

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

Report to: Joint Overview & Scrutiny Committee
Report from: Acting Director of Clinical Governance
Date: 23rd March 2009
Subject: Indicative Annual Health Check Declaration 2008/09

The paper outlines the requirements of reporting on the Annual Health Check Declaration for 2008/2009. This includes assessment against the 44 core standards.

Also included is an explanation on how UHL manages the process of self assessment to ensure robust systems are in place and the UHL Trust Board has sufficient assurance to make its declaration.

Indicative assessments at this stage suggest full compliance against all 41 of the 44 core standards with 3 further standards currently under discussion with regards to the level of compliance. These 3 standards (C7e, C8b and C20b) currently have a compliance level of 'insufficient assurance'. A verbal update will be presented at the meeting on 23rd March with regards to current status.

The UHL Trust Board will consider the declaration at its meeting on 9th April 2009 before 'signing off' the information.

The JOSCs are invited to question the Chief Executive, Acting Director of Clinical Governance and the Deputy Chief Nurse on UHL's indicative annual health check declaration.

1. INTRODUCTION

- 1.1 All Trusts are required to submit by noon on 1st May 2009 a declaration against the healthcare standards covering the time period 1st April 2008 to 31st March 2009.
- 1.2 This declaration must be made in public and UHL will present at the Trust Board meeting on 9th April 2009. Following submission to the Healthcare Commission it will be entered on UHL's website.
- 1.3 The declaration will cover 44 core standards.
- 1.4 This paper details the process for assessment and the indicative assessments to date.
- 1.5 Third party commentary must be invited from stakeholders including the Overview and Scrutiny Committee, the Local Involvement Networks, the Strategic Health Authority, the Local Safeguarding Childrens Board and the Learning Disability Partnership Boards. The comments received will be reproduced verbatim.

2. ASSESSMENT OF COMPLIANCE AGAINST CORE STANDARDS

- 2.1 Trusts are asked to declare compliance against the core standards using the following headings: -
 - **Compliant:** where the Trust Board determines that it has had 'reasonable assurance' that it has been meeting a standard without significant lapses for the whole of the assessment year from 1st April 2008 to March 31st 2009. The Healthcare Commission advise that 'reasonable assurance', by definition is not absolute assurance. Conversely, reasonable assurance cannot be based on assumption. Reasonable assurance is based on documentary evidence that can stand up to internal and external challenge.
 - **Not Met:** where assurances received by the Trust Board make it clear that there has been one or more **significant lapses** in relation to a standard during the year. Boards need to decide whether any identified lapse is significant or not. The decision includes consideration of a lapse's duration, its potential harmful impact and the likelihood of that harmful impact occurring. There is no simple formula of what constitutes a 'significant lapse'.
 - **Insufficient Assurance** – where a lack of assurance leaves the Trust Board unclear as to whether there have been any significant lapses during 2007/08.
- 2.2 The Healthcare Standards and Improvement Steering Group at its meeting on 24th February undertook the first round of 'confirm and challenge' against the 44 core standards.
- 2.3 A second round of confirm and challenge was completed on the 12th March 2009 by the Trust Board. Of the 44 core standards 41 were judged to be compliant with a further 3 (C7e, C8b and C20b) requiring additional information. At this stage these were deemed to have insufficient assurance. Additional information is being sought for these standards and will be presented and discussed at the Trust Board meeting on 9th April.
- 2.4 Each of the 44 core standards and their indicative compliance level are listed at Appendix A.
- 2.5 Commentary has been invited from all the required stakeholders and has been requested for the forthcoming April Trust Board meeting.

3. ACCOUNTABILITY ARRANGEMENTS AND ASSURANCE PROCESSES

Assurance is obtained in a number of ways:

- 3.1 The Healthcare Standards Steering Group, chaired by the Chief Executive, meets on a regular basis and is responsible for the co-ordination of all of the processes associated with the assessment of compliance with the core standards. Membership includes Chief Executives (or representatives) from NHS Leicester City and NHS Leicestershire County and Rutland, full time officers of the Joint Overview and Scrutiny Committee and UHL General Managers. Minutes of the meetings are submitted to UHL Trust Executive.
- 3.2 Regular reports on core standard assessment and the annual health check are made to the Trust Board, Governance and Risk Management Committee and Audit Committee. These reports include results of the interim quarterly assessments.
- 3.3 An annual review by East Midlands Internal Audit Services. The objective of the review is 'to provide assurance on the robustness of the Trust's approach to assessing compliance of the standards for better health core standards and the consistency in collation and recording of appropriate evidence'. In February 2009 East Midlands Internal Audit Services reported that "significant assurance can be provided that there is a generally sound system of control designed to meet the system's objectives.
- 3.4 An accountability framework with an Executive Lead for each of the 44 component parts of the core standards supported by a Lead Officer. These 'experts' are responsible for completing the self assessments of compliance based on analysis of the evidence available.
- 3.5 Assessments are completed three times during the year to ensure a regular and robust approach to self assessment through completion of an assessment framework. This requires the following:
 - A review of the latest guidance 'Criteria for Assessing Core Standards in 2008/09 for Acute Trusts' and the need to highlight any changes.
 - The completion of the Healthcare Commission 07/08 (latest published) lines of enquiry to collate evidence.
 - The review of the relevant section(s) of the 07/08 Trust profile report. This is the information used last year as part of the cross checking process by the Healthcare Commission.
 - Consideration of the clinical directorates self assessments and suggested evidence for the relevant core standards.

4. CONCLUSION

- 4.1 UHL will be 'signing off' its declaration at the public Trust Board meeting on 9th April 2009. The Joint Overview & Scrutiny Committee are invited to provide its commentary for inclusion in the declaration.
- 4.2 The Chief Executive, Acting Director of Clinical Governance and Deputy Chief Nurse will be in attendance to take any questions the Joint Overview & Scrutiny Committee may have.

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