

**THE LEEDS TEACHING HOSPITALS NHS TRUST**  
**BRIEFING NOTE FOR OVERVIEW AND SCRUTINY COMMITTEE**  
**24 MARCH 2009**

The Leeds Teaching Hospitals NHS Trust's declaration for 2007/8 indicated that all of the core standards were met with the exception of just 4 elements (see attached schedule) and had no significant lapses. 2 of these elements were compliant by 31<sup>st</sup> March 2008. Action plans were put in place for achieving compliance with the remaining 2 elements in 2008/09. We intend to declare compliance with both these standards at 31 March, subject to Board review.

In addition to these 2 non-compliant elements, the Trust has been focusing attention in 2008/09 on a further 3 elements which we feel need particular attention, as can be seen on the attached schedule. This is due to changes in the guidance for achieving these particular standards, requiring additional actions in order to be compliant.

A meeting was held between Trust Executive Directors and representatives from the Healthcare Commission on 30 January 2009 to review progress and agree the position in terms of compliance against these standards for 2008/09 and confirm the actions in those areas that will be declared non-compliant. Standard Domain Leads (Executive Directors) met on 12 February 2009 to review risk areas and agree the current position in relation to compliance with each of the standards, including specific actions required for 2008/09. The Trust Board will reassess the position against all the core standards on 26 March 2009 and review progress against the action plans to determine the current position for the full year declaration in 2008/09 and projections for 2009/10.

The Trust continues to develop detailed planning guidance each year for each of the standards to ensure the current position is maintained and improvements are made in relation to compliance with each of the standards and this remains core to our business planning processes.

We believe we have developed a robust process enabling our Trust Board to be assured of the standards we are achieving, which has the added value of external validation by the HCC.

Hugo Mascie-Taylor  
**Medical Director**

Craig Brigg  
**Director of Quality**

Domain	Core Standard	2007/08 Compliant Y/N	Specific focus in 2008/9
<b>Safety</b>	<b>Generic</b>		
C1: Healthcare organisations protect patients through systems that:	a) identify and learn from all patient safety incidents and other reportable incidents, and make improvements in practice based on local and national experience and information derived from the analysis of incidents	Y	
	b) ensure that patient safety notices, alerts and other communications concerning patient safety which require action are acted upon within required timescales.	Y	
C2: Healthcare organisations:	protect children by following national child protection guidelines within their own activities and in their dealings with other organisations.	Y	
C3: Healthcare organisations:	protect patients by following National Institute for Clinical Excellence (NICE) interventional procedures guidance.	Y	
C4: Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that:	a) the risk of healthcare acquired infection to patients is reduced, with particular emphasis on high standards of hygiene and cleanliness, achieving year on year reductions in MRSA	N	*
	b) all risks associated with the acquisition and use of medical devices are minimised	Y	*
	c) all reusable medical devices are properly decontaminated prior to use and that the risks associated with decontamination facilities and processes are well managed	N	*
	d) medicines are handled safely and securely	Y	
	e) the prevention, segregation, handling, transport and disposal of waste is properly managed so as to minimise the risks to the health and safety of staff, patients, the public and the safety of the environment.	Y	
<b>Clinical and Cost Effectiveness</b>	<b>Generic</b>		
C5: Healthcare organisations ensure that:	a) they conform to National Institute for Clinical Excellence (NICE) technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care	Y	
	b) clinical care and treatment are carried out under supervision and leadership	Y	
	c) clinicians continuously update skills and techniques relevant to their clinical work	Y	
	d) clinicians participate in regular clinical audit and reviews of clinical services	Y	*
C6: Healthcare organisations:	cooperate with each other and social care organisations to ensure that patients' individual needs are properly managed and met	Y	
<b>Governance</b>			
C7: Healthcare organisations:	a) apply the principles of sound clinical and corporate governance	Y	
	b) actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources	Y	
	c) undertake systematic risk assessment and risk management (including compliance with the controls assurance standards)	Y	
to be assessed outside declaration process	d) ensure financial management achieves economy, effectiveness, efficiency, probity and accountability in the use of resources	Not assessed	
	e) challenge discrimination, promote equality and respect human rights	Y	
to be assessed outside declaration process	f) meet the existing performance requirements (list of targets)	Not assessed	
C8: Healthcare organisations support their staff through:	a) having access to processes which permit them to raise, in confidence and without prejudicing their position, concerns over any aspect of service delivery, treatment or management that they consider to have a detrimental effect on patient care or on the delivery of services	Y	
	b) organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under-representation of minority groups	Y	
C9: Healthcare organisations:	have a systematic and planned approach to the management of records to ensure that, from the moment a record is created until its ultimate disposal, the organisation maintains information so that it serves the purpose it was collected for and disposes of the information appropriately when no longer required	N	
C10: Healthcare organisations:	a) undertake all appropriate employment checks and ensure that all employed or contracted professionally qualified staff are registered with the appropriate bodies	Y	
	b) require that all employed professionals abide by relevant published codes of professional practice	Y	
C11: Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare:	a) are appropriately recruited, trained and qualified for the work they undertake	Y	
	b) participate in mandatory training programmes	Y	
	c) participate in further professional and occupational development commensurate with their work throughout their working lives	Y	

