



Reference: AHC105884
Date: 26/04/2007

Your details

Trust self-declaration:

Organisation name:	Central And North West London Mental Health NHS Trust
Organisation code:	RV3

General statement of compliance

Please enter your general statement of compliance in the text box provided.

General statement of compliance	<p>Central and North West London Mental Health NHS Trust has reasonable assurance that there have been no significant lapses in meeting the core standards during the period 1st April 2006 - 31st March 2007.</p> <p>The Performance Management Committee has overseen the process of preparation for the declaration, receiving papers relating to the core standards throughout the year. The identified executive lead has reconfirmed compliance for the time period indicated above, considering our cross checking data and ensuring no significant lapses have taken place. Our evidence database has been updated and checked throughout the year.</p> <p>The declaration process has been checked by our internal auditors, Deloitte and Touche, who concluded that we had substantial assurance around the systems that we use.</p> <p>The Trust has studied the comments made by all our stakeholders and partners. We will be responding to each of our partners individually to thank them for their comments and we will be happy to share those responses with the Healthcare Commission if required.</p>
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Statement on measures to meet the Hygiene Code

Please enter this statement in the box provided.

Statement on measures to meet the Hygiene Code	<p>Central and North West London Mental Health NHS Trust recognises that the Health Act 2006 introduced a statutory duty on NHS organisations from October 1st 2006 to observe the provisions of the Code of Practice on Healthcare Associated Infections. As a result the Board has reviewed its arrangements and is assured that it has suitable systems and arrangements in place to ensure that the Code is being</p>
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	<p>observed at this Trust. Specifically the Board can confirm: C4a, C4c and C21 have been specifically considered to take account of the legislative change. This will be reflected in the Infection Control Annual Report 2006/2007 and Action Plan that will be presented to Trust Board in May 2007. The Infection Control Committee meets quarterly and reports on a range of issues including occurrence of MRSA and the Trust Board is confident that when it reports on Health Care Acquired Infections in May 2007, it will be on target.</p>
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Safety domain - core standards

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
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.	Not applicable (ambulance / mental health / learning disabilities services should declare 'not applicable')
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
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	Compliant

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	prior to use and that the risks associated with decontamination facilities and processes are well managed.	
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

Clinical and cost-effectiveness domain - core standards

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
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

Clinical and cost effectiveness domain - developmental standards

Please supply the following information:

Your level of progress in relation to developmental standard D2a	Fair
Your comments on your performance in relation to the comparative information contained in your information toolkits(s)	The Trust has implemented action plans to meet the standards, aims and other requirements for developing services

	<p>covered by the National Service Framework for Children, Young People and Maternity Services: Standard 9: mental health and psychological well-being of children and young people.</p> <p>The Trust has taken initial steps to implement as appropriate the NICE Guidance on Depression in Children and Young People, and Obsessive Compulsive Disorder. The Trust is implementing action plans, as appropriate, for NICE Guidance on Anxiety, Depression, Post Traumatic Stress Disorder, Self Harm and Violence. The Trust is meeting the recommendations or other requirements as appropriate for the NICE Guidance on Schizophrenia.</p> <p>The Trust monitors its performance in identifying and taking into account patients individual needs and preferences through compliance with the Care Programme Approach. This is audited on an annual basis. The results of these audits go to the management groups in local areas including the CPA Steering Groups which monitor, evaluate and action plan the results. Additionally the Trust has a Better Services for Women Working Group, Spirituality Working Group and Focused Implementation Site Status.</p> <p>The absence of a specialist unit within the region for young people led to the position on the performance indicator of young people on adult wards. In terms of the current position CNWL CAMHS recognises that meeting the level of demand for inpatient beds for young people and inappropriate use of adult beds is clearly not appropriate. The number of referrals coming through Tier 3 services is one area of demand in addition to young people referred from A&E out of hours services. These people often end up on adult wards where a paediatric bed is not deemed appropriate. Some PCT commissioners are not currently funding beds for service users requiring adolescent placements and hence young people in those boroughs are placed in adult wards. There is no specialist in patient provision for young people with eating disorders as well so this means they are required to be treated on wards set up for adults. We currently have a Trust-wide ban on under 18 admissions to adult wards. Additionally, the Trust is in the process of setting up an in-patient unit to meet the mental health needs of 14-18 year olds at</p>
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	Tier 4.
Your highest local priorities for improvement relating to developmental standard D2a	<p>The Trust continues to work with local partners through the Local Implementation Teams on targets from following NSFs: National Service Framework for Older People: Standard 7 - mental health in Older People; National Service Framework for Mental Health. The challenges of these targets are at the heart of the service we provide and we are fully committed to working with partners and Commissioners to meet them.</p> <p>Priorities for the year ahead include: Implementing Early Intervention in Psychosis across the whole of the Trust; Continuing to drive the Care Programme Approach; Advancing the patient choice agenda; Continuing to audit our implementation of all NICE guidelines; Undertaking a review of talking therapies; and Developing acute inpatient services to meet the mental health needs of 14-18 year olds.</p>

