Premises Assurance Model

NHS PAM structure and content

The NHS PAM has two distinct but complimentary parts:

- **Self assessment questions** (SAQs) supporting quality and safety compliance

- **Metrics**: supporting efficient use of the estate

Self Assessment Questions (SAQs) are spread over **five domains** with a sub set of questions known as **prompt** questions

- **Effectiveness**
- **Efficiency**
- **Patient Experience**
- **Safety**
- **Organisational Governance**

NHS PAM 2014 Scoring/Rating

Prompt questions are scored/rated based on the following options

Outstanding	compliant with no action plus evidence of high quality services and innovation
Good	compliant no action required
Requires minimal improvement	the impact on people who use services, visitors or staff is low
Requires moderate improvement	the impact on people who use services, visitors or staff is medium
Inadequate	Inadequate: action is required quickly, the impact on people who use services, visitors or staff is high
Not applicable	Not applicable to that service

Relevant guidance and legislation: Policies, procedures, working practises etc. should comply with any relevant guidance and legislation.

Evidence should demonstrate: The approach (policies, procedures etc.) are understood, operationally applied, adequately recorded, reported on, audited and reviewed.

Car Parking

Transport

Catering Services

Portering Services

Domestic Services

Linen Services

Pest Control

Switchboard Services

Patient Experience Domain

SAQ code	Self-Assessment Question - Does your organisation:
PE1	Involve patients, the public and Commissioners in shaping estates and facilities services, as well as gathering and using their experiences of estates and facilities services?
PE2	Ensure that patients, staff and visitors perceive that the condition, appearance, maintenance and privacy and dignity of the estate is satisfactory?
PE3	**Ensure that patients, staff and visitors perceive cleanliness to be satisfactory?**
PE4	Ensure that NHS Catering Services provide adequate nutrition and hydration through the choice of food and drink for people to meet their diverse needs?
PE5	Ensure that access and car parking arrangements meet the reasonable needs of patients, staff and visitors and are effectively managed at all times?
PE6	Ensures that safe, effective Portering Services are provided that meet the needs of patients and the organisation, consistent with all relevant guidance and legislation?
PE7	Ensure that the Telephony & Switchboard service is provided efficiently, professionally and courteously within agreed target response times?

Patient Experience Domain Prompt Qs

With regard to Cleaning and cleanliness can the organisation evidence the following:

Prompt Questions	The organisation has completed the **PLACE assessment** relating to cleanliness for all relevant sites and **published a local improvement plan?**

NHS England

Patient-led assessments of the care environment Organisational questions – food and drink – Treatment Centres

THE NHS CONSTITUTION
the NHS belongs to us all

County Durham and Darlington **NHS**
NHS Foundation Trust

Results of the 2014 - Patient Led Assessment of the Care Environment (PLACE)

Quality and Healthcare Governance Committee

September 2014

www.cddft.nhs.uk
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County Durham and Darlington **NHS**
NHS Foundation Trust

3.   CDDFT Results

Table 4 illustrates the final results for County Durham and Darlington NHS Foundation Trust (CDDFT) overall organisation score set against the national average for each of the four domains.

Table 4: CDDFTs Overall Organisation Score

	Cleanliness	Condition, Appearance & Maintenance	Privacy, Dignity & Wellbeing	Food
National Average Score	97.25%	91.97%	87.73%	88.79%
County Durham and Darlington NHS Foundation Trust	99.09% ↑	94.87% ↑	90.86% ↑	93.69% ↑

The overall organisational scores for the Trust are above the national average across all assessment criteria.

A fundamental part of assessments is the inclusion of lay assessors known generically as Patient Assessors. In this regard there are two specific conditions which organisations are requested to ensure:-

1) That there never be fewer than two patient assessors in any assessment team (or sub-team where assessment teams are split into more than one e.g. due to the hospital's size);

2) That the ratio between staff and patient assessors never be less than 50/50. This ratio can be increased in favour of patient assessors but should not be increased in favour of staff assessors.

The assessors are listed in Appendix 3.

PLACE 2014 Results – AMc/September 2014   Page 5

County Durham and Darlington **NHS**
NHS Foundation Trust

PLACE assessments were undertaken for each of the in-patient sites operated by CDDFT. The areas assessed by site are detailed in Appendix 4. Table 5 illustrates the final results for CDDFT's individual sites set against the national average.

