



Reference: AHC10000
Date: 30/04/2007

Your details

Trust self-declaration:

Organisation name:	East Of England Ambulance Service NHS Trust
Organisation code:	RYC

General statement of compliance

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

<p>General statement of compliance</p>	<p>The Trust has carried out a self-assessment based on the Healthcare Commission Criteria for Assessing Core Standards in 2006/2007. In making this declaration the Trust has considered compliance across the three organisations prior to merger and as a single organisation subsequently, using a methodology agreed by the Trust Board. The process of self assessment involved the collection and review of outcome based evidence and policies from across the Trust.</p> <p>The Executive team and the Trust Board have reviewed this process and associated evidence before making the final declaration. This has provided the Trust Board with reasonable assurance that it is compliant with the standards as shown in the declaration and has confidence in the associated action plans for areas of limited assurance or non compliance.</p> <p>The Trust has faced considerable challenges as a result of the merger process and the Trust Board believe that this is reflected in the declaration. Despite these challenges, the Trust Board believes it has maintained an excellent level of service to patients and commissioners and will continue to deliver this whilst the merger process is completed and change embedded.</p>
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Statement on measures to meet the Hygiene Code

Please enter this statement in the box provided.

<p>Statement on measures to meet the Hygiene Code</p>	<p>The Trust has the Health Act - Code of Practice for the Prevention and Control of Healthcare Associated Infection as the corner stone of its Infection Control Strategies and Policy. The effective prevention and control of HCAI is embedded into all strategies and practices of the Trust, be that the make-ready concept or the provision of single use equipment. While not every aspect of the code of practice is applicable</p>
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	<p>to the Trust, those that are applicable are being built into operational practice.</p> <p>The measures that are in place are</p> <ul style="list-style-type: none"> - A comprehensive Infection Control Strategy and Policy together with an Action Plan - Regular annual updates within the CPD Programmes - Within the OOH Primary Care provision, the use of antibiotics compared to the guidelines produced approaches 90% compliance - The Trust has approved the Medical Director to act as the Director of Infection Prevention and Control supported by an Infection Control Group with option to convene the Trust's Infection Control Advisory Body when there is a significant risk of infection within the community or to staff or patients - The Trust has a policy to use single use equipment to reduce the risk of the spread of infection. - There is repeated importance attached to hand washing, laundry and decontamination with the provision of antibacterial hand rubs - Selected audits are under-taken to demonstrate vehicle cleaning - Guidelines to the management of patients with MRSA <p>Other measures are being pursued across the new Trust to ensure a common and equitable adherence with the Health Act.</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

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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 prior to use and that the risks associated with decontamination facilities and processes are well managed.	Compliant
C4d	Healthcare organisations keep patients, staff and visitors safe by having systems to ensure that medicines are handled safely and securely.	Insufficient assurance
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

Safety domain - non-compliance/insufficient assurance

Please complete the details below for standard C4d, which you have declared as not met or insufficient assurance:

Start date of non-compliance or insufficient assurance	01/04/2005
End date of non-compliance or insufficient assurance (planned or actual)	31/12/2006

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Description of the issue (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)	The internal auditors identified that... The Trust should issue all Paramedics who work on the Air Ambulance or who act as County Support Relief Paramedics suitable locked receptacles in which controlled drugs can be stored in transit.
Actions planned or taken (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)	Locked receptacles to be made available to all staff, procurement system to be changed. The air ambulance operation based in Norwich has a central supply for medicines to prevent staff transporting controlled drugs. The system is managed to include recording of controlled drugs in accordance with the controlled drug regulations.

