



Webforms Output: Core standards declaration 2007/2008
May 2008

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* Please enter the postcode for your organisation. This must be in capital letters and be in the format EC1Y 8TG.

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This is the information that we have for your organisation.

If this information is incorrect please contact the Healthcare Commission at forms@healthcarecommission.org.uk

Organisation Name:

Chief Executive's First Name:

Chief Executive's Surname:

Chief Executive's Email:

Organisation Code:

- END OF PAGE -

If your organisation is any of the following please select the option PCT or Community Trust:

PCT
Community Trust
PCT with Mental Health
Care Trust with PCT

If your organisation is any of the following please select the option Mental Health or Learning Disability

Mental Health
Learning Disability
Care Trust with Mental Health

* Please enter your type of organisation

Acute

- Mental Health/Learning Disability
- PCT
- Ambulance
- Isle of Wight NHS PCT
- NHS Direct
- Health Protection Agency
- NHS Blood and Transplant

General Guidance

You might find it helpful to print the following instructions (a printable version is available here) so you can refer to them easily while you are completing the declaration form.

The declaration form is divided into the following sections:

1. General statement of compliance
2. Statement on measures in place to meet the provisions of the Hygiene Code
3. Domain pages for core standards
4. Sign off
5. Comments from third parties

Your declaration will be the basis of your score for the assessment of core standards.

For core standards, your declaration should cover the period from April 1st 2007 to March 31st 2008. The statement on the Hygiene Code should set out whether the appropriate measures are in place to ensure that the provisions of the Hygiene Code were being observed during 2007/2008.

There will not be a specific developmental standards assessment as part of the 2007/2008 annual health check. Instead, we will issue a small set of comparative, or benchmark, indicators to trusts to show their position relative to similar trusts within specific domains (safety, clinical and cost effectiveness or public health). We expect that trust boards will use this information along with the local data that trusts already use when reviewing their performance and considering their compliance with the core standards.

Please note you are only able to access sections applicable to your trust type.

1. General statement of compliance

The general statement is an opportunity for trusts to place in context the detail of the domain pages and the comments received from the specified third parties. Each trust should use the general statement of compliance to present a summary of its declaration. It is important for the statement to be consistent with the detail presented in the rest of the declaration.

2. Statement on measures in place to meet the Hygiene Code

Trusts are asked to provide a short statement outlining whether the trust considers it has appropriate measures in place to ensure that the provisions of the Hygiene Code were being observed during March 2007/ 2008. This year, we have been inspecting acute trusts as part of our duty under the Hygiene Code. If you have the results of a Hygiene Code inspection, you must include a short summary of the findings and any actions taken as a result of the inspection. This statement is also intended to provide assurance to patients and the public that trusts have taken due account of their new duties under the Code.

Please note – the Health Protection Agency and NHS Direct are not required to provide a statement on measures in place to meet the Hygiene Code.

3. Domain pages for core standards

Separate sections have been set up for each domain.

For each part standard (for example, C7b), you must categorise your trust under one of the following headings:

Compliant - a declaration of 'compliant' should be used where a trust's board determines that it has had 'reasonable assurance' that it has been meeting a standard, without significant lapses, from April 1st 2007 to March 31st 2008.

Not met - a declaration of 'not met' should be used where the assurances received by the trust's board make it clear that there has been one or more significant lapses in relation to a standard during the year.

Insufficient assurance - a declaration of 'insufficient assurance' should be used where a lack of assurance leaves the trust's board unclear as to whether there have been any significant lapses during 2007/2008. Please note, in circumstances where a trust is unclear about compliance for a whole year but has good evidence about the occurrence a significant lapse during the year, the trust should consider whether a declaration of 'not met' is more appropriate.

For each standard, the boards of trusts need to decide whether any identified lapses are significant or not. In making this decision, we anticipate that boards will consider any potential risks to patients, staff and the public, and the duration and impact of the lapse. The declaration should not be used for reporting isolated, trivial or purely technical lapses in respect of the core standards.

