



Webforms Output: Core standards declaration 2007/2008
May 2008

Generated 09/05/08
FRM-12, FRR-59C

* Please enter the postcode for your organisation. This must be in capital letters and be in the format EC1Y 8TG.

- END OF PAGE -

This is the information that we have for your organisation.

If this information is incorrect please contact the Healthcare Commission at forms@healthcarecommission.org.uk

Organisation Name:

Basingstoke And North Hampshire NHS
Foundation Trust

Chief Executive's First Name:

Mary

Chief Executive's Surname:

Edwards

Chief Executive's Email:

mary.edwards@nhht.nhs.uk

Organisation Code:

RN5

- END OF PAGE -

If your organisation is any of the following please select the option PCT or Community Trust:

PCT
Community Trust
PCT with Mental Health
Care Trust with PCT

If your organisation is any of the following please select the option Mental Health or Learning Disability

Mental Health
Learning Disability
Care Trust with Mental Health

* Please enter your type of organisation

Acute

- Mental Health/Learning Disability
- PCT
- Ambulance
- Isle of Wight NHS PCT
- NHS Direct
- Health Protection Agency
- NHS Blood and Transplant

General Guidance

You might find it helpful to print the following instructions (a printable version is available here) so you can refer to them easily while you are completing the declaration form.

The declaration form is divided into the following sections:

1. General statement of compliance
2. Statement on measures in place to meet the provisions of the Hygiene Code
3. Domain pages for core standards
4. Sign off
5. Comments from third parties

Your declaration will be the basis of your score for the assessment of core standards.

For core standards, your declaration should cover the period from April 1st 2007 to March 31st 2008. The statement on the Hygiene Code should set out whether the appropriate measures are in place to ensure that the provisions of the Hygiene Code were being observed during 2007/2008.

There will not be a specific developmental standards assessment as part of the 2007/2008 annual health check. Instead, we will issue a small set of comparative, or benchmark, indicators to trusts to show their position relative to similar trusts within specific domains (safety, clinical and cost effectiveness or public health). We expect that trust boards will use this information along with the local data that trusts already use when reviewing their performance and considering their compliance with the core standards.

Please note you are only able to access sections applicable to your trust type.

1. General statement of compliance

The general statement is an opportunity for trusts to place in context the detail of the domain pages and the comments received from the specified third parties. 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.

2. Statement on measures in place to meet the Hygiene Code

Trusts are asked to provide a short statement outlining whether the trust considers it has appropriate measures in place to ensure that the provisions of the Hygiene Code were being observed during March 2007/ 2008. This year, we have been inspecting acute trusts as part of our duty under the Hygiene Code. If you have the results of a Hygiene Code inspection, you must include a short summary of the findings and any actions taken as a result of the inspection. This statement is also intended to provide assurance to patients and the public that trusts have taken due account of their new duties under the Code.

Please note – the Health Protection Agency and NHS Direct are not required to provide a statement on measures in place to meet the Hygiene Code.

3. Domain pages for core standards

Separate sections have been set up for each domain.

For each part standard (for example, C7b), 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 had 'reasonable assurance' that it has been meeting a standard, without significant lapses, from April 1st 2007 to March 31st 2008.

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

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 any significant lapses during 2007/2008. Please note, in circumstances where a trust is unclear about compliance for a whole year but has good evidence about the occurrence a significant lapse during the year, the trust should consider whether a declaration of 'not met' is 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.

If one or more standards within a domain is declared as 'not met' or 'insufficient assurance', please record the details for each of these standards, including the following items of information:

Start date - the date at the start of the period for which the trust has:

- identified a lack of assurance to determine whether there have been any significant lapse(s)
- or
- identified one or more significant lapses which means that the trust has not met the standard

End date (planned or actual) - the date by which the trust plans to have:

- assurances in place to enable it to determine whether the standard has been met
- or
- addressed the issues identified as one or more significant lapse(s)

Issue - a statement detailing:

- why the trust does not have assurance to determine their level of compliance
- or
- the details of the significant lapse(s) that have been identified

Action plan - an outline of the steps the trust is taking, or has taken, to:

- address an issue of 'insufficient assurance' (that is, the actions in place to gain assurances of whether or not the trust is meeting the standard)
- or
- address an issue of 'not met' (that is, the actions in place to address the areas for which the trust has identified one or more significant lapse(s))

This year, where applicable, we will ask you for additional information where:

- the standard was declared as 'not met' or 'insufficient assurance' in 2006/2007 and
- there was an action plan with an end date before 31st March 2007 and
- the standard has again been declared as 'not met' or 'insufficient assurance' for 2007/08.

