Core standards assessment final declaration

Reference: CSA92102
Date: 02/05/2006

Trust self-declaration:

Organisation name	Good Hope Hospital NHS Trust
Organisation code:	RJH

Please supply the following information:

General statement of compliance	The Trust is submitting this final declaration aware of two significant issues, which may impact overall on its compliance with the standards up to the end of the financial year 2005/06.
	The Trust currently has a significant gap in its finances. The Trust has been working with its commissioners and healthcare partners to agree measures to address this gap
	The Trust has been managed under a franchise agreement over the past two years. This agreement ceased at the end of October 2005.
	From 1 November 2005, Good Hope Hospital NHS Trust entered into a management contract with Heart of England Foundation Trust for the provision of management support.
	Work is currently being undertaken to enable the Trust to attain Foundation Status by 2008. With the support of the SHA, the Good Hope Hospital NHS Trust is seeking to be merged into the Heart of England Foundation Trust by absorption.

Please indicate your trust's compliance with each of the following standards:

C1a	Healthcare organisations protect patients through systems that 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.	Compliant
C1b	Healthcare organisations protect patients through systems that ensure that patient safety notices, alerts and other communications concerning patient safety which require action are acted upon within required timescales.	Compliant
C2	Healthcare organisations protect	Compliant

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	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 Clinical Excellence (NICE) interventional procedures guidance.	Compliant
C4a	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that 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).	Compliant
C4b	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that all risks associated with the acquisition and use of medical devices are minimised.	Compliant
C4c	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that all reusable medical devices are properly decontaminated prior to use and that the risks associated with decontamination facilities and processes are well managed.	Compliant
C4d	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that medicines are handled safely and securely.	Compliant
C4e	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that 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.	Compliant

Please indicate your trust's compliance with each of the following standards:

C5a	Healthcare organisations ensure that 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.	Compliant
C5b	Healthcare organisations ensure that clinical care and treatment are carried out under supervision and leadership.	Compliant

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C5c	Healthcare organisations ensure that clinicians continuously update skills and techniques relevant to their clinical work.	Compliant
C5d	Healthcare organisations ensure that clinicians participate in regular clinical audit and reviews of clinical services.	Compliant
C6	Healthcare organisations cooperate with each other and social care organisations to ensure that patients' individual needs are properly managed and met.	Compliant

Please indicate your trust's compliance with each of the following standards:

C7a and C7c	Healthcare organisations apply the principles of sound clinical and corporate governance and Healthcare organisations undertake systematic risk assessment and risk management.	Compliant
C7b	Healthcare organisations actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources.	Compliant
C7e	Healthcare organisations challenge discrimination, promote equality and respect human rights.	Compliant
C8a	Healthcare organisations support their staff through 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.	Compliant
C8b	Healthcare organisations support their staff through organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under-representation of minority groups.	Compliant
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.	Compliant
C10a	Healthcare organisations undertake all	Compliant

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	appropriate employment checks and ensure that all employed or contracted professionally qualified staff are registered with the appropriate bodies.	
C10b	Healthcare organisations require that all employed professionals abide by relevant published codes of professional practice.	Compliant
C11a	Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare are appropriately recruited, trained and qualified for the work they undertake.	Compliant
C11b	Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare participate in mandatory training programmes.	Compliant
C11c	Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare participate in further professional and occupational development commensurate with their work throughout their working lives.	Compliant
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.	Compliant

Some core standards do not appear on the declaration form as they are assessed through other components of the annual health check.

Standards C7f and C19 are picked up through our assessment of existing targets. Standard C7d is assessed through our use of resources component which uses information from assessments undertaken by the Audit Commission and Monitor.

Please indicate your trust's compliance with each of the following standards:

C13a	Healthcare organisations have systems in place to ensure that staff treat patients, their relatives and carers with dignity and respect.	Compliant
C13b	Healthcare organisations have systems in place to ensure that appropriate consent is obtained when required, for all contacts with patients and for the use of any confidential patient information.	Compliant
C13c	Healthcare organisations have systems in place to ensure that staff treat patient information confidentially, except where authorised by legislation to the contrary.	Compliant
C14a	Healthcare organisations have systems	Compliant

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	in place to ensure that patients, their relatives and carers have suitable and accessible information about, and clear access to, procedures to register formal complaints and feedback on the quality of services.	
C14b	Healthcare organisations have systems in place to ensure that patients, their relatives and carers are not discriminated against when complaints are made.	Compliant
C14c	Healthcare organisations have systems in place to ensure that patients, their relatives and carers are assured that organisations act appropriately on any concerns and, where appropriate, make changes to ensure improvements in service delivery.	Compliant
C15a	Where food is provided, healthcare organisations have systems in place to ensure that patients are provided with a choice and that it is prepared safely and provides a balanced diet.	Compliant
C15b	Where food is provided, healthcare organisations have systems in place to ensure that patients' individual nutritional, personal and clinical dietary requirements are met, including any necessary help with feeding and access to food 24 hours a day.	Compliant
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.	Compliant

Please indicate your trust's compliance with each of the following standards:

C17	The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services.	Compliant
C18	Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.	Compliant

Some core standards do not appear on the declaration form as they are assessed

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through other components of the annual health check.