Table 5: CDDFTs Individual Site Scores

	Cleanliness	Condition, Appearance & Maintenance	Privacy, Dignity & Wellbeing	Food and Hydration Overall	Ward Food Score	Organisation Food Score
National Average Score	97.25%	91.97%	87.73%	88.79%	90%	86.1%
Bishop Auckland Hospital	99.76% ↑	94.08% ↑	92.56% ↑	90.59% ↑	93.85% ↑	85.89% ↓
Chester Le Street Community Hospital	100% ↑	98.11% ↑	85.00% ↓	91.95% ↑	100% ↑	85.89% ↓
Darlington Memorial Hospital	99.74% ↑	95.19% ↑	90.75% ↑	94.09% ↑	95.94% ↑	87.70% ↑
Richardson Hospital	99.61% ↑	97.50% ↑	96.23% ↑	93.75% ↑	96.67% ↑	90.85% ↑
Sedgefield Community Hospital	100% ↑	97.84% ↑	89.93% ↑	94.25% ↑	99.32% ↑	88.75% ↑
Shotley Bridge Community Hospital	98.94% ↑	94.52% ↑	84.92% ↓	91.91% ↑	96.94% ↑	86.45% ↑
University Hospital North Durham	98.06% ↑	94.14% ↑	90.74% ↑	94.38% ↑	97.78% ↑	84.21% ↓
Weardale Community Hospital	100% ↑	97.14% ↑	87.50% ↓	95.36% ↑	100% ↑	89.80% ↑

Scores highlighted in green indicate above the national average score.
Scores highlighted in red indicate below the national average score.

PLACE 2014 Results – AMc/September 2014   Page 6

County Durham and Darlington **NHS**
NHS Foundation Trust

4.   Northern Region Acute Trusts Organisational Scores

Table 7 illustrates the results for Northern Region Acute Trusts organisational scores set against the national average.

Table 7: Northern Region Acute Trusts Organisational Scores

	Cleanliness	Condition, Appearance & Maintenance	Privacy, Dignity & Wellbeing	Food and Hydration
National Average Score	97.25%	91.97%	87.73%	88.79%
County Durham and Darlington NHS Foundation Trust	99.09%	94.87%	90.86%	93.69%
Northumbria NHS Foundation Trust	98.97%	95.85%	91.45%	92.37%
The Newcastle Hospitals NHS Foundation Trust	99.87%	94.22%	93.55%	92.09%
Gateshead NHS Foundation Trust	99.64%	94.33%	90.79%	89.14%
North Tees and Hartlepool NHS Foundation Trust	98.40%	93.46%	86.90%	84.49%
Sunderland NHS Foundation Trust	99.61%	96.69%	94.32%	96.50%
South Tyneside NHS Foundation Trust	97.88%	92.69%	90.32%	91.85%
South Tees NHS Foundation Trust	98.61%	95.69%	88.41%	90.52%

Scores highlighted in green indicate above CDDFT organisational score.
Scores highlighted in red indicate below CDDFT organisational score.

PLACE 2014 Results – AMc/September 2014   Page 10

Self Assessment Questions (SAQ)	Ensure that patients, staff and visitors perceive cleanliness to be satisfactory?

With regard to Cleaning and cleanliness can the organisation evidence the following:

Prompt Questions	Is there a system/process, **additional** to PLACE assessments, to **measure patients and visitors satisfaction** of the cleanliness and is action taken on the results?

Self Assessment Questions (SAQ)	Ensure that patients, staff and visitors perceive cleanliness to be satisfactory?
With regard to Cleaning and cleanliness can the organisation evidence the following:	
Prompt Questions	Cleaning Schedules are **publicly** available?

Self Assessment Questions (SAQ)	**Ensure that patients, staff and visitors perceive cleanliness to be satisfactory?**
With regard to Cleaning and cleanliness can the organisation evidence the following:	
Prompt Questions	Patients, visitors and staff **know who to contact for cleaning issues** and there is a **robust procedure** for dealing with such complaints?

Introduction
The Facilities Team are committed to providing a clean environment for patients, staff and visitors by setting standard s using the Health Care Cleaning Manual and the code of practice for the prevention and Control of Healthcare Associated Infection.