Please describe the circumstances for this second consecutive declaration of non-compliance in light of the action plan.

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. These standards are:

C7d - this relates to financial management and will be measured through the use of resources 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 targets assessment.

C19 - this relates to access to services with nationally agreed timescales and will be measured through the existing targets and new national targets assessments.

In addition there are standards which are not applicable for certain trust types and as such will only be shown on the declaration form where applicable:

C3 - regarding NICE interventional procedures, we are not assessing ambulance trusts, mental health services, primary care trusts and learning disability services on this standard for 2007/2008.

C4c - regarding reusable medical devices, we are not assessing ambulance trusts, mental health services and learning disability services on this standard for 2007/2008.

C15a and C15b - regarding provision of food for patients, we are not assessing ambulance trusts on these standards.

C22b - regarding local health needs, we are not assessing acute trusts, ambulance trusts, mental health services and learning disability services on this standard for 2007/2008

HPA / NHSD and NHSBT - Some standards are not included in the declaration for your trust. These will have been agreed with you and the reasons for their exclusion are documented on our website

4. Sign off

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 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
- the statement of the measures in place to meet the requirements of the Hygiene Code are a true representation of the trust's position
- 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

5. Comments from specified third parties

Trusts are required to invite comments on their performance against the core standards, from specified third parties. These comments must be reproduced verbatim in the relevant sections of the form. The specified partners are:

- for all NHS trusts, except foundation trusts, third parties must include the strategic health authority, the local authority's overview and scrutiny committee, the trust's patient and public involvement forum and the local safeguarding children board
- for foundation trusts, third parties must include the local authority's overview and scrutiny committee, the patient and public involvement forum and the local safeguarding children board. We also encourage foundation trusts to seek, if they wish, comments from their board of governors and strategic health authority
- for the Health Protection Agency, NHS Direct and the NHS Blood and Transplant, organisations are required to invite comments on their performance

against the core standards from specified third parties. These have been agreed with you. These comments must be reproduced verbatim in the relevant sections of the form. At the top of the section, please record the name of the commentator.

A trust may have more than one overview and scrutiny committee within its catchment area. If this is the case, it should invite comments from those committees it deems most relevant. In addition, a committee may specifically ask to comment on the performance of a trust against core standards. Where this is the case, the trust should accept comments from such a committee and include them on their declaration form. In some locations, overview and scrutiny committees will have joint working arrangements. Where this is the case, the trust may wish to use those arrangements to gain comment.

Where a specified local partner declines to comment, a statement to this effect must be included in the declaration, along with any reasons cited by the local partner for their lack of comment.

Please note that Frequently Asked Questions are available by clicking the link within the 'Completer Information' section.

General statement of compliance

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

The Trust is proud to be able to declare full compliance at year end in the first full year as a Foundation Trust.

The Trust recognised during the year that more work was required to give reasonable assurance for C7e and has recruited an Equality and Diversity Adviser to drive this agenda forward. A great deal of work has been done in year including the following: A steering group has been formed, the Board has undergone equality and diversity training, the required documentation has been published on the website. The Board is confident in declaring that this standard has been met by the end of 2007/08.

- END OF PAGE -

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

Statement on measures to meet the Hygiene Code

* Please enter this statement in the box provided. There is no word limit on this answer.

Since October 2006 BNHFT has adopted all components of the hygiene code as a monitoring template for compliance and new plans. It forms the basis for internal and external reporting, the annual programme and day to day service delivery.

Under section 1: Management, organisation and environment: the Trust reviewed and improved the management structure of infection prevention and control, introduced additional risk assessment practice at various levels, increased frequency of reporting to the board, introduced new initiatives that ensure integration of infection prevention and control into routine clinical practice, improved patient isolation by creating more side rooms, created a designated isolation unit and trialed new hand hygiene products and air filtration units. Over a million pounds have been committed to environmental improvements since 2007. New and updated patient information leaflets have been introduced and additional infection control information has been posted on the website. The Trust is involved in several initiatives working across the health economy boundaries to improve compliance with the code, involving the PCT and other organisations across Hampshire and the Isle of Wight.

Under section 2: Clinical care protocols: new manuals have been introduced into all clinical areas with evidence based, up to date clinical care protocols as per the hygiene code. These are used as the basis for staff training.

