

Your details

Trust self-declaration:

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

General statement of compliance

Please enter your general statement of compliance in the text box provided.

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 2006 to 31st March 2007 and as a consequence the Board is pleased to sign off the declaration against these standards. In addition, the Board is satisfied that progress against the developmental standards D1 and D2a has been self-assessed as 'excellent' on the basis of the evidence provided and assurance received.
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Statement on measures to meet the Hygiene Code

Please enter this statement in the box provided.

Statement on measures to meet the Hygiene Code	 Liverpool Women's NHS Foundation Trust recognizes the importance of compliance with the requirements of the Health Act 2006 and as such continually reviews Infection Prevention and Control practices and systems. The Trust therefore is able to positively state that we are meeting the requirements and will continue to develop through our assurance reporting system to the Trust Infection prevention and Control Committee, The Clinical Governance Committee and upwards to the Trust Board. The following is a summary of the work carried out in the Trust to meet the requirements of the Hygiene Code: Appropriate systems to minimize the risk of healthcare associated infections including defined responsibilities for infection control Board approved and reviewed infection control programme including audit plan and surveillance programme Approved cleaning strategy with specified cleaning procedures and frequencies Provision of written information for service users and the public Education and training for all staff on healthcare associated infection and Hand Washing. Audit evidence that policies are implemented and reviewed. Ongoing high profile campaign in support of the 'Clean your
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	Ha	ands' initiative
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Safety domain - core 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 children by following national child protection guidelines within their own activities and in their dealings with other organisations.	Compliant
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
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	staff and visitors safe by having systems to ensure that medicines are handled safely and securely.	
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

Safety domain - developmental standard

Please supply the following information:

Your level of progress in relation to developmental standard D1	Excellent
Your comments on your performance in relation to the comparative information contained in your information toolkit(s)	The Liverpool Women's NHS Foundation Trust declares 'excellent' progress against standard D1 having achieved compliance with all the core safety standards. The Trust has maintained CNST level 3 for two years now across general and maternity standards and has one of the lowest levels of infection as evidenced by HPA data.
	 Following review of the comparative information in the Toolkit the areas in the Trust rated as 'worse than average and average performance' have been acted on and improved, since this particular data set was published, for example: Patient information - a centralised patient information system is in operation in the Trust lead by the Patient Quality Manager and monitored through the Patient Information Group. Provision has been made for all staff to attend Conflict Resolution training and monitoring the value of training for staff. A high profile campaign in respect of bullying and harassment has been put in place, including training and development for all staff in managing bullying and harassment effectively. This has resulted in increased staff awareness of the support available both inside and outside the Trust for staff affected by bullying and harassment.
	programme for all staff in Health and Safety management and centralised monitoring process of attendance including reporting and management of non-clinical incidents is now in place. The Trust has received further

	confidence from the most recent staff survey that staff feel supported in reporting incidents. The improvement in the findings of the 2006 staff survey in respect of staff suffering from work related injury in previous 12 months is a reflection of this i.e. there was a statistically significant decrease from 20% to 14% amongst the lowest for acute trusts. In addition there was a statistically significant increase of staff receiving training in Health and Safety from 74% to 82%. This being in the highest 20% for acute trusts. - Training and development in incident reporting is available to all staff within the Trust, a 12 month mandatory training programme and centralised monitoring are in operation.
Your highest local priorities for improvement relating to developmental standard D1	 To further improve our reporting and learning from incidents To further develop and improve our systems to reduce the numbers of medicines related incidents and monitor our changes in practice to ensure improvement To continue to develop our reporting, audit and monitoring processes in respect of infection control including hand washing practices.

Clinical and cost-effectiveness domain - core 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
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	Compliant

and met.

Clinical and cost effectiveness domain - developmental standards

Please supply the following information:

Your level of progress in relation to developmental standard D2a	Excellent
Your comments on your performance in relation to the comparative information contained in your information toolkits(s)	The Liverpool Women's NHS Foundation Trust declares 'excellent' progress against standard D2 having achieved compliance with all the core Clinical and Cost Effectiveness standards. The Trust has recently been designated by Monitor as one of the top eight foundation trusts nationally. Following review of the comparative information in the Toolkit, the areas in the Trust rated as 'worse than average performance' have been acted on and improved.
Your highest local priorities for improvement relating to developmental standard D2a	- To further develop our systems and processes for assessing and monitoring compliance with the requirements of NICE guidance and the National Service Frameworks.

