

**ANNUAL HEALTH CHECK  
DECLARATION OF COMPLIANCE WITH  
THE CORE  
STANDARDS FOR BETTER HEALTH  
01 April 2008 to 31 March 2009**

# **ANNUAL HEALTH CHECK – DECLARATION OF COMPLIANCE WITH THE CORE STANDARDS FOR BETTER HEALTH**

## **1. PURPOSE OF REPORT**

The purpose of this report is to advise Durham Adults, Wellbeing and Health Overview and Scrutiny committee of the outcomes of the internal Standards for Better Health self-assessment to establish the agreed levels of compliance to be declared to the Healthcare Commission, by 01 May 2009.

## **2. BACKGROUND**

- 2.1 The Healthcare Commission (HCC) is required to undertake an annual health check of Trusts, which is composed of five elements one of which is an assessment of compliance with the Standards for Better Health.
- 2.2 The purpose of the Annual Health check is to promote improvements in the quality of healthcare and public health through independent, authoritative, patient-centred assessments.
- 2.2 The Healthcare Commission requires all NHS Trusts to submit, by 01.05.09, a public declaration on the extent to which they are assured that the organisation is compliant with the core standards for the declaration period 01.04.08 to the 31.03.09, based upon a self assessment.

## **3. KEY ISSUES**

### **3.1 Delegated Responsibilities**

Responsibility for ensuring compliance with the Standards for Better Health for 2008 – 2009 was delegated by Trust Board, to the Clinical Governance and Clinical Risk Committee. The Clinical Governance and Clinical Risk Committee have monitored compliance with the Standards for Better Health throughout 2008/09 via a structured assurance reporting schedule. The Clinical Governance and Clinical Risk Committee met on the 05.03.2009 to review the evidence and to agree the levels of compliance

### **3.2 Compliance Levels**

Based upon the controls and assurances provided the Clinical Governance and Clinical Risk Committee agreed, on the 05.03.2009, that the organisation will declare full compliance with an in year lapse for the period 08.09.08- 17.09.08 for core standard C9.

### 3.3 In Year Lapse

Core Standard C9 requires the following –

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.

Element 1

The healthcare organisation has effective systems for managing records in accordance with *Records Management: NHS Code of Practice* (Department of Health, April 2006), *Information Security Management: NHS Code of Practice* (Department of Health April 2007) and *NHS Information Governance* (DoH, September 2007)

Line of enquiry

The movement, location and access to clinical records should be controlled. The mechanisms for accessing and transferring clinical records from one location or organisation to another should also be tailored to the high sensitivity of the material contained within the clinical records and the media on which they are held.

The organisation was informed of an information security breach (loss of a data stick) on the 08.09.2009. The information breach was resolved by 17.09.08. The trust responded immediately and a containment action plan was developed and completed by the end of September 2008.

The incident was reported as a Serious Untoward Incident to the Strategic Health Authority and the Information Commissioner's Office (ICO). An internal Root Cause Analysis investigation was commissioned from which a further action plan was developed which will be completed by the end of March 2009 as will the formal undertakings agreed with the ICO.

### 4. CONCLUSION

Tees Esk and Wear Valleys NHS Foundation Trust will declare full compliance at year end with an in year lapse for the period 08.09.08-17.09.08 for core standard C9