

* Please enter your NHS code and click search. Then please 'select' the name of your organisation and click continue below:

This is the information that we have for your organisation.

If this information is incorrect please contact the Care Quality Commission at forms@ccq.org.uk

Organisation Name:

Chief Executive's First Name:

Chief Executive's Surname:

Chief Executive's Email:

Organisation Code:

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

General guidance on how to complete the declaration form

You might find it helpful to print the following instructions (using the print function of your browser) so you can refer to them easily while you are completing the declaration form.

We have also published a guidance document titled "your guide to the core standards assessment 2009/10 "which you may find useful. This can be located by using the following link:

<https://www.cqc.org.uk>

This guidance covers:

How the declaration form is laid out
Guidance related to each section
FAQs

How the declaration form is laid out

The declaration form is divided into the following sections

1. General statement of compliance
2. Domain pages for core standards
3. Sign off

For the majority of sections there are multiples pages which require completion. You can save the form at any point, but you will not be able to submit a section until all questions are completed and you will not be able to submit the entire form until all sections have submitted.

Please note that for 2009/10 you are not required to submit commentaries from third parties.

General Guidance

The declaration you make will be the basis of your score for the assessment of core standards.

Your core standards declaration should cover the period from April 1st 2009 to October 31st 2009.

Please note, as in 2008/09, you will not be asked to make a statement on the Hygiene Code, nor is there a specific developmental standards assessment as part of the 2009/2010 periodic review.

When making your declaration you must consider whether your trust's board (or an appropriate officer with delegated authority from the board) has received reasonable assurance that the organisation has been compliant with the core standard for the period of 1st April 2009 - 31st October 2009 and that no significant lapses have occurred.

When making your declaration you may find it helpful to keep a record or file of the evidence that your board considered when reaching its judgment.

Section 1. General statement of compliance

The general statement is an opportunity for trusts to place in context the detail of the domain pages. Each trust should use the general statement of compliance to present a summary of its declaration. It is important for the statement to be consistent with the detail presented in the rest of the declaration.

Section 2. Domain pages for core standards

This is the main body of the declaration form. Each standard your trust is required to declare against will be set out here, organised under the domain headings.

Initial questions: For each part standard you must categorise your trust under one of the following headings:

Compliant: a declaration of compliant should be used where a trust's board determines that it has reasonable assurance that it has been meeting a standard, without significant lapses for the period of 1 April 2009 to 31 October 2009.

Not met: a declaration of 'not met' should be used where the assurances received by the trust's board make it clear that there have been one or more significant lapses in relation to a standard during the stated period.

Insufficient assurance: a declaration of 'insufficient assurance' should be used where a lack of assurance leaves the trust's board unclear as to whether there have been one or more significant lapses during the stated period. However, in circumstances where a trust is unclear about compliance for the stated period but has good evidence about the occurrence of a significant lapse during the stated period that a declaration of "not met" may be more appropriate.

For each standard, the boards of trusts need to decide whether any identified lapses are significant or not. In making this decision, we anticipate that boards will consider any potential risks to patients, staff and the public, and the duration and impact of the lapse. The declaration should not be used for reporting isolated, trivial or purely technical lapses in respect of the core standards.

Subsequent questions if you declare 'not met' or 'insufficient assurance': If you declare 'not met', or 'insufficient assurance' for a particular standard, you must complete the subsequent questions in the declaration form which relate to action plans. Please note you are not required to complete these if you have declared compliant and therefore you will not be able to input data.

Start date - This is the date from which the significant lapse occurred or the insufficient assurance was identified. The actual date should be given, even if this was before 1 April 2009.

Date at which you expect to have assurance of compliance - this is the date from which the board was or will be reasonably assured that it is fully compliant with the standard. This date should reflect the details within the action plan and can be dated after the end of the 2009/2010 assessment year. If non compliance will not have been resolved by the end of the year (31 March 2010), then the "end date of non compliance" should not be entered as 31 March 2010, but the appropriate later date.

Description of the issue - a short description of the significant lapse or why the trust does not have reasonable assurance.

