

CORE STANDARDS ASSURANCE AT QUARTER FOUR 2008/09 COMMISSIONING AND INDEPENDENT CONTRACTORS

Purpose

This paper explains the process and final position of compliance at quarter four 2008/09, against the Standards for Better Health, assessed as part of the Healthcare Commission's Annual Health Check, in order to give the PCT Board assurance of final position through the Integrated Governance and Performance Committee.

Introduction

The Standards for Better Health set out the level of quality all organisations providing NHS care are expected to meet or aspire to across the NHS in England. Each year, as part of the Healthcare Commission's Annual Health Check, the PCT must make a self-declaration as to its level of compliance with these standards. The Standards comprise 47 Core Standards in 7 domains:

- 1) Safety
- 2) Clinical and Cost Effectiveness
- 3) Governance
- 4) Patient Focus
- 5) Accessible and Responsive Care
- 6) Care Environment and Amenities
- 7) Public Health

The PCT is required to provide assurance against 31 core standards for Commissioning and 39 for Independent Contractors; a separate declaration is to be made for the Provider Arm. For the period 2008/09, the PCT must declare against all of its Core Standards according to the following scale:

- Compliant – The PCT meets all elements of the standard
- Non-Compliant – The PCT does not meet one or more elements of the standard
- Insufficient Assurance – The PCT does not have enough evidence to give assurance of compliance.

PCT Process

For NHS Birmingham East and North, each Core Standard has been allocated an Executive Director whose responsibility it is to ensure compliance for that standard. Each Director is at liberty to nominate a service lead for each standard. The PCT is making use of the Healthcare Commission's Inspection Guides (intended for use by the Healthcare Commission when inspecting a Trust for compliance against a particular standard). These guides list detailed lines of enquiry against each element of each standard. Each lead has completed these guides with a list of the evidence available within the Trust, and an assessment of whether the Trust meets the standard. In order to assure the Board, each standard is then taken through the PCT committee structure for approval, leading to a final declaration of compliance for that particular quarter.

Appendix A provides a statement of the final position at Quarter 4 against each of the 44 standards.

Compliance

For 2007/08 the PCT were unable to declare compliance for Independent Contractors for three of its Core Standards. These were:

- C20a Safe and secure environments including protection of physical assets
- C20b Environments support patient privacy and confidentiality
- C24 Response to incidents and emergency situations including inter-agency working for annual testing

This position was rectified in quarter three 2008/09 when the PCTs clinical quality and safety team liaised with the leads for specific groups to develop methods of assurance. In particular, David Stenson, Assistant Director, Healthcare Governance, and Karen Deeny, Head of Clinical Effectiveness, had implemented a Clinical Governance Optometry Toolkit, and a Clinical Governance Dental Workbook. Together, this has enabled the PCT to assure itself against all of the core standards.

Performance Accelerator – Core Standards Assurance Module

Training for the Core Standards module on Performance Accelerator is now complete. Due to the time scales for reporting on quarter four assurance it was not possible to submit this via Performance Accelerator. During April through to June 2009 Directorates will input their inspection guides and upload evidence ready for reporting of quarter one assurance in 2009/10. This will also enable any inspection team from the Care Quality Commission to view evidence and commentary direct from the Performance Accelerator.

Recommendations

On behalf of the PCT Board, the Integrated Governance and Performance Committee are asked to:-

- Note the final position of compliance for 2008/09 against the Standards for Better Health.
- Approve the annual statement of compliance for 2008/09, which will be ratified by the Trust Board before submitting to the Care Quality Commission website by midday 1st May 2009.