Under section 3: The health care worker: new health screening protocols and questionnaires were introduced and there is a three year programme in place to update staff records and check and ensure immunity.

The trust wide mandatory training and induction programmes include infection control for all staff including medical staff.

Monitoring of infection rates remains a key component of reporting to the various boards and this information is shared widely. The Board of Directors and Corporate Governance Board receive infection control information every month.

- END OF PAGE -

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.

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

not met

insufficient assurance

* 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

not met

insufficient assurance

* C2: Healthcare organisations protect children by following national child protection guidelines within their own activities and in their dealings with other organisations.

compliant

not met

insufficient assurance

- END OF PAGE -

* C3: Healthcare organisations protect patients by following National Institute for Clinical Excellence (NICE) interventional procedures guidance.

compliant

not met

insufficient assurance

- END OF PAGE -

Safety domain - core standards (C4a - C4e)

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

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

* 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.

compliant

not met

insufficient assurance

- END OF PAGE -

* C4d: Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that medicines are handled safely and securely.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

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

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

not met

insufficient assurance

* C5b: Healthcare organisations ensure that clinical care and treatment are carried out under supervision and leadership.

compliant

not met

insufficient assurance

* C5c: Healthcare organisations ensure that clinicians continuously update skills and techniques relevant to their clinical work.

compliant

not met

insufficient assurance

* C5d: Healthcare organisations ensure that clinicians participate in regular clinical audit and reviews of clinical services.

compliant

not met

insufficient assurance

* C6: Healthcare organisations cooperate with each other and social care organisations to ensure that patients' individual needs are properly managed and met.

compliant

not met

insufficient assurance

- END OF PAGE -

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

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 targets component of the annual health check.

Standard C7d is assessed through our use of resources 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.

compliant

not met

insufficient assurance

* C7b: Healthcare organisations actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources.

compliant

not met

insufficient assurance

* C7e: Healthcare organisations challenge discrimination, promote equality and respect human rights.

compliant

not met

insufficient assurance

Start date of non-compliance or insufficient assurance

01-04-2007

End date of non-compliance or insufficient assurance

17-03-2008

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

The Trust had not published the required documentation on the website, including Equality Schemes, Equality Impact Assessments and Workforce diversity data. The Trust Equality and Diversity Steering group was not functioning.

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

The required documentation has been published on the website. The Equality and Diversity steering group has a new set of Terms of Reference and has met. Subgroups have been agreed and data is being reviewed by the groups. Equality Impact Assessments have been completed for key functions and there is an agreed programme to conduct more assessments over the next 12 months. The Trust is now compliant with the required Equality and Diversity standards.

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

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

not met

insufficient assurance

* C10b: Healthcare organisations require that all employed professionals abide by relevant published codes of professional practice.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

* C11b: Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare participate in mandatory training programmes.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

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.

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

not met

insufficient assurance

* 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

not met

insufficient assurance

* C13c: Healthcare organisations have systems in place to ensure that staff treat patient information confidentially, except where authorised by legislation to the contrary.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

* C14b: Healthcare organisations have systems in place to ensure that patients, their relatives and carers are not discriminated against when complaints are made.

compliant

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

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

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

* 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

not met

insufficient assurance

- END OF PAGE -

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

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 targets 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

not met

insufficient assurance

* C18: Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.

compliant

not met

insufficient assurance

- END OF PAGE -

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.

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.

compliant

not met

insufficient assurance

- END OF PAGE -

* C20b: Healthcare services are provided in environments which promote effective care and optimise health outcomes by being supportive of patient privacy and confidentiality.

compliant

not met

insufficient assurance

- END OF PAGE -

* 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

not met

insufficient assurance

- END OF PAGE -

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

not met

insufficient assurance

- END OF PAGE -

* 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

not met

insufficient assurance

* 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

not met

insufficient assurance

- END OF PAGE -

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

Electronic sign off page

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 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
- the statement on measures to meet the Hygiene Code are a true representation of the trust's position
- any commentaries provided by specified third parties have been reproduced verbatim. Specified third parties are: strategic health authority, foundation trust board of governors (where relevant), patient and public involvement forums, overview and scrutiny committees and local safeguarding children boards
- 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.

