
Trust Board Meeting, 24th November 2011

Decontamination Compliance Programme Update

Presented by Chris Pocklington, Director of Delivery

Background

The Trust's decontamination facilities for both theatre instruments and endoscopy do not meet recent Health Technical Memoranda (HTM) guidance, resulting in a declaration of non-compliance to CQC and other regulatory agencies. The risk to services is recorded on the Trust's Board Assurance Framework and appropriate controls are in place and being monitored.

After consideration of an options paper, the Board made a decision to pursue an off-site strategy for theatre sterile services with a private service provider that is already in contract with the North West London NHS Decontamination Consortium (NWL). The Board has received several updates on progress and issues relating to the NW London Decontamination Service and the approach to be adopted.

The strategy adopted for Endoscopy decontamination was to create compliant facilities within existing sites given the very significant investment in 'scopes (in excess of £500k) needed to achieve a centralised solution.

TSSU Off-site Progress & Issues

The Board was presented with an update on progress in these negotiations at its October Development Session and apprised of the possible alternative strategies that could be pursued in response to contractual issues that have emerged, relating to the NWL service.

The Board accepted the Project Director's recommendation that a new options appraisal should be generated. This paper was intended to provide an update on progress.

However, the discussions between IHSS and NWL have taken a significant step forward and some changes are being proposed including a proposal to vary elements of the contract and processes covered. This may incur additional charges to the Trust through cost variations to elements of the service provided and these changes are being reviewed.

NW London is awaiting legal advice on the revised change proposals from IHSS and the NW London Decontamination Project Board is scheduled to meet on 18th November. This will inform the recommendations that will be taken to the Board at its December Development Session.

It should be noted that whilst there is strong support for a solution that brings this facility and service back in to our ownership, the projected capital cost would be in excess of £2m, which is not expected to be available in the near future, and (if it were made available) would alter the LTFM and IBP for FT status.

Endoscopy Progress & Issues

The Hemel Endoscopy Decontamination Compliance project works are approaching completion. The new decontamination equipment has been delivered and is in the process of being commissioned. A go live date is currently forecast for early in the New Year.

At Watford, the Trust is finalising the appointment of an NHS ProCure21+ contractor (IHP) to take the scheme forward from the "outline" designs agreed with users. Work is continuing with users to refine and improve the designs. The target go-live date for the Watford unit is October 2012, with a

proposed start on site before March 2012. In order to enable this, a P21+ mechanism to ensure milestone payments that meet Trust capital spend profiles will be employed.

On-going decontamination equipment failures and water quality issues are currently creating a significant pressure in the unit and on the Project team. An interim solution whereby a temporary facility is created and a decontamination washer leased is being explored. The service continues to work with the Project Team flexibly, but there are significant challenges to this approach that need to be worked through.

The P21+ partner has flagged a potential cost risk on the overall allowed budget for Endoscopy Decontamination. The Project team and Decontamination Compliance Programme Board will manage this risk and ensure co-ordination and alignment with the Capital Programme is achieved. However the service is considered “mission critical” and new compliant facilities must be delivered in time for the next JAG Accreditation visit which would otherwise result in the removal of the Trust’s ability to provide screening activity and the loss of a significant annual income (as well as potentially not being able to receive emergency patients of a specific type).

Recommendation

The board should note the content of this report.

Sarah Wiles

Director of Strategy and Infrastructure