

Assessment for Improvement/Standards for Better Health – Action Plan August 05

FIRST DOMAIN – SAFETY

Domain Outcome:

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

CORE STANDARD	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
Health care 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	<p>The healthcare organisation :</p> <ul style="list-style-type: none"> Has a defined reporting process and incidents are reported, both within the local reporting process and to the National Patient Safety Agency (NPSA) via the National Reporting and Learning System, taking into account <i>Building a Safer NHS for Patients</i> and <i>Implementing an Organisation with a Memory</i> (DoH 2001) Ensures reported incidents are analysed to seek to identify root causes and likelihood of repetition, taking into account <i>Building a Safer NHS for Patients</i> and <i>Implementing an Organisation with a Memory</i> (DoH 2001) Ensures improvement in practice are made as a result of analysis of local incidents taking into account <i>Building a Safer NHS for Patients</i> and <i>Implementing an Organisation with a Memory</i> and also as a result of information arising from the NPSA's national analysis of incidents via the National Reporting and Learning System 	<p>Ensure Incident Reporting policy is embedded</p> <p>Ensure incidents of all types are regularly reported from all disciplines of the PCT</p> <p>Ensure relevant incidents are reported to outside agencies including the NPSA</p> <p>Ensure the PCT is compliant with the requirements of <i>Building a Safer NHS for Patients</i> and <i>Implementing an Organisation with a Memory</i></p> <p>Ensure an analysis is carried out for all reported incidents and a root cause analysis for relevant reported incidents</p> <p>Establish appropriate mechanisms to effect changes to service and/or practice as a result of learning from local and national analysis of incidents</p>	Sally Fletcher Sally Fletcher	Complete
ensure that patient safety notices, alerts and other communications concerning patient safety which require action are acted upon within required time-scales	<ul style="list-style-type: none"> Ensures that patient safety notices, alerts and other communications issued by the Safety Alert Broadcast System (SABS) and Medicines and Healthcare products Regulatory Agency (MHRA) are implemented within the required timescale, in accordance with CE's bulletin article (Gateway 2326) and the drug alerts system 	Ensure a robust system of disseminating of alert notices is in place and the requirements of SABS and MHRA are implemented	Sally Fletcher Sarah Beattie	Complete

<p>C2)</p> <p>Health care organisations protect children by following national child protection guidance within their own activities and in their dealings with other organisations.</p>	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Has defined and implemented effective processes for identifying, reporting and taking action on child protection issues, in accordance with the <i>Protection of Children Act 1999</i>, the <i>Children Act 2004</i>, <i>Working Together to Safeguard Children</i> (DoH 1999) and <i>Safeguarding children in whom illness is induced or fabricated by carers with parenting responsibilities</i> (DoH July 2001) Works with all relevant partners and communities to protect children in accordance with <i>Working Together to Safeguard Children</i> (DoH 1999) Ensures Criminal Records Bureau (CRB) checks are conducted for all staff and students with access to patients and relatives in the normal course of their duties in accordance with <i>CRB disclosures in the NHS</i> (NHS Employers 2004) 	<p>Ensure the requirements of the <i>Protection of Children Act 1999</i>, <i>2004</i> are implemented and a progress report on compliance is produced for the Board</p> <p>Ensure systems are in place in compliance with the requirements of <i>Working together to safeguard children</i>, to work in partnership with relevant partners</p> <p>Ensure a robust screening system is in place for all appropriate staff as required in order to comply with the requirements of <i>CRB disclosures in the NHS</i></p>	<p>Pauline Derbyshire Helen Duncan</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>
<p>C3)</p> <p>Health care organisations protect patients by following NICE Interventional Procedures guidance</p>	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Follows NICE interventional procedures guidance in accordance with <i>The interventional procedures programme</i> (HSC 2003/011) 	<p>Establish a system to routinely examine and implement or otherwise NICE interventional procedures and make appropriate reports to the Board</p> <p>Identify lead officers from relevant disciplines to monitor the PCT's compliance with the interventional procedures programme</p>	<p>Sally Fletcher Hazel Hughes and Alison Johnson</p>	<p>Complete</p>

	Health care organisations keep patients, staff and visitors safe by having systems to ensure that the risk of health care acquired infection to patients is reduced, with particular emphasis on high standards of hygiene and cleanliness, achieving year-on-year reductions in MRSA	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> • Has taken steps to minimise the risk of healthcare acquired infection to patients, taking account of : <ul style="list-style-type: none"> ➢ <i>Winning Ways</i> (DoH 2003) ➢ <i>A matron's charter: an action plan for cleaner hospitals</i> (DoH 2004) ➢ <i>Revised guidance on contracting on cleaning</i> (DoH 2004) ➢ <i>Audit Tools for Monitoring Infection Control Standards</i> (Infection Control Nurses Association 2004) ➢ <i>Prevention of Healthcare-associated Infection in Primary and Community Care</i> (NICE 2003) • Has systems in place to ensure it contributes to year-on-year reductions in MRSA in inpatient wards, in accordance with the Local Delivery Plan (LDP) 	Ensure there is a robust system in place to minimise the risk of healthcare acquired infection to patients in accordance with <i>Winning Ways</i> and other associated regulations	Shelagh Garnett Linda Newsham	Complete
C4a)			Ensure the LDP includes appropriate targets for the management of and reductions in MRSA as appropriate	Sally Fletcher John Pascoe and Linda Newsham	Complete
C4b)	all risks associated with the acquisition and use of medical devices are minimised	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> • Has systems in place to minimise the risks associated with the acquisition and use of medical devices in accordance with guidance issued by the MHRA 	Ensure there is a system in place for the management of medical devices, which ensures risks associated with the acquisition and use of medical devices are minimised in accordance with MHRA guidance and other legislative requirements	Sally Fletcher John Pascoe and Linda Newsham	Complete
C4c)	all reusable medical devices are properly decontaminated prior to use and that the risks associated with decontamination facilities and processes are well managed	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> • Ensures reusable medical devices are properly decontaminated in appropriate facilities, in accordance with guidance issued by the MHRA and Medical Devices Directive (MDD) 93/42 EEC 	Ensure an Annual Report on the Management of Devices is produced for the Board	Shelagh Garnett Linda Newsham	Complete
			Ensure the PCT is compliant with MHRA guidance and the Medical Devices Directive		
			Ensure decontamination of reusable medical devices is carried out appropriately throughout the organisation		

