

Health Overview and Scrutiny Committee
Working Group on Healthcare Commission Core Standards
25 April 2008

Trust	Core Standard discussed	Declaration	Information gleaned
Medway Foundation Trust (Andy Horne, Chief Executive; Helen Goodwin, Head of Governance)	C4e <i>Health care 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.</i>	Not Met	Changes in regulations and clinical practice mean that more clinical waste is being generated, segregated into more waste streams. The Foundation Trust is declaring itself Not Met, due to system failures identified by the Environment Agency in November 2007. These failures are mainly about flaws in the documentation and audit trails (consignment notices) on the part of the waste management contractors. The contract is held by a consortium of all trusts in Kent and Medway. This problem affects all other trusts, as members of the waste consortium; and the fault is in the service provided by the contractor, rather than in the Foundation Trust itself. While the Foundation Trust is declaring itself Not Met against C4e for the third year running, this is down to a range of issues, each of which has been resolved in turn.
	C4c <i>Health care 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.</i>	Not Met	The Foundation Trust is declaring itself Not Met due to the delayed introduction of a centralised cold sterilisation unit. The level of clinical activity is rising, necessitating more facilities. The unit will be installed and, in the meantime, rigid endoscopes are being used for gynaecological investigations. £700,000 has been invested in equipment for the new unit.

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	<p>C4a <i>Health care organisations keep patients, staff and visitors safe by having systems to ensure that the risk of health care acquired infection to patients is reduced, with particular emphasis on high standards of hygiene and cleanliness, achieving year-on-year reductions in MRSA.</i></p>	Compliant	<p>The Foundation Trust is declaring itself Compliant, having met the standards set out in the Hygiene Code. The Foundation Trust is planning to redevelop all its medical wards, which will increase bed capacity, thereby helping to isolate outbreaks of infection. Screening of patients for MRSA is being undertaken, and elective and emergency patients are being separated.</p>
	<p>C9 <i>Health care 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.</i></p>	Compliant	<p>The Foundation Trust is declaring itself Compliant, but there are concerns about the organisation of the paper unified healthcare record and other matters. There are big plans for the improvement of records management, involving transfer to an off-site location. The Foundation Trust has a medium-term plan (within five to 10 years) to go over to an electronic records system. All incidents involving loss of data or breach of patient confidentiality are captured by an incident-logging process and an audit is conducted.</p>
<p>West Kent PCT (Molly Clark, Project Manager for Governance; Anne Carroll, Assistant Director, Clinical Governance)</p>	<p>C7e <i>Health care organisations challenge discrimination, promote equality and respect human rights.</i></p>	Not Met	<p>A policy has been formulated covering both these Core Standards, but it has yet to be finalised. A conference for this purpose is being held on 16 June 2008.</p>

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	<p>C18 <i>Health care organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.</i></p>	Not Met	<p>The Patient and Public Involvement Forum for the PCT raised concerns about the inadequacy of dental services across the whole of the West Kent area, as well as inequalities in service provision within the area.</p> <p>The Forum also visited Livingstone Community Hospital at Dartford and noted the lack of written material in ethnic minority languages, as well as the lack of translation services for patients who did not have a good understanding of English.</p>
	<p>C23 <i>Health care organisations have systematic and managed disease prevention and health promotion programmes which meet the requirements of the National Service Frameworks and national plans with particular regard to reducing obesity through action on nutrition and exercise, smoking, substance misuse and sexually transmitted infections.</i></p>	Not Met	An external review has revealed significant lapses in respect of sexual health and smoking. A new strategy and action plan are being put in place.
	<p>C5c <i>Healthcare organisations ensure that clinicians continuously update skills and techniques relevant to their clinical work.</i></p>	Insufficient Assurance	The PCT believes that this updating of skills and techniques is probably happening, but there is a lack of evidence to show this. A new software system is being implemented that will allow managers to map staff training and identify areas needing attention. A staff skills audit and training needs analysis have taken place. Clinical staff have a professional responsibility to undertake continuing professional development. The Quality and Outcomes Framework review should pick up shortcomings in GP practices.

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	<p>C8b <i>Health care 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.</i></p>	Insufficient Assurance	
	<p>C9 <i>Health care 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.</i></p>	Insufficient Assurance	The PCT has had to work to make records management policy consistent, following the merger in 2006 of its three predecessor PCTs, which had varying policies.
	<p>C13c <i>Health care organisations have systems in place to ensure that staff treat patient information confidentially, except where authorised by legislation to the contrary.</i></p>	Insufficient Assurance	

