

**NORTH EAST AMBULANCE SERVICE NHS TRUST**

**INTERNAL AUDIT REPORT E2007/05**

**HEALTHCARE STANDARDS**

**Sunderland Internal Audit Services**

**February 2007**

## HEALTHCARE STANDARDS

### 1. Introduction

- 1.1 An audit was carried out in respect of the Healthcare Standards in compliance with the Tactical Internal Audit Plan.
- 1.2 The purpose of the audit was to assure the Trust that there are reliable arrangements for gaining assurance on compliance with the Department of Health's Standards for Better Health.

### 2. Scope of the audit

- 2.1 The scope of the audit involved examination of the performance assessment process and a review of the evidence to support compliance on a sample of standards. In accordance with the Tactical Internal Audit Plan, the audit focused on all seven domains, from which core standards were selected from each for review, as indicated below:

<u>Domain</u>	<u>Core Standard</u>
<ul style="list-style-type: none"> <li>• Safety</li> </ul>	C1a Patient protection through experience. C1b Communicating safety to patients. C3 National Institute for Health and Clinical Excellence (NICE) Interventional Procedures guidance.
<ul style="list-style-type: none"> <li>• Clinical and Cost Effectiveness</li> </ul>	C5a NICE technology appraisals. C5b Management of clinical care.
<ul style="list-style-type: none"> <li>• Governance</li> </ul>	C7a Principles of clinical and corporate governance. C7c Risk assessment and risk management. C7e Equality.
<ul style="list-style-type: none"> <li>• Patient Focus</li> </ul>	C13c Patient confidentiality.
<ul style="list-style-type: none"> <li>• Accessible and Responsive Care</li> </ul>	C17 Improving health care services through the views of service users.
<ul style="list-style-type: none"> <li>• Care Environment and Amenities</li> </ul>	C20a Safe and secure environment.
<ul style="list-style-type: none"> <li>• Public Health</li> </ul>	C22a Co-operation between organisations and authorities. C22b Local Director of Public Health's Annual Report. C22c Local partnership arrangements.

- 2.2 Standard C7e was included; in particular, as in 2005/6 the Trust was not wholly compliant with this standard.

- 2.3 Discussions were held with John Hehir, Business Planning Manager, and relevant supporting evidence was also reviewed.

### 3. **Findings**

- 3.1 A summary of the findings is set out below:

<u>Objective</u>	<u>Satisfactory Arrangements In Place</u>	<u>Issues Raised</u>
<u>Self Assessment Process</u>		
1. There are adequate accountability arrangements in place for ensuring that the Trust complies with the healthcare standards.	✓	
2. The assessment of compliance with the healthcare standards is consistent and appropriate.	✓	
3. Ongoing compliance with the healthcare standards is continuously monitored.	✓	
4. The content of the annual declaration in respect of each healthcare standard is substantiated by appropriate evidence.	✓	
<u>Standards - Compliance Evidence</u>		
5. <u>Core Standards C1a and C1b:</u> Health care organisations protect patients through systems that		
a) 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; and	✓	
b) ensure that patient safety notices, alerts and other communications concerning patient safety, which require action, are acted on within required timescales.	✓	
6. <u>Core Standard C3:</u> Health care organisations protect patients by following NICE interventional procedures guidance.	✓	

<u>Objective</u>	<u>Satisfactory Arrangements In Place</u>	<u>Issues Raised</u>
<p>7. <u>Core Standards C5a and C5b:</u> Health care organisations ensure that</p> <ul style="list-style-type: none"> <li>a) they conform to NICE technology</li> <li>b) appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care;</li> <li>c) clinical care and treatment are carried out under supervision and leadership.</li> </ul>	✓	✓
<p>8. <u>Core Standards C7a, C7c and C7e:</u> Health care organisations</p> <ul style="list-style-type: none"> <li>a) apply the principles of sound clinical and corporate governance;</li> <li>c) undertake systematic risk assessment and risk management;</li> <li>e) challenge discrimination, promote equality and respect human rights.</li> </ul>	✓	✓
<p>9. <u>Core Standard: C13c:</u> Health care organisations have systems in place to ensure that staff treat patient information confidentially, except where authorised by legislation to the contrary.</p>	✓	1x low priority issue Page 5
<p>10. <u>Core Standard C17:</u> The views of patients, their careers and others are sought and taken into account in designing, planning, delivering and improving health care services.</p>	✓	
<p>11. <u>Core Standard C20a:</u> Health care 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.</p>	✓	

<u>Objective</u>	<u>Satisfactory Arrangements In Place</u>	<u>Issues Raised</u>
12. <u>Core Standards C22a, C22b and C22c:</u> Health care organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by		
a) cooperating with each other and with local authorities and other organisations;	✓	
b) ensuring that the Local Director of Public Health's annual report informs their policies and practices;	✓	
c) making an appropriate and effective contribution to local partnership arrangements including local strategic partnerships and crime and disorder reduction partnerships.	✓	

**4. Conclusion**

- 4.1 On the basis of the work carried out, the self-assessment process was found to be well organised, appropriately documented and authorised, and supported by agreed plans. For the sample of standards examined, the evidence was satisfactory. A minor point was identified that the Ambulance Trust is already addressing. The issue is summarised and prioritised in **Appendix A.**
- 4.2 Satisfactory remedial action has been to ensure that the outstanding issue is promptly addressed.
- 4.3 Internal Audit will review action taken in response to the recommendation made in accordance with the agreed timescale.
- 4.4 Based on the work undertaken by Internal Audit, significant assurance is given that there is a generally sound system of control designed to meet the organisation's objectives.

**Appendix A**

**HEALTHCARE STANDARDS**

<b><u>Standard</u></b>	<b><u>Weakness</u></b>	<b><u>Priority</u></b>	<b><u>Recommendation</u></b>	<b><u>Action Agreed</u></b>	<b><u>Actioning Officer &amp; Agreed date.</u></b>
C7e	The Attendance Management Policy and Procedure produced in support of compliance is draft only.	Low	The policy and procedure should be formally adopted.	The policy will be sent to the Policy Sub Group on the 2nd March with the recommendation to be agreed. On agreement the policy will be presented to the Joint Consultative Committee (JCC) on the 13th March and then the Trust Board for final ratification and approval at its March 2007 meeting.	Elma Alexander Human Resources Manager. 31 March 2007

**Key to Priority Rating**

- High** Significant weakness in internal control and/or non-compliance with statutory requirements or Trust policy that could lead to material loss or public criticism. This should be addressed urgently.
- Medium** Weakness that could undermine the system of internal control or non-compliance with Trust policy but is not fundamental. This should be addressed as soon as possible.
- Low** Improvement in control that represents best practise or potential efficiency savings but where the weakness is unlikely to compromise internal control.