If one or more standards within a domain is declared as 'not met' or 'insufficient assurance', please record the details for each of these standards, including the following items of information:

Start date - the date at the start of the period for which the trust has:

- identified a lack of assurance to determine whether there have been any significant lapse(s)
- or
- identified one or more significant lapses which means that the trust has not met the standard

End date (planned or actual) - the date by which the trust plans to have:

- assurances in place to enable it to determine whether the standard has been met
- or
- addressed the issues identified as one or more significant lapse(s)

Issue - a statement detailing:

- why the trust does not have assurance to determine their level of compliance
- or
- the details of the significant lapse(s) that have been identified

Action plan - an outline of the steps the trust is taking, or has taken, to:

- address an issue of 'insufficient assurance' (that is, the actions in place to gain assurances of whether or not the trust is meeting the standard)
- or
- address an issue of 'not met' (that is, the actions in place to address the areas for which the trust has identified one or more significant lapse(s))

This year, where applicable, we will ask you for additional information where:

- the standard was declared as 'not met' or 'insufficient assurance' in 2006/2007 and
- there was an action plan with an end date before 31st March 2007 and
- the standard has again been declared as 'not met' or 'insufficient assurance' for 2007/08.

Please describe the circumstances for this second consecutive declaration of non-compliance in light of the action plan.

Some standards are not included in the declaration, as separate assessments for them are being undertaken elsewhere in our overall assessment process or where these have been judged to not be applicable to the trust type. These standards are:

C7d - this relates to financial management and will be measured through the use of resources assessment for which we will rely on the findings of the Audit Commission or Monitor.

C7f - this relates to existing performance requirements and will be measured through the existing targets assessment.

C19 - this relates to access to services with nationally agreed timescales and will be measured through the existing targets and new national targets assessments.

In addition there are standards which are not applicable for certain trust types and as such will only be shown on the declaration form where applicable:

C3 - regarding NICE interventional procedures, we are not assessing ambulance trusts, mental health services, primary care trusts and learning disability services on this standard for 2007/2008.

C4c - regarding reusable medical devices, we are not assessing ambulance trusts, mental health services and learning disability services on this standard for 2007/2008.

C15a and C15b - regarding provision of food for patients, we are not assessing ambulance trusts on these standards.

C22b - regarding local health needs, we are not assessing acute trusts, ambulance trusts, mental health services and learning disability services on this standard for 2007/2008

HPA / NHSD and NHSBT - Some standards are not included in the declaration for your trust. These will have been agreed with you and the reasons for their exclusion are documented on our website

4. Sign off

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 from the board.

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 for the core standards
- the statement of the measures in place to meet the requirements of the Hygiene Code are a true representation of the trust's position
- 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

5. Comments from specified third parties

Trusts are required to invite comments on their performance against the core standards, from specified third parties. These comments must be reproduced verbatim in the relevant sections of the form. The specified partners are:

- for all NHS trusts, except foundation trusts, third parties must include the strategic health authority, the local authority's overview and scrutiny committee, the trust's patient and public involvement forum and the local safeguarding children board
- for foundation trusts, third parties must include the local authority's overview and scrutiny committee, the patient and public involvement forum and the local safeguarding children board. We also encourage foundation trusts to seek, if they wish, comments from their board of governors and strategic health authority
- for the Health Protection Agency, NHS Direct and the NHS Blood and Transplant, organisations are required to invite comments on their performance

against the core standards from specified third parties. These have been agreed with you. These comments must be reproduced verbatim in the relevant sections of the form. At the top of the section, please record the name of the commentator.

A trust may have more than one overview and scrutiny committee within its catchment area. If this is the case, it should invite comments from those committees it deems most relevant. In addition, a committee may specifically ask to comment on the performance of a trust against core standards. Where this is the case, the trust should accept comments from such a committee and include them on their declaration form. In some locations, overview and scrutiny committees will have joint working arrangements. Where this is the case, the trust may wish to use those arrangements to gain comment.

Where a specified local partner declines to comment, a statement to this effect must be included in the declaration, along with any reasons cited by the local partner for their lack of comment.

Please note that Frequently Asked Questions are available by clicking the link within the 'Completer Information' section.

General statement of compliance

* Please enter your general statement of compliance in the text box provided. There is no word limit on this answer.

