



Reference: CSA56574

Date: 01/11/2005

Trust Self-Declaration:

Trust:	Salford Royal Hospitals NHS Trust
CSA Main Contact:	Henry Stahr
Main contact's email:	henry.stahr@SRHT.NHS.UK

Safety domain

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

C1a	Healthcare organisations protect patients through systems that identify and learn from all patient safety incidents and other reportable incidents, and make improvements in practice based on local and national experience and information derived from the analysis of incidents.	Compliant
C1b	Healthcare organisations protect patients through systems that ensure that patient safety notices, alerts and other communications concerning patient safety which require action are acted upon within required timescales.	Compliant
C2	Healthcare organisations protect children by following national child protection guidelines within their own activities and in their dealings with other organisations.	Compliant
C3	Healthcare organisations protect patients by following National Institute for Clinical Excellence (NICE) interventional procedures guidance.	Insufficient assurance
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).	Insufficient assurance
C4b	Healthcare organisations keep patients, staff	Compliant

	and visitors safe by having systems to ensure that all risks associated with the acquisition and use of medical devices are minimised.	
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

Non-compliance/insufficient assurance for safety domain

Please complete the details below for standard C3 for which you indicated your trust does not comply, or that you have insufficient assurance:

Start Date of Non-Compliance or Insufficient Assurance	01/04/2005
End Date of Non-Compliance or Insufficient Assurance (planned or actual)	01/12/2006
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)	Review of procedures being undertaken. Information expected to be complete November 2005. Compliance is anticipated.
Actions Planned or Taken (you are restricted to 1500 characters including spaces. This is approx. 200 - 250 words or	Procedures to be discussed with relevant directorates. Financial, training and educational issues to be addressed. Responsible Executive: Exec Medical Director

half a side of A4 typed)	
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Please complete the details below for standard C4a for which you indicated your trust does not comply, or that you have insufficient assurance:

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)	Following review of Standard C4a (MRSA) the Trust can only confirm an insufficient assurance to this Standard. The Trust has implemented significant work streams to tackle this high priority area, supported by robust action plans. Unfortunately, the Trust at the time of the draft declaration has not received the Strategic Health Authority Review around MRSA practice, and therefore, at this time are not in a position to provide independent assurance that the actions taken to date are appropriate and effective.
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)	Strategic Health Authority Peer Audit of MRSA October 2005

Clinical and cost-effectiveness domain

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

C5a	Healthcare organisations ensure that they conform to National Institute for Clinical Excellence (NICE) technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care.	Compliant
C5b	Healthcare organisations ensure that clinical care and treatment are carried out under supervision and leadership.	Compliant
C5c	Healthcare organisations ensure that clinicians continuously update skills and techniques relevant to their clinical work.	Compliant
C5d	Healthcare organisations ensure that clinicians participate in regular clinical audit and reviews of clinical services.	Compliant

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

Please indicate 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
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	Compliant

	of healthcare are appropriately recruited, trained and qualified for the work they undertake.	
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

Patient focus domain

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

C13a	Healthcare organisations have systems in place to ensure that staff treat patients, their relatives and carers with dignity and respect.	Compliant
C13b	Healthcare organisations have systems in place to ensure that appropriate consent is obtained when required, for all contacts with patients and for the use of any confidential patient information.	Compliant
C13c	Healthcare organisations have systems in place to ensure that staff treat patient information confidentially, except where authorised by legislation to the contrary.	Compliant
C14a	Healthcare organisations have systems in place to ensure that patients, their relatives and carers have suitable and accessible information about, and clear access to, procedures to register formal complaints and feedback on the quality of services.	Compliant
C14b	Healthcare organisations have systems in place to ensure that patients, their relatives and carers are not discriminated against when complaints are made.	Compliant
C14c	Healthcare organisations have systems in place to ensure that patients, their relatives and carers are assured that organisations act appropriately on any concerns and, where appropriate, make changes to ensure improvements in service delivery.	Compliant
C15a	Where food is provided, healthcare organisations have systems in place to	Compliant

	ensure that patients are provided with a choice and that it is prepared safely and provides a balanced diet.	
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

Accessible and responsive care domain

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

C17	The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services.	Compliant
C18	Healthcare organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably.	Compliant

Care environment and amenities domain

Please indicate 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
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

