

West Hertfordshire NHS Trust - Governance Declaration – November 2008

2008/09 In year Reporting

Name of Organisation: **West Hertfordshire NHS Trust**

Organisational risk rating score

Each organisation is required to calculate their risk score and RAG rate their current performance as per the 2008/9 Provider Management Regime, in addition to providing comment with regard to any contractual issues and performance against projected HCC targets:

Key Area for rating / comment by Provider	Score / RAG rating
Governance Risk Rating (RAG as per East of England Provider Management Regime guidance)	Amber
Financial Risk Rating (Assign number as per East of England PMR guidance)	3
Contractual Position (RAG as per East of England PMR guidance)	Green
2008/9 Quality Rating (RAG as per East of England PMR guidance based on in year forecast)	Green

Governance Declarations

EofE Organisations subject to the Provider Management Regime must ensure that plans in place are sufficient to ensure compliance in relation to all national targets and core standards including ongoing compliance with the *Code of Practice for the Prevention and Control of Healthcare Associated Infections* and declare any contractual issues and highlight any material changes to the 2008/9 HCC forecast. No supporting detail is required unless compliance cannot be confirmed.

Please complete sign **one** of the two declarations below. If you sign declaration 2, provide supporting detail using the form below. Signature may be either hand written or electronic, however please be sure to print your name.

Governance declaration 1

The board is satisfied that plans in place **are sufficient** to ensure ongoing compliance with all existing targets (after the application of thresholds) and national core standards and with all known targets going forward. The board is satisfied that plans in place are sufficient to ensure ongoing compliance with the *Code of Practice for the Prevention and Control of Healthcare Associated Infections* (including the Hygiene Code). The board also confirms that there are no material contractual disputes and that it is on track to deliver the projected HCC rating.

Please see declaration 2.

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Governance declaration 2

For Governance, Finance, Service Provision, Quality and Safety or the *Code of Practice for the Prevention and Control of Healthcare Associated Infections* the Board cannot make Declaration 1 and has provided relevant details below.

The board is satisfied that plans in place **are sufficient** to ensure ongoing compliance with all other existing targets (after the application of thresholds) and national core standards and with all known targets going forward. The board also confirms that there are no material contractual disputes and that it is on track to deliver the projected HCC rating.

(Signed by)



(Please Print Name) **Jan Filochowski**

on behalf of the Board of Directors

Acting in capacity as **Chief Executive**

* delete as appropriate

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If Declaration 2 has been signed:

Please identify which targets have led to the Board being unable to sign declaration 1. For *each area such as Governance, Finance, Service Provision or HCC rating forecast (including as relevant national targets or core standards)* please state the reason for being unable to sign the declaration, and explain briefly what steps are being taken to resolve the issue. Please provide an appropriate level of detail.

Target / Core Standard:

The following sections provide commentary on West Hertfordshire NHS Trust's areas of non compliance as at September 2008.

1. Code of Practice for the Prevention and Control of Healthcare Associated Infections (including the Hygiene Code)

We are compliant with the Hygiene Code, with the exception of duty 4.

As at November 2008, we are fully compliant with the Hygiene Code, with the exception of duty 4. We are not compliant with duty 4 due to our decontamination non compliance, which is detailed in **section 3.1**.

Further to achieving decontamination compliance in Spring 2010, **we will be compliant with the hygiene code from spring 2010.**

2. National targets

We are not complaint with one national target.

In November 2008 our performance was below plan for 18wks admitted patients (85.2%), and so we were non compliant with delivering the agreed 18weeks admitted patients trajectory. This is our 4th month of below plan performance.

We are planning to achieve more than 90% for 18weeks admitted patients for December 2008.

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3. Core standards compliance

At the end of the 2007/08 financial year we were non compliant with four core standards –

1. Core standard C4c: All reusable medical devices are properly decontaminated prior to use and the risks associated with decontamination facilities & processes are well managed (Decontamination)
2. Core standard C20a – A Safe & Secure environment that promotes care & optimises health outcomes (Health & Safety)
3. Core standard C20b: Environments that support patient privacy and confidentiality (Single Sex Accommodation)
4. Core standard C23: A systemic & managed health promotion programmes are in place (Public Health)

The table below details our year to date core standards compliance:

Declaration	Core standards non compliance	Non compliance	Changes in compliance
April 2008	4	C4c, C20a, C20b, C23	-
May 2008	3	C4c, C20a, C20b	We declared compliance on C23 , a systematic and managed health promotion programme in place (public health), further to implementing our action plan.
June 2008	2	C4c, C20a	We declared compliance on C20b , environments that support patient privacy and confidentiality (single sex accommodation); further to having completed the necessary works which resulted in separate male and female MRSA bays at Watford Hospital.
July 2008	2	C4c, C20a	-
Aug 2008	2	C4c, C20a	-
Sept 2008	4	C4c, C10a, C14c, C20a	We declared non compliance on an additional two core standards: C10a – Employment checks C14c – Accessible complaints procedure
October 2008	4	C4c, C10a, C14c, C20a	-
November 2008	4	C4c, C10a, C14c, C20a	-

As at November 2008 we are non compliant on four core standards.

3.1. Core standard C4c: All reusable medical devices are properly decontaminated prior to use and the risks associated with decontamination facilities & processes are well managed (Decontamination)

We continue to finalise our project plans, which will detail how we will become compliant with core standard C4c. There are 4 projects, which require completion in order to be able to declare compliance – three under the remit of West Hertfordshire NHS Trust planning and one under the remit of a consortium approach.

Trust led -

1. Endoscopy (Hemel Hempstead) – business case approved in September 2008. Further to review the proposed location of the new unit has been updated, and the project completion date is June 2009.
2. Endoscopy (Watford) – further to the initial proposed business case being reviewed a revised solution is required. Proposals are currently being developed and will now be presented to the executive team by January 2009.
3. ENT – business case approved in November 2008. Project timetable being finalised, the initial estimates is 6-9months.

Consortium led -

4. We are part of a sector consortium project, which is currently ongoing to deliver a decontamination centre for surgical instruments, with the project completion date proposed as Spring 2010.

We are planning to become C4c compliant by Spring 2010.

3.2. C10a – Employment checks

From September 2008 we have declared non compliance with C10a. This is further to a Healthcare Commission inspection of our compliance with this standard, which found us to be non compliant. On 25th November 2008 we formally appealed to the Healthcare Commission disputing their findings, as we believe we have the evidence to support a declaration of compliance. We await the outcome of the appeal.

3.3. Core standard C14c - Accessible complaints procedure

From September 2008 we have declared non compliance with C14c.

We have set ourselves the target of delivering 85% compliance with the 25 day response time on complaints by March 2009.

We are planning to become compliant on C14c by March 2009.

3.4. Core standard C20a – A safe & secure environment that promotes care & optimises health outcomes (Health & Safety)

We will ensure that by March 2009 we would have implemented our Health and Safety action plan, which will ensure we achieve compliance.

We are planning to become compliant on C20a by March 2009.

3.5. Projected end of year position

As at November 2008, we are planning to be non compliant on one core standard by the 31st March 2009.

We are planning to be compliant on core standard C4c by spring 2010.

4. Financial Risk Rating

Our financial risk rating continues to be 3. This is due to the current I&E surplus being lower than planned. We continue to forecast an end of year rating of 4, based on the planning assumption that we will deliver a full-year surplus of £4.4m.