Poole Hospital NHS Foundation Trust has completed a full assessment of its compliance against the revised core standards for the period 01 April 2007 to 31 March 2008. The Board of Directors are confident there is assurance that there have been no significant lapses in any of the standards and is therefore, submitting a fully compliant declaration. In addition, this year the Trust is able to take assurance from successfully achieving NHSLA Level 2 in both General and Maternity Risk Management Standards. In support of this fully compliant declaration, comments have been received from the Patient and Public Involvement Forum, Dorset Health Scrutiny Committee, Poole Borough Council, South West Strategic Health Authority and Bournemouth Borough Council. These statements all support the Board of Director's assurance and declaration of full compliance. Poole Hospital became a Foundation Trust in November 2007 and remains committed to providing the best possible care and treatment in a safe and healthy environment for both patients and staff.

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Statement on measures to meet the Hygiene Code

* Please enter this statement in the box provided. There is no word limit on this answer.

Poole Hospital NHS Foundation Trust recognises that the Health Act 2006 introduced a statutory duty on NHS organisations to observe the Code of Practice on Healthcare Associated Infections. As a result the Trust has reviewed its infection control systems and arrangements and can confirm compliance with the Hygiene Code. During the year 2007-2008 there has been a significant improvement in infection control measures in the Trust. Hospital acquired infections have reduced with an excellent performance on Clostridium difficile. The Trust continues to implement best practice and has complete a deep clean programme during the year.

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Safety domain - core standards (C1a - C3)

Please declare 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

not met

insufficient assurance

* 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

not met

insufficient assurance

* C2: Healthcare organisations protect children by following national child protection guidelines within their own activities and in their dealings with other organisations.

compliant

not met

insufficient assurance

- END OF PAGE -

* C3: Healthcare organisations protect patients by following National Institute for Clinical Excellence (NICE) interventional procedures guidance.

compliant

not met

insufficient assurance

- END OF PAGE -

Safety domain - core standards (C4a - C4e)

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

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

* 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

not met

insufficient assurance

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* C4d: Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that medicines are handled safely and securely.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Clinical and cost effectiveness domain - core standards (C5a - C6)

Please declare 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

not met

insufficient assurance

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

compliant

not met

insufficient assurance

* C5c: Healthcare organisations ensure that clinicians continuously update skills and techniques relevant to their clinical work.

compliant

not met

insufficient assurance

* C5d: Healthcare organisations ensure that clinicians participate in regular clinical audit and reviews of clinical services.

compliant

not met

insufficient assurance

* C6: Healthcare organisations cooperate with each other and social care organisations to ensure that patients' individual needs are properly managed and met.

compliant

not met

insufficient assurance

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Governance domain - core standards (C7a - C9)

Please note some core standards do not appear on the declaration form as they are assessed through other components of the annual health check:

Standard C7f is assessed through the existing targets component of the annual health check.

Standard C7d is assessed through our use of resources component which uses information from assessments undertaken by the Audit Commission and Monitor.

Standards C7f and C7d are not applicable to the Health Protection Agency, NHS Direct or NHS Blood and Transplant.

Please declare 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

not met

insufficient assurance

* C7b: Healthcare organisations actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources.

compliant

not met

insufficient assurance

* C7e: Healthcare organisations challenge discrimination, promote equality and respect human rights.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

Governance domain - core standards (C10a - C12)

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

* C10a: Healthcare organisations undertake all appropriate employment checks and ensure that all employed or contracted professionally qualified staff are registered with the appropriate bodies.

compliant

not met

insufficient assurance

* C10b: Healthcare organisations require that all employed professionals abide by relevant published codes of professional practice.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

* C11b: Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare participate in mandatory training programmes.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Patient focus domain - core standards (C13a - C14c)

Please declare 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

not met

insufficient assurance

* 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

not met

insufficient assurance

* C13c: Healthcare organisations have systems in place to ensure that staff treat patient information confidentially, except where authorised by legislation to the contrary.

compliant

not met

insufficient assurance

* C14a: Healthcare organisations have systems 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.

compliant

not met

insufficient assurance

* C14b: Healthcare organisations have systems in place to ensure that patients, their relatives and carers are not discriminated against when complaints are made.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

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Patient focus domain - core standards (C15a - C16)

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

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

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* 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

not met

insufficient assurance

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Accessible and responsive care domain - core standards (C17 - C18)

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

Standard C19 is assessed through the existing targets component of the annual health check.