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

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

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	further professional and occupational development commensurate with their work throughout their working lives.	
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
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.	Insufficient assurance
C14b	Healthcare organisations have systems in place to ensure that patients, their relatives and carers are not discriminated against when complaints are made.	Not met
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.	Not applicable (ambulance trusts should declare 'not applicable')
C15b	Where food is provided, healthcare organisations have systems in place to ensure that patients' individual	Not applicable (ambulance trusts should declare 'not applicable')

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	nutritional, personal and clinical dietary requirements are met, including any necessary help with feeding and access to food 24 hours a day.	
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

Patient focus domain - non-compliance/insufficient assurance

Please complete the details below for standard C14a, which you have declared as not met or insufficient assurance:

Start date of non-compliance or insufficient assurance	01/04/2006
End date of non-compliance or insufficient assurance (planned or actual)	01/06/2007
Description of the issue (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)	The Healthcare Commission identified that in one locality: <ul style="list-style-type: none"> - The Call Centre and Ambulances did not always have access to suitable information about the procedure for making complaints. - Front line staff have not received training on complaints management.
Actions planned or taken (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)	The Trust plans to revise the information on complaints available to patients and staff, and increase staff awareness through an ongoing development programme.

Please complete the details below for standard C14b, which you have declared as not met or insufficient assurance:

Start date of non-compliance or insufficient assurance	01/04/2006
End date of non-compliance	01/06/2007

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or insufficient assurance (planned or actual)	
Description of the issue (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)	The Healthcare Commission identified that the Trust needed to be more explicit and proactive towards its approach to not discriminating against people who have made a complaint and that there were limited systems in place to obtain feedback on these issues.
Actions planned or taken (maximum of 1500 characters including spaces - this is approximately 200 - 250 words)	The Trust plans to revise policy, procedures and information provided to patients to ensure that patients are fully aware they will not be discriminated against when making complaints. The Trust will implement a system that provides feedback on these issues (for example patient survey).

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 others are sought and taken into account in designing, planning, delivering and improving healthcare services.	Compliant
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	Compliant

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	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.	
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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.	
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)

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	Title	Full name	Job title
1.	Ms	Maria Ball	Chair
2.	Dr	Paul Remington	Non Executive Director
3.	Mrs	Caroline Bailes	Non Executive Director
4.	Mr	Jagtar Singh	Non Executive Director
5.	Mrs	Anna Bennett	Acting Chief Executive
6.	Mr	Chris Bland	Acting Director of Finance
7.	Mr	Oskan Edwardson	Director of Operations
8.	Mr	John Elliott	Director of Human Resources
9.	Dr	John Scott	Clinical Director

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.

Strategic health authority comments	<p>The East of England SHA has assessed performance against a limited number of standards for the period April 2006 to end of March 2007. These standards were selected from the full complement of HCC standards as those on which we consider we can reasonably comment given the limited information held by the SHA.</p> <p>The SHA believes the Trust has had a very good year in delivering high quality services to patient's, especially in achieving the 75% of Category A calls responded to within 8 minutes.</p>
Patient and public involvement forum comments	<p>East of England Ambulance Patient and Public Involvement Forum</p> <p>Commentary on Core Standards</p> <p>The East of England Ambulance PPI Forum would like to acknowledge that the East of England Ambulance Service NHS Trust has encouraged patient and public involvement generally and involved the Forum in many of its committees and activities.</p> <p>The Forum is also encouraged by the Trusts positive approach and professional delivery of its care to patients.</p> <p>However, the transition from three Ambulance Trusts in the Eastern region to one larger Trust has not been a seamless one. Whilst the Forum appreciates the sheer scale of the task in hand there is concern over the amount of time it is taking the Trust to implement their new structure. The level of communication from the Trust Board to the Forum has at times been disappointing.</p> <p>Core Standard C14:</p> <p>The Forum instigated a working group for PALs and Complaints with representatives from the Trust. The group has met on a number of occasions and work is progressing well. The Trust has agreed that a leaflet produced in Essex for patients and the public concerning</p>

complaints can be standardised and issued throughout the region. This has proved to be a positive and productive group and the Forum would now like to see further progression in the distribution of this leaflet to the Patients and the Public in the East of England. The Forum is also pleased to note that it now receives regular reports from the Trust on complaints, PALs enquiries and commendations.