C4d)	medicines are handled safely and securely	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Has systems in place to ensure that medicines are handled safely and securely, taking into account <i>Building a Safer NHS: Improving Medication Safety</i> (DoH 2004) and in accordance with the statutory requirements of the <i>Medicines Act 1968</i>, the <i>Misuse of Drugs Act 1971</i> and the <i>Misuse of Drugs Act 1971 (Modification Order (2001))</i> 	<p>Ensure compliance with the requirements of <i>Building a Safer NHS: Improving Medication Safety, Medicines Act 1968</i> and the <i>Misuse of Drugs Act</i></p>	Sally Fletcher Hazel Hughes	Complete
C4e)	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	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> ensures waste is properly managed to minimise the risks to patients, staff, the public and the environment, in accordance with <i>Health and Safety Executive(HSE) Guidance: Safe Disposal Of Clinical Waste (ISBN 0 7176 24927)</i> (updated publication scheduled for May 2005) 	<p>Ensure there is a waste management strategy/policy</p> <p>Ensure the PCT is compliant with the requirements of <i>the Health and Safety Executive Guidance: Safe Disposal of Clinical Waste</i>.</p> <p>Ensure risk assessments in respect of waste management are carried out as appropriate</p>	Pauline Derbyshire/Sally Fletcher John Pascoe	Complete
DEVELOPMENTAL STANDARDS	D1 Health care organisations continuously and systematically review and improve all aspects of their activities that directly affect patient safety and apply best practice in assessing and managing risks to patients, staff and others, particularly when patients move from the care of one organisation to another	REQUIREMENTS To be advised	ACTION PLAN To be advised	DIRECTOR/LEAD Sally Fletcher	WHEN

SECOND DOMAIN - CLINICAL AND COST EFFECTIVENESS

Domain Outcome: 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					
CORE STANDARDS	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN	
-	Health care organisations ensure that				
C5 a)	<p>they conform to NICE technology appraisals and, where it is available, take into account nationally agreed guidance when planning and delivering treatment and care</p> <p>The healthcare organisation:</p> <ul style="list-style-type: none"> Conforms to the procedures for the adoption of NICE technology appraisals in accordance with <i>Implementation of NICE guidance</i> (DoH 2004) Takes into account when planning and delivering care nationally agreed best practice as defined in NSFs, NICE clinical guidelines, national plans and nationally agreed guidance 	<p>Ensure there is a mechanism in place to routinely monitor:</p> <ul style="list-style-type: none"> NICE guidelines as issued and recommend implications for the PCT Implementation or otherwise of the interventional guidelines That NSFs and NICE clinical guidelines, national plans and nationally agreed guidance are taken into account in the planning and delivery of care 	<p>Sally Fletcher Hazel Hughes and Alison Johnson</p>	<p>Complete</p> <p>Complete</p>	
C5 b)	<p>clinical care and treatment are carried out under supervision and leadership</p> <p>The healthcare organisation ensures that :</p> <ul style="list-style-type: none"> All staff involved in delivering clinical care and treatment receive appropriate supervision, taking into account national guidance from the relevant professional bodies Clinical leadership is supported and developed within all disciplines 	<p>Ensure there is a system for clinical supervision in place and all clinical staff are provided with appropriate clinical supervision</p> <p>Ensure there is a mechanism in place to support and develop clinical leadership in all disciplines</p>	<p>Pauline Derbyshire Anne Gaskell, Nikki Leach and Lisa Moorhouse</p>	<p>Complete</p> <p>Complete</p>	
C5 c)	<p>clinicians continuously update skills and techniques relevant to their clinical work</p> <p>The healthcare organisation:</p> <ul style="list-style-type: none"> Ensures that clinicians from all disciplines have access to and participate in activities to update the skills and techniques relevant to their clinical work 	<p>Ensure monitoring arrangements are in place to ensure that clinicians continuously update skills and techniques relevant to their work</p>	<p>Pauline Derbyshire Anne Lewis and Val Peter</p>	<p>Complete</p>	

C5 d)	clinicians participate in regular clinical audit and reviews of clinical services	The healthcare organisation ensures: <ul style="list-style-type: none"> Clinicians are involved in prioritising, conducting, reporting and acting on clinical audits Clinicians participate in reviewing the effectiveness of clinical services through evaluation, audit or research 	Ensure all clinicians are involved in an on-going programme of clinical audit Ensure action plans are developed and implemented as appropriate following audit reports Ensure there is an appropriate mechanism in place for the review of the effectiveness of services	<i>Pauline Derbyshire</i> Anne Lewis and Val Peter	Complete
C6	Health care organisations cooperate with each other and social care organisations to ensure that patients' individual needs are properly managed and met.	The healthcare organisation : Works with relevant partner agencies to ensure that patients' individual needs are properly met and managed across organisational boundaries in accordance with <i>Guidance on the Health Act Section 31 partnership arrangements (DoH 1999)</i>	Ensure there are appropriate mechanisms in place to ensure that patient's individual needs are properly managed and met through cooperation with partner agencies and social services	<i>Pauline Derbyshire</i> Anne Gaskell, Nikki Leach and Lisa Moorhouse	Complete
DEVELOPMENTAL STANDARDS		REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
D2 a)	Patients receive effective treatment and care that: conform to nationally agreed best practice, particularly as defined in National Service Frameworks, NICE guidance, national plans and agreed national guidance on service delivery	To be advised	To be advised	<i>Pauline Derbyshire</i>	
D2 b)	take into account their individual requirements and meet their physical, cultural, spiritual and psychological needs and preferences	To be advised	To be advised	<i>Pauline Derbyshire</i>	
D2 c)	are well co-ordinated to provide a seamless service across all organisations that need to be involved, especially social care organisations; and	To be advised	To be advised	<i>Pauline Derbyshire</i>	
D2 d)	is delivered by healthcare professionals who make clinical decisions based on evidence-based practice	To be advised	To be advised	<i>Pauline Derbyshire</i>	

THIRD DOMAIN - GOVERNANCE

Domain Outcome:

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.