Please declare 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

not met

insufficient assurance

* C18: Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.

compliant

not met

insufficient assurance

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Care environment and amenities domain - core standards (C20a - C21)

Please declare 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

not met

insufficient assurance

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* C20b: Healthcare services are provided in environments which promote effective care and optimise health outcomes by being supportive of patient privacy and confidentiality.

compliant

not met

insufficient assurance

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* 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

not met

insufficient assurance

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Public health domain - core standards (C22a - C24)

Please declare 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 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

not met

insufficient assurance

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* 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.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Electronic sign off page

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 from the board.

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
- the statement on measures to meet the Hygiene Code are a true representation of the trust's position
- any commentaries provided by specified third parties have been reproduced verbatim. Specified third parties are: strategic health authority, foundation trust board of governors (where relevant), patient and public involvement forums, overview and scrutiny committees and local safeguarding children boards
- 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.

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Electronic sign off - details of individual(s)

	Title:	Full name:	Job title:
1	Mr	Peter Harvey	Chairman
2	Mrs	Sue Sutherland	Chief Executive
3	Ms	Sue Donaldson	Director of Human Resources
4	Mr	Martin Smits	Director of Nursing
5	Dr	Roger Packham	Medical Director
6	Mr	David Taylor	Director of Finance
7	Mr	Charles Cunningham	Non-Executive Director
8	Mr	John Knowles	Non-Executive Director
9	Mrs	Jean Lang	Non-Executive Director
10	Mrs	Elizabeth Hall	Non-Executive Director
11	Dame	Yvonne Moores	Non-Executive Director
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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Comments from specified third parties

Please enter the comments from the specified third parties below.

* Please enter the name of the strategic health authority that has provided the commentary

South West Strategic Health Authority

* Strategic health authority comments. There is no word limit on this answer.

"On the basis of the evidence available to the Strategic Health Authority, there is no reason to disagree with the assessment made by the NHS Foundation Trust in its declaration with regard to maintaining core standards."

* Please enter the name of the patient and public involvement forum that has provided the commentary

Independant PPI Forum for Poole Hospital

* Patient and public involvement forum comments. There is no word limit on this answer.

Independent PPI Forum for Poole Hospital

Comments for the the Annual Health Check 2007-2008

With the dissolution of the Patient & Public Involvement (PPI) Forums in March 2008, before the Trust has to submit its declaration, these comments relate to activities from April 2007 to March 2008 in which the Forum has had direct participation.

Domain/Core Standard Comment Evidence

Domain 1

Safety.

C1a The performance of the Trust has been observed through Forum representation on the Risk Management and Safety Committee, the Trust Board and liaison with PALS. The forum believes that the Trust is fully compliant with this standard. Forum Minutes. Board Papers.

Trust Liaison Committee Minutes.

C4a Cleanliness inspections carried out by the Forum this year have found no issues to report. The Forums participation in this years PEAT inspection found an improvement over 2007 in both cleanliness / appearance and catering standards. The Trust is expected to achieve "Green" status with high individual scores.

The Forum is represented on the Domestic Cleaning Services Tender Evaluation Team and also had input to the Specification. We are pleased to note that the Trust's Infection Control Team and Modern Matrons are also included. Forum reports and minutes.

PEAT report.

Letters to/from Trust officers.

Board Papers.

Evaluation Team notes.

Domain 4

Patient Focus.

C13a Mixed-sex bays in the Medical Assessment Unit have now been virtually eliminated thanks to concerted Management, Staff and Forum effort. A member of staff has carried out a survey of 1000 patients admitted and this work achieved an award at the International Conference for Acute Medicine in Glasgow 2007. The Medical Assessment Unit staff also plan to publish a paper.

This collaboration of Trust and Forum has been cited as "Good Practice" on the Department of Health paper 'Information for Dignity Champions'.

The Forum finds it regrettable that the Government has reneged on its promise to eliminate Mixed-Sex accommodation in the NHS. This component of Dignity in Care is at the forefront of patient and public concern in our local community and Poole Hospital Foundation Trust has responded admirably to this concern. The Trust has shown that, with the will and application, this problem can be addressed. The current Government stance devalues this effort. Trust reports.

Forum reports.