Action plan - a short summary of what action has been or is planned to be taken to rectify the issue by the stated end date of non compliance

We will also ask you for additional information where:

in your 2008/2009 declaration the standard was declared as 'not met' or insufficient assurance' and in your 2008/2009 declaration the corresponding action plan had an end date on or before 31st October 2009 and the standard has again been declared as 'not met' or 'insufficient assurance' for 2009/2010

You will need to describe the circumstances for this second consecutive declaration of non-compliance in light of the action plan. You will not be able to access or be required to complete this text box unless the above criteria has been met.

Some standards are not included as part of the core standards assessment and you are therefore not required to declare against them. They are assessed separately elsewhere in the periodic review for 2009/2010. These standards are:

C7d - this relates to financial management and will be measured through the quality of financial management assessment for which we will rely on the findings of the Audit Commission or Monitor.

C7f - this relates to existing performance requirements and will be measured through the existing commitments and national priorities assessment.

C19 - this relates to access to services with nationally agreed timescales and will be measured through the existing commitments and national priorities assessment.

In addition two standards have been judged to be not applicable to ambulance trusts for the 2009/2010 core standards assessment and as such will only be shown on the declaration form for other trust types. The two standards are

C15a and C15b - regarding provision of food for patients.

You will also not be required to declare against standards related to healthcare-associated infections as from the 1 April 2009, all NHS organisations to which the Health and Social Care Act 2008 Code of Practice for the Prevention and Control of Healthcare Associated Infections applies were registered with the Care Quality Commission. Standards C4a and C4c are therefore covered by our registration of trusts in 2009/10.

Trusts should note that a declaration for standard C21 will be required. However, element two of core standard C21 will not be assessed for all NHS provider trusts in 2009/10 as element two is also covered by our registration of trusts in 2009/10 with regard to the Code of Practice for the Prevention and Control of Healthcare Associated Infections.

Section 3. Sign off

The Care Quality 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 from the board.

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 for the core standards
- 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

Frequently Asked Questions

- Q1. What do you mean by reasonable assurance and significant lapse?
- Q2. Why can I not access all the sections of the form?
- Q3. How do I delegate to someone who isn't listed in the delegate list?
- Q4. How do I nominate someone to complete the form?
- Q5. How can I print a section of the form?
- Q6. How can I print all the form in one step?
- Q7. How can I print the form in the format it would be appear as submitted, so that it does not show all the not applicable questions?
- Q8. Some of the standards seem to be missing, why is this?
- Q9. What are the key dates with regard to the declaration form?
- Q10. I am still having trouble with the webform, where can I get further help?
- Q11. Where can I find further information on the core standards assessment for 2008/2009?
- Q12. How do I submit my declaration form?
- Q13. I need to resubmit my form, what do I do?
- Q14. My pdf shows standards and questions which are not relevant to my trust - what should I do?
- Q15. I've changed my declaration from not met to met, however the text I entered still appears on the form and the pdf - what should I do?

- Q1. What do you mean by reasonable assurance and significant lapse?

Reasonable assurance

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. In determining what level of assurance is reasonable, trusts must reflect that the core standards are not optional and describe a level of service which is acceptable and which must be universal. Our expectation is that each trust's objectives will include compliance with the core standards. This will be managed through the trust's routine processes for assurance.

Trusts' boards should consider all aspects of their services when judging whether they have reasonable assurance that they are meeting the published criteria for assessment. Where healthcare organisations provide services directly, they have primary responsibility for ensuring that they meet the core standards. However, their responsibility also extends to those services that they provide via partnerships or other forms of contractual arrangement (for example, where human resource functions are provided through a shared service). When such arrangements are in place, each organisation should have reasonable assurance that those services meet the requirements of the standards.

Significant lapse

Trusts' boards should decide whether a given lapse is significant or not. In making this decision, we expect that boards will consider the extent of risk of harm this lapse posed to people who use services, staff and the public, or indeed the harm actually done as a result of the lapse. The type of harm could be any sort of detriment caused by lapse or lapses in compliance with a standard, such as loss of privacy, compromised personal data or injury, etc. Clearly this decision will need to include consideration of a lapse's duration, its potential harmful impact and the likelihood of that harmful impact occurring. There is no simple formula to determine what constitutes a 'significant lapse'. This is, in part, because our assessment of compliance with core standards is based on a process of self-declaration through which a trust's board states that it has received 'reasonable assurance' of compliance. A simple quantification of the actual and/or potential impact of a lapse, such as the loss of more than ?1 million or the death of a patient or a breach of confidentiality, for example, cannot provide a complete answer.

