

Assurance Framework

2004/05

STRATEGIC OBJECTIVES		CORE/DEVELOPMENTAL STANDARDS		PCT PRINCIPAL OBJECTIVES	
1.0	SAFETY To ensure that patient safety is enhanced by healthcare processes, working practices and systematic activities that prevent or reduce the risk of harm to patients	C1	Health care organisations protect patients through systems that <ol style="list-style-type: none"> a) 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; and b) ensure that patient safety notices, alerts and other communications concerning patient safety which require action are acted upon within required timescales 	1.1	To ensure compliance with the statutory duty of quality and the delivery of safe, high quality patient care
		C2	Health care organisations protect children by following national child protection guidance within their own activities and in their dealings with other organisations	1.2	To identify and manage all risks properly and appropriately (in particular those risks associated with infection control, medical devices, decontamination, medicines and waste management)
		C3	Health care organisations protect patients by following NICE Interventional Procedures guidance	1.3	To ensure that effective systems are in place to learn from patient safety incidents
		C4	Health care organisations keep patients, staff and visitors safe by having systems to ensure that: <ol style="list-style-type: none"> a) the risk of health care acquired infection to patients is reduced, with particular emphasis on high standards of hygiene and cleanliness, achieving year-on-year reductions in MRSA; b) all risks associated with the acquisition and use of medical devices are minimised; c) all reusable medical devices are properly decontaminated prior to use and that the risks associated with decontamination facilities and processes are well managed; d) medicines are handled safely and securely; and e) 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 	1.4	To ensure that effective child protection arrangements are in place throughout the organisation and in partner organisations
		D1	Health care organisations continuously and systematically review and improve all aspects of their activities that directly affect patient safety and apply best practice in assessing and managing risks to patients, staff and others, particularly when patients move from the care of one organisation to another	1.5	To ensure that health care processes, practices and activities are continually reviewed and that improvements in practice are implemented

	STRATEGIC OBJECTIVES		CORE/DEVELOPMENTAL STANDARDS		PCT PRINCIPAL OBJECTIVES
2.0	<p>CLINICAL AND COST EFFECTIVENESS To ensure that patients achieve health care benefits that meet their individual needs through health care decisions and services based on what assessed research evidence has shown provides effective clinical outcomes</p>	C5	<p>Health care organisations ensure that:</p> <ul style="list-style-type: none"> a) they conform to NICE technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care; b) clinical care and treatment are carried out under supervision and leadership; c) clinicians continuously update skills and techniques relevant to their clinical work; and d) clinicians participate in regular clinical audit and reviews of clinical services 	2.1	<p>To commission cost effective and evidence based responsive healthcare services for the local population</p>
		C6	<p>Health care organisations co-operate with each other and social care organisations to ensure that patients' individual needs are properly managed and met</p>	2.2	<p>To provide efficient and effective local services through a primary care focus</p>
		D2	<p>Patients receive effective treatment and care that:</p> <ul style="list-style-type: none"> a) conform to nationally agreed best practice, particularly as defined in National Service Frameworks, NICE guidance, national plans and agreed national guidance on service delivery; b) take into account their individual requirements and meet their physical, cultural, spiritual and psychological needs and preferences; c) are well co-ordinated to provide a seamless service across all organisations that need to be involved, especially social care organisations; and d) is delivered by health care professionals who make clinical decisions based on evidence-based practice 	2.3	<p>To ensure that all prescribing within the PCT is appropriate, safe and cost-effective</p>