Forum Minutes.

Trust Liaison Committee Minutes.

Letters to/from Trust officers.

DoH web-site.

C14 a The Patient Advice & Liaison Service (PALS) has implemented access improvements, which have led to an increase in copy letter requests. Graphs produced by PALS clearly show the correlation between the decrease in formal complaints alongside the increase in PALS queries.

The Trust provides an admirable Patient Advice & Liaison Services which has implemented positive improvements for patients and visitors. Forum Minutes

Trust Liaison Committee Minutes

Letters to/from Trust officers

C14c The Forum conducts a rolling survey of patient and public concerns, the results being fed to the Trust either informally through the Trust Liaison Committee, or formally through letters to the CEO and/or the Forum's Work Plan.

The Forum has found the Trust to be responsive to their comments and encouraging of patient and public involvement. Forum Minutes.

Forum Work Plan.

Letters to/from Trust officers.

Trust Liaison Committee Minutes.

Domain 5

Accessible and responsive care.

C17 The Forum has representation on and input to, the Trust Board and various committees concerned with the planning and delivery of services.

A collaboration between Trust staff, the Forum and the local community together with a massive fund-raising campaign, ensured the re-opening of the Hydrotherapy Pool on 11/09/07. The Trust listened to, and acted upon, patients' requests for Hydrotherapy treatment.

The Trust achieved Foundation Status in 2007 and has set up a Council of Public Members, which includes a PPI Forum link.

The Trust has also run several successful public consultation events: Poole & Community Hospitals event 18/10/07 and Cardiac 18 week wait event 12/10/07. Trust Board Papers.

Forum Minutes.

Forum Work Plan.

Trust Liaison Committee Minutes.

Bournemouth Daily Echo.

CPPIH "Forum Focus"
 C18 The Forum has worked with the Trust to improve on-site patient transport. An embryonic, volunteer-manned electric buggy service is now in place.
 The Trust has listened to patients' requests for better access to the hospital, and made steps towards improvements. Forum Minutes.
 Forum Work Plan.
 Trust Liaison Committee Minutes.
 Domain 6
 Care environment and amenities.
 C20/21 As comments for C4a plus the following:-
 As part of the cleanliness inspections, the Forum reports any hazards and/or deficiencies in fabric or fittings. Perceived major hazards are reported immediately, verbally, to Facilities Management. The Forum found no adverse incidents to report, this year.
 The Forum has had input to a "task and finish" group concerned with the establishment of a Corporate Standard for fittings, furniture and décor.
 Forum Minutes.
 Forum reports.
 Trust Liaison Committee Minutes.
 Letters to/from Trust officers,
 Group Minutes.

* Please enter the name of the local child safeguarding board that has provided the commentary

Bournemouth and Poole Local Childrens Safeguarding Board

* Local child safeguarding board comments. There is no word limit on this answer.

Comments invited but none to be submitted for this year.

Please enter the name of the organisation that has provided the first commentary

Please enter the first commentary for this organisation

Please enter the name of the organisation that has provided the second commentary

Please enter the second commentary for this organisation

Please enter the name of the organisation that has provided the third commentary

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Please enter the name of the organisation that has provided the fourth commentary

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Please enter the name of the organisation that has provided the fifth commentary

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Please enter the name of the organisation that has provided the sixth commentary

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Please enter the name of the organisation that has provided the seventh commentary

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Please enter the name of the organisation that has provided the eighth commentary

Please enter the eighth commentary for this organisation

Please enter the name of the organisation that has provided the ninth commentary

Please enter the ninth commentary for this organisation

Please enter the name of the organisation that has provided the tenth commentary

Please enter the tenth commentary for this organisation

Please enter the name of the organisation that has provided the eleventh commentary

Please enter the eleventh commentary for this organisation

Please enter the name of the organisation that has provided the twelfth commentary

Please enter the twelfth commentary for this organisation

Please enter the name of the organisation that has provided the thirteenth commentary

Please enter the thirteenth commentary for this organisation

Please enter the name of the organisation that has provided the fourteenth commentary

Please enter the fourteenth commentary for this organisation

Please enter the name of the organisation that has provided the fifteenth commentary

Please enter the fifteenth commentary for this organisation

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Overview and scrutiny committee comments

* How many overview and scrutiny committees will be commenting on your trust? (maximum of 10)

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

- END OF PAGE -

Overview and scrutiny committee comments

Name of overview and scrutiny committee 1

Dorset Health Scrutiny Committee

Comments. There is no word limit on this answer.

