

# Core standards assessment final declaration



Reference: CSA92147  
Date: 03/05/2006

## Trust self-declaration:

Organisation name	Whittington Hospital NHS Trust (The)
Organisation code:	RKE

## Please supply the following information:

General statement of compliance	<p>The Board of the Whittington Hospital NHS Trust has reasonable assurance that there have been no significant lapses in meeting the core standards during the period 1 April 2005 to 31 March 2006, other than for the exceptions recorded for standards C4c and C14a. Plans have been put in place during the year to address both of these standards.</p> <p>Commentaries have been provided by the following local partners: North Central London Strategic Health Authority, Whittington Hospital Patient &amp; Public Involvement Forum, Islington Overview &amp; Scrutiny Committee, and Harinegy Overveiw and Scrutiny Committee. They support the Whittington's self-assessment against the standards. In addition, the Trust's auditors have declared themselves satisfied with the approach taken to the self-assessment.</p>
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## Please indicate your trust's compliance with each of the following 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)	Compliant

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	interventional procedures guidance.	
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.	Not met
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

Please complete the details below for standard C4c for which you indicated your trust does not comply, or that you have insufficient assurance:

Start date of non-compliance or insufficient assurance	17/11/2005
End date of non-compliance or insufficient assurance (planned or actual)	31/03/2007
Description of the issue (you are restricted to 1500 characters including spaces. This is approx.	Reports of a cluster of contaminated theatre trays in November 2005 were declared as a Serious Untoward Incident.

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200 - 250 words or half a side of A4 typed)	
Actions planned or taken (you are restricted to 1500 characters including spaces. This is approx. 200 - 250 words or half a side of A4 typed)	An SUI investigation was completed and an associated action plan was agreed and implemented, with a full review of procedures in sterile services. No further incidents have occurred. An interim plan is underway with the aim of moving decontamination services off site by December 2006. A long term programme has been agreed with the North West London decontamination project and the Whittington has become a full member of the NWL project board. The aim of the project is to develop new centralised decontamination services by December 2008.

Please indicate your trust's compliance with each of the following 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 and met.	Compliant

Please indicate your trust's compliance with each of the following 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

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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 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	Compliant

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	consistently applied.	
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**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:

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 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.	Not met
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	Compliant

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	necessary help with feeding and access to food 24 hours a day.	
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 complete the details below for standard C14a for which you indicated your trust does not comply, or that you have insufficient assurance:

Start date of non-compliance or insufficient assurance	01/04/2005
End date of non-compliance or insufficient assurance (planned or actual)	30/09/2005
Description of the issue (you are restricted to 1500 characters including spaces. This is approx. 200 - 250 words or half a side of A4 typed)	Only 51% of patient complaints received between April and September were responded to within 20 working days
Actions planned or taken (you are restricted to 1500 characters including spaces. This is approx. 200 - 250 words or half a side of A4 typed)	Internal processes and training for the management of complaints were reviewed and reinforced, and a new Complaints Co-ordinator appointed in October 2005. Weekly monitoring of complaint responses was reviewed at Executive Team meetings, and performance was reported to Trust Board every two months. The standard was met during Quarters 3 and 4, with 83% of complaints being responded to within 20 working days.

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

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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

Please indicate your trust's compliance with each of the following 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 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

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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

**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 signatories	10
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Electronic sign off – details of individual(s)

	Title	Full name	Job title
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	Mr	Narendra Makanji	Chairman
	Mr	David Sloman	Chief Executive
	Mrs	Margaret Boltwood	Director of Human Resources
	Mr	Peter Farmer	Non-Executive Director
	Ms	Pat Gordon	Non-Executive Director
	Ms	Doreen Henry	Non-Executive Director
	Mr	Philip Ient	Director of Facilities
	Mrs	Celia Ingham-Clark	Medical Director
	Professor	Anne Johnson	Non-Executive Director
	Ms	Deborah Wheeler	Director of Nursing & Clinical Development

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.

<p>Strategic health authority commentary</p>	<p>The SHA established agreed guidance for the process of self assessment, which we regard as a fundamental part of good governance, and asked organisations to provide information against each of ten criteria set out in the SHA guidance, so that the HC can have a measure of confidence in the declaration. The trust did not explicitly state the extent to which their self-assessment process complies with the ten elements of the NCL sector guidance, but submitted a chronological description of their process:</p> <p>Evidence of meeting the guidance on the self assessment process is clear in -          Process and strategy agreed by board          Led by board involving NEDs and executive directors appropriately          Management accountability for reporting and monitoring          Independent checking of evidence and balancing of stakeholders' perceptions          Reasons given for insufficient assurance          Sustainability</p> <p>Evidence is less clear in -          Integrated governance          Reliability and robustness of self assessment process          Significance of lapse is properly considered          Evidence used is appropriately takes into account the context</p> <p>We are satisfied with the action plans that have brought into compliance child protection (C2), complaints (C14a, from October 2005), and public health disease prevention and health promotion (C23). Due to a SUI in November 2005, the trust was concerned about its degree of compliance with decontamination of medical devices and expects to make a conclusive statement to the HC in its declaration. We are satisfied that the SUI was managed appropriately.</p>
<p>Patient and public involvement forum commentary</p>	<p>Whilst the Patient and Public Involvement (PPI) Forum for Whittington Hospital may not be in a position to formally assess the Hospital's performance, overall the Forum has a favourable impression. Here are some specific comments:</p>

