

Reference: CSA91475 Date: 28/04/2006

Trust self-declaration:

Organisation Name	Clatterbridge Centre For Oncology NHS Trust
Organisation Code:	REN

Please supply the following information:

Other than for the exceptions recorded on the seven domain pages, the trust board has reasonable assurance that there have been no significant lapses in meeting the core standards during the period April 1st 2005 to March 31st 2006.
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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
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,	Compliant

	with particular emphasis on high standards of hygiene and cleanliness, achieving year on year reductions in Methicillin-Resistant Staphylococcus Aureus (MRSA).	
C4b	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that all risks associated with the acquisition and use of medical devices are minimised.	Compliant
C4c	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that all reusable medical devices are properly decontaminated prior to use and that the risks associated with decontamination facilities and processes are well managed.	Compliant
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

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

C7a and C7c	Healthcare organisations apply the principles of sound clinical and corporate governance and Healthcare organisations undertake systematic risk assessment and risk management.	Compliant
C7b	Healthcare organisations actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources.	Compliant
C7e	Healthcare organisations challenge discrimination, promote equality and respect human rights.	Compliant
C8a	Healthcare organisations support their staff through having access to processes which permit them to raise, in confidence and without prejudicing their position, concerns over any aspect of service delivery, treatment or management that they consider to have a detrimental effect on patient care or on the delivery of services.	Compliant
C8b	Healthcare organisations support their staff through organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under-representation of minority groups.	Compliant
C9	Healthcare organisations have a systematic and planned approach to the management of records to ensure that, from the moment a record is created until its ultimate disposal, the organisation maintains information so that it serves the purpose it was collected for and disposes of the information appropriately when no longer required.	Compliant
C10a	Healthcare organisations undertake all appropriate employment checks and ensure that all employed or contracted professionally qualified staff are registered with the appropriate bodies.	Compliant
C10b	Healthcare organisations require that all employed professionals abide by relevant published codes of professional practice.	Compliant
C11a	Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare are appropriately recruited, trained and qualified for the work they undertake.	Compliant

C11b	Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare participate in mandatory training programmes.	Compliant
C11c	Healthcare organisations ensure that staff concerned with all aspects of the provision of healthcare participate in further professional and occupational development commensurate with their work throughout their working lives.	Compliant
C12	Healthcare organisations which either lead or participate in research have systems in place to ensure that the principles and requirements of the research governance framework are consistently applied.	Compliant

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

Standards C7f and C19 are picked up through our assessment of existing targets. Standard C7d is assessed through our use of resources component which uses information from assessments undertaken by the Audit Commission and Monitor.

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	Compliant

	relatives and carers are assured that organisations act appropriately on any concerns and, where appropriate, make changes to ensure improvements in service delivery.	
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

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

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

Standards C7f and C19 are picked up through our assessment of existing targets Standard C7d is assessed through our use of resources component which uses information from assessments undertaken by the Audit Commission and Monitor.

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	Compliant
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	assets of the organisation	
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

C22a and C22c	Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by cooperating with each other and with local authorities and other organisations and C22c Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by making an appropriate and effective contribution to local partnership arrangements including local strategic partnerships and crime and disorder reduction partnerships.	Compliant
C22b	Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by ensuring that the local Director of Public Health's annual report informs their policies and practices.	Not met
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

Please complete the details below for standard C22b for which you indicated your trust does

## Core standards assessment final declaration

Start date of non-compliance or insufficient assurance	01/04/2005
End date of non-compliance or insufficient assurance (planned or actual)	01/03/2006
Description of the issue (you are restricted to 1500 characters including spaces. This is approx. 200 - 250 words or half a side of A4 typed)	During this time the Trust did not have in place policies and procedures which were informed by the local Director of Public Healths annual report.
Actions planned or taken (you are restricted to 1500 characters including spaces. This is approx. 200 - 250 words or half a side of A4 typed)	As a tertiary Trust which provides services to 15 PCTs we were advised by the SHA to reflect the geographically local PCTs annual reports into our work programme. The Trust has now reviewed two annual reports from local PCTs and has developed a Health Promotion Strategy which was approved by the Trust on 1st March 2006.

not comply, or that you have insufficient assurance:

The Healthcare Commission recommends that all members of the trust board, including the non-executive directors (for foundation trusts this should be the board of directors) should sign off the declaration in the space provided below. Here, sign off is achieved by recording the name(s) and position(s) of the individual(s) concerned. We do not require scanned signatures.