DORSET HEALTH SCRUTINY COMMITTEE (DHSC)
HEALTHCARE COMMISSION: ANNUAL HEALTH CHECK 2007/08
Poole Hospital
Contributions from Dorset Health Scrutiny Committee to the Annual Health Checks of NHS Bodies,
based on their involvement with the work of the Committee for the period 1 April 2007 – 31 March 2008

NAME OF NHS BODY
DATE(S) OF INVOLVEMENT WITH DHSC

DETAIL OF INVOLVEMENT
APPLICABLE STANDARD/ TARGET
AND COMMENT

Poole Hospital NHS Foundation Trust

8 May 2007
Minute 39
Reponses to scrutiny reviews
Core Standard C18 - Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.

The scrutiny review on Rural Access to Health Services in September 2006 recommended that the acute trusts provide details of their quality control procedures regarding telephone access.
Outcome: This request was passed onto Poole Hospital NHS Foundation Trust and full details were provided to the Committee's satisfaction.

27 June and 20 July 2007

Written submission of evidence and attendance to give oral evidence to an Informal Panel of Dorset Health Scrutiny Committee on 'Inappropriate Hospital Admissions and Support for Older People at Home'.

Core Standard C22 – Health care organisations promote, protect and demonstrably improve health of the community served, and narrow health inequalities by

a) co-operating with each other and with local authorities and other organisations.....

The Trust was asked to participate in the scrutiny review by providing written and oral evidence to a 'select committee' style meeting of the Informal Panel of DHSC.

Outcome: The Trust met the request by providing useful written evidence and data and answered all the questions put to them. The Trust's contribution helped shape the review which is ongoing and due to report in May 2008.

13 November 2007

Minute 99.1 to 99.4

Response to Review of Rural Access to Health Services

Core Standard C18 - Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.

The scrutiny review on Rural Access to Health Services in September 2006 recommended that Poole Hospital NHS Trust on the review of the current taxi contract in March 2007 consider;

- (i) the introduction of a flat rate charge across the county for all patients regardless of distance
- (ii) the specific needs of oncology patients who fall outside the benefit bands.

Outcome: The Trust provided a written response to these recommendations and outlined what the Trust did to assist patients with information and advice on transport costs. The Trust attended Committee so the response could be discussed and members could raise concerns. The Trust co-operated fully with the Committee.

13 November 2007 Minute 96.2

Healthcare Commission Annual healthcheck Results

Core Standard C16 – Health Care organisations make information available to patients and public on their services.....

The Committee considered the Healthcare Commissions' Annual Healthcheck results.

Outcome: The Trust made comment to members about the significantly improved performance during 2006/07. The Trust confirmed that areas of weakness had been targeted and it was expected that improvement in performance would continue. The Trust representatives were available to answer questions from members.

Ongoing

Liaison with a Member representative from DHSC

Core Standard C17 - The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving health care services.

In May 2007 the DHSC resolved to identify members who would act in capacity of a liaison link to specific health trusts so that the flow of information between trusts and the Committee might improve.

Outcome: A member was identified in the summer of 2007 to fulfil this function and the Trust have co-operated in getting this liaison established.

Name of overview and scrutiny committee 2

Poole Borough Health Scrutiny Committee

Comments. There is no word limit on this answer.

Poole Borough Health Scrutiny Committee

Poole Hospital NHS Foundation Trust

Domain: Safety

C4 – Members commend the Trust for being one of the best performing Trusts nationally for Clostridium Difficile (C-Diff) rates and have explored how the Trust is implementing a number of actions in order to maintain its low rates of hospital acquired infection. Actions include regular hand-washing amongst staff, a deep-cleaning programme, audit and surveillance and regular reporting and performance management. The Trust has a clear policy on infection control and is seeking to increase its MRSA screening programme to check and decolonise patients before they enter hospital. Members note that current performance targets do not allow for the reporting of differentiated figures which reflect the number of patients already infected with MRSA bacterium before entering the hospital.