Governance domain - core 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	Compliant

	a detrimental effect on patient care or on the delivery of services.	
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 appropriate employment checks and ensure that all employed or contracted professionally qualified staff are registered with the appropriate bodies.	Compliant
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

Patient focus domain - core standards

C13a	Healtheare organizations have excteme	Compliant
	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 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
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

Accessible and responsive care domain - core standards

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

Care environment and amenities domain - core standards

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
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

Public health domain - core 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	Compliant
	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.	
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 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
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

Electronic sign off - details of individual(s)

Electronic sign off - details of individual(s)

	Title	Full name	Job title
1.	Mr	Ken Morris	Chairman
2.	Mrs	Louise Shepherd	Chief Executive
3.	Mrs	Ann McCracken	Vice Chairman
4.	Mr	David Carbery	Non-Executive Director
5.	Mr	Hoi Yeung	Non-Executive Director
6.	Mr	Roy Morris	Non-Executive Director
7.	Ms	Yvonne Rankin	Non-Executive Director
8.	Ms	Sue Lorimer	Director of Finance
9.	Mr	David Richmond	Medical Director
10.	Ms	Caroline Salden	Director of Service Development
11.	Ms	Gill Core	Director of Nursing, Midwifery & Patient Quality
12.	Mrs	Kim Doherty	Director of Human Resources

Comments from specified third parties

Please enter the comments from the specified third parties below. If you are copying text from another document, it is advisable to copy the text and paste it into a new document as unformatted text before pasting this into your form.

Strategic health authority comments	The following statement was received from Mike Farrar, Chief Executive, NHS North West	
comments	"In view of the current performance management role of NHS North West we will not be providing Standards for Better Health 2006/07 Declaration Commentaries for NHS Foundation Trusts."	
Patient and public involvement	The following comment was received from the Patient and Public Involvement Forum for Liverpool Women's NHS Foundation Trust:	
forum comments	"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 13a - Treatment and care of Patients CS 15 - Provision of food 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.	
	The PPI already 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."

Overview and scrutiny committee comments

Overview and scrutiny committee 1

Comments	Comment received from the Health & Adult Services Scrutiny Panel of Liverpool City Council as follows:
	"Members were pleased to note the declaration by Liverpool Women's NHS Foundation Trust of full compliance against the core standards and the evidence provided in the progress towards a declaration against the developmental standards."

Overview and scrutiny committee 2

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Comments	Comment received from the Scrutiny and Review Committee (Health and Social Care) of Sefton Borough Council as follows:
	"Thank you for your contact to confirm that Liverpool Women's NHS Foundation Trust is stating full compliance against core standards in it's declaration to the Healthcare Commission.
	As advised, it was agreed by Councillors that due to the limited resources available to the Working Group, Sefton Scrutiny and Review Committee (Health and Social Care) would focus it's efforts on the Sefton PCT and Acute NHS trusts located within the local authority boundary.
	I can confirm that this approach has also been adopted by our neighbouring local authorities, and we understand that Liverpool City Council will provide the primary statement to the Healthcare Commission on behalf of the Liverpool Women's NHS Foundation Trust.
	Sefton Members appreciate that the Trust is maintaining contact in respect of the declaration process, and look forward to further developing communication links in the future".

Overview and scrutiny committee 3

Comments	Knowsley Borough Council, Health and Social Care Scrutiny Committee - no comment received. The Trust was informed that similar to the position at Sefton, the Council's limited resources meant that it had focused on trusts located within the Borough.

Board of governors' comments

Please enter the comments from the board of governors in the box below:

Comment received from the Membership Council of Liverpool Women's

NHS Foundation Trust as follows:
"Three members of the Membership Council were delegated to review a sample of the Trust evidence to support their compliance with core standards.
We looked at Core Standards; C4a, C22a, C22b C22c and C23.
C4a - we reviewed extensive evidence for this standard. Clear lines of responsibility and reporting were evident in the documentation.
There is obvious ongoing work on the risk register. Its format has clearly improved and it is obvious that its use will impact on day to day infection control. We were very impressed by the level of detail contained in the risk register.
The quarterly and annual reports of the infection control team to the clinical governance committee were very comprehensive, and show high standards of infection control. We saw a great deal of evidence of ongoing infection control training across all grades and disciplines with evidence that this training is reviewed and assessed regularly. We concur that the Trust complies with C4a of the Health Care Standards.
C22 - This was a very broad area but we saw a great deal of evidence for compliance with C22a, C22 b and C22c.
The Trust is involved with a number of initiatives around substance misuse, smoking cessation and teenage pregnancy. The Trust is demonstrably involved with the Liverpool City safe and many other organisations and communities.
The Trust has worked hard to promote and sustain a smoke free environment.
C23 - We looked at a range of evidence to support the Trust's compliance with this standard, particularly the Public Health strategy, smoke free policy, pregnancy, parenting and substance misuse, and breast feeding initiative.
We were guided and supported through this review by Cathy Umbers (Trust Risk Manager) who showed great patience in answering our many questions. She quickly located evidence for us and gave us a good understanding of the process.
We were impressed by the thoroughness of the documentary evidence."