CORE STANDARDS		REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
C7 a)	Health care organisations apply the principles of sound clinical and corporate governance	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Has effective arrangements in place for clinical governance which take account of <i>Clinical governance in the new NHS</i> (HSC 1999/065) Has arrangements in place for corporate governance, that accord with <ul style="list-style-type: none"> ➢ <i>Governing the NHS: A guide for NHS Boards</i> (DoH and NHS Appointments Commission 2003) ➢ <i>Corporate Governance Framework Manual for PCTs</i> (DoH 2003 v. 6) ➢ <i>Assurance: The Board Agenda</i> (DoH 2002) ➢ <i>Building the assurance framework: a Practical Guide for NHS Boards</i> (DoH 2003) 	<p>Ensure there is a sound system of clinical governance in place</p> <p>Ensure compliance is achieved with <i>HSC 1999/065 –Clinical governance in the new NHS</i></p> <p>Ensure there is a sound system of corporate governance in place in compliance with <i>Governing the NHS: A Guide for NHS Boards</i> and other relevant DoH guidance</p>	<p>Sally Fletcher Sally Fletcher and Jill Truby</p>	<p>Complete</p> <p>Complete</p>
C7 b)	actively support all employees to promote openness, honesty, probity, accountability, and the economic, efficient and effective use of resources	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Actively supports staff to promote openness, honesty, probity, accountability and the economic, effective use of resources in accordance with <i>the Code of Conduct for NHS managers</i> (DoH 2002) and <i>Directions to NHS bodies on counter fraud measures</i> (DoH 2004) 	<p>Ensure policies and procedures are in place in compliance with the <i>Code of Conduct for NHS managers</i> and other relevant guidance</p>	<p>Paul Havey Paul Havey</p>	<p>Complete</p>

<p>C7 c)</p>	<p>undertake systematic risk assessment and risk management (including compliance with the controls assurance standards)</p>	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> • Has effective arrangements in place for clinical governance which take account of <i>Clinical governance in the new NHS</i> (HSC 1999/065) • Has arrangements in place for corporate governance, that accord with <ul style="list-style-type: none"> ➢ <i>Governing the NHS: A guide for NHS Boards</i> (DoH and NHS Appointments Commission 2003) ➢ <i>Corporate Governance Framework Manual for PCTs</i> (DoH 2003 v. 6) ➢ <i>Assurance: The Board Agenda</i> (DoH 2002) ➢ <i>Building the assurance framework: a Practical Guide for NHS Boards</i> (DoH 2003) 	<p>Ensure there is a sound system of clinical governance in place which complies with HSC 1999/065</p> <p>Ensure there is a sound system of corporate governance in place in compliance with <i>Governing the NHS: A Guide for NHS Boards</i> and other relevant DoH guidance</p> <p>Ensure there is a comprehensive programme of risk assessment and risk management</p>	<p>Sally Fletcher Sally Fletcher</p>	<p>Complete</p> <p>Complete</p>
<p>C7 d)</p>	<p>ensure financial management achieves economy, effectiveness, efficiency, probity and accountability in the use of resources</p>	<p>This standard will be measured through the use of resources assessment</p>	<p>Ensure there is a sound system of financial management so as to ensure economy, effectiveness, efficiency, probity, and accountability in the use of resources</p>	<p>Paul Havey Paul Havey</p>	<p>Complete</p>
<p>C7 e)</p>	<p>challenge discrimination, promote equality and respect human rights</p>	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> • Challenges discrimination, promotes equality and respects human rights, in accordance with current legislation and guidance, with particular regard to the <ul style="list-style-type: none"> ➢ <i>Human Rights Act 1998</i> ➢ <i>Race Relations Act 1976 (as amended)</i> ➢ <i>Equal Pay Act 1970 (as amended)</i> ➢ <i>Sex Discrimination Act 1975</i> ➢ <i>Disability Discrimination Act 1995</i> ➢ <i>Sex Discrimination (Gender Reassignment) Regulations 1999</i> ➢ <i>Employment Equality (Religion or belief) Regulations 2003</i> ➢ <i>Employment Equality (Sexual Orientation) Regulations 2003</i> <p>and takes into account the supporting codes of practice produced by the Commission for Racial Equality, the Equal Opportunities Commission and the Disability Rights Commission</p>	<p>Ensure the PCT's policies and procedures are in compliance with relevant legislation and that they challenge discrimination, promote equality and respect human rights</p> <p>Ensure there is a system in place for the reporting of gaps in compliance with the requirements of relevant legislation as listed</p>	<p>Judith Faux Liz Jones</p>	<p>December 2005</p> <p>December 2005</p>