- END OF PAGE -

Electronic sign off - details of individual(s)

	Title:	Full name:	Job title:
1	Mr	Gordon Holdcroft	Chairman
2	Ms	Mary Edwards	Chief Executive
3	Mrs	Donna Green	Chief Operating Officer / Nursing Director
4	Dr	Andrew Bishop	Medical Director
5	Mr	Steve Bolam	Finance Director
6	Mrs	Yvonne Coventry	Human Resources Director
7	Mr	Paul Richards	Chair of the Audit Committee / Non-Executive Director
8	Mr	Robert Hodge	Non-Executive Director
9	Mr	Leon Allen	Non-Executive Director
10	Mrs	Maggy Wallace	Non-Executive Director
11	Mrs	Catherine Brill	Non-Executive Director
12	Ms	Nicola Horlick	Non-Executive Director
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			

- END OF PAGE -

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

Comments from specified third parties

Please enter the comments from the specified third parties below.

* Please enter the name of the strategic health authority that has provided the commentary

South Central Strategic Health Authority

* Strategic health authority comments. There is no word limit on this answer.

Safety
Number of SABS alerts with actions outstanding over the completion deadline is 8.

Reduction of MRSA
The 03/04 baseline was 20. At the end of 07/08 the percentage reduction against this baseline was 75%.

Reduction of Clostridium Difficile
For C difficile rates per 1,000 bed days, the national statement demonstrates 2007/08 rates ranging from 1.77 (Apr-07) to YTD 2.15 (Feb-08). Comparison with 2006/07 is not possible as figures are not available.

Finance
The SHA does not have access to the organisation's financial position.

Governance
The SHA does not performance manage the organisation's governance arrangements.

Accessible and Responsive Care

- There is high confidence of an 85% target being met for admitted patients treated within 18 weeks from referral.
- There is high confidence of a 90% target being met for non-admitted patients treated within 18 weeks from referral.
- Waiting times for cancer treatment are entirely satisfactory.
- More than 98% of patients consistently wait less than four hours in A&E.

Public Health
The organisation is participating in the alcohol and violence data sharing project for A&E attendance and sharing of data with Crime and Disorders Reduction Partnerships. (Standard C22c)

The organisation is fully delivering Smoke Free status. (Standard C23) (to be confirmed)

* Please enter the name of the patient and public involvement forum that has provided the commentary

BNHFT PPIF

* Patient and public involvement forum comments. There is no word limit on this answer.

C4a: The Forum has received presentations on Infection Control measures. The Forum receives monthly governance reports assessing divisional performance against standards for better health, examination of which includes infection control.

The Forum acknowledges the stringent and continued efforts to eradicate healthcare acquired infections. The Forum pays tribute to the Trust's sustained focus on infection control.

C13a: a) A number of Forum monitoring visits were undertaken during 2007/08, specifically to E and F Floors. Reports available and outcomes are recorded in Forum Meeting minutes of March 2008.

During visits and surveys undertaken by Forum Members, it was recorded that the Trust meets this standard.

b) The Forum was consulted during the development of the Liverpool Care Pathway and has been kept informed of progress with this initiative. Discussions on this work were recorded in Forum Meeting minutes of July 2007 and January 2008.

The Forum acknowledges the work done in this area and considers that the Trust is compliant with this standard.

C14: The Forum has been monitoring the outcome of the Trust's Governance procedures review, receiving monthly PALS and Complaints reports. These reports have been discussed amended in line with Forum suggestions and comments.

Outcomes of this work reported in monthly Forum Meeting minutes throughout 2007/08.

The Forum considers that the revised arrangements are a more simplified and streamlined process. The system is still in its infancy and has required some amendment but appears to be working well.

C15: Discussions and queries raised around food and food preparation have been addressed. During surveys of patients and the public, meals scored a high rating. Refer to the Forum Street Surveys in July 2007.

The Forum regularly receives reports of high patient satisfaction with food, in respect of availability, dietary requirements and quality.

C16: The Forum received information on the Trust's work around the Liverpool Care Pathway, examining procedures and information available to patients.

Outcomes from these discussions recorded in Meeting minutes dated July 2007 and 2008.

It is felt that the Trust works hard at establishing effective information sources for patients and the public.

C17:Example:
The Forum was actively involved in the planning for the Trust's Health Information Point with views on the design, layout and facilities actively sought and encouraged.

The Forum delivered a survey on Maternity patients on behalf of the Trust; the report from which is awaited.

The outcome of this work is recorded in Forum Meeting minutes throughout 2007 and 2008.

It is felt that the Trust actively supports patient and public involvement.

C21: The Forum is represented on the Clinical Effectiveness Committee to ascertain patient focus in this area. Forum Members monitor cleanliness and standards during visits and surveys. Outcomes recorded in Meeting minutes during 2007/08.