Appendix A

Core Standard		Owner	Sponsor	Commissioning	Independent Contractors
C01a	Incidents – Reporting and Learning	Karen Deeny	Doug Wulff	Compliant	Compliant
C01b	Safety Alerts	Karen Deeny	Doug Wulff	Compliant	Compliant
C02	Safeguarding Children	Karen Deeny	Val Jones	Compliant	Compliant
C03	NICE interventional Procedures	Karen Deeny	Doug Wulff	Not applicable	Not applicable
C04a	Infection Control	Karen Deeny	Doug Wulff	Not applicable	Compliant
C04b	Safe Use of Medical Devices	Karen Deeny	Doug Wulff	Not applicable	Compliant
C04c	Decontamination	Karen Deeny	Doug Wulff	Not applicable	Compliant
C04d	Medicines Management	Karen Deeny	Doug Wulff	Not applicable	Compliant
C04e	Clinical Waste	James Parker	Marie Moore	Not applicable	Compliant
C05a	NICE Technology Appraisals	Karen Deeny	Doug Wulff	Compliant	Compliant
C05b	Clinical Supervision	Karen Deeny	Val Jones	Not applicable	Compliant
C05c	Updating Clinical Skills and Techniques	Karen Deeny	Val Jones	Not applicable	Compliant
C05d	Clinical Audit and Review	Karen Deeny	Doug Wulff	Not applicable	Compliant
C06	Partnership	James Parker	Marie Moore	Compliant	Compliant
C07a&c	Corporate and Clinical Governance	Rosey Monaghan	Louise Pritchard	Compliant	Compliant
C07b	Honesty, Probity, etc	Mike Burns	Jonathan Tringham	Compliant	Compliant
C07e	Discrimination	Kevin Nembhard	Louise Pritchard	Compliant	Compliant
C08a	Whistle-blowing	Michaela Bragg	Julie Cooper	Compliant	Compliant
C08b	Personal Development etc	Michaela Bragg	Julie Cooper	Compliant	Compliant
C09	Records Management	Rosey Monaghan	Louise Pritchard	Compliant	Compliant
C10a	Employment Checks	Michaela Bragg	Julie Cooper	Compliant	Compliant
C10b	Professional Code of Conduct	Michaela Bragg	Julie Cooper	Compliant	Compliant
C11a	Recruitment, Training & Skill Mix	Michaela Bragg	Julie Cooper	Compliant	Compliant
C11b	Mandatory Training	Michaela Bragg	Julie Cooper	Compliant	Compliant
C11c	Professional Development	Michaela Bragg	Julie Cooper	Compliant	Compliant
C12	Research Governance	Antony Stewart	Nicola Bengé	Compliant	Compliant
C13a	Dignity and Respect	Karen Deeny	Val Jones	Compliant	Compliant
C13b	Consent	James Parker	Marie Moore	Compliant	Compliant
C13c	Confidentiality of Patient Information	James Parker	Marie Moore	Compliant	Compliant
C14a	Accessible Complaints Procedure	Karen Deeny	Doug Wulff	Compliant	Compliant
C14b	Complainants and Discrimination	Karen Deeny	Doug Wulff	Compliant	Compliant
C14c	Complaints Response	Karen Deeny	Doug Wulff	Compliant	Compliant
C15a	Food - Provision	James Parker	Marie Moore	Not applicable	Not applicable
C15b	Individual Needs	James Parker	Marie Moore	Not applicable	Not applicable
C16	Accessible Information	Anna Shaw	Louise Pritchard	Compliant	Compliant
C17	Patient and Public Involvement	Anna Shaw	Louise Pritchard	Compliant	Compliant
C18	Equity, choice	Yvonne Richards	Louise Pritchard	Compliant	Compliant
C20a	Safe, Secure Environment	James Parker	Marie Moore	Compliant	Compliant
C20b	Privacy and Confidentiality	James Parker	Marie Moore	Not applicable	Compliant
C21	Clean, Well Designed Environments	James Parker	Marie Moore	Not applicable	Compliant
C22a&c	Public Health Partnerships	Antony Stewart	Nicola Bengé	Compliant	Not applicable
C22b	Local Health Needs	Antony Stewart	Nicola Bengé	Compliant	Not applicable
C23	Public Health Cycle	Antony Stewart	Nicola Bengé	Compliant	Compliant
C24	Emergency Preparedness	Dawn Roberts	Louise Pritchard	Compliant	Compliant

CORE STANDARDS ASSURANCE AT QUARTER FOUR 2008/09

PROVIDER ARM

Purpose

This paper explains the process and final position of compliance at quarter four 2008/09, against the Standards for Better Health, assessed as part of the Healthcare Commission's Annual Health Check, in order to give the PCT Board assurance of final position through the Integrated Governance and Performance Committee.

Introduction

The Standards for Better Health set out the level of quality all organisations providing NHS care are expected to meet or aspire to across the NHS in England. Each year, as part of the Healthcare Commission's Annual Health Check, the PCT must make a self-declaration as to its level of compliance with these standards. The Standards comprise 47 Core Standards in 7 domains:

- 8) Safety
- 9) Clinical and Cost Effectiveness
- 10) Governance
- 11) Patient Focus
- 12) Accessible and Responsive Care
- 13) Care Environment and Amenities
- 14) Public Health

The Provider Arm is required to provide assurance against 44 core standards for the period 2008/09 according to the following scale:

- Compliant – The Provider Arm meets all elements of the standard
- Non-Compliant – The Provider Arm does not meet one or more elements of the standard
- Insufficient Assurance – The Provider Arm does not have enough evidence to give assurance of compliance.

PCT Process

For NHS Birmingham East and North, each Core Standard has been allocated an Executive Director whose responsibility it is to ensure compliance for that standard. Each Director is at liberty to nominate a service lead for each standard. The PCT is making use of the Healthcare Commission's Inspection Guides (intended for use by the Healthcare Commission when inspecting a Trust for compliance against a particular standard). These guides list detailed lines of enquiry against each element of each standard. Each lead has completed these guides with a list of the evidence available within the Trust, and an assessment of whether the Trust meets the standard. In order to assure the Board, each standard is then taken through the PCT committee structure for approval, leading to a final declaration of compliance for that particular quarter.

