Report to:	East Sussex Health Overview and Scrutiny Committee (HOSC)
Date:	19th March 2009
By:	Director of Law and Personnel
Title of report:	Healthcare Commission Annual Health Check process 2008/09
Purpose of report:	To update HOSC on the annual health check process for 2008/09 and to agree HOSC's approach.

RECOMMENDATIONS

HOSC is recommended to:

1. Agree the Committee's approach to the Healthcare Commission Annual Health Check process 2008/09 as proposed in paragraphs 3.2 and 3.3.

1. The Annual Health Check Process

1.1 In 2005/06 the Healthcare Commission introduced a new system for assessing the performance of NHS organisations, known as the 'Annual Health Check'. This requires all NHS organisations to submit a self-assessment against the national 'Standards for Better Health'.

1.2 As part of this process, NHS organisations are required to invite third parties including HOSCs, Local Involvement Networks (LINks) and Strategic Health Authorities to make any comments on the organisation's performance against the standards based on evidence gathered during the year. Third parties are not required to comment and there is no penalty for the NHS organisation or the third party if commentary is not submitted. Any comments received must be included verbatim by the NHS organisation within their self-assessment.

1.3 The Healthcare Commission then cross-checks the self-assessments against nationally held data and the comments received by third parties to identify any inconsistencies and any areas of non-compliance with the standards. On the basis of this analysis, around 10% of organisations receive a detailed inspection on the basis that they have an increased risk of non-compliance. A further 10% of organisations are selected entirely at random to receive an inspection.

1.4 The Healthcare Commission uses the self-assessments, their analysis and any inspection findings to calculate two ratings for each organisation – one for the quality of services and one for the use of resources.

2. HOSC commentary in previous years

2.1 2005/06 was the first year of this process. HOSC submitted general commentary on each NHS organisation but decided that a far more extensive analysis would be required in order to submit detailed commentary against the standards. This detailed analysis was not possible within the timescale.

2.2 In 2006/07 the HOSC Scrutiny Lead Officer mapped HOSC's key areas of work during the year against the national standards and identified the few most relevant standards to comment on. Comments were prepared against the few identified standards based on HOSC meeting minutes or review reports and, following review by HOSC members and agreement by the HOSC Chairman, these were submitted to the relevant NHS organisation in mid-April 2007. This was a significant piece of work and it is not possible to identify whether the commentary influenced the assessment of the NHS organisations directly.

2.3 In 2007/8 HOSC's work focussed almost entirely on the Fit for the Future programme of evidence gathering and reporting. This meant the Committee was unable to undertake its usual varied work programme and therefore had very little evidence on which to base comments on the performance of NHS organisations against the standards. It was therefore agreed that HOSC would not make comments but would write to the relevant PCTs and Trusts to explain the position so they could include this letter within their declaration to the Healthcare Commission.

3. HOSC proposed approach for 2008/09

3.1 HOSC's responses in the previous three years illustrate the range of options open to the Committee in relation to submitting commentary for the Annual Health Check, in summary:

- Submit no comments.
- Submit general comments, based on an overview of the committee's work during the year.
- Submit detailed comments, based on a full analysis of HOSC's work during the year.

3.2 It is proposed that HOSC makes general comments this year and particularly focuses on the patient and public involvement aspects of the national standards, which includes the PCTs' and Trusts' engagement with HOSC. This proposal strikes a balance between supporting and participating in the process whilst recognising that HOSC resources are limited and must be prioritised where they will have most impact.

3.3 To provide general commentary, it is proposed that the HOSC Scrutiny Lead Officer drafts letters to each relevant NHS organisation, based on an overview of the year's work, for approval by the HOSC Chairman and Vice-Chairman on the Committee's behalf.

4. Future of the Annual Health Check

4.1 This will be the last year of the Annual Health Check in its current form. The Healthcare Commission will no longer exist after 31 March 2009. It will be merged with the Commission for Social Care Inspection and the Mental Health Act Commission to form a new organisation, the Care Quality Commission, from April 2009.

4.2 The Care Quality Commission will still have a duty to undertake an annual assessment of the performance of NHS organisations. The organisation is in the process of developing and consulting on its approach to its work and further details are expected once the Commission formally takes over from April.

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