Governance domain - core standards

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
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	Compliant

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	personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under-representation of minority groups.	
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

Patient focus domain - core standards

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
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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 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

Accessible and responsive care domain - core standards

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

C17	The views of patients, their carers and	Compliant
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	others are sought and taken into account in designing, planning, delivering and improving healthcare services.	
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 - core standards

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
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 - core standards

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	Compliant
	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.	

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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

Electronic sign off - details of individual(s)

Electronic sign off - details of individual(s)

	Title	Full name	Job title
1.	Dame	Ruth Runciman	Chairman
2.	Ms	Claire Murdoch	Chief Executive
3.	Professor	Dorothy Griffiths	Non-Executive Director
4.	Ms	Beverly Provost	Non-Executive Director
5.	Mr	Ian Holder	Non-Executive Director
6.	Ms	Hiroo Chothia	Non-Executive Director
7.	Ms	Bhavana Desai	Non-Executive Director
8.	Mr	Edward Matt	Director of Operations and Information
9.	Dr	Alex Lewis	Medical Director
10.	Mr	Trevor Shipman	Director of Finance
11.	Mr	Ian McIntyre	Director of Estates and Facilities
12.	Mr	David Brettle	Director of Human Resources

Comments from specified third parties

Please enter the comments from the specified third parties below. If you are copying text from another document, it is advisable to copy the text and paste it into a new document as unformatted text before pasting this into your form.

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<p>Strategic health authority comments</p>	<p>SHA comments re Central North West London Mental Health Trust (for inclusion in the Declaration against Core Standards 2006/7)</p> <p>In reviewing the declaration NHS London has followed the principle of self assessment, except where its performance reviews and information clearly indicate a different interpretation. This process has not highlighted any major concerns with the Trust's assessment.</p> <p>Mike Hellier PROVIDER AGENCY</p>
<p>Patient and public involvement forum comments</p>	<p>The Trust made no provision in its procedures regarding the Annual Healthcare check to review and respond to the comments made by the Forum on the 2006 Healthcare Check. This was discovered after the Forum chased the Trust to find out why the Trust had not responded to the Forum's response. The Trust finally made its response in October 2006. Some Forum comments received no response from the Trust.</p> <p>Whilst the Trust may have set up systems and procedures, the implementation of these in each location and service is not consistent. Full compliance to a standard should only be claimed when there is full and meaningful implementation of the standard throughout the Trust. At times this has not happened. The Forum is not convinced that these cases are unfortunate, isolated and insignificant.</p> <p>C13a Healthcare organisations have systems in place to ensure that staff treat patients, relatives and carers with dignity and respect. Comment: The Forum has judged the Trust not to be fully compliant. Whilst the Trust may have set up policies and systems, this is not adequate enough to ensure that staff always treat patients, carers and relatives with dignity and respect. From the Forum's informal visit to the Gordon Hospital, patients have commented that there are nursing staff who do not listen and are dismissive of patients concerns. Although patients have also commented on good nursing staff, it was their experience of those who did not treat them with the dignity and respect that made their experience very negative. This underlines that the Trust policy is not being implemented systematically throughout the Trust. The Forum would welcome the Trust in looking at ways which they can monitor their policy in treating patients, relatives and carers with respect. We commend CNWL managers at the Gordon in tackling the issue of 'support and mentoring' to junior staff, particularly staff considered to be under-performing. The Forum was informed that 'Customer Care' training has been placed on hold and understands that this would be re-introduced to all staff sometime this year. It is not clear who made this decision to stop this training or the period of time when this training has been in abeyance. The Forum would welcome the return of 'Customer Care' training at the earliest opportunity. With respect to 'Patient Protected Time', it was clear from the Gordon visit that this was not being adhered to at all times on all the wards, unless the ward manager is there to enforce the system.</p> <p>C14a Healthcare organizations have systems in place to ensure that patients, their relative and carers have suitable and accessible information, and clear access to, procedures to register formal complaints and feedback on the quality of services. Comments: The Forum has judged the Trust not to be fully compliant. During the visits to the Gordon Hospital, availability of leaflets on the</p>