	STRATEGIC OBJECTIVES	CORE/DEVELOPMENTAL STANDARDS	PCT PRINCIPAL OBJECTIVES
3.0	<p>GOVERNANCE The Trust will make sure that managerial and clinical leadership and accountability, as well as the organisation's culture, systems and working practices ensure that probity, quality assurance, quality improvement and patient safety are central components of all the activities of the healthcare organisation</p>	<p>C7 Health care organisations</p> <ul style="list-style-type: none"> a) apply the principles of sound clinical and corporate governance; b) actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources; c) undertake systematic risk assessment and risk management (including compliance with the controls assurance standards); d) ensure financial management achieves economy, effectiveness, efficiency, probity and accountability in the use of resources; e) challenge discrimination, promote equality and respect human rights; and f) meet the existing performance requirements <p>C8 Health care organisations support their staff through</p> <ul style="list-style-type: none"> a) 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; and b) organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under representation of minority groups <p>C9 Health care 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</p> <p>C10 Health care organisations</p> <ul style="list-style-type: none"> a) undertake all appropriate employment checks and ensure that all employed or contracted professionally qualified staff are registered with the appropriate bodies; and b) require that all employed professionals abide by relevant published codes of professional practice 	<p>3.1 To ensure the sound administration of the PCT finances and achieve and maintain recurring financial balance and deliver on mandatory financial targets</p> <p>3.2 To assess and manage risks through an effective risk management strategy</p> <p>3.3 To ensure that systems and working practices support quality improvement and assurance across the clinical and corporate governance agendas</p> <p>3.4 To ensure that the Trust recruits, retains, develops and empowers staff</p> <p>3.5 To develop a comprehensive, robust and reliable information management and technology infrastructure</p> <p>3.6 To establish and maintain robust information governance arrangements</p> <p>3.7 To communicate effectively with internal and external stakeholders</p>

	STRATEGIC OBJECTIVES	CORE/DEVELOPMENTAL STANDARDS	PCT PRINCIPAL OBJECTIVES
	<p>GOVERNANCE (Cont.)</p>	<p>C11 Health care organisations ensure that staff concerned with all aspects of the provision of health care</p> <ul style="list-style-type: none"> a) are appropriately recruited, trained and qualified for the work they undertake; b) participate in mandatory training programmes; and c) participate in further professional and occupational development commensurate with their work throughout their working lives <p>C12 Health care 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</p> <p>D3 Integrated governance arrangements representing best practice are in place in all health care organisations and across all health communities and clinical networks</p> <p>D4 Health care organisations work together to</p> <ul style="list-style-type: none"> a) ensure that the principles of clinical governance are underpinning the work of every clinical team and every clinical service; b) implement a cycle of continuous quality improvement; and c) ensure effective clinical and managerial leadership and accountability <p>D5 Health care organisations work together and with social care organisations to meet the changing health needs of their population by</p> <ul style="list-style-type: none"> a) having an appropriately constituted workforce with appropriate skill mix across the community; and b) ensuring the continuous improvement of services through better ways of working <p>D6 Health care organisations use effective and integrated information technology and information systems which support and enhance the quality and safety of patient care, choice and service planning</p> <p>D7 Health care organisations work to enhance patient care by adopting best practice in human resources management and continuously improving staff satisfaction</p>	

	STRATEGIC OBJECTIVES			PCT PRINCIPAL OBJECTIVES
4.0	<p>PATIENT FOCUS Healthcare is provided in partnership with patients, their carers and relatives, respecting their diverse needs, preferences and choices, and in partnership with other organisations (especially social care organisations) whose services impact on patient well-being</p>	<p>C13 Health care organisations have systems in place to ensure that</p> <ul style="list-style-type: none"> a) staff treat patients, their relatives and carers with dignity and respect; b) appropriate consent is obtained when required for all contacts with patients and for the use of any patient confidential information; and c) staff treat patient information confidentially, except where authorised by legislation to the contrary <p>C14 Health care organisations have systems in place to ensure that patients, their relatives and carers</p> <ul style="list-style-type: none"> a) have suitable and accessible information about, and clear access to, procedures to register formal complaints and feedback on the quality of services; b) are not discriminated against when complaints are made; and c) are assured that organisations act appropriately on any concerns and, where appropriate, make changes to ensure improvements in service delivery <p>C15 Where food is provided, health care organisations have systems in place to ensure that</p> <ul style="list-style-type: none"> a) patients are provided with a choice and that it is prepared safely and provides a balanced diet; and b) patients' individual nutritional, personal and clinical dietary requirements are met, including any necessary help with feeding and access to food 24 hours a day <p>C16 Health care 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</p> <p>D8 Health care organisations continuously improve the patient experience, based on the feedback of patients, carers and relatives</p>		<p>4.1 To strengthen the capacity of patients, carers and the wider public to participate in health and healthcare planning and delivery</p> <p>4.2 To improve the five key dimensions of the patient experience</p>