As a minimum, we require the declaration to be signed off by an appropriate officer(s) with delegated authority. There is no requirement for a paper copy of the final declaration to be signed and returned to the Healthcare Commission.

The completion of the sign off page will be taken as verification that the individual(s) who are recorded as signing off the declaration have reviewed the contents of the declaration form and are certifying that:

the general statement of compliance, and information provided for each standard, are a true representation of the trust's compliance

any commentaries provided by specified third parties have been reproduced verbatim. Specific third parties are: strategic health authority, and foundation trust board of governors, where relevant, and patient and public involvement forums and overview and scrutiny committees

### they are signing off the declaration form on their behalf and with delegated authority on behalf of all members of the trust board as referred to above

Please state how many individual(s) will be signing off the declaration (maximum of 30):

Number of	1
signatories	

#### Electronic sign off – details of individual(s)

Title	Full name	Job title
Mr	Alan White	Chairman

Please enter the commentaries below. If copying and pasting, it is advisable to copy the text and paste unformatted into a new document. Then copy and paste the unformatted text into the web form.

Strategic health authority commentary	The Strategic Health Authority is expected to comment on the capability of organisations to meet the core standards within the Standards for Better Health (DH 2004) with the exception of C7d (financial management), C7f (existing targets) and C19 (access targets).
	It is the responsibility of the Trust Board to assure itself that the relevant processes are robust and all judgements on compliance are based on supportive evidence. The Board also need to be able to demonstrate that the Trust is working towards a programme of continuous quality improvement.
	The Strategic Health Authority takes a view that the Trust has good governance systems in place to assure the delivery of safe and effective health care. The Trust has attained accreditation at CNST (Clinical Negligence Scheme for Trusts) level 3 by the NHS Litigation Authority. The Trust has also attained IWL (Improving Working Lives) Practice Plus accreditation in year.
	The Strategic Health Authority is satisfied that the Trust has addressed the issues raised by the Strategic Health Authority in its statement relating to the Draft Declaration in October 2005.
Patient and public involvement	Commentary for the final declaration for Clatterbridge Centre for Oncology
forum commentary	The Forum covered each of the domains during the content of their meetings and have provided the attached coverage of each domain.
	Although the Clatterbridge Centre for Oncology Trust PPI Forum (CCO PPIF) are asked to attend meetings with the CCO to look at those areas covered in the Annual Health Check (AHC), the Forum's workplan does not cover the whole AHC. Therefore, the commentary reflects this and covers only those areas where the Forum have actual knowledge and evidence of compliance.

The forum and the trust continue to work well together and the forum are developing their knowledge on the workings of the CCO.
Ronald Anderson; CCO Trust PPIF Chairman
Clatterbridge Centre for Oncology – Commentary First Domain – Safety The Forum have discussed this domain in all its parts and, at this stage, decided that it could make no substantive comment. Second Domain: Clinical and Cost Effectiveness The Forum have discussed this domain in all its parts and, at this stage, decided that it could make no substantive comment. Third Domain – Governance C7 e) Challenge discrimination, promote equality and respect human rights Aware of Essence of Care Groups existence but not yet been to a
<ul> <li>meeting</li> <li>b) Organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under-representation of minority groups</li> <li>C8</li> <li>b) Organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under-representation of minority groups</li> <li>Aware of Induction &amp; Diversity Groups – not attended meetings</li> <li>C12 Healthcare organisations which either lead or participate in research have systems in place to ensure that the principles and requirements of the organisation of minority provides and requirements of the systems in place to ensure that the principles and requirements of the organisation of minority provides and requirements of the systems in place to ensure that the principles and requirements of the organisation of minority provides and requirements of the systems in place to ensure that the principles and requirements of the organisations where the principles and requirements of the organisations of the principles and requirements of the principles and requirements of the organisations of the principles and requirements of the organisations of the principles and requirements of the principles and principles and</li></ul>
<ul> <li>the research governance framework are consistently applied</li> <li>The Forum have been involved in the Clinical Audit Group but are very new to this group and, therefore, at this stage, cannot make substantive comment.</li> <li>CCO - Fourth Domain: Patient Focus</li> <li>C13 Healthcare organisations have systems in place to ensure</li> </ul>