The Forum considers that the Trust delivers high standards of cleanliness throughout the Hospital.

* Please enter the name of the local child safeguarding board that has provided the commentary

North and East Hampshire LSCB

* Local child safeguarding board comments. There is no word limit on this answer.

Comments have been requested from the local child safeguarding board but no comments have been received.

Please enter the name of the organisation that has provided the first commentary

Please enter the first commentary for this organisation

Please enter the name of the organisation that has provided the second commentary

Please enter the second commentary for this organisation

Please enter the name of the organisation that has provided the third commentary

Please enter the third commentary for this organisation

Please enter the name of the organisation that has provided the fourth commentary

Please enter the fourth commentary for this organisation

Please enter the name of the organisation that has provided the fifth commentary

Please enter the fifth commentary for this organisation

Please enter the name of the organisation that has provided the sixth commentary

Please enter the sixth commentary for this organisation

Please enter the name of the organisation that has provided the seventh commentary

Please enter the seventh commentary for this organisation

Please enter the name of the organisation that has provided the eighth commentary

Please enter the eighth commentary for this organisation

Please enter the name of the organisation that has provided the ninth commentary

Please enter the ninth commentary for this organisation

Please enter the name of the organisation that has provided the tenth commentary

Please enter the tenth commentary for this organisation

Please enter the name of the organisation that has provided the eleventh commentary

Please enter the eleventh commentary for this organisation

Please enter the name of the organisation that has provided the twelfth commentary

Please enter the twelfth commentary for this organisation

Please enter the name of the organisation that has provided the thirteenth commentary

Please enter the thirteenth commentary for this organisation

Please enter the name of the organisation that has provided the fourteenth commentary

Please enter the fourteenth commentary for this organisation

Please enter the name of the organisation that has provided the fifteenth commentary

Please enter the fifteenth commentary for this organisation

- END OF PAGE -

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

Overview and scrutiny committee comments

* How many overview and scrutiny committees will be commenting on your trust? (maximum of 10)

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

- END OF PAGE -

Overview and scrutiny committee comments

Name of overview and scrutiny committee 1

Hampshire Health Overview and Scrutiny
Committee

Comments. There is no word limit on this answer.

Basingstoke and North Hampshire Hospital Annual Health Check: Hampshire County Council Health Overview & Scrutiny Committee comments

Thank you for inviting our comments on the Basingstoke and North Hampshire Hospital Trust's Annual Health Check Statement. The comments we are making relate to the period 1 April 2007- 31 March 2008 and reflect only those issues that have been formally included in our agendas. They are therefore fully in the public domain and open to in-depth examination if the Commission so wishes (see the web link <http://www3.hants.gov.uk/healthscrutiny>)

There have been no issues relating to the Trust formally considered by the Committee in 2007/08; we therefore assume that there have been no changes to services provided by the Trust that could be considered substantial in nature. Additionally we have had no concerns raised with us by the Patient and Public Involvement Forum or any other stakeholder group.

We would however wish to commend the working relationship that exists between the Trust and the HOSC which allows for there to be regular dialogue aimed at addressing issues before they need to be dealt with formally. The contribution that your Chief Executive made to our recent meeting, setting out the benefits of Foundation Trust status was very well received by members.

- END OF PAGE -

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 enter the comments from the board of governors in the box below. There is no word limit on this answer.

Commentary on Standards for Better Health Declaration for 2007/08

It has been a busy year for us in our first full year as a Council of Governors. We have grasped the issues of Governance and are especially pleased with the setting up of a number of working groups, each of which has 3-5 Governor members with an interest in that area. Groups include:

- Nominations
- Remuneration
- Patient Experience
- Communications
- Membership strategy and recruitment
- Constituencies
- Annual Plan
- Standards for Better Health
- Audit

Notable successes include the appointment of a new Chair and two new non-executive directors, work on appraisals and our ongoing increase in membership numbers.

We have also joined and started participating in national forums (the Foundation Trust Network and the Foundation Trust Governors Association) relating to the work of Foundation Trusts and the responsibilities/working practices of Governors.

We are pleased with the way the hospital has developed since becoming a Foundation Trust. We have been especially pleased with the positive reputation that the Trust has continued to build on through 2007/08, including the Excellent / Excellent rating which the Trust received in October. We particularly applaud the processes in place to assess and manage patients in order to maintain the excellent position with regard to infection control.