ward was variable. Some wards had little or no leaflets at all. This was similar to the findings of the Forum, reported in the 2006 Healthcare Check.(C16). In 2006 it was in relation to St Charles Mental Health Unit. There are still expressions from patients and carers of fears of reprisals should complaints be made regarding their treatment and care. The Forum in 2006 said 'Complaints are made but it is not always possible to follow-up on whether changes/improvements are made'. The trust has made no response regarding complainants being able to follow-up their complaint.

C14c

Healthcare organisation have systems in place to ensure that patients, their relative and carers are assured that organizations act appropriately on any concerns and where appropriate, make changes in ensure improvements on service delivery.

Comments: The Forum has judged the Trust not to be fully compliant. The Forum has been involved with Harrow service users and carers relating to ongoing concerns regarding Wiseworks Enterprise in Harrow. The services users and carers was disappointed that CNWL was not supportive of their concerns, particularly in relation to proper consultation of what stakeholders wanted to see the service develop into. Service users and Carers feel that CNWL staff in Harrow failed in support them, even in relation to the assessment contained on the Care Plan made by CNWL in conjunction with Harrow Council.

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.

Comments: The Forum has judged the Trust not to be fully compliant. The Forum is concerned that systems are not in place to ensure healthy balanced menus, particularly taking into account the long stays of many service users and the lack of opportunity for exercise. There is also concern that practices are not in place to ensure that service users are properly fed and that patients receive their choice. During the follow up visit to Nile ward, St. Charles MH unit in December 2006, nursing staff confirmed that there had been no fruit available for some weeks on the ward. This was in spite of reassurances made by Senior Trust managers in relation to Forum comments in the Healthcheck 2006. From the Forums visit at the Gordon, it was noticed that the weekly menu, was lacking in vegetables, which raises concern about patients getting their daily portion of 5 fruits and vegetables. It has also been noted that Halal food continues raise concerns regarding variety. Patients are still expressing that there is no choice and often the dish does not contain vegetables. During the Forums Food watch visit carried out at Park Royal MH unit in September 2006, it was noted that some patients would miss out on their ordered dish due to staff not properly monitoring patient are given their allocated meal.

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 received and, where appropriate inform patients on what to expect during treatment, care and after care.

Comments: The Forum has judged the Trust not to be fully compliant. The Forum notes that the Trust has not responded to comments made in the health check 2006. The Forum said in 2006, 'In relation to CPAs, the Forum query how the Trust makes CPA accessible

to those who do not speak English, have visual impairment or those who are illiterate.' The Trust has informed the Forum that there are Audits of CPAs. However these audits exclude service users and carers. Hence the assessment of the quality and implementation of care plans is inadequate. This is borne out by the widespread dissatisfaction by carers and service users with the quality of care plans. We note that the Trust has looked at the whole issue of care plans and CPA and has come up with over 40 recommendations. CNWL has provided no information to the Forum about setting up Trust wide systems regarding the content of care plans and the assessment and monitoring and review procedures relating to care plans. Some service users have informed the Forum that they have been told by CNWL staff that they do not have a care plan. The Forum is still being informed by some carers about not being invited to Care Plan meetings or their views being sought. Further example of the credibility of CNWL's CPA is in relation to Wiseworks. Harrow carers are not convinced that the Trust supports the care plan they, CNWL, has written. These concerns were represented because their care plan has included for service users attendance at Wiseworks Enterprise. The assessments which are being carried out by Harrow Council are with the support of CNWL, evidenced by the joint correspondence to the services users. This has totally undermined the Trust credibility in undertaking CPAs in the eyes of the service users and carers.

C17

The views of patients, their carers and others are sought and taken into account in designing, planning, delivery and improving healthcare services.