Determining what constitutes a significant lapse depends on the standard that is under consideration, the circumstances in which a trust operates (such as the services they provide, their functions and the population they serve), and the extent of the lapse that has been identified (for example, the duration of the lapse and the range of services affected, the numbers exposed to the increased risk of harm, the likely severity of harm to those exposed to the risk (taking account their vulnerability to the potential harm, etc).

Note that where a number of issues have been identified, these issues should be considered together in order to determine whether they constitute a significant lapse.

- Q2. Why can I not access all the sections of the form?

Some sections are only relevant to specific trust types. For instance the "Board of governors' comments" section is only accessible to mental health

and acute trusts. Additionally some questions are dependent on your declaration, for instance if you declare "not met" or "insufficient assurance" we require you to submit details.

You will only have access to those sections relevant to your trust type and your declaration.

Q3. How do I delegate to someone who isn't listed in the delegate list?

You can only delegate to those people who have been nominated to complete the form. If you wish to nominate an additional individual please complete the registration form which is available within the forms website.

Q4. How do I nominate someone to complete the form?

If you are a "Lead" and wish to nominate another person within your organisation as a nominated lead or to delegate completion of the form, you must complete the registration form available through the online forms system at using your standard log in details

Once selected the registration form will prompt you to nominate and supply the name and e-mail address of a colleague you wish to delegate access to the declaration form.

You then have to indicate whether you wish this individual to be a "Lead" or a "Completer". A 'Lead' is able to fill in the form or delegate the form to other registered users in their trust to complete. A 'Lead' has the final review of the form and is able to submit the data. A 'Completer' can fill in the form or relevant sections of it but is unable to delegate access to the form or able to submit the completed form.

Please ensure you select the 'complete' option in order to submit your nomination.

It is possible to have more than one registered lead for your organisation, if you require this please ensure you use the duplicate allocation option on the registration form.

Information will be sent to each registered lead explaining how they can access the online declaration form. Nominated leads will not be able to access their online declaration form until their registration has been submitted.

Q5. How can I print a section of the form?

On the summary page of the form select the "pdf" button for the part of the form you wish to print. This then enables you to print just that section of the form. It will print out all the questions relevant to that question, not just the ones applicable to your trust.

Q6. How can I print all the form in one step?

You are able to print the declaration form as one document through the "Available forms" section of the myform website. Select the "pdf" button which is relevant to the form you wish to print, this then enables you to print the declaration form as one rather individual sections. Please note it will print out all the questions relevant to that question, not just the ones applicable to your trust.

Q7. How can I print the form in the format it would be appear as submitted, so that it does not show the questions that are not applicable?

In previous years, prior to submission, you were only able to print a "pre-submitted" version of the PDF form using the "view printable version in PDF" link. The pre-submitted version of the PDF shows all the questions, including those which are not applicable to the trust. The questions are hidden from view on the online form. This function is still available this year.

However, there is an additional section titled "draft submission form", which will become available once you start filling in the declaration form. Clicking on this link will open a PDF form based on the information provided on the online form so far. The version of the PDF provided in this section will hide any questions not applicable to the trust based on the information provided so far.

Once the submit button is pressed the form is frozen and the final PDF only shows those questions which are applicable and the answers selected. This final PDF can be accessed by selecting the "view printable version in PDF" link.

Q8. Some of the standards seem to be missing, why is this?

Some standards are not included in the declaration, as separate assessments for them are being undertaken elsewhere in our overall assessment process or where these have been judged to not be applicable to the trust type. Please see the "Domain pages for core standards" section of this guidance for more information.

Details can be found in the published criteria documents available at the follow link:

<http://www.cqc.org.uk/guidanceforprofessionals/healthcare/nhsstaff/periodicreview2009/10/corestandards.cfm>

Q9. What are the key dates with regard to the declaration form?