Cleaning Frequencies
Each ward and clinical department has a detailed Cleaning Responsibility Framework that identifies areas, items to be cleaned and how often they are to be cleaned. Each ward has a copy of their full detailed specification.

The Trust has its own dedicated Deep Clean Team. Wards and Departments are cleaned annually and as required, we also use new technology - Hydrogen Peroxide Vapour.

Monitoring of Cleaning Standards
Quality Monitoring of both cleanliness and the environment is carried out in a number of ways:
Annual Patient Led Assessment of the Care Environment (PLACE) Inspection
Weekly/Monthly Cleanliness Technical Monitoring Audits and
Daily Spot Checks

The Facilities Team also use the results from the following to measure patient and service users views of the cleaning service provided :
Family and Friends Test, Annual Patient Survey and Post Discharge Survey Results
Compliments and Complaints

We would also welcome and encourage you to pass on your comments, suggestions and concerns about any issues relating to hospital cleaning. You can do this by contacting the Associate Director of Facilities on 01325 743070.

Output from PAM – SAQs/Prompt questions

Average scores

Outstanding

Good

Requires minimal improvement

Requires moderate improvement

Inadequate

PE1 PE2 PE3 PE4 PE5 PE6 PE7
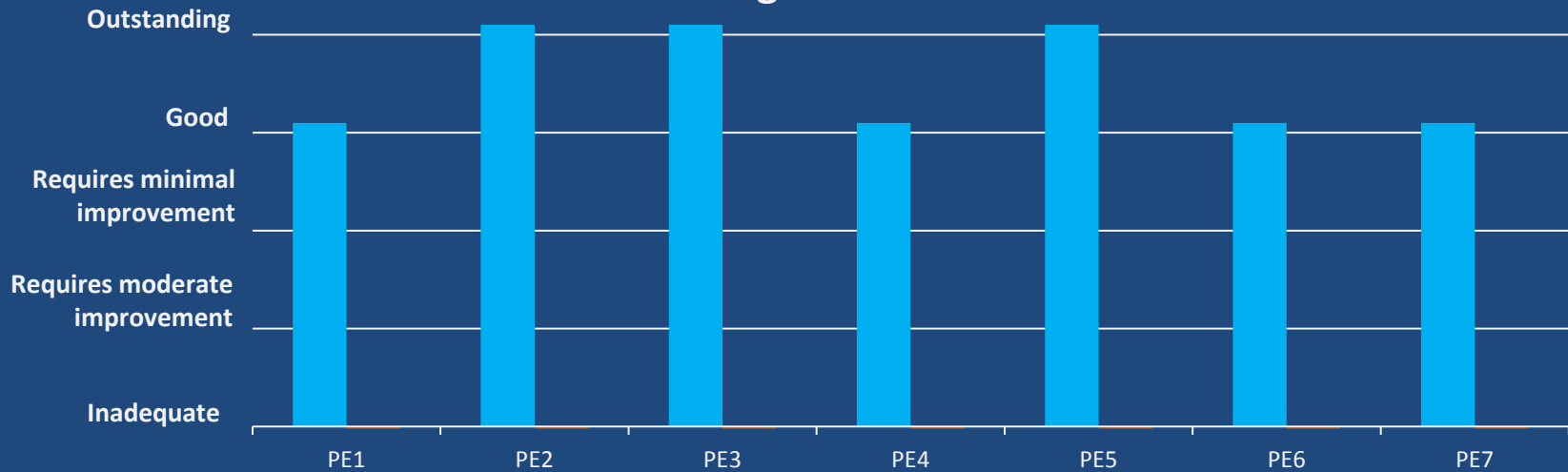
Distribution of patient experience prompt questions (%) 2014-15