Domain 1: Safety

C4a Infection control

We have received updates on infection rates and infection control plans at the Trust. The Trust is to be commended on the very low MRSA rates in 2007/08 with the third lowest rates in the country for 2006/07. The Trust also had the 14th lowest rate in the country for Clostridium Difficile in 2006/07 and much work has gone on to maintain and improve these infection rates. We discussed the impact of the new Uniform policy and high bed occupancy on infection rates. In addition the staff survey for 2006/07 reported good awareness amongst staff of infection control requirements.

C4b Medical Equipment

We are pleased with the new equipment which has been introduced across the Trust this year, including state of the art beds, new chairs, and intravenous drug pumps.

Domain 2: Clinical and Cost Effectiveness

C6 Co-operation with other organisations for clinical care.

We have heard much about the Trust's work to attempt to reduce the number of patients experiencing delayed transfers of care recognising that this has been an area of concern for some time. The Trust is to be applauded on the work it has done to date with Hampshire PCT and Social Services in tackling this problem and we look forward to seeing a more detailed action plan for the future to resolve the issue.

Domain 3: Governance

C7e Equality and Diversity

During 2007/08, we appointed an Older Persons Champion Governor, a Younger Persons Champion Governor and a Disabled Persons Champion Governor.

We are aware that the Trust has recruited an Equality and Diversity Officer during the year to ensure that the standards and processes required are fully in place by year end.

One of the Governors is a member of the Equality and Diversity Steering group which has been established in the year.

C8b Workforce Development.

The Remuneration working group of the Council has worked with the Chairman to review the appraisal process for the non-executive directors.

We received a presentation on the 2006/07 staff survey which highlighted positive scores for flexible working and the extent of positive feeling in the organisation. However issues were highlighted around appraisals and we support the Trust's focus on updating the appraisal process and ensuring that all staff have had an appraisal in the 12 months to March 2008.

We congratulated the Trust on its decision to award a payment to staff which meant that they were not disadvantaged by the staging of the national pay award.

Domain 4: Patient Focus

C14a Complaints, PALS and Comments

We have set up a Patient Experience working group with the Public and Patient Involvement Forum. The Trust has been a pilot site for the Patient Experience Tracker (PET) which is a system for recording patients' views. On the basis of this pilot study, our Patient Experience working group has recommended that the Trust purchase this system permanently while recognising that more work needs to be done before it is used more widely.

Domain 5: Accessible and Responsive Care

C17 Public and Patient Involvement

We are pleased to note that the attendance of Governors at Council meetings (an average of 85%) compares very favourably with that of other FTs (based on feedback from national meetings) and involvement in general by Governors is high.

The Membership strategy and recruitment working group target of 4825 members by the end of March was exceeded by the end of February.

The Trust AGM in September was extremely well attended.

We have instituted a programme of Constituency meetings involving members and non-members which have been well attended and involved excellent speakers from the Trust. The Constituency working group is reviewing the best ways to arrange these meetings.

The PPIF has met with us and we were pleased to hear that the PPIF receives feedback on changes which have been implemented as a result of issues raised by patients and the public.

Members of the Trust and of the public are increasingly contacting us to discuss issues.

The Communications working group has been instigated to improve ways of communicating with patients and the public as well as how we work internally with the Chair and Board of Directors.

C18 Equity of access across population

We are particularly pleased that the Trust was chosen for the 18 Week Referral to Treatment Early Achiever programme and that we achieved the target for three of the four specialities by December 2007. In the 4th speciality, Orthopaedics, although none of the centres on the programme achieved the target, the Trust had one of the best results nationally.

Domain 6: Care Environment and Amenities

C20a Safe and Secure Environment

We have discussed the issue of the Trust's car parking facilities as it is an area of concern for staff, patients and visitors. We recognise the assurances given by the Chairman and Board that this is a high priority and that the Trust has a number of initiatives underway to improve the situation, including an alternative travel plan. A planning application has now been submitted for an additional 200 spaces.

C21 Clean Environment

We are pleased to note that the Deep-Clean Programme is on plan for completion by the end of March. We are impressed at the approach taken by the Trust in using in-house cleaning staff, rather than outside Contractors, and we will be interested in monitoring the ongoing deep-clean programme.

Domain 7: Public Health

Individual Governors are aware of the extensive and impressive work that the Trust does in this area and will be making other Governors more familiar with it.

Closing Comment

Whilst our comments refer to areas of specific interest or discussions/reviews, we are generally satisfied that the hospital is compliant with all basic standards and processes.

- END OF PAGE -

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