Public Health domain

Please indicate 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 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.	Compliant
C23	Healthcare organisations have systematic and managed disease prevention and health promotion programmes which meet the requirements of the national service frameworks (NSFs) and national plans with particular regard to reducing obesity through action on nutrition and exercise, smoking, substance misuse and sexually transmitted infections.	Compliant
C24	Healthcare organisations protect the public by having a planned, prepared and, where possible, practised response to incidents and emergency situations, which could affect the provision of normal services.	Compliant

Endorsed by (internal Audit view of the quality of processes used by the board in making its last statement of Internal Control)

	<p>The Head of Internal Audit opinion is provided to assist the Board in completing the Statement on Internal Control (SIC), which forms part of the Annual Financial Statements for the year 2004/2005, and is not intended for any other purpose. The SIC provides public assurances about the effectiveness of the organisation's system of internal control.</p> <p>The Board is accountable for maintaining a sound system of internal control that supports the achievement of the organisation's objectives. This should be based on an ongoing risk management process that is designed to identify the principal risks to the organisation's objectives, to evaluate the nature and extent of those risks, and to manage them efficiently, effectively and</p>
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economically.

Boards are responsible for putting in place arrangements for gaining assurance about the effectiveness of the organisation's system of internal control. To achieve this, the Board should identify the principal risks to the organisation meeting its principal objectives and map out the key controls in place to manage these risks. The Board should also identify how they have gained sufficient assurance about the effectiveness of these key controls.

Assurances may be derived from a number of sources and it is the responsibility of the Board to determine how much reliance can be placed on each of them.

My opinion is limited to the work carried out by Internal Audit during the year on the effectiveness of the management of those principal risks identified by the organisation which includes the production of the Assurance Framework.

Opinion on the Assurance Framework

Category	Description	Trust/PCT for 2004/2005
A	An Assurance Framework has been established which is designed and operating to meet the requirements of the 2004/05 SIC and provide reasonable assurance that there is an effective system of internal control to manage the principal risks identified by the organisation.	

Opinion on the System of Internal Control

It is my opinion that for the identified principal risks covered by internal audit work, the Board has:

Significant Assurance, that there is a generally sound system of control designed to meet the organisation's objectives. However, some weaknesses in the design or inconsistent application of controls put the achievement of particular objectives at risk.

This opinion represents the overall conclusion based on my consideration of the assurances from individual audits, as set out in my Annual Report for 2004/2005.

It is the Board's responsibility to satisfy itself it has sufficient assurance about the operation of controls in place to manage other principal risks.

signature

Head of Internal Audit
24 June

	2005
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Has the auditor disclosed any matters in relation to the Statement on Internal Control within the Independent (external) Auditor's Report to the Directors of the Board on the financial statements in 2004/2005?

	No
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Please supply the following information

general statement of compliance	<p>The Trust Board has reviewed the Standards for Better Health and the assurances on compliance. There are two standards for which there is currently insufficient assurance of compliance and non which the Board considers are significantly non-compliant. The Trust has also shared its declaration with the Strategic Health Authority, Salford City Council Overview and Scrutiny Committee and the Patient and Public Forum who have provided their commentary on the Trust's declaration. The Trust Board therefore makes this declaration based on evidence it has received and is confident that the declaration is a true and fair reflection of the Trust's compliance with Standards for Better Health.</p>								
strategic health authority commentary	<p>The Strategic Health Authority support the trust's declaration on meeting the care standards based on our local information from:</p> <ul style="list-style-type: none"> · Handling of patient safety incidents · Handling of local media issues · Achievement of consistently good performance on the star ratings (including the balanced scorecard targets) · Service reconfiguration within the health economy. 								
patient and public involvement forum commentary	<p>The Forum consider that the infrastructure associated with meeting the required standards of the seven relevant domains appears to be in place and well established. In this respect the Trust can clearly be said to be fully compliant with the requirements. It was noted that in the Trust's opinion they comply with all requirements associated with the seven domains with the exception that insufficient assurance is currently available for Standard being C04a and. C03.</p> <p>The Forum has consulted members of the public on a variety of issues and is currently in the process of summarising the responses. The Forum is developing a Work Programme which will provide necessary evidence and assurance that the Trust continues to comply with the Standards.</p> <p>It is therefore the intention of the Patient & Public Involvement Forum to monitor and report their findings on the following domains of the Declaration;</p> <table border="0"> <tr> <td>Domain 1</td><td>Safety</td></tr> <tr> <td>Domain 4</td><td>Patient Focus</td></tr> <tr> <td>Domain 5</td><td>Accessible & Responsive Care</td></tr> <tr> <td>Domain 6</td><td>Care, Environment and Amenities</td></tr> </table>	Domain 1	Safety	Domain 4	Patient Focus	Domain 5	Accessible & Responsive Care	Domain 6	Care, Environment and Amenities
Domain 1	Safety								
Domain 4	Patient Focus								
Domain 5	Accessible & Responsive Care								
Domain 6	Care, Environment and Amenities								