C7 f)	meet the existing performance requirements set out in the annex	This standard will be measured through the existing targets assessment (Appendix 1 National Standards, Local Action)	Ensure that the targets listed under National Standards, Local Action are achieved	<i>Paul Havey</i> Paul Havey	Complete
	Health care organisations support their staff through				
C8 a)	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	The healthcare organisation: <ul style="list-style-type: none"> Has arrangements in place to ensure that staff know how to raise concerns, and are supported in so doing, in accordance with <i>The Public Disclosure Act 1998</i> and <i>Whistle Blowing in the NHS</i> (HSC 1999/198) 	Ensure there is a whistle blowing policy in place and that it is actively promoted throughout the organisation, for example at induction training	<i>Judith Faux</i> Liz Jones	Complete
C8 b)	organisational and personal development programmes which recognise the contribution and value of staff, and address, where appropriate, under representation of minority groups	The healthcare organisation: <ul style="list-style-type: none"> Supports and involves staff in organisational and personal development programmes as defined by the relevant areas of the <i>Improving Working Lives</i> Standard at Practice Plus level Staff from minority groups have opportunities for personal development in accordance with <i>Leadership and Race Equality in the NHS Action Plan</i> 	Ensure compliance with <i>Improving Working Lives</i> Standard at Practice Plus level Ensure compliance with <i>Leadership and Race Equality in the NHS Action Plan</i> (DoH 2004)	<i>Judith Faux</i> Liz Jones	Complete Complete
C9	Health care 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	The healthcare organisation: <ul style="list-style-type: none"> Has systems in place to ensure that records are managed in accordance with the NHS Information Authority's (NHSIA) <i>Information Governance Toolkit</i> 	Ensure there is a records management strategy/policy in place and that it is implemented throughout the organisation Ensure compliance with NHS Information Authority's <i>Information Governance Toolkit</i>	<i>Pauline Derbyshire</i> Pauline Derbyshire and Sally Fletcher	Complete

	Health care organisations				
C10 a)	undertake all appropriate employment checks and ensure that all employed or contracted professionally qualified staff are registered with the appropriate bodies	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Ensures the necessary employment checks are undertaken for all staff in accordance with <i>Pre and post employment checks for all persons working in the NHS in England</i>(HSC 2002/008) and <i>CRB disclosures in the NHS</i> (NHS Employers 2004) 	Ensure compliance is achieved with HSC 2002/008 and <i>CRB disclosures in the NHS</i> by having a sound system for employment checks	Judith Faux Liz Jones	Complete
C10 b)	require that all employed professionals abide by relevant published codes of professional practice	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Requires staff to abide by relevant codes of professional practice, including through employment contracts and job descriptions Has systems in place to identify and manage staff who are not abiding by relevant codes of professional practice 	<p>Ensure there is an appropriate recruitment policy that includes the requirement for staff to comply with relevant codes of professional practice</p> <p>Ensure job descriptions and employment contracts include staff responsibility for abiding by relevant codes of professional practice</p> <p>Ensure there is a mechanism for the reporting and management of failure to abide by professional codes of practice</p>	Judith Faux Liz Jones	Complete Complete

	Health care organisations ensure that staff concerned with all aspects of the provision of health care			
C11 a)	are appropriately recruited, trained and qualified for the work they undertake;	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> • Recruits staff in accordance with relevant legislation and with particular regard to the <ul style="list-style-type: none"> ➢ <i>Employment Relations Act 1996</i> ➢ <i>Equal Pay Act 1970</i> ➢ <i>Sex Discrimination Act 1975</i> ➢ <i>Race Relations Act 1976 (as amended)</i> ➢ <i>Disability Discrimination Act 1995</i> ➢ <i>Sex Discrimination (Gender Reassignment) Regulations 1999</i> ➢ <i>Employment Equality (Religion or Belief) Regulations 2003</i> ➢ <i>Employment Equality (Sexual Orientation) Regulations 2003</i> ➢ <i>Code of Practice for the International Recruitment Of Healthcare Professionals</i> (DoH 2004) • Undertakes workforce planning which aligns workforce requirements to its service needs • Ensures that staff participate in work-based training programmes necessary to the work they undertake as defined by the relevant areas of the <i>Improving Working Lives</i> standard at Practice Plus level 	<p>Carry out a mapping exercise to establish a baseline for compliance with legislative requirements of the Acts as listed opposite</p> <p>Ensure there are mechanisms in place which incorporate workforce requirements and planning to meet the organisation's service needs</p> <p>Ensure that staff are able to participate in work based training programmes as appropriate and relevant</p>	<p><i>Judith Faux</i> Liz Jones</p> <p>Complete</p> <p>Complete</p> <p>Complete</p>
C11 b)	participate in mandatory training programmes	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> • Ensures all staff participate in relevant mandatory training in accordance with the <i>Management of Health and Safety at Work Regulations 1999</i> • Ensures staff and students participate in relevant induction programmes 	<p>Ensure there is an appropriate training policy /strategy which requires all staff to participate in mandatory training</p> <p>Ensure all new staff including students attend local and corporate induction programmes</p>	<p><i>Sally Fletcher</i> Sally Fletcher</p> <p>Complete</p> <p>Complete</p>

C11 c)	participate in further professional and occupational development commensurate with their work throughout their working lives	The healthcare organisation: <ul style="list-style-type: none"> Ensures staff have opportunities to participate in professional and occupational development in accordance with Working together-learning for the NHS (DoH 2001) and <i>Continuing professional development: quality in the new NHS</i> (HSC 1999/154) 	Ensure training reports are produced and communicated to relevant committees Ensure staff have opportunities to participate in professional and occupational development as appropriate	<i>Pauline Derbyshire and Sally Fletcher</i> Pauline Derbyshire and Sally Fletcher	Complete
C12	Health care 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	The healthcare organisation: <ul style="list-style-type: none"> Complies with the requirements of the <i>Research Governance framework for health and social care</i> (DoH 2001) 	Ensure compliance with <i>Research Governance framework for health and social care</i> as appropriate	<i>Sally Fletcher</i> Sally Fletcher	Complete
DEVELOPMENTAL STANDARDS					
D3	Integrated governance arrangements representing best practice are in place in all health care organisations and across all health communities and clinical networks	To be advised	ACTION PLAN To be advised	DIRECTOR/LEAD <i>Sally Fletcher</i>	WHEN
D4 a)	Health care organisations work together to ensure that the principles of clinical governance are underpinning the work of every clinical team and every clinical service	To be advised	To be advised	<i>Sally Fletcher</i>	
D4 b)	implement a cycle of continuous quality improvement	To be advised	To be advised	<i>Sally Fletcher</i>	
D4 c)	ensure effective clinical and managerial leadership and accountability	To be advised	To be advised	<i>Pauline Derbyshire</i>	

FOURTH DOMAIN - PATIENT FOCUS

Domain Outcome:

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.