Standards C7f and C19 are picked up through our assessment of existing targets Standard C7d is assessed through our use of resources component which uses information from assessments undertaken by the Audit Commission and Monitor.

Please indicate your trust's compliance with each of the following standards:

C20a	Healthcare services are provided in environments which promote effective care and optimise health outcomes by being a safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation	Compliant
C20b	Healthcare services are provided in environments which promote effective care and optimise health outcomes by being supportive of patient privacy and confidentiality.	Compliant
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.	Compliant

Please indicate your trust's compliance with each of the following standards:

C22a and C22c	Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by cooperating with each other and with local authorities and other organisations and C22c Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by making an appropriate and effective contribution to local partnership arrangements including local strategic partnerships and crime and disorder reduction partnerships.	Compliant
C22b	Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by ensuring that the local Director of Public Health's annual report informs their policies and practices.	Compliant
C23	Healthcare organisations have	Compliant

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	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.		
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.	Compliant	

The Healthcare Commission recommends that all members of the trust board, including the non-executive directors (for foundation trusts this should be the board of directors) should sign off the declaration in the space provided below. Here, sign off is achieved by recording the name(s) and position(s) of the individual(s) concerned. We do not require scanned signatures.

As a minimum, we require the declaration to be signed off by an appropriate officer(s) with delegated authority. There is no requirement for a paper copy of the final declaration to be signed and returned to the Healthcare Commission.

The completion of the sign off page will be taken as verification that the individual(s) who are recorded as signing off the declaration have reviewed the contents of the declaration form and are certifying that:

the general statement of compliance, and information provided for each standard, are a true representation of the trust's compliance

any commentaries provided by specified third parties have been reproduced verbatim. Specific third parties are: strategic health authority, and foundation trust board of governors, where relevant, and patient and public involvement forums and overview and scrutiny committees

they are signing off the declaration form on their behalf and with delegated authority on behalf of all members of the trust board as referred to above

Please state how many individual(s) will be signing off the declaration (maximum of 30):

Number of signatories	12

Electronic sign off – details of individual(s)

	Title	Full name	Job title
	Mr	Andrew Madden	Non Executive Director

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	Mrs	Nichola Lloyd	Non Executive Director
	Mr	John Hannah	Non Executive Director
	Mr	Adrian Viles	Non Executive Director
	Mr	Phil Milligan	Managing Director
	Mr	Andrew Walker	Director of Operations
	Mrs	Barbara Beal	Director of Nursing
	Mrs	Theresa Nelson	Director of H.R. (Acting)
	Dr	David Bowden	Medical Director
	Mr	David Phillpot	Director of Information (Acting)
	Mrs	Jo Chambers	Deputy CEO/Director of Finance
	Mr	Mark Goldman	CEO

Please enter the commentaries below. If copying and pasting, it is advisable to copy the text and paste unformatted into a new document. Then copy and paste the unformatted text into the web form.

Strategic health authority commentary	DECLARATION SHA COMMENTARY Trust Name Good Hope Hospitals NHS Trust SAFETY DOMAIN C2 Child Protection · The Trust has a good paediatric liaison service and is skilling-up staff in key areas such as A & E. However there is a need for good basic in-house training. CLINICAL EFFECTIVENESS C5a) Conform to NICE appraisal · The Trust has an active NICE implementation group and engages with the PCT on implementation issues including local guidance, finance and clinical audit. There is some evidence of implementation of NICE technology appraisals and clinical guidelines. Over the past six months, the Trust, in conjunction with its commissioning PCTs has begun to improve its audit of NICE guidance which has resulted in a number of recommendations for action. We would like to see the Trust follow these up including re-audit. PATIENT FOCUS · Overall the organisation has good systems in place which promotes timely access to information to patients, it has good reporting mechanisms, however current staff shortages are impacting on the organisations ability ensure standards are maintained around patient dignity and respect. ACCESSIBLE · Overall, there are robust systems in place for the seeking views patients and carers across the organisation and theses are used in a variety of ways toimprove services. The Trust is able to site a wide depth and breath of the impact these changes have made to the patient experience. ENVIRONMENT · The trust does not meet the absolute minimum requirement of 20% for singleroom accommodation, the recommended minimum amount nationally is 50%, Good Hope have 17%.· The trust still has 1 (out of 19) Nightingale

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	ward.
Patient and public involvement forum commentary	GOOD HOPE HOSPITAL NHS TRUST

SELF ASSESSMENT – HEALTHCARE COMIMISSION

Comments from PPI Forum Good Hope Hospital

1.   PPI Forum members are delighted with the continuous improvement in working relations and with The Trust improved undertaking of the Forums role by Trust staff.