	The report on these four domains will form part of the Forum's work plan and the results will be submitted to the Trust by the end of March 2006 prior to the submission of the Trust's final Declaration.
How many overview and scrutiny committees will be commenting on your trust?	1

Overview and scrutiny committee 1 - commentary

Overview and Scrutiny Committee Commentary	<p>The Community, Health and Social Care Scrutiny Committee has considered the draft declaration made by the Trust and based on their previous experiences of working with the Trust, do not doubt that the self -assessment is an accurate reflection of the standards achieved.</p> <p>The Committee has developed a strong working relationship with officers from the Trust, who have demonstrated a firm commitment to the scrutiny process. Not only has this been exhibited in their willingness to provide information to and/or attend meetings of the Community, Health and Social Care Scrutiny Committee, but also in their support for the development of the scrutiny function, for example through their attendance at the annual scrutiny conference and work programming events.</p> <p>There have also been considerable efforts made to include the chair and other members of the committee in a range of events in connection with the Trust's application for Foundation Status.</p> <p>In carrying out its work programme through to October 2005, the committee has been able to question and influence both existing and proposed services and monitor the implementation of service improvements. (C17)</p> <p>The Committee has taken a close interest for the past year into the Trust's handling of MRSA and infection control. This included a site visit to the hospital to view the practical measures in place to manage infection control. Members are aware of current good practice and planned initiatives and will continue to monitor effectiveness. (C4a)</p> <p>Members have received "Patient Responsiveness" reports for the Trust, encompassing complaints and PALS contacts and are assured that there is a robust procedure in place. (C14)</p> <p>The Committee are aware of the joint working undertaken by the Trust in conjunction with the Primary Care Trust and local authority, particularly around managing delayed transfers of care, on which they receive regular update reports. (C6)</p>
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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 the declaration in the space provided below. As a minimum, we require that the declaration is signed by an appropriate officer(s) with delegated authority. Signatures below represent the following:

approval that the general statement of compliance, and information provided for each standard, are a true representation of the trust's compliance
 approval that any commentaries provided by specified third parties (i.e. strategic health authority (where relevant), patient and public involvement forums and overview and scrutiny committees) have been reproduced verbatim.
 approval that the relevant comments from the head of internal auditor opinion have been reproduced verbatim, and that the information provided in respect of the external auditor's view reflect the independent auditor's report to the directors of the board on the financial statement in 2004/05.

Please state how many members of the trust board, including the non-executive directors, will be signing the form (maximum of 20):

Number of signatories	12
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Details of first signatory

Mrs	Margaret A Morris	Trust Chair
Signature:		

Details of second signatory

Mr	David N Dalton	Chief Executive
Signature:		

Details of third signatory

Dr	Peter C Barnes	Executive Medical Director
Signature:		

Details of fourth signatory

Mrs	Elaine Inglesby	Executive Nurse Director
Signature:		

Details of fifth signatory

Mr	Thomas A Whitfield	Director of Finance
Signature:		

Details of sixth signatory

Mr	Raj J Jain	Director of Workforce and Corporate Affairs

Signature:		
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Details of seventh signatory

Mr	Hugh J Mullen	Director of Operations
Signature:		

Details of eighth signatory

Mr	Simon H G Neville	Director of Strategy and Development
Signature:		

Details of ninth signatory

Mr	James J Potter	Deputy Trust Chair
Signature:		

Details of tenth signatory

Professor	Katharine Perera	Non-executive Director
Signature:		

Details of eleventh signatory

Professor	David Thompson	Non-executive Director
Signature:		

Details of twelfth signatory

Mr	Martin Hyman	Non-executive Director
Signature:		