Core Standard C16:

Following lengthy negotiations between the Trust and the Forum the Trust has now agreed that all patient aftercare and information leaflets will be carried on ambulance vehicles. This system is already working in Essex, instigated in liaison with the Essex PPI Forum members, and will now be adopted throughout the rest of the eastern region. This will include the diabetes aftercare leaflet produced by Forum members in East Anglia in August 2005.

Core Standard C17:

1. Patient Surveys have been shared with the Forum and the Trust has taken into account their comments and recommendations. There is also Forum representation on the Ethics Advisory Group where all patient surveys are approved before being issued to patients and the public.

2. The Forum first raised the issue of patient safety and security in June 2006 following an incident in Norfolk where a patient jumped from a moving vehicle and subsequently died. The Trust confirmed that a working group looking at safety and security on ambulance vehicles would be established and PPI Forum representation would be welcome on this group. To date despite repeated requests by the Forum the Trust has not confirmed the establishment of a working group, whether it has met or when it plans to meet.

3. The former Beds and Herts Ambulance PPI Forum carried out a Patient Transport Services (PTS) survey in Bedfordshire and Hertfordshire following information received by the Forum raising concerns over the provision of PTS. The survey was extensive and encompassed both the Trust Operations and a wide patient experience. The Forum submitted a report detailing their findings to the Trust in September 2006. A verbal acknowledgement of the report was received from the Trust at a Board meeting in September 2006 but to date there has been no official written feedback or communication with the Forum from the Trust. The Forum finds this very disappointing particularly given the fact that the Trust has now lost the PTS contract to a private provider in Bedfordshire and Hertfordshire.

4. The former Essex Ambulance PPI Forum raised the issue of ambulances that are required to exceed the speed limit or go through a red light for an emergency call and whether the Trust has a policy relating to this matter. The Forum was informed that this would come under the national policy covered by the Road Traffic Act. However, following the merger to one larger Trust the Forum would like clarification that there is a clear, consistent and uniform policy in place which is being adhered to by the Trust throughout the region.

Core Standard C20 a & b

It came to the Forums attention that the Out of Hours (OOH) service provided by district nurses and their drivers working for the PCTs of

	<p>North Norfolk, Southern Norfolk, Norwich and Broadland was under threat. As a result of this the Forum wrote a letter of concern to the local press which generated concern from local patients and the public. Contact was then established by the Forum with the district nurses and their drivers and Norfolk MPs were lobbied. A meeting was organised and chaired by the Forum on 10th August 2006 between representatives of the PCTs, local MPs, district nurses, their drivers and a representative from Anglian Medical Care (AMC) part of the Ambulance Service, running the current OOH service in Norfolk and Waveney. The outcome of this meeting was that AMC agreed to employ the district nurses and their drivers ensuring that the quality of service to patients would be maintained. In December 2006 all district nurses and some of the drivers transferred to AMC. The Forum is very encouraged and pleased to note that AMC recognised the importance of the delivery of first class care to patients by the OOH district nurses and to date this arrangement appears to be working most satisfactorily.</p> <p>Core Standard C21:</p> <p>1. The PTS survey carried out by members in Bedfordshire and Hertfordshire looked at the quality of PTS vehicles in the two counties and concerns were highlighted regarding the comfort of the patient's journey. Some of the vehicles were bumpy, noisy and unreliable with a high percentage of breakdowns, although staff clearly ensured vehicles were clean and roadworthy. The Forum recommended that the availability of satellite navigation could also be a useful aid to staff when planning some journeys. The survey also highlighted that there is no standardisation of vehicles or design which could help improve procurement and operational arrangements.</p> <p>2. Forum members in Essex actively monitor PTS in Essex (with the exception of West Essex) the Trust involved the Forum members in the requirements for PTS vehicles which resulted in a programme of replacement vehicles being implemented.</p>
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Overview and scrutiny committee comments