that: a) Staff treat patients, their relatives and carers with dignity and respect
<ul> <li>PEAT:-</li> <li>Walkabouts. Forum members have involvement in PEAT.</li> <li>Provision of Wigs Survey – (see minutes 25.10.05)</li> <li>Carried out Disability Audit to assist trust in adaptations and alterations and identified problem areas. Forum member invited to Diversity Forum within CCO.</li> </ul>
C15 Where food is provided, healthcare organisations have systems in place to ensure that: a) Patients are provided with a choice and that it is prepared safely and provides a balanced diet
Forum will be involved in PEAT so would be able to ensure patients are provided with choice in future
<ul> <li>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</li> </ul>
Forums are involved with PEAT so will be able to ensure patients' individual requirements are met in future
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
<ul> <li>From QA Walkabout 14/2/06 on some Wards the 'Clean your Hands' leaflets were missing</li> </ul>
<ul> <li>There had been some complaints re: 'jargon' and terminology used when talking to patients</li> </ul>
<ul> <li>Is the 'Significant News' document from the Cancer Network being adapted (CCO Minutes 17.1.06)</li> </ul>
• The Forums for CCO, Christie and the Marsden will be carrying out an Information gathering day in March – so should be able to comment further in April's final declaration
Fifth Domain – Accessible and Responsive Care
C18 Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably
Forum involved with PEAG walkabouts and acknowledge that the PEAG give PEAT access to services. The forum is to ask the Chief Pharmacist if CCO has any criteria for ordering certain drugs and if cost is a criterion.
C19 Healthcare 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.	
The forum can only comment on patient input and found that, those spoken to, had expressed that they had prompt care and services met with patient expectations.	
Sixth Domain – Care environment and amenities	
C20 Healthcare services are provided in environments which promote effective care and optimise health outcomes being : (a) a safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation.	
The forum acknowledge PEAT involvement and the forum are familiar with the environment provided for patients staff and visitors, as a result of their involvement with the QA walkabouts and other visits to the hospital.	
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	
CCO won the Clean Hospital Award as part of Building Better Healthcard Awards. The forum intend to do an infection control survey over the coming year and acknowledge the PEAT	
verview and crutiny ommittees will e commentating	How many overview and scrutiny committees will be commentating
	on your trust?

# Please enter the commentaries below. If copying and pasting, it is advisable to copy the text and paste unformatted into a new document. Then copy and paste the unformatted text into the web form.

Overview and scrutiny committee 1 - commentary

Overview and scrutiny committee commentary	Clatterbridge Centre for Oncology Comments from Wirral Social Care and Health Select Committee based on the work programme 2004-05.
commentary	Clatterbridge Centre for Oncology is a member of the Involving People Modernisation Team responsible for developing a joined up approach to PPI across Wirral. Wirral Social Care and Health Select Committee welcomes the thorough consultation CCO is undertaking in its application for Foundation Trust Status. CCO has regularly involved representatives of the local authority in Foundation Status events (C17). The Committee's work programme has not covered other issues of direct relevance to CCO, therefore the Committee is unable to comment further on the standards at this stage. The Committee looks forward to working more closely with CCO in its coming work programme.

# Overview and scrutiny committee 2 - commentary

Overview and scrutiny committee commentary	The Sefton MBC Scrutiny & Review Health Overview Committee has concentrated its commenting on the performance of those Trusts and PCTs within the Council boundary, where it has had an active scrutiny relationship and therefore some direct evidence on performance. The Sefton MBC Scrutiny & Review Health Overview Committee have, in the course of the period under review, received report on service configuration and working practice from the Clatterbridge Centre for Oncology NHS Trust, and recognise the tremendous work undertaken, and its reputation as a centre of excellence.
	It is the Committees intention to develop a stronger relationship with the Trust over the course of the coming year, building on the initial contacts made during 2005. This will enable us to provide meaningful comment as part of next years annual statement. A site visit to the Trust by Members is planned for later in the year.