	STRATEGIC OBJECTIVES		CORE/DEVELOPMENTAL STANDARDS		PCT PRINCIPAL OBJECTIVES
	<p>PATIENT FOCUS (Cont.)</p>	<p>D9</p> <p>D10</p>	<p>Patients, service users and, where appropriate, carers receive timely and suitable information, when they need and want it, on treatment, care, services, prevention and health promotion and are</p> <ul style="list-style-type: none"> a) encouraged to express their preferences; and b) supported to make choices and shared decisions about their own health care <p>Patients and service users, particularly those with long-term conditions, are helped to contribute to planning of their care and are provided with opportunities and resources to develop competence in self-care</p>		

	STRATEGIC OBJECTIVES	CORE/DEVELOPMENTAL STANDARDS	PCT PRINCIPAL OBJECTIVES
5.0	<p>ACCESSIBLE AND RESPONSIVE CARE Patients receive services as promptly as possible, have choice in access to services and treatments, and do not experience unnecessary delay at any stage of service delivery or of the care pathway</p>	<p>C17 The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving health care services</p> <p>C18 Health care organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably</p> <p>C19 Health care organisations ensure that patients with emergency health needs are able to access care promptly and within nationally agreed timescales, and all patients are able to access services within national expectations on access to services</p> <p>D11 Health care organisations plan and deliver health care which</p> <ul style="list-style-type: none"> a) reflects the views and health needs of the population served and which is based on nationally agreed evidence or best practice; b) maximises patient choice; c) ensures access (including equality of access) to services through a range of providers and routes of access; and d) uses locally agreed guidance, guidelines or protocols for admission, referral and discharge that accord with the latest national expectations on access to services 	<p>5.1 To ensure the provision of timely and better access to elective and emergency services</p> <p>5.2 To improve access to NHS dentistry</p> <p>5.3 To ensure the provision of timely and better access to primary care services</p> <p>5.4 To improve access to services provided by the PCT</p> <p>5.5 To ensure that national targets are met to effectively manage referral patterns</p> <p>5.6 To effectively manage delayed discharges</p> <p>5.7 To ensure the effective implementation of patient choice initiatives</p>

	STRATEGIC OBJECTIVES		CORE/DEVELOPMENTAL STANDARDS		PCT PRINCIPAL OBJECTIVES
6.0	<p>CARE ENVIRONMENT AND AMENITIES Care is provided in environments that promote patient and staff well-being and respect for patients' needs and preferences in that they are designed for the effective and safe delivery of treatment, care or a specific function, provide as much privacy as possible, are well maintained and are cleaned to optimise health outcomes for patients</p>	C20	<p>Health care services are provided in environments which promote effective care and optimise health outcomes by being</p> <ul style="list-style-type: none"> a) a safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation; and b) supportive of patient privacy and confidentiality 	6.1	<p>To develop and provide local services that meets patients needs and preferences</p>
		C21	<p>Health care 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</p>	6.2	<p>To ensure that appropriate environmental standards are maintained across provider and commissioned services</p>
		D12	<p>Health care is provided in well designed environments that</p> <ul style="list-style-type: none"> a) promote patient and staff well-being, and meet patients' needs and preferences, and staff concerns; and b) are appropriate for the effective and safe delivery of treatment, care or a specific function, including the effective control of health care associated infections 		

STRATEGIC OBJECTIVES		CORE/DEVELOPMENTAL STANDARDS		PCT PRINCIPAL OBJECTIVES	
7.0	PUBLIC HEALTH	C22	Health care organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by <ul style="list-style-type: none"> a) co-operating with each other and with Local Authorities and other organisations; b) ensuring that the local Director of Public Health's Annual Report informs their policies and practices; and c) making an appropriate and effective contribution to local partnership arrangements including Local Strategic Partnerships and Crime and Disorder Reduction Partnerships 	7.1	To develop effective partnership working across the local health community and wider SHA
				7.2	To develop effective Local Authority partnerships
				7.3	To develop appropriate disease programmes which meet the requirements of the National Service frameworks to promote, protect and improve the health of the population
				7.4	To address the health inequalities agenda, focussing on areas of proven effectiveness and responding to specific local health needs
		C23	Health care organisations have systematic and managed disease prevention and health promotion programmes which meet the requirements of the National Service Frameworks and national plans with particular regard to reducing obesity through action on nutrition and exercise, smoking, substance misuse and sexually transmitted infections		
		C24	Health care 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		
		D13	Health care organisations <ul style="list-style-type: none"> a) identify and act upon significant public health problems and health inequality issues, with Primary Care Trusts taking the leading role; b) implement effective programmes to improve health and reduce health inequalities; c) protect their populations from identified current and new hazards to health; and d) take fully into account current and emerging policies and knowledge on public health issues in the development of their public health programmes, health promotion and prevention services for the public, and the commissioning and provision of services 		

