



DERBY CITY COUNCIL

ADULT SERVICES AND HEALTH COMMISSION 12 March 2007

Report of the Director of Corporate and Adult Social Services

Annual Health Check – Statements by the Commission on Local NHS Health Bodies

RECOMMENDATION

- 1.1 To consider and discuss comments for the Healthcare Commission on local NHS Health Bodies as part of the Annual Health Check

SUPPORTING INFORMATION

- 2.1 The Healthcare Commission is health watchdog in England. Its job is to check that healthcare services are meeting standards in a range of areas including safety, cleanliness and waiting times. It has a statutory duty to assess the performance of NHS healthcare organisations and awarding annual performance ratings related to them.
- 2.2 The healthcare Commission launched a new process for assessing and rating each healthcare organisation in 2005 called the annual health check. In this process it seeks to answer two questions.
 - Are healthcare organisations getting the basics right?
 - Are healthcare organisations making and sustaining progress?
- 2.3 A key element of the annual health check requires NHS health bodies to submit declarations of their compliance to 24 standards and targets set by the Government. These covered by the following seven broad outcomes:
 1. **Safety** - Patient safety is enhanced by the use of health care processes, working practices and systemic activities that prevent or reduce the risk of harm to patients
 2. **Clinical and Cost Effectiveness** - 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
 3. **Governance** - 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 health care organisation

4. **Patient Focus** - Health care 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
 5. **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
 6. **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
 7. **Public Health** - Programmes and services are designed and delivered in collaboration with all relevant organisations and communities to promote, protect and improve the health of the population served and reduce health inequalities between different population groups and areas
- 2.4 To ensure Healthcare Commission has a full picture of the performance of health services, it seeks to include the views of third parties in their assessments of the health bodies. It requires Health bodies to invite comments from third parties which include Patients and Public Involvement Forums, Overview and Scrutiny Committees and the Board of Directors of foundation Trusts and submit them verbatim with their declarations.
- 2.5 We have received a letter from the East Midlands Ambulance Service confirming their compliance to all 24 core standards and a request to ASH Commission for its comments on their performance. Although the timetable for submitting the declarations to the Healthcare Commission is 1 May, the Ambulance Service has requested that the comments reach them by 26 March when they will be discussed at their scheduled meeting. Other healthcare bodies are also expected to submit their requests in due course.
- 2.6 The Adult Services and Health Commission is not compelled to make any comments on the health bodies, however should members decide do so, it is important that it backs up its comments with evidence.

- 2.7 PCT – Out of Hours Call Handling and Triage consultation; response to Commissions report on Reducing Health Inequalities; involvement in the Be Active promotion, Consultation on the Changes to Adult Drug Treatment Services Model

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Background papers:	None
List of appendices:	Appendix 1 - Implications Appendix 2 – Draft Annual Health Check statements Appendix 3 – List of Core Standards

Appendix 1

IMPLICATIONS

Financial

1. None arising from this report.

Legal

2. The Health and Social Care Act 2001 gives health scrutiny committees powers to review any matter relating to the planning, provision and operation of health services.

Personnel

3. None arising from this report.

Equalities impact

4. Effective scrutiny will benefit all Derby people.

Corporate Priorities

5. This report links with Council's priority for 2007-10 to help us all to be healthy and active.