On the 26th October 2009 the declaration form will be made available on our website for trusts to start entering their data. Nominated leads will not be able to access the online declaration form until their registration has been submitted.

From the 23rd November 2009 trusts will be able to submit their completed declarations. Regional teams will carry out a set of checks against each submitted declaration. We aim to complete these checks, and to inform each trust of the outcome, within three working days of receiving the declaration.

The final date for submission of the 2009/2010 declarations is 12:00 noon on the 7th December 2009. Failure to submit a declaration by the deadline may result in your trust being penalised.

By 31st December 2009 we expect all trusts to have published their declarations. If a trust does not make the declaration publicly available, we will publish it on our website indicating that it has not been shared with the local community.

Q10. I am still having trouble with the webform, where can I get further help?

If you are still having difficulties with the declaration webform please contact our helpline on 03000 61 61 61 or enquiries@cqc.org.uk.

Q11. Where can I find further information on the core standards assessment for 2009/2010?

Our guidance documents for the core standards assessment for the 2009/2010 periodic review can be found at:

<http://www.cqc.org.uk/guidanceforprofessionals/healthcare/nhsstaff/periodicreview2009/10/corestandards.cfm>

Q12. How do I submit my declaration form?

Each section of the declaration form needs to be completed and the "finish" button selected, changing the status of the section to "finished". The "submit" button is then available on the main page of the web form and the form can be submitted.

Q13. My pdf shows standards and questions which are not relevant to my trust - what should I do?

The pre submitted pdf shows all questions including those, which are not applicable to the trust and are hidden from view on the online form. This is set up so that the "pre-submit" version of the pdf showed all questions in order that it could be consider in it's entirety in hard copy before being populated. The hidden questions which do not apply to the trust and do not appear on the webform should be ignored.

Once the submit button is pressed the form is frozen and the final pdf only shows those questions which are applicable and the answers selected.

Q14. I've changed my declaration from not met to met, however the text I entered still appears on the form and the pdf - what should I do?

The text entered will disappear once the submit button is pressed, the text will remain visible until this point. This is to prevent trusts accidentally changing their declaration and losing all the data they have previously entered. This information will not be submitted as part of your declaration and will not show on the final declaration form / pdf.

You can print off a pdf version of the form as it will display once submitted. Please see FAQ 7 for more information on how to do this

Q15. I need to resubmit my form, what do I do?

All trusts will be allowed to request a resubmission between the above dates, but to ensure that we treat all trusts fairly, we will not authorise requests for resubmission after midday on 7th December 2009.

The rules for requesting a resubmission of your declaration are published on our website. We advise you to refer to these rules before submitting your declaration, and before submitting a request for resubmission. These are available at:

<https://www.cqc.org.uk>

A request for resubmission needs to be made by your trust's registered lead using the appropriate online form, which is available at:

<https://webforms.cqc.org.uk/open/survey.php?sid=527842482>

If we have authorised a request for resubmission, your trust must resubmit its declaration within five working days of the authorisation, or by midday on Monday 14th (whichever is earlier).

General statement of compliance

* Please enter your general statement of compliance in the text box provided. There is no word limit on this answer.

With the exception of lapses in relation to Core Standards C4b, C7a&c and C20a, occurring in 2008 / 2009 and which continued into 2009 / 2010, the Trust Board has reasonable assurance that there have been no significant lapses in meeting the core standards during the period April 1st 2009 to October 31st 2009.
This statement was made at a formal meeting of the Trust Board on Tuesday, 24 November 2009 in the Boardroom at Scunthorpe General Hospital.

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Safety domain - core standards (C1a - C3)

Please declare 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) interventional procedures guidance.

 compliant**Safety domain - core standards (C4a - C4e)**

Please declare your trust's compliance with each of the following standards:

* 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.

 not met

Start date of non-compliance or insufficient assurance

Date at which you expect to have assurance of compliance

Description of the issue (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)

Arising from a routine, planned inspection by the Health and Safety Executive in February 2009, issues were identified which demonstrated a failure to comply with C04b ("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." Element 1: The healthcare organisation has systems in place to minimise the risks associated with the acquisition and use of medical devices in accordance with guidance issued by the Medicines Healthcare Products Regulatory Authority.") Specifically:
o Moving & Handling: Inspection of Hoists & Slings - Lack of robust procedure for labelling of inspected hoists and slings and follow-up of defects. Trust wide.