Areas the PPI Forum considers the Hospital to have done well:

- A study with Healthlink and Groundswell regarding homeless people in the Emergency Department has reported positive feedback regarding the change in behaviour in dealing with homeless people. The project continues and is pinpointing the hospital procedures dependant on when the homeless person is seen and who they are referred to, as well as agreeing definitions with all interested parties (and there are many). There are now two flowcharts which can be worked on to identify and close the gaps.
- A very good communication link between the forum and the Trust has been set up, which is positively supported by the Trust. The forum has achieved observer status on the board and Patient Experience Review Group, has a representative attending Walk-in-Centre meetings and on the steering group and is participating in future development plans. The forum looks forward to further progress in involving the wider community in decision-making.
- The forum have taken an interest in patient meal times and were pleased to see that protected meal times have given staff more time to attend to elderly patients' needs. We hope that the Trust will continue to explore ways of making food as nutritious and appetising as possible for patients with poor appetites or special needs. The forum is also very encouraged at the introduction of housekeepers on the wards where they have made a positive difference.
- The forum commends the Whittington on developing an outreach programme from the pharmacy service, seeing designated members of the department regularly going to wards to discuss medication with patients, doctors and nurses, encouraging patients to retain medication at their bedsides
- The forum is pleased to see that waiting times have improved for outpatients at the pharmacy
- We would like to commend the Trust on taking action to protect patient and community interests when dealing with the Jarvis financial crisis and its impact on the development
- We are pleased to hear that the Trust has moved up in its rating as a good hospital to work for, resulting in better recruitment. The move towards foundation status is being closely monitored as the forum wishes to ensure patients are not placed at a disadvantage by this move
- The Trust is commended on their receiving Clean Air Gold Award. Well done and keep it up.
- We are very pleased to see the great improvement by the Trust's response time to complaints. We hope the trust will strive to maintain and build on this improvement
- The forum is especially pleased at the Trust's co-operation in setting up an HIV/AIDS antenatal support group which arose from the forum's outreach activity

Areas that the Forum feels need further attention by the Trust:

- The area of data protection in relation to spiritual needs requires more attention to make it easier for patients' spiritual needs to be met, without violating privacy; the forum has been liaising with the Trust on this
- The forum has an ongoing concern which the Hospital shares on cleaning standards and will continue to monitor this
- We recognise the Whittington is a flagship hospital for "Choose & Book", however we would like to monitor more closely the amendments/alterations made to improve the patient experience through better electronic communication within the Trust as well as with other NHS bodies
- Prescription Pre-payment Certificates - these are not as widely available as would be desirable, however the forum is working with the

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	<p>hospital on this matter (October 2005)</p> <p>- Communications on newsworthy issues between the Trust and the forum need improvement. The forum has been asked to comment on a number of occasions without being made aware of the background or current status. We would welcome a closer and informed relationship with the Trust's press office.</p>
How many overview and scrutiny committees will be commenting on your trust?	2

**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 commentary	<p><b>ISLINGTON COUNCIL OVERVIEW COMMITTEE</b></p> <p>the Overview Committee decided to focus on the scrutiny of Core Standards C22-24 in particular C22(a) and (c) that link in with the Council's agenda round public health. The Overview Committee were aware that this was a new process for all concerned and hoped that it would be the start of a positive engagement between the Council's Overview Committee and the respective Trusts.</p> <p><b>C22 a&amp;c</b></p> <p>The Whittington Hospital NHS Trust is a community based district hospital which serves the population of Islington and Haringey almost exclusively. We were pleased to note that the Trust had a strong commitment to working and co-operating with other partners and agencies to improve the health of residents. A recent example of this co-operative was the work undertaken by the Council, PCT and the Whittington Hospital to improve the services offered to stroke sufferers at the Whittington. We noted the submissions made to us in respect of local partnership arrangements and strategic partnership and crime and disorder reduction partnerships. There is a high priority for developing further partnerships and co-operation with other agencies.</p> <p><b>C22b</b></p> <p>the Whittington serves a multi-cultural community and we were pleased to note that the Trust had arrangements in place to be able to respond to these communities such as an extensive diabetes service as diabetes is a common problem for many South Asian women. We noted a number of other initiatives being undertaken in their submission which were all designed to manage disease prevention and that the Trust was a non-smoking site and had been awarded a Clean Air Gold Award from the Roy Castle Foundation.</p> <p>We were pleased to note that food catered for all ethnic diets in addition to vegetarian however we were informed that visitors were made to leave unless helping with feeding - the Committee were of the view that there was a need to ensure that cultural eating habits were recognised as in some cultures one other person was always present when another</p>
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	<p>person was eating and any policy needed to reflect this cultural diversity.</p> <p><b>C23</b> We were pleased to note that the Whittington had taken major steps to prevent the spread of MRSA given that this is a major area of concern to the public. The Committee also welcomed that in partnership with the PCT, smoking cessation clinics were run in the hospital for staff and patients and that further health promotion programmes were being put in place to deal inter alia with substance misuse, cardiovascular disease, nutrition and exercise.</p> <p><b>C24</b> the Committee welcomed the assurances that emergency/major incident plans were in place and had been tested in action during the 7th July bombings and had generally been satisfactory. We were also assured that flu pandemic emergency plans were in place and agreed with the Strategic Health Authority although we were obviously unable to measure its effectiveness.</p> <p><b>General</b> The Committee noted that the Annual Healthcheck was a new process for all concerned and that the Trusts had had to spend a significant amount of time trying to understand it. It is hoped that as the process developed this would enable other similar types of information gathering not to be able to be undertaken.</p> <p>It should be noted that the Committee were only considering the issues raised by the standards as set out under the Public Health domains and therefore some of the information that was discussed, although giving an overall view of how the Trust worked and its approach to quality, did not provide conclusive evidence of compliance with the standards.</p> <p>the Committee noted that the Whittington had a considerable agenda for developing their approach to public health and their responsibilities towards the community that they serve and would be building on this progress in the coming year.</p> <p>the Committee noted that ongoing discussions with partners will be necessary if the Trust is to be able to declare compliance with the developmental standards that will be introduced in 2006/07</p>
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### Overview and scrutiny committee 2 - commentary