C12: Healthcare organisations:	which either lead or participate in research have systems in place to ensure that the principles and requirements of the research governance framework are consistently applied	Y	
<b>Patient Focus</b>	<b>Generic</b>		
C13: Healthcare organisations have systems in place to ensure that:	a) staff treat patients, their relatives and carers with dignity and respect	Y	
	b) appropriate consent is obtained when required, for all contacts with patients and for the use of any confidential patient information	Y	
	c) staff treat patient information confidentially, except where authorised by legislation to the contrary	Y	
C14: Healthcare organisations have systems in place to ensure that patients, their relatives and carers:	a) have suitable and accessible information about, and clear access to, procedures to register formal complaints and feedback on the quality of services	Y	
	b) are not discriminated against when complaints are made	Y	
	c) are assured that organisations act appropriately on any concerns and, where appropriate, make changes to ensure improvements in service delivery	Y	
C15: Where food is provided healthcare organisations have systems in place to ensure that:	a) patients are provided with a choice and that it is prepared safely and provides a balanced diet	Y	
	b) patients' individual nutritional, personal and clinical dietary requirements are met, including any necessary help with feeding and access to food 24 hours a day	Y	
C16: Healthcare organisations:	make information available to patients and the public on their services, provide patients with suitable and accessible information on the care and treatment they receive and, where appropriate, inform patients on what to expect during treatment, care and after care	Y	
<b>Accessible and responsive care</b>			
C17:	The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services	Y	
C18: Healthcare organisations:	enable all members of the population to access services equally and offer choice in access to services and treatment equitably	Y	
C19: Healthcare organisations: to be assessed outside declaration process	ensure that patients with emergency health needs are able to access care promptly and within nationally agreed timescales, and all patients are able to access services within national expectations on access to services	Not assessed	
<b>Care environment and amenities</b>	<b>Generic</b>		
C20: Healthcare services are provided in environments which promote effective care and optimise health outcomes by being:	a) a safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation	Y	
	b) supportive of patient privacy and confidentiality	Y	
C21: Healthcare services are provided in environments which promote effective care and optimise health outcomes by being:	well designed and well maintained with cleanliness levels in clinical and non-clinical areas that meet the national specification for clean NHS premises	Y	*
<b>Public health</b>			
C22: Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by:	a) cooperating with each other and with local authorities and other organisations	Y	
	b) ensuring that the local Director of Public Health's annual report informs their policies and practices	Y	
	c) making an appropriate and effective contribution to local partnership arrangements including local strategic partnerships and crime and disorder reduction partnerships	Y	
C23: Healthcare organisations:	have systematic and managed disease prevention and health promotion programmes which meet the requirements of the national service frameworks (NSFs) and national plans with particular regard to reducing obesity through action on nutrition and exercise, smoking, substance misuse and sexually transmitted infections	Y	
C24: Healthcare organisations:	protect the public by having a planned, prepared and, where possible, practiced response to incidents and emergency situations which could affect the provision of normal services	Y	

Note: C7d, e and C19 are not assessed by the Healthcare Commission as part of the Declaration process