Actions planned or taken (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)

Action has been completed by the deadline agreed with the HSE (September 2009), specifically:
The Trust has now changed from re-useable to disposable / single patient use slings. A complete review of the arrangements for the inspection of hoists and the follow-up of defects has also been undertaken and the Allianz 'Tag Check' System - a simple colour coded tagging system for lifting equipment (i.e. hoists), which is inspected at a standard frequency - was implemented on 1 August 2009. With this system a single colour is current and, together with a disc to confirm the date of the last inspection and date of the next inspection, is used to alert staff to the fact that any piece of equipment with that colour tag attached has been inspected and is safe to use. Awareness Sessions were held for all relevant ward / department managers during July. The Trust's Lifts & Lifting Equipment Policy has also been revised and re-issued.

We note from your 2008/09 declaration form that your action plan was due to be completed by 31 October 2009. Please provide details regarding why you continue to declare not met or insufficient assurance for this standard for 2009/10. There is no word limit on this answer.

Action has been completed by the deadline agreed with the HSE (September 2009). HSE have confirmed compliance with all requirements of the Improvement Notice.

* 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

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

Clinical and cost effectiveness domain - core standards (C5a - C6)

Please declare 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

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

Governance domain - core standards (C7a - C9)

Please note some core standards do not appear on the declaration form as they are assessed through other components of the annual health check:

Standard C7f is assessed through the existing commitments & national priorities component of the annual health check.

Standard C7d is assessed through our quality of financial management component which uses information from assessments undertaken by the Audit Commission and Monitor.

Standards C7f and C7d are not applicable to the Health Protection Agency, NHS Direct or NHS Blood and Transplant.

Please declare 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.

not met

Start date of non-compliance or insufficient assurance

04-02-2009

Date at which you expect to have assurance of compliance

24-06-2009

Description of the issue (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)

Arising from a routine, planned inspection by the Health and Safety Executive in February 2009, issues were identified which demonstrated a failure to comply with C7a&c, 'Healthcare organisations: a) apply the principles of sound clinical and corporate governance; c) undertake systematic risk assessment and risk management. Element 3 (The healthcare organisation systematically assesses and manages its risks, both corporate / clinical risks in order to ensure probity, clinical quality and patient safety.)'
Specifically:
o Lone Working - Lack of evidence of risk assessment and local procedure; site and area specific.
o Violence & Aggression - Lack of evidence of risk assessment; site and patient specific.
o Moving & Handling: General - Lack of evidence of risk assessment; site and area specific.

Actions planned or taken (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)

Actions have been completed by the deadlines agreed with the HSE (May and June 2009), specifically:
Lone Working (Facilities, Diana Princess of Wales Hospital, Grimsby):
A risk assessment in relation to the lone working risks for the night Facilities staff at DPOWH has been completed and additional control measures have been identified and implemented. This has included the implementation of the 'Man Down' electronic alarm / lone working device and the provision of violence and aggression and moving & handling training.
In respect of lone working generally, the Trust's Lone Working Policy and arrangements have been reviewed in order to ensure that all areas where lone workers are present have been identified, risk assessments have been completed and the necessary controls are in place.
Violence & Aggression (Goole District Hospital):
A risk assessment has been completed and additional control measures have been identified and implemented.
In respect of the management of violence & aggression generally, the Trust's Policy on the Management of Violence & Aggression and associated Risk Assessment Tool has been revised and re-issued.
Moving & Handling (Medical Records, Diana Princess of Wales Hospital, Grimsby)
A risk assessment has been completed and additional control measures have been identified and implemented.
In respect of moving & handling generally, the Trust's Minimal Lift Policy has been revised and re-issued.

We note from your 2008/09 declaration form that your action plan was due to be completed by 31 October 2009. Please provide details regarding why you continue to declare not met or insufficient assurance for this standard for 2009/10. There is no word limit on this answer.

Actions have been completed by the deadlines agreed with the HSE (May and June 2009). HSE have confirmed compliance with all requirements of the Improvement Notices.