Members are particularly encouraged that the Trust is considering revisiting its policy on staff uniform to prohibit the wearing of uniform off-premises in order to encourage greater confidence amongst the general public.

Domain: Clinical and Cost Effectiveness

C5 – Poole Hospital NHS Foundation Trust has achieved Practice Development Accreditation for Care of the Elderly and Surgery. Pathology, Cancer Services and Library Services have also been accredited and the Trust has achieved Level 2 compliance from the NHS Litigation Authority.

C6 – The Trust has been closely involved in the planning process to transfer resources from secondary care into the POPPs project for older people, a partnership project with the PCT and social services to promote the independence of older people by reducing avoidance admissions to hospital, supporting older people to remain in their own homes and providing more lower level forms of support.

The Trust has found its 3.5% target for delayed transfers of care from acute beds challenging but is working closely with Local Authority partners to introduce new arrangements to address this.

Domain: Accessible and Responsive Care

C17 – The Trust gained Foundation Trust status in 2007 and has been actively recruiting members, which now stands at 5000 from Poole and the wider catchment area. An Elected Member of the Borough of Poole is a member of the governing Body as well as seven Poole residents.

C18 – The Trust has achieved 100% compliance with its target for all elective and Outpatient bookings made through Choose and Book.

C19 – The Trust regularly meets its target to discharge 98% of patients from A&E within 4 hours. The 68% target for 'Door to Needle' time within 60 minutes for thrombolysis has proved challenging but Members have explored how the Trust is working closely with the South Western Ambulance Service NHS Trust in order to improve performance in this area. Members acknowledge that the Trust faces pressure to achieve national targets which may in fact impinge on more pertinent local targets.

Name of overview and scrutiny committee 3

Bournemouth Health Scrutiny sub panel

Comments. There is no word limit on this answer.

- Poole NHS Foundation Trust Hospital

Domain 1 - Safety
Core Standards 1 – 4d

The work in working to promote the use of hand-gels and patient bed-sides was seen as very good and Members felt that this showed that the Trust was being very responsive in tackling issues relating to infection control.

The Trust's incident reporting policy to monitor problem areas was seen to show positive steps forward. The significant improvements in medicines management were recognised.

Domain 2 – Clinical and Cost Effectiveness
Core Standards 5 – 6

The steps to include staff in professional and meaningful audits of services were seen as very good.

The Trust's work in developing a single assessment process was recognised as being very good. Particular mention was made of the work in relation to older people. The suggestion that patient medication and information be kept in their fridge in case of emergencies was welcomed by Members as this seemed to be beneficial.

Domain 3 - Governance
Core Standard 7a – 12

Members said that they would welcome more statistical data relating to staff such as the results of the staff survey and statistics relating to whistle blowing etc.

Members also felt that the mapping of complaints and how they were dealt with would be of benefit to staff.

Members were very pleased to hear that the Trust had invested time and money into developing the staff annual development process. The provision of staff training in management of violence and aggression was very important and welcomed this.

Domain 4 – Patient Focus
Core Standards 13a - 6

Patient Information Groups to monitor all patients' leaflets to ensure that they are produced in a clear and accessible format was highly commended by Members.

Domain 5 – Accessible and Responsive Care
Core Standard 17 – 19

Members were very pleased with how the Trust had been rated on provision of patient meals and on cleanliness.

Domain 6 – Care Environment and Amenities
Core Standards 20a – 21

Members were pleased to hear about the planned developments regarding a new and better maternity ward on the site.

Domain 7 – Public Health
Core Standards 22a – 24

The Trust acknowledged that it could do more work in this area. Members were pleased to what work had been done to reduce the number of staff smoking and welcomed planed targets to help reduce this figure even more.

Overall:

Members acknowledged the Trusts honesty in appraising its performance and were encouraged by some excellent examples of work relating to patient focus which demonstrated that the Trust listened to the views of patients and staff.

DECISION MADE:

That the comments made above be passed on to the relevant organisations.

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There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Please enter the comments from the board of governors in the box below. There is no word limit on this answer.

The Board of Governors invited to comment. Organisation became a Foundation Trust in November 2007. The Board of Governors not in a position to comment on the full year. No comments submitted.

- END OF PAGE -

There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list