an organisation's decision not to release information. It also advises on the Data Protection Act 1998 and monitors whether an organisation is complying with the requirements of being a data controller.

KEY GOVERNANCE DOCUMENTS

1. DHSC Framework Agreement and supporting protocols

DHSC has drawn up a Framework Document in consultation with us that sets out how DHSC expects CQC to operate. Our business and ways of working are included as part of the Framework and supporting protocols:

The Framework Document is scheduled for annual review.

2. Memorandum of Understanding

We hold a Memorandum of Understanding (MoU) with our funding bodies. This sets out, at a high level, our funding and governance arrangements.

3. Service Level Agreement

We have a Service Level Agreement (SLA) with CQC that covers the services that we cannot provide for ourselves such as HR advice and support, legal expertise and procurement activities.

4. Corporate Governance Framework

The Corporate Governance Framework sets out the responsibilities and procedures that we use to make sure we govern our organisation to a high standard.

5. Our Strategic Framework

Our Strategic Framework sets our strategic direction to build on the improvements that Freedom to Speak Up has already made, ensuring that speaking up arrangements work consistently well.

The NGO is required to report to Secretary of State on progress in delivering their business plan; and report annually to Parliament.

6. Business Plan

Our Business Plan sets out the main work we will carry out between to support the delivery of our strategic framework.

7. Risk Register

We use CQC's Risk Management Policy which sets out our approach to managing risk effectively including responsibilities for risk management. Our corporate risk register sets out the key risks to our business.

8. ALB Terms of Reference

Terms of reference for the Accountability and Liaison Board (ALB) – see section 5.1 above.

Statutory disclosures and statements

1. Annual report

We are required to produce an annual report which will be laid before Parliament and then presented to the boards of CQC and NHSE, detailing the progress they have made, performance of the NGO, and a statement of its finances. No reporting by the National Guardian will be subject to approval by CQC or NHSE.

The Annual Report is published on our website.

2. Other statutory disclosures

As a public body, we are required by law to respond to certain disclosure requirements:

- We must provide responses to requests for information from Parliament and Members of Parliament, in the form of responding to Parliamentary Questions (written and oral), Prime Ministers Questions, adjournment debates, Early Day Motions, briefings for Ministerial meetings etc; and reporting to Health Select Committee and the Public Accounts Committee.
- We may also receive requests for information from the Department of Health and Social Care and, where relevant, other Government Departments
- Freedom of Information (FoI) Act 2000 requirements, including a Publication Scheme set out the classes of information which we make available, and how we must respond to Freedom of Information requests.

3. Prescribed Persons

An annual Prescribed Persons report is made by the National Guardian's Office in accordance with the Prescribed Persons (Reports on Disclosures of Information) Regulations 2017.

As required by those regulations, the report sets out the number of disclosures of information from workers made to the NGO that it reasonably believes are qualifying disclosures, as defined by section 43B of the Employment Rights Act 1996. The report also summarises how the NGO has responded to those disclosures and how they have affected the NGO's ability to perform its functions and meet its objectives.