Appendix A provides a statement of the final position at Quarter 4 against each of the 44 standards.

Compliance

This is the first time that the PCT has had to declare compliance for both its Commissioning and Provider Arm as two separate declarations. The Provider Arm has been able to assure against all of its 44 core standards for 2008/09.

Performance Accelerator – Core Standards Assurance Module

Training for the Core Standards module on Performance Accelerator is now complete. Due to the time scales for reporting on quarter four assurance it was not possible to submit this via Performance Accelerator. During April through to June 2009 Directorates will input their inspection guides and upload evidence ready for reporting of quarter one assurance in 2009/10. This will also enable any inspection team from the Care Quality Commission to view evidence and commentary direct from the Performance Accelerator.

Recommendations

On behalf of the PCT Board, the Integrated Governance and Performance Committee are asked to:-

- Note the final position of compliance for 2008/09 against the Standards for Better Health.
- Approve the annual statement of compliance for 2008/09, which will be ratified by the Trust Board before submitting to the Care Quality Commission website by midday 1st May 2009.

Appendix A

Core Standard		Owner	Sponsor	Providers
C01a	Incidents – Reporting and Learning	Karen Deeny	Marie Moore	Compliant
C01b	Safety Alerts	Karen Deeny	Marie Moore	Compliant
C02	Safeguarding Children	Karen Deeny	Marie Moore	Compliant
C03	NICE interventional Procedures	Karen Deeny	Marie Moore	Compliant
C04a	Infection Control	Karen Deeny	Marie Moore	Compliant
C04b	Safe Use of Medical Devices	Karen Deeny	Marie Moore	Compliant
C04c	Decontamination	Karen Deeny	Marie Moore	Compliant
C04d	Medicines Management	Karen Deeny	Marie Moore	Compliant
C04e	Clinical Waste	James Parker	Marie Moore	Compliant
C05a	NICE Technology Appraisals	Karen Deeny	Marie Moore	Compliant
C05b	Clinical Supervision	Karen Deeny	Marie Moore	Compliant
C05c	Updating Clinical Skills and Techniques	Karen Deeny	Marie Moore	Compliant
C05d	Clinical Audit and Review	Karen Deeny	Marie Moore	Compliant
C06	Partnership	James Parker	Marie Moore	Compliant
C07a&c	Corporate and Clinical Governance	Rosey Monaghan	Marie Moore	Compliant
C07b	Honesty, Probity, etc	Mike Burns	Marie Moore	Compliant
C07e	Discrimination	Kevin Nembhard	Marie Moore	Compliant
C08a	Whistle-blowing	Michaela Bragg	Marie Moore	Compliant
C08b	Personal Development etc	Michaela Bragg	Marie Moore	Compliant
C09	Records Management	Rosey Monaghan	Marie Moore	Compliant
C10a	Employment Checks	Michaela Bragg	Marie Moore	Compliant
C10b	Professional Code of Conduct	Michaela Bragg	Marie Moore	Compliant
C11a	Recruitment, Training & Skill Mix	Michaela Bragg	Marie Moore	Compliant
C11b	Mandatory Training	Michaela Bragg	Marie Moore	Compliant
C11c	Professional Development	Michaela Bragg	Marie Moore	Compliant
C12	Research Governance	Antony Stewart	Marie Moore	Compliant
C13a	Dignity and Respect	Karen Deeny	Marie Moore	Compliant
C13b	Consent	James Parker	Marie Moore	Compliant
C13c	Confidentiality of Patient Information	James Parker	Marie Moore	Compliant
C14a	Accessible Complaints Procedure	Karen Deeny	Marie Moore	Compliant
C14b	Complainants and Discrimination	Karen Deeny	Marie Moore	Compliant
C14c	Complaints Response	Karen Deeny	Marie Moore	Compliant
C15a	Food - Provision	James Parker	Marie Moore	Compliant
C15b	Individual Needs	James Parker	Marie Moore	Compliant
C16	Accessible Information	Anna Shaw	Marie Moore	Compliant
C17	Patient and Public Involvement	Anna Shaw	Marie Moore	Compliant
C18	Equity, choice	Yvonne Richards	Marie Moore	Compliant
C20a	Safe, Secure Environment	James Parker	Marie Moore	Compliant
C20b	Privacy and Confidentiality	James Parker	Marie Moore	Compliant
C21	Clean, Well Designed Environments	James Parker	Marie Moore	Compliant
C22a&c	Public Health Partnerships	Antony Stewart	Marie Moore	Compliant
C22b	Local Health Needs	Antony Stewart	Marie Moore	Compliant
C23	Public Health Cycle	Antony Stewart	Marie Moore	Compliant
C24	Emergency Preparedness	Dawn Roberts	Marie Moore	Compliant