Comment: The Forum feels that the Trust has not been supportive of local Harrow service users and carers regarding proposals by Harrow council for Wiseworks. The Forum was pleased to take part in discussions called by the Head of the Brent Mental Health Team regarding proposed cuts by Brent PCT regarding the Assertive Outreach Team. This is a good example of how a Team should respond to proposed cuts and service changes

C18

The healthcare organisations has taken steps to offer patients choice in access to services and treatment, where appropriate, and ensures that this offered equitably, taking into account Building on the Best: Choice responses and equity the in the NHS.

Comment: Due to the Trust's process relating to the different local boroughs' services, patients have little choice in accessing other services and treatment beyond their local borough.

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.

Comment: The Forum has been informed by Harrow service users and carers that keys for the locks on the drawers have taken a long time to organise. Although managers are reviewing a better system, the process has been unsatisfactory. In relation to the Gordon Hospital, the Forum was pleased to know that new locks have arrived and will be placed and secured in rooms very soon.

C23

Healthcare organisations have systematic and managed disease

	<p>prevention and health promotion programmes which meet the requirements of the emotional services frameworks (NSF) and national plans with particular regard to reducing obesity through action on nutrition and exercise, smoking, substance misuse and sexually transmitted disease.</p> <p>Comment: The Forum has been informed by Harrow carers that carers are not satisfied that the Trust is doing all it can to support patients in relation to obesity. The Forum has been informed that the Harrow Rethink group donated its first exercise bike and rower to the Acute Wards last year. Rehabilitation facilities in Northwick Park Hospital (NWLH) could be made available to service users outside of 'normal working hours' but this has not been followed up by CNWL staff. An example is some service users in Harrow, prescribed with the medication Clozapine which causes weight gain as a side effect. Although their weight is monitored there is no health promotions programme offered in dealing with subsequent weight gain from the medication.</p>
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Overview and scrutiny committee comments

Overview and scrutiny committee 1

<p>Comments</p>	<p>Brent Overview and Scrutiny Committee</p> <p>I write in response to the Trust's self declaration under the Healthcare Commission Annual Health Check process 2006/7. This letter constitutes our formal comments for inclusion in the final submitted document.</p> <p>The Committee is encouraged by the Trust's apparent compliance with each of the standards and will request a further update once the Healthcare Commission has made its final assessment.</p> <p>We are, however, frustrated that we are not in a position to make fuller comment, as we have not attained a sufficient evidence base in relation to many of the issues and areas outlined in the declaration. This is in part due to the late starting of this year's committee cycle, but primarily a result of the health check process itself, which has not allowed for in-depth or meaningful consultation in relation to the agreed standards and how they are met locally.</p> <p>The Health Select Committee sees that the health check is an opportunity to comment on, and further strengthen, its relationship with the trust. Members are keen to relate local perspective to the performance information within the declaration. As we begin to set our work programme for 2007/8 we will seek to enhance the focus of topics to allow strands of the annual health check to be considered more closely. Furthermore, we would welcome further information on the 'developmental' progress highlighted in the Trust's declaration, particularly around mental health in older people (standard 7) and mental health and the psychological well-being of children and young people (standard 9).</p> <p>I would like to thank you for your attendance and support throughout this year, and the constructive approach the Trust has taken within the context of service reviews and finance cuts across the NHS as a whole.</p>
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	<p>Yours sincerely,</p> <p>CLlr Rev. David Clues Chair, Health Select Committee</p>
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Overview and scrutiny committee 2

Comments	<p>Harrow</p> <p>Harrow Council's Adult Health and Social Care Scrutiny Sub-Committee is again pleased to have the opportunity to comment on the annual health checks for the NHS organisations serving the borough. The comments provided by the Committee reflect upon only those core/developmental standards and issues which have been discussed by members over the past municipal year to date (May 2006 to March 2007) and feature on the scrutiny work programme. Members have also taken the opportunity to provide a more general local perspective from their ward work with local residents. We thank colleagues from the Trust for attending our committee meeting in March to present the progress made on the self-assessment.</p> <p>The scrutiny committees in Harrow have not this year considered any issues relating directly to this Trust and are therefore unable to substantiate with evidence any commentary on the Trust's assessment of its ability to meet the core/development standards.</p> <p>In relation to C6, the Committee is assured that the Trust cooperates with the local authority and this is demonstrated by the development of a Section 31 agreement between the two organisations with regard to mental health services for Harrow.</p> <p>With regard to C17, the Trust discussed with the Committee its application for Foundation Trust status as part of its consultation process with stakeholders on the future operation of the organisation.</p> <p>Scrutiny committees in Harrow will continue to build upon their constructive working relationships with the Trust, and look forward to a continuing and meaningful dialogue between scrutiny and the borough's healthcare organisations.</p>
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Overview and scrutiny committee 3

