# Briefing Note for Overview and Scrutiny Committee – 17 March 2008
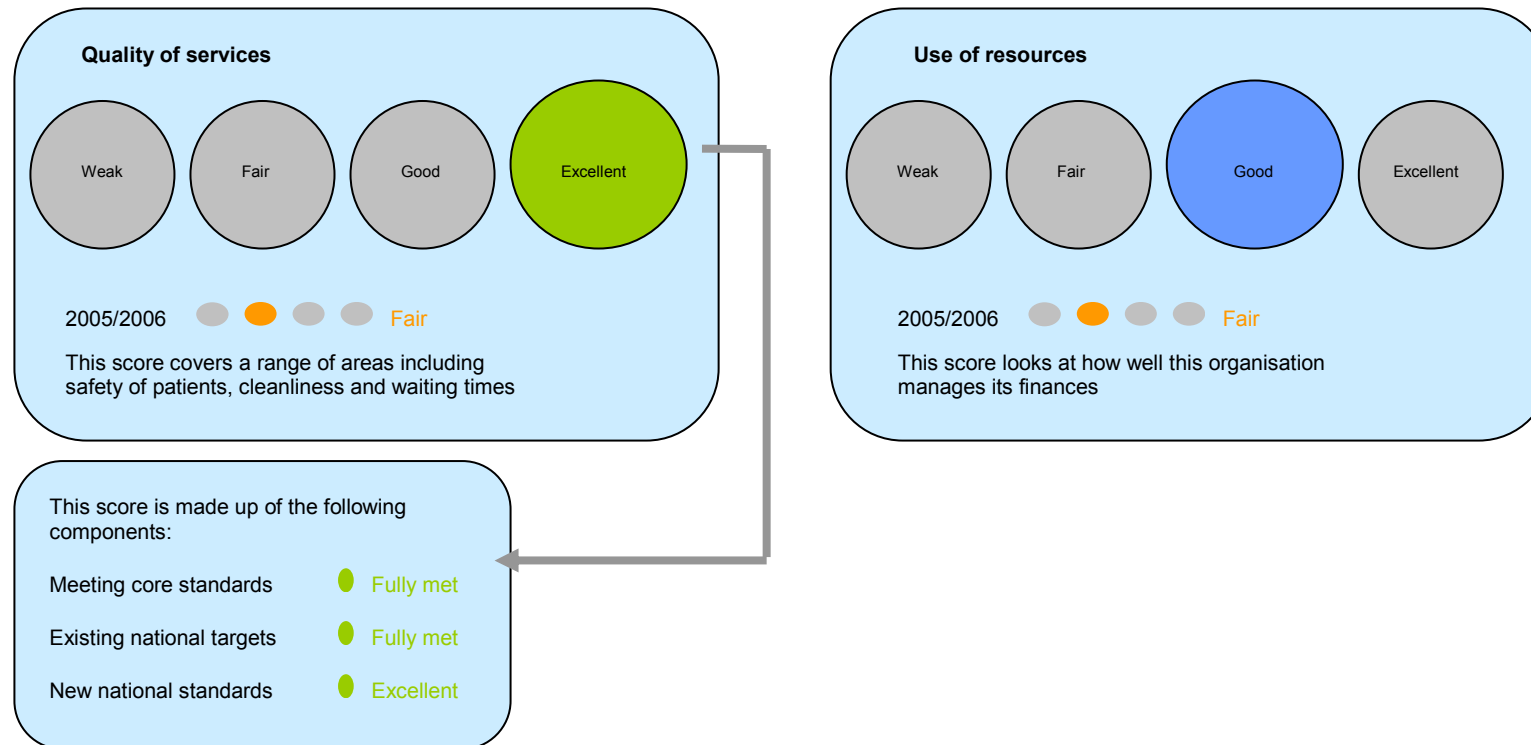
Leeds Partnerships NHS
NHS Foundation Trust

Leeds Partnerships NHS Foundation Trust's declaration for 2006/7 indicated that we met all the core standards.

During the period 1 April 2006 to 31 March 2007 the Trust Board believe that there were no significant lapses in meeting the core standards other than in C1a and C11b where compliance was achieved from 1 September 2006 and 1 March 2007 respectively.

The Trust Board will re-assess our position against all core standards on 24 April 2008 to determine our current position for the full year 2007/2008.

We continue to work towards maintaining and improving the core standards and ensure that this remains an important element of our business planning process. The Healthcare Commission confirmed our internal assessment when they published the 2006/2007 Annual Health check ratings and where we were rated as excellent for our "Quality Services" and good for our "Use of Resources".

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.