2.   Forum members highlight the support and assistance provided by Barbara Beal on behalf of the Trust.

3.   PPI Forum members are able to support their comments as a result of the regular inspections and report received throughout the Work Programme 2005/2006.

4.   C9 – Forum members noted the significant improvement in the Medical Records Department which was in need of urgent attention.

5.   C13A – Forum members noted that the Trust did not have a policy on Patient dignity and respect.

Forum members were anxious to receive a copy of the Trusts draft plans in this area.

6.   C15 – Forum members were disappointed by the decline in statements on Hospital Food.

Forum members had received comments from patients and noted during inspections that the standard was poor.

Forum members agreed to follow up this service in the Work Plan 2006/2007.

7.   C15B - Forum members noted that supporting patients with feeding needed to be included and reviewed in the Wards Nursing Audits.

Patient visitors were observed sitting on beds and food trolleys created several Health and Safety issues for patients.

Forum members agreed to increase the number of Ward Inspections to monitor the Trusts resolve to tackle these issues.

8.   C16 – Forum members requested a regular review of the Patient Information Leaflet.

Paediatrics were not compliant.

Forum members requested an action plan for the Trust to respond to this non-compliance.

9.   C17 – Forum members agreed to forward a letter to the Board Chair to clarify their support for the Trust in the ongoing merger proposal |

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	discussion. Forum members agreed to align their Work Programme 2006/2007 more closely with the Healthcare Commission Core Standards. Forum members requested that a staff audit skills audit is completed by the Trust and details forwarded to the Forum. Forum members recorded a vote of thanks to all the staff for their excellent work under the extreme pressures around the future development of the Trust. 10. C18 – Forum members agreed that Choose and Book needed a higher priority with GP's supporting links with Good Hope Hospital. 11. C24 – Forum members requested information on M.I.P. 12. Overall Forum members celebrated the considerable improvements across Good Hope Hospital NHS Trust over the last 12 months.
How many overview and scrutiny committees will be commentating on your trust?	2

Please enter the commentaries below. If copying and pasting, it is advisable to copy the text and paste unformatted into a new document. Then copy and paste the unformatted text into the web form.

Overview and scrutiny committee 1 - commentary

Overview and scrutiny committee commentary	ANNUAL HEALTH CHECKS LICHFIELD AND TAMWORTH JOINT HEALTH SCRUTINY COMMITTEE COMMENTARY Comments for inclusion in the final declaration form for Good Hope Hospital We are in the process of developing a relationship with Good Hope Hospital and have been pleased to welcome representatives from the Hospital to several of our meetings. We have not undertaken any specific scrutiny reviews in relation to the activities of Good Hope and therefore will confine our comments to standard C22a, local cooperation / partnership working The Hospital has been proactive in keeping our Members apprised of developments at the Trust and we have been given an opportunity to contribute to changes proposed. Representatives from the Trust (including on one occasion the newly appointed Chief Executive) have

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	attended the meeting to update Members on proposals to merge with the Heart of England NHS Foundation Trust and we have been able to contribute to the debate. We have also received a presentation on the Hospital's Annual Health Check declaration and were able to ask a range of questions regarding the submission to which we received detailed responses. We believe that the Hospital is committed to developing a closer relationship with this Committee and we look forward to progressing this in the coming year.

Overview and scrutiny committee 2 - commentary

Overview and scrutiny committee commentary	Birmingham City Council Health Overview and Scrutiny Committee Declaration for the Healthcare Commission's Annual Healthcheck "Birmingham City Council Health Overview and Scrutiny Committee can only comment on those limited areas where it has had involvement with the Trust" Standard C4a Evidence supplied to the Committee as part of the on-going tracking of our review into MRSA has not raised any concerns with regard to the Trusts infection control procedures. Roles, responsibilities and accountabilities are explicit in jobe descriptions, and reinforced through appraisal, Personal Development Plans and performance management systems. For example with Matrons. However this is an area the Trust is reviewing to strengthen its performance management systems. This work is onging in line with the interim management arrangements of the Trust with the Heart of England Foundaton Trust. The Trust does record MRSA on death certificates where this has been a contributory factor or present at the time of death. The Director of Nursong & IPC has reviewed the Trusts relationships with the coroner's office to strengthen communication.