Comments	<p>London Borough of Hillingdon External Services Scrutiny Committee</p> <p>C6 Healthcare organisations cooperate with each other and social care to ensure that patients' individual needs are properly managed and met.</p> <p>The Trust is working closely with its partners to deliver mental health services to Hillingdon residents. In particular, officers from both the Trust and the Council told us that the two organisations are working closely together and employ joint staff for example.</p> <p>C7 Healthcare organisations 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</p>
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	<p>and effective use of resources; c) undertake systematic risk assessment and risk management; 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</p> <p>The Trust has implemented significant improvements to the management of Hillingdon mental health services since it assumed responsibility for these services in April 2006. A new, experienced, Head of Service was brought in from another part of the Trust and the Committee are confident that the governance of the Trust has significantly improved. (C7a)</p> <p>CNWL brought in senior nurses to Hillingdon to work on professional development for the key frontline staff. The Committee visited the local mental health facilities and spoke to frontline employees. These employees told Members that they feel much more valued and therefore motivated since CNWL took over the services. The Committee are fully assured that the Trust is supporting its staff. (C7b)</p> <p>Prior to April 2006 the mental health services were run by the PCT and were therefore facing financial difficulties. CNWL has a long track record (over 10 years) of successful financial management and is working to improve the efficiency of Hillingdon services. The Trust have a range of initiatives in place to maximise the value that can be gained from its funding from the PCT, including plans to re-open a closed ward in Hillingdon which should prevent people being placed in more expensive private sector placements out of the Borough. The Committee are confident that the Trust will be able to implement these initiatives. (C7d)</p> <p>C13 Healthcare organisations have systems in place to ensure that a) staff treat patients, their relatives and carers with dignity and respect.</p> <p>The Committee visited the Riverside Mental Health Unit and witnessed the high-quality services and are confident the Trust is fully compliant on C13a. All in-patients have a private en-suite room and are able to use a range of high quality facilities including a gym and IT suite.</p> <p>C20 Healthcare services are provided in environments which promote effective care and optimise health outcomes by being 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.</p> <p>As above, each patient has a private room with personal shower and toilet facilities, thereby ensuring the Trust is fully compliant with this standard. The Trust has spent GBP600,000 on refurbishing its facilities in Hillingdon, which ensures patients are treated in an excellent environment.</p>
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Overview and scrutiny committee 4

Comments	<p>Kensington & Chelsea</p> <p>We welcome the opportunity given to us by the Healthcare Commission to comment on the Declaration of Compliance from the Mental Health Trust.</p>
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The format of these healthchecks remains as unhelpful as last year. They appear to be more designed for box-ticking by the Healthcare Commission, i.e. reporting upwards by the Trusts, rather than to be informational documents to which the general public, including Overview and Scrutiny Committees, can easily explain their views and outline their experiences. The relationship of a trust downwards to patients and to the public seems to be obscure. The healthcheck forms are not designed to be helpful to those outside the health bureaucracy and to this extent are flawed as they are not aids either to transparency nor to accountability.

There is still a feeling that this exercise is over-concerned with process rather than outcomes.

We have seen the Healthcare Commission Public Health Development standards of our PCT and this document, unlike that for the core standards, gives information to which people can relate and is therefore meaningful. We would have found it helpful had been attached to the core standards review of compliance. If it were, then the public and the OSCs might be better prepared to comment.

The OSC does not find it helpful that boxes are ticked with the word 'compliant' without supporting this assessment with evidence and information. It is to be regretted that this was not done with the CNWL Mental Health Trust.

The OSC's response is set out below. It takes into account a recent consultation exercise undertaken with the local community organisations and PPIFs on the experience of their users with the K&C PCT. Among the organisations contributing were PPIFs covering the PCT, Chelsea & Westminster and Royal Brompton and Harefield Trusts, Sixty Plus, Full of Life and Service Users Drug Reference Group, and Council staff from Adult Care and Children's Services on how the service provided by the Trust is perceived by some of its users.