<p>Overview and scrutiny committee commentary</p>	<p><b>HARINGEY COUNCIL OVERVIEW AND SCRUTINY COMMITTEE</b> the comments made by the Overview and Scrutiny Committee in relation to core standards have come from general health scrutiny work that has been undertaken during the year and from focussed reviews on specific topics. Please note that comments from reviews apply only to the specific service area referred to, unless otherwise stated. The Committee welcomed the positive and pro-active approach taken by Trust and the level of information provided, which had not been readily available to scrutiny committees previously. It recognised the need and importance of working together to improve the health and well being of residents.</p>
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C6

The Committee noted evidence from stakeholders received at the Haringey Health Scrutiny Conference that patients were now presenting more regularly with tropical and other rare diseases that hospital staff were not always familiar with. This was due to the increasingly diverse nature of the community served. The Committee feels that better detection and treatment might be facilitated by the development of closer links with the Hospital for Tropical Diseases.

C13

the Committee feels that the current condition at Accident and Emergency can compromise the ability of the hospital to treat patients with dignity and respect. The Haringey Health Scrutiny Conference noted the views of stakeholders that the environment was not pleasant and could be distressing, particularly for children. It was also noted that the service is under intense pressure and operating substantially above its planned maximum capacity. The Committee warmly welcomes plans to create a separate paediatric area in Accident and Emergency.

C15

the Committee welcomes the introduction of protected mealtimes. This has helped to ensure that patients are served hot meals and are not disturbed during this time. The Committee was reassured to hear from the Trust that patient complaints in relation to food are acted upon and feedback responded to. For example, menus have been changed in the light of patient feedback.

C17

The Committee feels that the Trust has demonstrated that it regards engaging with the local community as a high priority. It has shown a willingness to engage with a range of organisations in order to obtain the views of users and their representatives. In particular, good links have been developed during the past year with overview and scrutiny. This included assistance with the setting up of a Health Scrutiny Conference to which a wide range of stakeholder organisations were invited, including user and carer representative organisations.

C18

The Committee notes that the Trust faces enormous challenges in addressing needs equitably within the locality due to the very wide diversity of communities. There are almost 200 different languages spoken in Haringey and there is one of the largest refugee and asylum seeker communities within the country. The Committee heard evidence from stakeholders at the Haringey Health Scrutiny Conference that not all communities within the Borough understand how the NHS works and that it is not uncommon for the hospital to be the first contact that people have had with health services in this country. Many users are not registered with a GP and use the hospital in the first instance when unwell. The Committee recognises the additional strain on resources that these factors place on the trust and the therefore high level of achievement that meeting these exceptionally diverse needs can represent.

The Committee noted the views expressed at the Haringey Health Scrutiny Conference that accessibility is an issue that affects people in work and those with childcare responsibilities. It therefore suggests that, in order to enhance accessibility to services, consideration be given to making diagnostic appointments available after school hours, in the evenings and at weekends.

	<p>C19 The Committee notes with concern the rise in numbers of patients attending Accident and Emergency at the hospital with non emergency conditions. The service is under intense pressure and operating substantially above its planned maximum capacity. This is a national phenomenon and systems need to be put in place to divert such patients with non emergency conditions away from Accident and Emergency. The problem is exacerbated by the comparatively large number of patients in the locality who are not registered with a GP. The Committee welcomes the measures that are being taken to address this issue. This includes plans by the Trust to set up a walk in centre at the hospital and the establishment of a post, with funding from the PCT, to filter out non emergency cases.</p>
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