Overview and scrutiny committee 1

<p>Comments</p>	<p>STANDARDS FOR BETTER HEALTH PETERBOROUGH CITY COUNCIL HEALTH OVERVIEW AND SCRUTINY COMMITTEE</p> <p>THIRD PARTY COMMENTARY FOR INCLUSION WITH SELF DECLARATION OF EAST ANGLIAN AMBULANCE TRUST</p> <p>C17 - The views of patients, their carers and others are sought and taken into account in designing, planning, delivering and improving healthcare services</p> <p>There is regular liaison and exchange of information between the Ambulance Trust and the Health Overview and Scrutiny Committee. A senior officer from the Trust attends committee meetings and has responded promptly to all requests for information either from individual members of the committee or the committee as a whole.</p>
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	<p>The Health Scrutiny Officer and an officer from the Ambulance Trust meet quarterly with officers from other Trusts in the Peterborough area to discuss local issues. The input from Trust officers is invaluable in helping to plan an effective HOSC work programme and in directing the committee's health scrutiny reviews into areas of local concern.</p> <p>During the restructuring of the Ambulance Trust in 2006 the Committee received regular updates and a presentation to one of its meetings which outlined the reasons for the changes and addressing concerns raised by the Committee with regard to issues that may affect them locally.</p> <p>Officers from the Ambulance Trust recently attended a meeting of the Eastern County Chairs of Health Overview and Scrutiny Committee and delivered a presentation regarding progress of the trusts' merger, future strategy, Health Declarations and the impact of the Acute Services Review</p> <p>C19 - Healthcare organisations ensure that patients with emergency 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.</p> <p>At its meeting in January 2007 the Committee noted the good performance levels for the Ambulance Trust response times and asked that its congratulations be formally recorded in the minutes of the meeting.</p> <p>C 22 - Healthcare organisations promote, protect and demonstrably improve the health of the community served, and narrow health inequalities by:</p> <p>a) co-operating with each other and with local authorities and other organisations</p> <p>The Committee has acknowledged through information received from the Ambulance Trust that there is wide provision of non-emergency patient transport services in partnership working with local authorities, as well as GP out of hours schemes with doctors and nurses.</p> <p>Prior to the re-structuring of the ambulance trusts in the Eastern region the Committee noted that the East Anglian Ambulance trust had consistently met high levels of key performance targets for three years, had been involved in piloting new initiatives and had developed good partnership working. It was also noted that the Trust considered it essential that the partnership working developed prior to the re-structure should be maintained and that there must be strong strategic capacity at corporate level and strengthened leadership at local level.</p>
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Overview and scrutiny committee 2

Comments	<p>CAMBRIDGESHIRE COUNTY COUNCIL HEALTH AND ADULT SOCIAL CARE SCRUTINY COMMITTEE</p> <p>East of England Ambulance Service NHS Trust</p>
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	<p>Core Standards: Final Declaration 2006/7 Comments</p> <p>Domain 5: Accessible and Responsive Care Standard C17 The views of patients, their carers and others are taken into account in designing, planning, delivering and improving health care services</p> <p>The new East of England Ambulance Trust has established links with the Health and Adult Social Care Scrutiny Committee through the Cambridgeshire Locality Chief Operating Officer. The Trust has contributed valuable evidence to a Cambridgeshire-led Joint Scrutiny Committee which is examining proposals for the future of Hinchingsbrooke Hospital NHS Trust. It held an information seminar for scrutiny committee members to advance their understanding of the issues facing the service.</p> <p>At a regional level, links have been established between the Trust and the Eastern Region Forum of Health Scrutiny Chairs, including a presentation by the Trust to the Forum. The Forum facilitates liaison and joint working on common issues between scrutiny committees across the region.</p> <p>These arrangements have provided a foundation which will assist the Committee to develop its scrutiny of the Trust in future.</p>
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Overview and scrutiny committee 3