**Quality of services**

Weak    Fair    Good    Excellent

2005/2006    Fair

This score covers a range of areas including safety of patients, cleanliness and waiting times

**Use of resources**

Weak    Fair    Good    Excellent

2005/2006    Fair

This score looks at how well this organisation manages its finances

This score is made up of the following components:

| Meeting core standards | Fully met |
| Existing national targets | Fully met |
| New national standards | Excellent |

**Chris Butler**
**Trust Chief Executive**

**Guy Musson**
**Trust Director of Finance and Performance**

## Core Standards

The Annual Health Check is the Healthcare Commission's system for assessing healthcare organisations. One element of the Annual Health Check is the assessment of core standards, which describe a service which is acceptable and which must be universal. The chart below shows the core standards and LPFT's assessment of overall compliance in 2006/07. The Board will be asked to ratify the Trust's Annual Health Check declaration for 2007/08 at its April meeting and the declaration will be submitted to the Health Care Commission by 30th April 2008. No significant breach has been identified in any core standard in year.

| Domain | Core Standard | 2006/7 declaration |
|---|---|---|
| **Safety** | **Patient safety is enhanced by the use of healthcare processes, working practices and systematic activities that prevent or reduce the risk of harm to patients** | |
| 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.<br>b) ensure that patient safety notices, alerts and other communications concerning patient safety, which require action, are acted upon within required timescales | C1a compliant from Sept 2006 |
| C2: Healthcare organisations: | protect children by following national child protection guidelines within their own activities and in their dealings with other organisations. | |
| C3: Healthcare organisations: | protect patients by following National Institute for Health and Clinical Excellence (NICE) interventional procedures guidance | |
| 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 Methicillin-Resistant Staphylococcus Aureus (MRSA)<br>b) all risks associated with the acquisition and use of medical devices are minimised<br>c) all reusable medical devices are properly decontaminated prior to use and that the risks associated with decontamination facilities and processes are well managed<br>d) all medicines are handled safely and securely<br>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 | |
| **Clinical and Cost Effectiveness** | **Patients achieve healthcare benefits that meet their individual needs through healthcare decisions and services, based on what assessed research evidence has shown provides effective clinical outcomes.** | |
| C5: Healthcare organisations ensure that: | a) they conform to National Institute for Health and Clinical Excellence (NICE) technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care<br>b) clinical care and treatment are carried out under supervision and leadership<br>c) clinicians1 continuously update skills and techniques relevant to their clinical work<br>d) clinicians participate in regular clinical audit and reviews of clinical services | |
| C6: Healthcare organisations | Co-operate with each other and social care organisations to ensure that patients' individual needs are properly managed and met | |
| **Governance** | **Managerial and clinical leadership and accountability, as well as the organisation's culture, systems and working practices, ensure that probity, quality assurance, quality improvement and patient safety are central components of all activities of the healthcare organisation.** | |
| C7: Healthcare organisations | a) apply the principles of sound clinical and corporate governance<br>b) actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources<br>c) undertake systematic risk assessment and risk management<br>d) ensure financial management achieves economy, effectiveness, efficiency, probity and accountability in the use of resources<br>e) challenge discrimination, promote equality and respect human rights<br>f) meet the existing performance requirements | |
| 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<br>b) organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, underrepresentation of minority groups | |
| 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 | |
| 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<br>b) require that all employed professionals abide by relevant published codes of professional practice | |
| 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<br>b) participate in mandatory training programmes<br>c) participate in further professional and occupational development commensurate with their work throughout their working lives | C11b compliant from March 2007 |
| 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 | |
|---|---|---|
| **Patient Focus** | **Healthcare is provided in partnership with patients, their carers and relatives, respecting their diverse needs, preferences and choices, and in partnership with other organisations (especially social care organisations) whose services impact on patient wellbeing.** | |
| C13: Healthcare organisations have systems in place to ensure that: | a) staff treat patients, their relatives and carers with dignity and respect<br>b) appropriate consent is obtained when required, for all contacts with patients and for the use of any confidential patient information<br>c) staff treat patient information confidentially, except where authorised by legislation to the contrary | |
| 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<br>b) are not discriminated against when complaints are made<br>c) are assured that the organisation acts appropriately on any concerns and where appropriate, make changes to ensure improvements in service delivery | |
| 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<br>b) patients' individual nutritional, personal and clinical dietary requirements are met, including where necessary help with feeding and access to food 24 hours a day | |
| 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 | |
| **Accessible and Responsive Care** | **Patients receive services as promptly as possible, have choice in access to services and treatments, and do not experience unnecessary delay at any stage of service delivery or the care pathway.** | |
| C17: | the views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services | |
| C18: Healthcare organisations: | organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably | |
| C19: Healthcare organisations: | 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 | |
| **Care Environment and Amenities** | **Care is provided in environments that promote patient and staff wellbeing and respect for patients' needs and preferences in that they are designed for the effective and safe delivery of treatment, care or a specific function, provide as much privacy as possible, are well maintained and are cleaned to optimise health outcomes for patients.** | |
| 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<br>b) supportive of patient privacy and confidentiality | |
| 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 | |
| **Public Health** | **Programmes and services are designed and delivered in collaboration with all relevant organisations and communities to promote, protect and improve the health of the population served and reduce health inequalities between different population groups and areas.** | |
| 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<br>b) ensuring that the local Director of Public Health's annual report informs their policies and practices<br>c) making an appropriate and effective contribution to local partnership arrangements including local strategic partnerships and crime and disorder reduction partnerships | |
| 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<br>The elements are driven by the health improvement and health promotion requirements set out in NSFs and national plans with a particular focus on the following priority areas:<br>• encouraging sensible drinking of alcohol<br>• encouraging people to stop smoking and providing a smokefree environment<br>• promoting opportunities for healthy eating<br>• increasing physical activity<br>• reducing drug misuse<br>• improving mental health and well-being<br>• promoting sexual health<br>• preventing unintentional injuries | |
| C24: Healthcare organisations | protect the public by having a planned, prepared and, where possible, practised response to incidents and emergency situations, which could affect the provision of normal services | |