CORE STANDARDS		REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
	Health care organisations have systems in place to ensure that staff treat patients, their relatives and carers with dignity and respect	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Has taken steps to ensure that all staff treat patients, carers and relatives with dignity and respect at every stage of their care and treatment Acts in accordance with relevant equalities legislation, with particular regard to the <i>Disability Discrimination Act 1995</i>, the <i>Race Relations Act 1976 (as amended)</i> and the <i>Human Rights Act 1998</i>, to meet the needs and rights of different patient groups with regard to dignity and respect Has systems in place to identify areas where dignity and respect may have been compromised and takes action in response 	<p>Ensure there are clear policies in place so as to ensure all staff treat patients, carers and relatives with dignity and respect at all times</p> <p>Ensure all staff comply with the requirements of the <i>Disability Discrimination Act 1995</i>, the <i>Race Relations Act 1976</i> and the <i>Human Rights Act 1998</i></p> <p>Ensure there is an appropriate mechanism in place for the reporting of failure to treat people with dignity and respect</p> <p>Ensure appropriate action is taken in instances where dignity and respect have been compromised by staff</p>	<p>Pauline Derbyshire and Sally Fletcher Pauline Derbyshire and Sally Fletcher</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>

<p>C13 b)</p>	<p>appropriate consent is obtained when required for all contacts with patients and for the use of any patient confidential information</p>	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Has processes in place to ensure that valid consent, including from those who have communication or language support needs, is obtained by suitably qualified staff for all treatments, procedures (including post-mortem) and investigations in accordance with <i>Good Practice in Consent: Achieving the NHS Plan Commitment To Patient Centred Consent Practice</i> (HSC 2001/023) <i>Reference guide to consent for examination or treatment</i> (DoH 2001) <i>Families and Post Mortems: A Code Of Practice</i> (DoH 2003) <i>Seeking Consent: Working With Children</i> (DoH 2001) <ul style="list-style-type: none"> Ensures that patients, including those with language and/or communication support needs, are provided with information on the use and disclosure of confidential information held about them, in accordance with <i>Confidentiality: NHS Code of Practice</i> (DoH 2003) 	<p>Ensure there is an up-to-date Consent Policy in place</p> <p>Ensure all relevant staff have been trained in the application of the Consent Policy and associated forms</p> <p>Carry out an audit to establish compliance level and develop an action plan as appropriate</p>	<p><i>Pauline Derbyshire and Sally Fletcher</i> Pauline Derbyshire and Sally Fletcher</p>	<p>Complete</p>
<p>C13 c)</p>	<p>staff treat patient information confidentially, except where authorised by legislation to the contrary</p>	<p>The healthcare organisation:</p> <ul style="list-style-type: none"> Ensures that staff act in accordance with <i>Confidentiality: NHS Code of Practice</i> (DoH 2003) <i>Data Protection Act 1998</i> <i>Protecting and Using Patient Information: A Manual for Caldicott Guardians</i> (DoH 1999) <i>Human Rights Act 1998</i> <i>Freedom of Information Act 2000</i> <p>when using and disclosing patients' personal information</p>	<p>Ensure information leaflets and awareness raising exercises are made available, to patients including those with language or communication difficulties, on the use and disclosure of confidential information held about them</p>	<p><i>Sally Fletcher</i> Sally Fletcher</p>	<p>Complete</p>

	Health care 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	The healthcare organisation: <ul style="list-style-type: none"> Ensures that patients, relatives and carers are provided with accessible information about, and have clear access to, formal complaints systems in accordance with the <i>NHS (Complaints) Regulations 2004 and associated guidance</i> Provides opportunities for patients, relatives and carers to give feedback on the quality of services 	Ensure there is a Complaints Policy in place Ensure all staff are made aware of the requirements of the <i>NHS (Complaints) Regulations 2004</i> and the associated guidance Ensure there is an established system in place for dealing with feedback from service users on the quality of services	Sally Fletcher Angela Wiseman	Complete
C14 a)	are not discriminated against when complaints are made	The healthcare organisation: <ul style="list-style-type: none"> Has systems in place to ensure that patients, carers and relatives are not discriminated against as a result of having complained 	Ensure that there are robust systems in place so that patients, carers and relatives are not discriminated against as a result of having complained	Sally Fletcher Angela Wiseman	Complete
C14 b)	are assured that organisations act appropriately on any concerns and, where appropriate, make changes to ensure improvements in service delivery	The healthcare organisation: <ul style="list-style-type: none"> Responds to complaints from patients, relatives and carers in accordance with <i>NHS (Complaints) Regulations 2004</i> and associated guidance Uses concerns and complaints from patients, relatives and carers, to improve service delivery, where appropriate 	Ensure action plans are developed and implemented to improve service delivery as appropriate following concerns raised by service users	Sally Fletcher and Pauline Derbyshire Sally Fletcher and Pauline Derbyshire	Complete Complete