ASSURANCE FRAMEWORK - SAFETY

Principal Risks (incl. Risk Score)	Expected Management Controls	Actual Controls	Management Assurances	External / Independent Assurance	Gaps in Controls	Gaps in Assurances	Positive Assurances	Ongoing Monitoring	
1.1 To ensure compliance with the statutory duty of quality and the delivery of safe, high quality patient care									
1.1.1	Failure to understand requirements leading to possible legal action against the Trust RISK SCORE:	The Board has systems in place to ensure that the organisation is aware of and can react to information regarding legislation, statute, guidance etc.	DoH CE Bulletin scanned and actioned weekly. Other DoH Bulletins reviewed and actioned as appropriate. Induction and appropriate training programmes in place. SABs scheme for cascading alerts in place	Reports to Board including Chief Executives Report detailing changes to legislation, actions to be taken	Audit reviews of Governance arrangements. NHSLA	More rigorous process required to review documents and actions required	Level 1A NHSLA Risk Management Standard achieved in September 2004	Clinical Governance, Risk Management & Audit Committees	
1.1.2	Failure to establish effective systems to comply with statutory duty of quality RISK SCORE:	Board has in place a clinical governance strategy with supporting policies and policies	Clinical Governance Strategy & Risk Management Strategy in place. Most supporting policies and procedures in place. Health & Safety Policy. Clinical audit programmes in place	Clinical Governance Committee & Risk Committee provide regular reports to the Board. Clinical Governance updates to the PEC	Healthcare Commission NHSLA HSE				
1.1.3	Responses to internal and external audits and reports are inadequate RISK SCORE:	The Board has in place an effective system for dealing with internal and external audits	Audit Committee in place and responsible for reviewing all audit reviews and for monitoring implementation of audit recommendations	Audit Committee in place and reports to Board	Internal & External Audit	Clarify process for reviewing audits and reviews – role of Committees	Need to tighten up on process for implementing actions arising from audits	Annual Audit Letter Internal Audit annual review	
1.2 To identify and manage risks properly and appropriately									
1.2.1	Failure to develop and embed systems to identify and manage risks RISK SCORE:	Board has a risk management strategy, policy and procedure, incident policy and assurance framework in place	Risk Management Policy. Incident reporting system. Risk register in place. Patient safety and other alerts reviewed regularly Health & Safety Control Book system in place		Healthcare Commission NHSLA assessment HSE	Vacant Risk manager post has not been replaced. No regular reports on incidents to sub-committees or Board	No designated Board lead for "Patient Safety"	Level 1A NHSLA Risk Management Standard achieved in September 2004	Clinical Governance & Risk Management Committees

Principal Risks (incl. Risk Score)		Expected Management Controls	Actual Controls	Management Assurances	External / Independent Assurance	Gaps in Controls	Gaps in Assurances	Positive Assurances	Ongoing Monitoring
1.2.2	Failure to educate, train and communicate risk management strategy and procedures to all staff RISK SCORE:	Training strategy and programmes in place	Education and Training Strategy in place. Risk Management sessions held with front-line staff	Training Records	Healthcare Commission NHSLA		Improve training records as gaps exist	Staff Survey feedback on awareness of incident reporting procedures	Clinical Governance, Risk Management & Health & Safety Committees
1.3 To ensure that effective systems are in place to learn from patient safety incidents									
1.3.1	Failure to systematically review and analyse incidents to identify trends etc. RISK SCORE:	The Board receives information on incidents, complaints and claims	Monthly review meetings established between clinical governance, complaints and risk functions. Serious clinical incident review process in place		Healthcare Commission NHSLA	Lack of a proper system for quality indicators. Serious Clinical Incident Group do not meet regularly			
1.4 To ensure that effective child protection arrangements are in place throughout the organisation and in partner organisations									
1.5 To ensure that health care processes, practices and activities are continually reviewed and that improvements in practice are implemented									
1.4.1	Failure to implement improvements in practice as a result of analysis of incidents RISK SCORE:	The Board receives information on changes to practices and improvements			Healthcare Commission NHSLA				