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25 November 2008

Anna Walker
Chief Executive
Healthcare Commission
Finsbury Tower
103-105 Bunhill Row
London
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Dear Ms Walker

Re: Healthcare Commission Qualification of our Compliance with C10A

You will be aware that the Trust underwent a qualification visit from the Healthcare Commission earlier this year and were assessed on five core standards. We had a feedback meeting with John Croft and April Brown on 8th October 2008 and were told that we had provided sufficient evidence for standards C4B, C8A, C11 and C16 to provide adequate assurance that the standards had been met.

In respect of C10A (Employment Checks) the HCC did not consider there was sufficient evidence to provide adequate assurance that the standard had been met. This related in particular to

- The lack of evidence presented on whether the Trust had processes in place to ensure that Allied Health Professionals (AHPs) had been through the CRB check process.
- The lack of any evidence that the arrangement with a third party provider to undertake CRB checks for locum doctors was reviewed.

I can confirm that the Trust policy for verification of professional registrations does include AHPs and that this policy was tabled on the day and accepted by the Assessor.

Unfortunately, this could not be confirmed by the HCC since the assessor who had carried out the check on C10A was not present at the follow-up meeting and the information was relayed by John Croft, who had not been present during the discussions on this Standard.

Furthermore, all of the agencies that we use for the employment of locum doctors are part of the National Framework. Agencies have to reach required standards to get onto the framework and they are audited by PASA. We have confirmation from Mary Hardman of PASA, that the PASA framework agency agreements include detailed compliance requirements in line with mandatory NHS employment checks. She also confirmed that all agencies under the framework are audited on the quality of their employment checks on a regular basis.

The Trust is further concerned that the conclusions drawn at the end of the assessment and HCC quality check process were not identical to the wording in the document that the Trust was invited to check for factual accuracy. I acknowledge the right of the HCC to make final changes, but in this case the text that had been added would certainly have triggered the Trust to submit additional data on our quarterly audits of employment checks. Again, we had these audits in our possession at the time of the qualification visit.

I had been waiting for a follow up visit from April Brown but this was recently cancelled. For this reason I am now taking this step of writing to you directly.

I now have the quandary that I and the standard leads believe that we were and remain compliant with the standard but we have been informed by HCC that we are not. In light of the above evidence, could you please clarify the HCC's current view on our compliance.

Irrespective of your answer, if the HCC have any examples of exemplar Trusts where performance on this standard is outstanding, I would be grateful to receive contact details so that we can seek advice on how further to improve our performance.

Kind regards

Yours sincerely

Professor Graham Ramsay
Medical Director/Director of Patient Safety

Cc Jan Filochowski, Chief Executive
Sarah Childerstone, Director of Workforce
Clare Mooney, Deputy Director of Workforce
Nick Egginton, Clinical Governance Manager
Mark Jarvis, Associate Director of Integrated Governance