	Where food is provided, health care organisations have systems in place to ensure that	(This standard only applies to organisations that routinely provide patients with food)			
C15 a)	patients are provided with a choice and that it is prepared safely and provides a balanced diet; and	<p>The healthcare organisation offers patients a choice of food in line with the requirements of a balanced diet and in accordance with the six key requirements of the <i>Better Hospital Food programme (NHS Estates 2001)</i>, reflecting the needs and preferences and rights (including faith and cultural needs) of its service user population</p> <ul style="list-style-type: none"> • Ensures that the preparation, distribution, handling and serving of food is carried out in accordance with food safety legislation and national guidance, including the <i>Food Safety Act 1990, the Food Safety (General Food Hygiene) Regulations 1995 and EC regulation 852/2004</i> 	<p>Develop an action plan ,where appropriate for the implementation of the six key requirements of the <i>Better Hospital Food</i> programme</p> <p>Ensure the PCT complies with the requirements of the Food Safety legislation and other related guidance</p>	<i>Pauline Derbyshire</i> Pauline Derbyshire	N/A
C15 b)	patients' individual nutritional, personal and clinical dietary requirements are met, including any necessary help with feeding and access to food 24 hours a day	<p>The healthcare organisation ensures patients have access to food and drink 24 hours a day in accordance with the requirements of the <i>Better Hospital Food</i> programme (NHS Estates 2001)</p> <ul style="list-style-type: none"> • Ensures the nutritional, personal and clinical dietary requirements of individual patients are assessed and met, including the right to have religious dietary requirements met • Ensures patients requiring assistance with eating and drinking are provided with appropriate support 	<p>Develop an action plan ,where appropriate for the implementation of the six key requirements of the <i>Better Hospital Food</i> programme</p> <p>Ensure the PCT complies with the requirements of the Food Safety legislation and other related guidance</p>	<i>Pauline Derbyshire</i> Pauline Derbyshire	Complete

C16	Health care organisations make information available to patients and the public on their services, and 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.	The healthcare organisation provides suitable and accessible information on the services it provides and in languages and formats relevant to its service population, and which accords with <i>the Disability Discrimination Act 1995</i> and the <i>Race Relations Act 1976 (as amended)</i> <ul style="list-style-type: none"> Provides patients and where appropriate, carers (including those with communication or language support needs) with sufficient and accessible information on the patient's individual care, treatment and after care, taking into account the <i>Toolkit for Producing Patient Information</i> (DoH 2003), <i>Information for Patients</i> (NICE) and other nationally agreed guidance where available 	Ensure an assessment of compliance with the <i>Disability Discrimination Act 1995</i> and <i>Race Relations Act 1976 (as amended)</i> is carried out and action plans produced as appropriate. Develop and provide suitable information on services provided Ensure information provided is in language and format relevant to the service provided	Sally Fletcher Sally Fletcher	December 2005
DEVELOPMENTAL STANDARDS	DEVELOPMENTAL STANDARDS	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
D8	Health care organisations continuously improve the patient experience, based on the feedback of patients, carers and relatives Patients, service users and, where appropriate, carers receive timely and suitable information, when they need and want it, on treatment, care, services, prevention and health promotion and are	To be advised	To be advised	Pauline Derbyshire	
D9 a)	encouraged to express their preferences	To be advised	To be advised	Pauline Derbyshire	
D9 b)	supported to make choices and shared decisions about their own health care	To be advised	To be advised	Pauline Derbyshire	
D10	Patients and service users, particularly those with long-term conditions, are helped to contribute to planning of their care and are provided with opportunities and resources to develop competence in self-care	To be advised	To be advised	Pauline Derbyshire and Shelagh Garnett	

FIFTH DOMAIN - ACCESSIBLE AND RESPONSIVE CARE

Domain Outcome: 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				
CORE STANDARDS	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
C17 The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving health care services	<p>The healthcare organisation seeks the views of patients, carers and the local community, including those facing barriers to participation, in accordance with <i>Strengthening Accountability, patient and public involvement policy guidance - Section 11 of the Health and Social Care Act 2001</i> (DoH 2003) and, as appropriate, the associated practice guidance and the <i>Race Relations Act 1976 (as amended)</i></p> <ul style="list-style-type: none"> Takes into account the views of patients, carers and the local community when designing, planning, delivering and improving healthcare, in accordance with <i>Strengthening Accountability, policy guidance - Section 11 of the Health and Social Care Act 2001</i> (DoH 2003) and, as appropriate, the associated practice guidance 	<p>Establish mechanism to seek the views of patients, carers and the local community, including those facing barriers to participation, in respect of designing, planning, delivering and improving health care services</p> <p>Ensure the views of patients, carers and local community is taken into account when designing, planning, delivering and improving healthcare</p> <p>Ensure compliance is achieved with all patient and public involvement policy guidance</p>	<p>Colette Gill Colette Gill and Liz Easterbrook</p>	<p>Complete</p> <p>Complete</p>
C18 Health care organisations enable all members of the population to access services equally and offer choice in access to services and treatment equitably	<p>The healthcare organisations taken steps to ensure that all members of the population it serves are able to access its services on an equitable basis, including acting in accordance with the <i>Sex Discrimination Act 1975</i>, the <i>Disability Discrimination Act 1995</i> and the <i>Race Relations Act 1976 (as amended)</i></p> <ul style="list-style-type: none"> Has taken steps to offer patients choice in access to services and treatment, where appropriate, and ensures that this is offered equitably, taking into account <i>Building on the Best: Choice, Responsiveness And Equity in the NHS</i> (DoH 2003) 	<p>Ensure that the services provided are accessible to all members of the population served by the PCT</p> <p>Ensure services provided are in accordance with the requirements of the <i>Sex Discrimination Act 1975</i>, the <i>Disability Discrimination Act 1995</i> and the <i>Race Relations Act 1976 (as amended)</i></p> <p>Ensure there are mechanisms in place to offer patients choice in access to services and treatment, where appropriate and ensure this is offered equitably</p>	<p>Colette Gill Colette Gill</p>	<p>Complete</p> <p>Complete</p>

C19	Healthcare organisations ensure that patients with emergency health needs are able to access care promptly and within nationally agreed timescales, and all patients are able to access services within national expectations on access to services	This standard will be measured under the existing targets and new national targets assessment	Ensure all targets are achieved within the specified timescale	Colette Gill Colette Gill	Complete
	DEVELOPMENTAL STANDARDS	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
	Health care organisations plan and deliver health care which				
D11 a)	reflects the views and health needs of the population served and which is based on nationally agreed evidence or best practice	To be advised	To be advised	Colette Gill	
D11 b)	maximises patient choice	To be advised	To be advised	Colette Gill	
D11 c)	ensures access (including equality of access) to services through a range of providers and routes of access	To be advised	To be advised	Colette Gill	
D11 d)	uses locally agreed guidance, guidelines or protocols for admission, referral and discharge that accord with the latest national expectations on access to services	To be advised	To be advised	Colette Gill	

SIXTH DOMAIN - CARE ENVIRONMENT AND AMENITIES

Domain Outcome:

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.