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	<p>C4a <i>Health care organisations keep patients, staff and visitors safe by having systems to ensure that the risk of health care acquired infection to patients is reduced, with particular emphasis on high standards of hygiene and cleanliness, achieving year-on-year reductions in MRSA.</i></p>	Compliant	<p>The PCT has three locality-based community infection control nurses, who work with care homes and primary care practitioners. A root cause analysis is undertaken whenever community-acquired Clostridium difficile is present in a patient admitted to hospital. Monthly surveillance reports are produced and a postcode analysis of patterns is undertaken. Advice is given to GPs on microbiological analysis and the excessive use of antibiotics is discouraged. The PCT attends acute Trusts' infection control meetings.</p>
<p>South East Coast Ambulance Service NHS Trust (Andy Cashman, Service Development Manager)</p>	<p>C5b <i>Health care organisations ensure that clinical care and treatment are carried out under supervision and leadership.</i></p>	Insufficient Assurance	<p>This Core Standard is not entirely appropriate to Ambulance Trusts, given the way in which their staff work. Systems have been put in place since the creation of the Trust in 2006, but they are still not fully embedded. A traditional apprentice-style training model has been replaced by a degree programme based in key skills and competencies. Clinical staff are now registered healthcare professionals and required to undertake continuing professional development. Control room staff do not need to be trained clinicians; but they are all trained and have some level of clinical knowledge.</p>
	<p>C4a <i>Health care organisations keep patients, staff and visitors safe by having systems to ensure that the risk of health care acquired infection to patients is reduced, with particular emphasis on high standards of hygiene and cleanliness, achieving year-on-year reductions in MRSA.</i></p>	Compliant	<p>Ambulances are now cleaned and prepared in "Make ready centres" by dedicated teams. Clinicians do, though, still have responsibility for rubbing down hard surfaces between patients and maintaining good infection control practices. All invasive equipment (such as needles) is single-use. Disposable linen is used.</p>

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	<i>C7e Health care organisations challenge discrimination, promote equality and respect human rights.</i>	Insufficient Assurance	The Trust employs a member of staff for external liaison on equality and diversity issues, but that member of staff was not in place throughout the year.
Kent and Medway NHS and Social Care Partnership Trust (Erville Millar, Chief Executive)	<i>C7e Health care organisations challenge discrimination, promote equality and respect human rights.</i>	Not Met	The Trust will in future ensure that race equality impact assessments are conducted and published in respect of its policies.
	<i>C8b Health care 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.</i>	Not Met	The Trust will in future implement policies to ensure that staff from black and minority ethnic groups have opportunities for personal development – targeted where appropriate.
	<i>C16 Health care 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.</i>	Not Met	The Trust already provides information for patients and the public in five languages, but it will need in future to use a broader range of languages and make the material more readily available.

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	C17 <i>The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving health care services.</i>	Not Met	The Trust will need in future to develop good processes to show that it involves and consults a wide range of groups, including members of black and minority ethnic communities, regarding the planning of services.
	C18 <i>Health care organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.</i>	Not Met	The Trust needs to do more to ensure that information is readily available for all sections of the community to allow them to access services easily.
Medway PCT (Natalie Davies, Company Secretary)	C1a <i>Health care 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.</i>	Not Met	The PCT is now compliant in this regard, but has only been so from September 2007. This in-year lapse related only to the process for less serious incidents. The process for dealing with Serious Untoward Incidents was in place throughout the year.
	C5a <i>Health care organisations ensure that they conform to NICE technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care.</i>	Insufficient Assurance	While the process to assess conformity with NICE Technology Appraisals is in place, there is not an audit trail to demonstrate that an action plan has been completed in respect of each and every Technology Appraisal.

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	C5d <i>Health care organisations ensure that clinicians participate in regular clinical audit and reviews of clinical services.</i>	Insufficient Assurance	A detailed clinical audit plan has been agreed within the PCT and many clinical audits have been completed. However, not all services are able to show that they have completed all the mandatory audits.
	C7e <i>Health care organisations challenge discrimination, promote equality and respect human rights.</i>	Not Met	The PCT has not been meeting all of the requirements regarding the assessment of the effect of its policies on minority groups. The PCT failed to update its race equality scheme and to complete equality impact assessments on its Board papers – these failures are now being rectified. A Diversity and Equality Manager is being appointed. The PCT aims not only to meet the minimum standard but to become a centre of excellence in this regard.
	C18 <i>Health care organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.</i>	Not Met	
	C11b <i>Health care organisations ensure that staff concerned with all aspects of the provision of health care participate in mandatory training programmes.</i>	Not Met	This relates to non-clinical training (e.g. fire safety). Mandatory training sessions have been provided, but attendance levels have not been satisfactory. The PCT needs to ensure that both staff and managers recognise this training as a priority.

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East Kent Hospitals Trust (Julie Pearce, Director of Nursing, Quality and Midwifery)	C4e Health care 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.	Not Met	There were two or three breaches of standards during the year, meaning that the Trust has to declare itself Not Met. This was mainly due to the inadequacy of the contract specification that had been drawn up by the Kent waste consortium. There are some internal issues too. A business case is being developed for a dedicated waste manager. There is a training issue around the separation and segregation of waste. The policy regarding hazardous waste disposal needs to be reviewed.
	C7e Health care organisations challenge discrimination, promote equality and respect human rights.	Compliant	Additional evidence has been sought, in particular regarding whether or not there was a “glass ceiling” affecting black and minority ethnic staff, and the Trust is satisfied that it is Compliant.