

Reference: CSA92363 Date: 03/05/2006

Trust self-declaration:

Organisation name	Liverpool Women's Hospital NHS Foundation Trust
Organisation code:	REP

Please supply the following information:

General
statement of
compliance

The Board of Directors of Liverpool Women's NHS Foundation Trust has received sufficient assurance that there have been no significant lapses in meeting the core standards during the period 1st April 2005 to 31st March 2006 and as a consequence the final declaration has been 'signed off' by the whole Board.

The comments received from the Patients' Forum and Membership Council following their independent detailed scrutiny processes are very positive in terms of the integrity of the Trust's evidence portfolio, which was viewed first hand by members of both groups.

The SHA's comment acknowledges the independent assurance offered by the the achievement of CNST level 3 and IWL Practice Plus accreditation. The SHA's covering letter to the Trust notes that it has cross referenced the Trust's draft declaration with its own available data.

The Trust acknowledges the point raised by Overview and Scrutiny Committees that a more robust relationship needs to be developed with all NHS organisations with regard to this process going forward.

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

	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

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

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

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

	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.

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

	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

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

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

	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	11
signatories	

Electronic sign off – details of individual(s)

Title	Full name	Job title
Mr	Ken Morris	Chairman

Mrs	Louise Shepherd	Chief Executive
Mrs	Ann McCracken	Vice Chairman
Mr	David Carbery	Senior Independent Director
Mr	Hoi Yeung	Non-Executive Director
Mr	Roy Morris	Non-Executive Director
Mr	David Richmond	Medical Director
Ms	Sue Lorimer	Director of Finance
Ms	Caroline Salden	Director of Service Development
Mrs	Kim Doherty	Director of Human Resources
Ms	Gill Core	Director of Nursing, Midwifery and Patient Quality

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

Cheshire and Merseyside Strategic Health Authority (submitted by Helen Bellairs, Director of Performance/ Lead Nurse) comment as follows:

The Strategic Health Authority is expected to comment on the capability of organisations to meet the core standards within the Standards for Better Health (DH 2004) with the exception of C7d (financial management), C7f (existing targets) and C19 (access targets).

It is the responsibility of the Foundation Trust Board to assure itself that the relevant processes are robust and all judgements on compliance are based on supportive evidence. The Board also need to be able to demonstrate that the Trust is working towards a programme of continuous quality improvement.

The Strategic Health Authority takes a view that the Foundation Trust has good governance systems in place to assure the delivery of safe and effective health care. The Trust has attained accreditation against the Clinical Negligence Scheme for Trusts standards at level 3 by the NHS Litigation Authority. The Trust has also attained IWL (Improving Working Lives) Practice Plus accreditation in year.

Patient and public involvement forum commentary

Patient and Public Involvement Forum for Liverpool Women's NHS Foundation Trust, comment as follows:

'The PPI Forum were very pleased to be asked to participate in a review of evidence for the Core Standards.

A special visit was arranged where PPI Forum members were provided with evidence on the Core Standards that were of specific interest to the Forum. The Forum wanted to see the evidence on the Core Standards (CS) that directly relate to Patients and the Public, as advised by the Healthcare Commission.

These were:-

CS 13 – Treatment and care of Patients

CS 14 – Issues and Complaints CS 15 – Provision of food CS 16 - Patient Information CS 17 – Involvement of Patients and Public in Improving Services It was explained by the Trust Risk Manager that the evidence is held on an electronic database. This database contains procedure notes, standards, information leaflets, logs of issues and action plans to resolve problems or address staff training. A sample was printed and provided for the Review Meeting. The PPI already undertakes the Annual Bugwatch, attends the Infection Control Committee and PEAT Inspections and has a close working relationship with the PALS Management. These activities give a first hand view of the daily working practices of the hospital. During these activities the PPI Forum has observed at first-hand that patients are treated with respect and dignity. It has also been seen that a balanced and varied choice of food is provided and that information leaflets are available. The regular interaction between the PPI Forum and the hospital combined with the meeting to review the Core Standard evidence has allowed a view of the standards and procedures that the LWH Foundation Trust applies. It is obvious that these standards and procedures ensure that high quality care is priority in both training and day-to-day practice. The members of the PPI Forum were impressed by the thoroughness of the documentary evidence. It was unanimously agreed that the evidence seen at the review meeting supported the declaration of the LWH Foundation Trust being fully compliant in all of the above Core Standards. Signed - Patient and Public Involvement Forum for the Liverpool Women's NHS Foundation Trust.' How many overview and scrutiny committees will be commentating on your trust?

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	Liverpool City Council - Social Care and Health Select Committee comment (submitted by the Committee Clerk) as follows:
commentary	'I can confirm that at its meeting on 20th March, the NHS Scrutiny Panel (sub-group of the Social Care & Health Select Committee was pleased to note that your respective Trusts would be declaring full compliance to the Health Care Commission.
	The Panel further referred to the presentations and terminology used by all trusts in the submissions, although useful, as being technical and

difficult to understand. The Panel felt in that in future they would be prepared to work with the Trusts to adopt a model of presentation that would facilitate effective scrutiny.'

Overview and scrutiny committee 2 - commentary

Overview and scrutiny committee commentary

Sefton Metropolitan Borough Council - Scrutiny & Review (Health Overview) Committee comment as follows:

'The Sefton MBC Scrutiny & Review Health Overview Committee has concentrated its commenting on the performance of those Trusts and PCTs within the Council boundary, where it has had an active scrutiny relationship and therefore some direct evidence on performance.

The Sefton MBC Scrutiny & Review Health Overview Committee are fully aware of the Trust's reputation, and recognise the tremendous work undertaken, serving the needs of residents of Liverpool, Sefton, Knowsley, and the wider area.

It is the aim of the Scrutiny & Review Health Overview Committee to develop improved communication links with the Trust over forthcoming months, but feels it is not in a position, as yet, to formally comment on the Liverpool Women's NHS Foundation Trust's annual statement for the period in question.'

Overview and scrutiny committee 3 - commentary

Overview and
scrutiny
committee
commentary

Knowsley Borough Council - Health and Social Care Scrutiny Committee

'Knowsley Health and Social Care Scrutiny Committee has received the Declaration from the Trust and has no comments to make.'

Governors' comments

Governors' comments

Liverpool Women's NHS Foundation Trust Membership Council, comment as follows:

'Five members of the Membership Council were delegated to review a sample of the Trust's evidence to support their core standards for self-assessment. In particular we looked at the written evidence for standard C1a and were confident that the Trust really is compliant.

It became clear that the Trust has developed a fair culture, which was much evidenced by:

- Learning from adverse incidents
- Examples of changes in practice resulting from adverse incidents.

We also looked at standards C13, C2, C4a, C4d, C5a, C7c, C11b, C13a and C18. Throughout the discussion, the Trust's Risk Manager showed a very detailed knowledge of all of the Trust's systems.

It became clear that the whole process of improving standards is fairly embedded across the Trust. Overall, we were very impressed by the

thoroughness of the documentary evidence. We are grateful that the Membership Council has been given this opportunity to assess the Trust's core standards compliance and we hope that we can continue to have an input into the process in the future.'	Membership Council has been given this opportunity to assess the Trust's core standards compliance and we hope that we can continue to
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