CORE STANDARDS	REQUIREMENT	ACTION PLAN	DIRECTOR/LEAD	WHEN
<p>C20 a)</p> <p>Health care services are provided in environments which promote effective care and optimise health outcomes by being</p> <p>a safe and secure environment which protects patients, staff, visitors and their property, and the physical assets of the organisation</p>	<p>The healthcare organisation minimises the health, safety and environmental risks to patients, staff and visitors, in accordance with <i>Health and Safety at Work and Fire Legislation</i>, the <i>Disability Discrimination Act 1995</i> and the <i>Management of Health, Safety and Welfare Issues for NHS staff</i> (NHS Employers 2005)</p> <ul style="list-style-type: none"> Protects patients, staff and visitors by providing a secure environment, in accordance with <i>NHS Estates Building Notes and Health Technical Memoranda</i> and taking account of <i>A Professional Approach to Managing Security in the NHS (Counter Fraud and Security Management Service 2003)</i> and other relevant national guidance Effectively protects its physical assets and those of patients, staff and visitors taking into account <i>A professional approach to managing security in the NHS [Counter Fraud and Security Management Service 2003]</i> 	<p>Conduct an organisation wide survey / risk assessment to ensure risks to the health, safety and environmental in respect of service users, staff and visitors are minimised and develop an action plan as appropriate</p> <p>Ensure there is organisation-wide compliance with the legislation as highlighted opposite</p> <p>Ensure there is a robust system to manage and protect the organisation's physical assets and protect patients, staff and visitors in compliance with the guidance as highlighted opposite</p>	<p>Sally Fletcher Sarah Beattie and John Pascoe</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>
<p>C20 b)</p> <p>supportive of patient privacy and confidentiality</p>	<p>The healthcare organisation has taken steps to provide services in environments that are supportive of patients privacy and confidentiality, including the provision of single sex facilities and accommodation</p>	<p>Ensure that in clinics and health centres care is delivered in environments which protect the privacy and dignity of service users</p>	<p>Pauline Derbyshire Lesley Dickinson</p>	<p>Complete</p>

C21	Health care 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.	The healthcare organisation has taken steps to provide care in well designed and well maintained environments taking into account <i>Developing an Estates Strategy (1999) Estate Code: Essential Guidance on Estates and Facilities Management(NHS Estates 2003)</i> <i>A Risk Based Methodology for Establishing and Managing Backlog (NHS Estates 2004)</i> NHS Environmental assessment tool (NHS Estates 2002) Disability Discrimination Act 1995 and associated code of practice <ul style="list-style-type: none"> Provides care in an environment that meets the national specification for clean NHS premises in accordance with <i>Revised guidance on contracting for cleaning (DoH 2004)</i> and <i>A Matron's charter: an action plan for cleaner hospitals (DoH 2004)</i> 	Ensure that clinics and health centres are well-maintained, in accordance with legislation and other guidance	<i>Pauline Derbyshire</i> Lesley Dickinson	December 2005
	DEVELOPMENTAL STANDARDS	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
D12 a)	Health care is provided in well-designed environments that promote patient and staff well-being, and meet patients' needs and preferences, and staff concerns	To be advised	To be advised	<i>Judith Faux</i>	
D12 b)	are appropriate for the effective and safe delivery of treatment, care or a specific function, including the effective control of health care associated infections	To be advised	To be advised	<i>Shelagh Garnett</i>	

SEVENTH DOMAIN - PUBLIC HEALTH

Domain Outcome:

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

CORE STANDARDS	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
<p>Health care organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by co-operating with each other and with local authorities and other organisations</p>	<p>The healthcare organisation actively works with partners to improve health and narrow health inequalities, including by contributing appropriately and effectively to nationally recognised and statutory partnerships, such as the Local Strategic Partnerships, or the CDRP partnership, taking account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance <i>National Standards, Local Action</i> (DoH 2004) <i>Tackling Health Inequalities: A Programme For Action</i> (DoH 2003) <i>Making Partnerships Work For Patients, Carers And Service Users</i> (DoH 2004) <i>Commencement of PCTs as Responsible Authorities</i> (DoH 2004) The PCT Competency Framework (NatPaCT)</p> <ul style="list-style-type: none"> Agrees a set of priorities in relation to health improvement and narrowing health inequalities with local authorities and other organisations, which is informed by health needs, health equity audit and public service agreement targets taking 	<p>Ensure arrangements are in place for working in partnership with partner agencies including local authorities and other organisations</p> <p>Ensure the organisation complies with the legislation and guidance highlighted opposite</p> <p>Develop and agree set of priorities in relation to health improvement and narrowing health inequalities with local authorities and other organisations</p>	<p>Shelagh Garnett and Colette Gill David Hearne and Colette Gill</p>	<p>Complete</p>

<p>C22 a)</p>		<p>account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance <i>Tackling Health Inequalities: A Programme For Action</i> (DoH 2003) <i>National Standards, Local Action</i> (DoH 2004)</p> <ul style="list-style-type: none"> • Makes information on health and healthcare needs available to local authorities and other organisations, including community groups, taking account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance and <i>Making partnership work for patients, carers and service users</i> (DoH 2004) 	<p>Develop an action plan for implementation of <i>Choosing Health: Making Healthy Choices Easier</i> and the associated guidance</p>	<p>Complete</p>
<p>C22 b)</p>	<p>ensuring that the local Director of Public Health's Annual Report informs their policies and practices</p>	<p>The healthcare organisation ensures its policies and practices to improve health and reduce health inequalities are informed by the local Director of Public Health's Annual Public Health Report (APHR) taking account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance</p> <ul style="list-style-type: none"> • Ensures that commissioning is informed by the local Director of Public Health's APHR taking account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance 	<p>Ensure policies and practices to improve health and reduce health inequalities are informed by the Director of Public Health's Annual Report</p> <p>Ensure the PCT's commissioning process is informed by the Director of Public Health's Annual Report</p>	<p>Shelagh Garnett and Colette Gill Shelagh Garnett and Colette Gill</p> <p>Complete</p> <p>Complete</p>