We have read and agreed with the comments from the City of Westminster Health OSC on CNWL Mental Health Trust with a reservation on the comment on Domain 2, about which we do not have enough information.

Standard C6 Healthcare organisations cooperate with each other and social care organisations

The Royal Borough of Kensington and Chelsea has a good working relationship with CNWL Mental Health Trust. For example the trust has been fully involved in the joint working mechanism the Joint Health Partnership Board.

We trust that once Foundation Status is approved there will be no reduction in the flow of information to OSCs and the public from the Trust, in particular keeping in the public domain all Board papers which are not commercially sensitive or impact on individual privacy.

Standard C13a Dignity and Respect

We are concerned to hear that the Trust does not provide an adequate aftercare service to drug/alcohol users who have been through a detox and/or rehab programme. This could leave some service users vulnerable, resulting in possible relapse.

	<p>Standard 11a Recruitment of staff</p> <p>Recruitment could be better used to bring vulnerable groups into the workforce, particularly where this would serve to increase the quality of service, and improve outcomes for vulnerable groups.</p> <p>We are concerned that there are a high number of vacancies in nursing posts.</p> <p>Standard 18 Equality of access</p> <p>The multi-disciplinary preventative mental health service for young people (Early Intervention Team or EIP) is reported to be very helpful and committed</p>
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Overview and scrutiny committee 5

<p>Comments</p>	<p>City of Westminster</p> <p>Domain 1 Safety HCC Outcomes: patient safety is enhanced by the use of healthcare processes, working practices and systemic activities that prevent or reduce the risk of harm to patients</p> <p>No comment.</p> <p>Domain 2 Clinical & Cost Effectiveness HCC Outcomes: patients achieve healthcare benefits that meet their individual needs through healthcare decisions and services, based on what assessed research evidence has shown provides effective clinical outcomes</p> <p>In relation to Central and North West London's (CNWL) application for Foundation Trust status, Members have reservations about the implications of operating the proposed structure concerning financial and staffing resources, which they do not feel were adequately addressed/satisfied in either the consultation document or in discussions with the Trust at consultation stage (source: consultation meeting with CNWL on their application for Foundation Trust status, 9 October 2006).</p> <p>Domain 3 Governance HCC Outcomes: managerial and clinical leadership and accountability, as well as the organisations' culture, systems and working practices, ensure that probity quality assurance, quality improvement and patients safety are central components of all activities of the healthcare organisation</p> <p>In relation to CNWL's application for Foundation Trust status, Members are pleased to note that they have allocated the City Council a seat on the Membership Council. If the application is approved, there may be an impact on consultation arrangements (under sections 7 and 11 of the 2001 Health and Social Care Act). Members therefore welcome the assurances provided by the Chief Executive of CNWL that existing arrangements for consultation with the Health Scrutiny Task Group would continue if Foundation status was achieved. However, Members have reservations about the opportunities for consulting residents and</p>
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	<p>service users outside the formal mechanisms of the proposed structure (source: consultation meeting with CNWL on their application for Foundation Trust status, 9 October 2006).</p> <p>Domain 4 Patient Focus HCC Outcomes: healthcare is provided in partnership with patients, their carers and relatives, respecting their choices, and in partnership with other organisations (especially social care) whose services impact on patient well being.</p> <p>We have considered the conclusions of 'Minding the Gaps', a research report by the BME Health Forum in respect of how consultations by local Trusts are undertaken with BME groups and have noted a series of recommendations to improve the process. We would like to see the Trusts improve the process in this respect, and place a priority on addressing gaps and weaknesses in services, particularly in relation to access to health services and relevant training amongst health professionals (source: 'Minding the Gaps: Research into the participation of BME organisations and groups in health consultations and activities in Kensington, Chelsea and Westminster', BME Health Forum Report, June 2006).</p> <p>Domain 5 Accessible and responsive care HCC Outcomes: 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 the care pathway</p> <p>No comment.</p> <p>Domain 6 Care environment and amenities HCC Outcomes: 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</p> <p>We are pleased to note that the Paterson Wing is closing. Our view is that the provision of mental health services in an acute setting is not the most appropriate way to deal with mental health needs, and we are pleased with the re-provision of these services in a community-based setting.</p> <p>Domain 7 Public health HCC Outcomes: 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 services and reduce health inequalities between different population groups and areas.</p> <p>No comment.</p>
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