* 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

* 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

Governance domain - core standards (C10a - C12)

Please declare your trust's compliance with each of the following standards:

* 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 consistently applied.

compliant

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Patient focus domain - core standards (C13a - C14c)

Please declare 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.

compliant

* 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

Patient focus domain - core standards (C15a - C16)

Please declare your trust's compliance with each of the following standards:

* 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 necessary help with feeding and access to food 24 hours a day.

compliant

* 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

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

Accessible and responsive care domain - core standards (C17 - C18)

Some core standards do not appear on the declaration form as they are assessed through other components of the annual health check.

Standard C19 is assessed through the existing commitments & national priorities component of the annual health check.

Please declare 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

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Care environment and amenities domain - core standards (C20a - C21)

Please declare 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.

not met

Start date of non-compliance or insufficient assurance

04-02-2009

Date at which you expect to have assurance of compliance

23-09-2009

Description of the issue (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)

Arising from a routine, planned inspection by the Health and Safety Executive in February 2009, issues were identified which demonstrated a failure to comply with 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. Element 1: The healthcare organisation effectively manages health, safety and environmental risks to patients / service users, staff and visitors, in accordance with all relevant health and safety legislation...", and Element 2: The healthcare organisation provides a secure environment....")

Specifically:

- o Management of Asbestos - Failure to develop a written plan in response to survey undertaken in 2005 and to act on recommendations to remove or encapsulate asbestos in a number of locations. Failure to inform staff working in these locations of the presence of asbestos. Trust-wide.
- o Control of Contractors - Permit to work system inadequate. Trust wide.
- o Lone Working - Lack of evidence of risk assessments and local procedures; site and area specific.
- o Violence & Aggression - Lack of evidence of risk assessments; site and patient specific.
- o Moving & Handling: General - Lack of evidence of risk assessments; site and area specific.

Actions planned or taken (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)

Actions have been completed by the deadlines agreed with the HSE (May and September 2009), specifically:

Asbestos (Trust wide):

Immediate action was taken to address the initial recommendations for removal and encapsulation of Priority 1 asbestos materials and to ensure that appropriate documentation, awareness and training were in place. A re-survey of all Trust sites has also been completed and the outcome used to inform the Trust's Asbestos Management Plan. A review of the Trust's Policy for the Safe Control and Management of Asbestos has also been completed.

Control of Contractors / Permit to Work (Trust wide):

A new system is being introduced and will be monitored on its performance. The Trust's Control of Contractors Policy and associated documentation has also been revised and re-issued.

o See also measures to achieve compliance with C7a&c

We note from your 2008/09 declaration form that your action plan was due to be completed by 31 October 2009. Please provide details regarding why you continue to declare not met or insufficient assurance for this standard for 2009/10. There is no word limit on this answer.

Actions have been completed by the deadlines agreed with the HSE (May and September 2009). HSE have confirmed compliance with all requirements of the Improvement Notices.

* 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

There are no further questions in this section. Please press either the Save and Quit button or the Finish button to return to the main section list

Please note some standards may not appear on the declaration form as they are not applicable to your trust type. Please refer to the guidance for further information.

Public health domain - core standards (C22a - C24)

Please declare 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 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

* 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

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list

Electronic sign off page

The Care Quality 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 from the board.

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
- 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.

Electronic sign off - details of individual(s)

	Title:	Full name:	Job title:
1	Mr	Bill Beaumont	Chairman
2	Mr	Philip Jackson	Deputy Chairman / Non-Executive Director
3	Mr	Keith Darwin	Non-Executive Director
4	Dr	Jim Whittingham	Non-Executive Director
5	Mr	Ian Davey	Non-Executive Director
6	Mrs	Michelle Wilson	Non-Executive Director
7	Mr	Andrew North	Chief Executive
8	Ms	Angie Smithson	Director of Service & Business Development
9	Ms	Karen Jackson	Director of Finance, Information & Performance
10	Mrs	Jane Partridge	Director of Nursing & Patient Services
11	Dr	Liz Scott	Medical Director / Deputy Chief Executive
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			

There are no further questions in this section. Please press either the Save and Quit button or the Submit button to return to the main section list