<p>C22 c)</p>	<p>making an appropriate and effective contribution to local partnership arrangements including Local Strategic Partnerships and Crime and Disorder Reduction Partnerships.</p>	<p>The healthcare organisation actively works with partners to improve health and narrow health inequalities, including by contributing appropriately and effectively to nationally recognised and statutory partnerships, such as the Local Strategic Partnerships, or the CDRP partnership, taking account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance <i>National Standards, Local Action</i> (DoH 2004) <i>Tackling Health Inequalities: A Programme For Action</i> (DoH 2003) <i>Making partnerships work for patients carers and service users</i> (DoH 2004) <i>Commencement of PCTs as responsible authorities</i> (DoH 2004) <i>The PCT competency framework</i> (NatPaCT) agrees a set of priorities in relation to health improvement and narrowing health inequalities with local authorities and other organisations, which is informed by health needs, health equity audit and public service agreement targets taking account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance, <i>Tackling Health Inequalities: A Programme for Action</i> (DoH 2003) and <i>National Standards, Local Action</i> (DoH 2004)</p> <ul style="list-style-type: none"> • Makes information on health and healthcare needs available to local authorities and other organisations, including community groups – taking account of <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance and <i>Making partnership work for patients, carers and service users</i> (DoH 2004) 	<p>Ensure local partnerships links have been established, including Local Strategic Partnerships and Crime and Disorder Reduction Partnership.</p> <p>Ensure priorities in relation to health improvement and reducing health inequalities are agreed with local authorities and other partners</p> <p>Establish mechanisms to make information on health and healthcare needs available to local authorities, other organisations and community groups</p>	<p><i>Shelagh Garnett and Colette Gill</i> Mike Sinnott and Shelagh Garnett</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p>
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<p>C23</p>	<p>Health care organisations have systematic and managed disease prevention and health promotion programmes which meet the requirements of the National Service Frameworks and national plans with particular regard to reducing obesity through action on nutrition and exercise, smoking, substance misuse and sexually transmitted infections.</p>	<p>The healthcare organisation collects, analyses and makes available information on the current and future health and healthcare needs of the local population, to support the disease prevention and health promotion requirements of the NSFs and national plans</p> <ul style="list-style-type: none"> • Sets planning priorities for disease prevention, health promotion and narrowing health inequalities using information on local population health, including ethnic monitoring, and evidence of effectiveness • Commissions or provides disease prevention and health promotion services and programmes to improve health and narrow health inequalities based on population needs and using evidence of effectiveness • Monitors its disease prevention and health promotion services and programmes and uses the findings to inform the planning process • Implements policies and practice to support healthy lifestyles among the workforce in accordance with <i>Choosing Health: Making Healthier Choices Easier</i> (DoH 2004) and associated implementation guidance • Has an identified lead for public health or access to public health expertise to meet its strategic and operational roles 	<p>Ensure there is a system in place for the collation and analysis of information on current and future health and healthcare needs of the local population</p> <p>Establish mechanisms for the sharing of the above information with partner agencies</p> <p>Ensure information on local population is used in planning priorities for disease prevention, health promotion and narrowing health inequalities</p> <p>Ensure there is a health promotion service and programme for the improvement of health and narrowing of health inequalities</p> <p>Ensure there is a system for the monitoring of the health promotion services and programmes which provides feedback into the planning process</p> <p>Ensure compliance with <i>Choosing Health: Making Healthier Choices Easier</i></p>	<p>Shelagh Garnett Shelagh Garnett</p>	<p>Complete</p> <p>Complete</p> <p>Complete</p> <p>Complete</p> <p>Complete</p> <p>Complete</p>
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C24	Health care 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.	The healthcare organisation has up to date and tested plans to deal with incidents, emergency situations and major incidents in accordance with relevant guidance, including <i>Civil Contingencies Act 2004 Getting ahead of the curve</i> (DoH 2002) <i>Plan for major incidents: the NHS guidance</i> (DoH 1998) <i>Beyond a major incident</i> [DoH 2004] <ul style="list-style-type: none"> Works with key partner organisations in the preparation of, training for and annual testing of major incident plans, in accordance with the <i>Civil Contingencies Act 2004, Plan for Major Incidents: the NHS Guidance</i> (DoH 1998) (D98c 17/3/235) and <i>Beyond a major incident</i> (DoH 2004) 	Ensure there is an emergency plan in place which is regularly tested Ensure compliance with the legislative requirements as highlighted opposite Ensure there is a major incident plan which has been developed in partnership with partner organisations	<i>Shelagh Garnett</i> <i>Arif Rajpura</i>	Complete
	DEVELOPMENTAL STANDARD	REQUIREMENTS	ACTION PLAN	DIRECTOR/LEAD	WHEN
	Health care organisations				
D13 a)	identify and act upon significant public health problems and health inequality issues, with primary care trusts taking the leading role	To be advised	To be advised	<i>Shelagh Garnett</i>	
D13 b)	implement effective programmes to improve health and reduce health inequalities	To be advised	To be advised	<i>Shelagh Garnett</i>	
D13 c)	protect their populations from identified current and new hazards to health	To be advised	To be advised	<i>Shelagh Garnett</i>	
D13 d)	take fully into account current and emerging policies and knowledge on public health issues in the development of their public health programmes, health promotion and prevention services for the public, and the commissioning and provision of services	To be advised	To be advised	<i>Shelagh Garnett and Colette Gill</i>	