<p>Comments</p>	<p>Standards for Better Care 2006/2007 Herts HSC Commentary for East of England Ambulance Trust</p> <p>East of England Ambulance Trust The Committee made the decision to comment on selected Core Standards that have a particular public and patient focus.</p> <p>The Declaration of Standards for Better Health (2005/06) had been handled through the Joint Bedfordshire, Hertfordshire and Luton Health Scrutiny Committee. The Joint Committee and Hertfordshire County Council have enjoyed a positive relationship with the Beds, Herts and Luton Paramedic Trust and the reconfigured East of England Ambulance Trust. Due to the reconfiguration of ambulance services during 2006 the Joint Committee was disbanded and this has curtailed the ability of the Committee to gather evidence to support the Declaration of Standards for Better Health (2006/07). This will be addressed for the Declaration process for 207/08.</p> <p>East of England Ambulance Trust Core Standard 22a: Healthcare 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 Health Scrutiny Committee (HSC) wishes to commend the positive relationship between HSC and the Trust evidenced through its willing to participate at Committee meetings, topic groups and joint member & health service organised seminars (e.g. Herts Health Maze November 2006) and hosting elected member visits to Trust facilitates (July 2006).</p>
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Overview and scrutiny committee 4

Comments	<p>Norfolk Health Overview and Scrutiny Committee</p> <p>The Norfolk Health Overview and Scrutiny Committee has decided not to comment on any Norfolk Trust's declaration this year and would like to stress that this should in no way be taken as a negative comment. The Committee looks forward to working with all the Norfolk health trusts in the future to establish whether the Healthcheck process is of value locally and, if so, the most effective way of using it should time permit.</p>
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Overview and scrutiny committee 5

Comments	<p>Bedfordshire & Luton Joint Health Scrutiny Committee</p> <p>Response of the Joint Committee to the East of England Ambulance Service NHS Trust's Self Assessment to be submitted to the Healthcare Commission.</p> <p>4. The Joint Committee welcomes the opportunity to comment on the East of England Ambulance Service NHS Trust's self assessment to be submitted to the Healthcare Commission. At its meeting on the 27 April 2007 the Joint Committee had the benefit of being able to consider the self-assessment that had been approved by the Trust Board.</p> <p>5. The Joint Committee welcomes the Trust's declared compliance with the core standards apart from the following:</p> <ul style="list-style-type: none"> - C4d Insufficient Assurance - C14a Insufficient Assurance - C14b Not Met <p>6. The Joint Committee can confirm in respect standard of C22a that the Trust has cooperated with and engaged with the Joint Committee as it fulfils its overview & scrutiny responsibilities.</p> <p>7. The Joint Committee recognises that the Healthcare Commission's approach requires the Trust to demonstrate compliance by having the appropriate policies in place, in having the appropriate processes in place and by ensuring, respectively, their implementation and application. The Joint Committee believes that in this respect the Trust has identified and demonstrated compliance. The Joint Committee is however concerned that there is little by way of numerical evidence presented to demonstrate the outputs and outcomes of the policies and practices in meeting the needs and demands of patients and in improving the health of the population. The Joint Committee believes that, without the presentation of numerical data, neither the Trust nor its stakeholders can see whether the policies and procedures are delivering success or progress. In particular it is not possible to evaluate whether what is presented is compliance with best practice or average practice. The Joint Committee believes that numerical evidence showing absolute and trend data in respect of the core standards, perhaps through the use of a Key Performance Indicator approach to the presentation of evidence, would greatly enhance the value of the self-assessment process and provide the opportunity for the Trust to demonstrate its</p>
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	<p>successes and its performance in comparison with other Ambulance Trusts. (NB. The Joint committee has written separately to the Healthcare Commission in respect of the points made in this paragraph which appears in the Joint Committee's response to the self-assessments of each of the five local NHS Bodies.)</p> <p>8. The Joint Committee wishes to be advised of the outcome of the Healthcare Commission's assessment of the East of England Ambulance Service NHS Trust in respect of the Trust's performance during 2006/07.</p>
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Overview and scrutiny committee comments (2)

Overview and scrutiny committee 6

Comments	<p>The following Overview and Scrutiny Committees made no specific comments:</p> <p>Thurrock Southend Essex Suffolk</p>
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