% of prompt questions

100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%

PE1 PE2 PE3 PE4 PE5 PE6 PE7

- 5. Inadequate
- 4. Requires moderate improvement
- 3. Requires minimal improvement
- 2. Good
- 1. Outstanding
- Not applicable
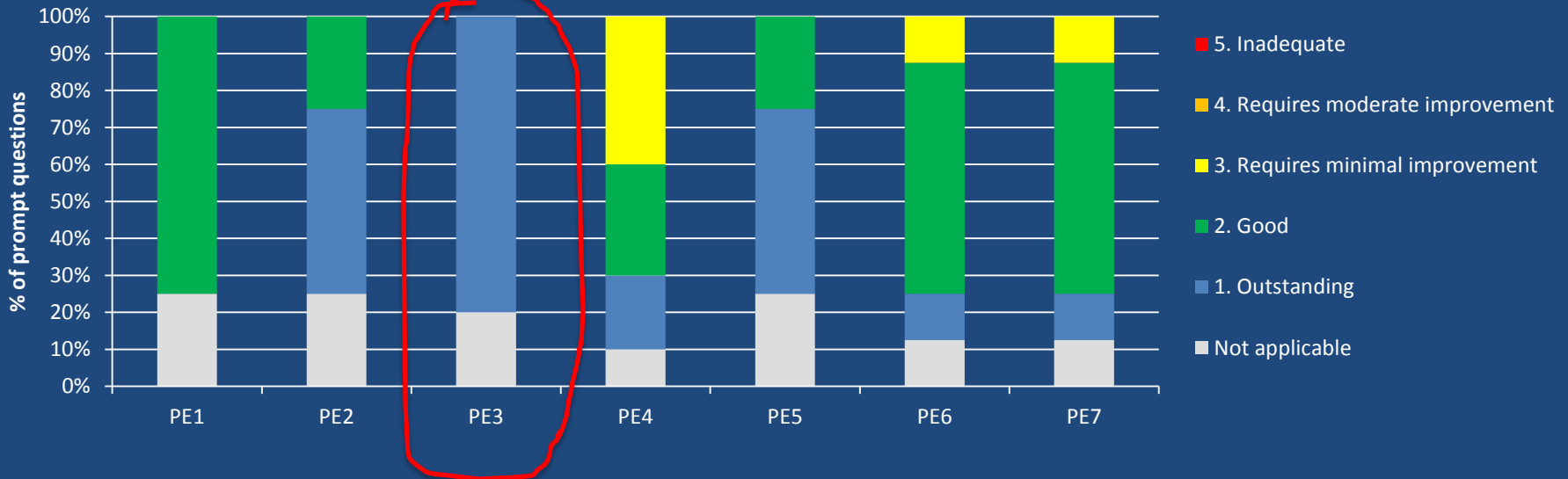
Safety Domain

SAQ code	Self Assessment Question - Is the Organisation/site safe and compliant with well managed systems in relation to:
S1	Asset Management and Maintenance
S2	The Design and Layout of Premises
S3	Health & Safety at Work
S4	**Catering Services**
S5	Asbestos
S6	Medical Gas Systems
S7	Natural Gas and Other Non Medical Piped Gas Systems
S8	Water Systems
S9	Electrical Systems
S10	Mechanical Systems (e.g. Lifting Equipment)
S11	Ventilation Systems
S12	Lifts
S13	Pressure Systems
S14	Decontamination Processes
S15	Fire Safety
S16	**Waste Management**
S17	**Cleanliness and Infection Control applying to Premises and Facilities**
S18	**Laundry and Linen Services**
S19	Medical Devices and Equipment
S20	Security Management
S21	Resilience, Emergency and Contingency Planning
S22	**Transport Services**
S23	**Pest Control**
S24	Premises and Equipment issues identified in all relevant Safety-Related Reporting Systems
S25	Contractor Management
S26	Undertaking New Build and Refurbishment Works
S27	Safety and Suitability of Premises and Services, when the organisation is not responsible for the premises in which the care, treatment and support is delivered

Self Assessment Questions (SAQ)	Is your organisation safe and compliant with well managed systems in relation to: Cleanliness and Infection Control applying to Premises and Facilities

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 1	**Policy & Procedures -** Does the Organisation have a current, approved **Policy** and an underpinning set of **procedures** that comply with relevant **legislation** and **published guidance**?

- Cleaning Policy
- Linen Bagging Policy – Curtain Changing
- Cleaning Method Statements
- Cleaning Responsibility Matrix
- Cleaning Schedules (public display)
- Cleaning Schedules (operational use)
- Colour Coding Guidance
- Cleaning Procedures:
  - Hydrogen Peroxide Decontamination Operational Protocol
  - Flushing Little Used Outlets
  - Cleaning a bed space

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 2	**Roles and Responsibilities -** Does the Organisation have appropriately **qualified** and formally appointed people with **clear descriptions** of their **role and responsibility** which are well **understood**?

- Organisational Structure

- List of Roles

- Roles and Responsibilities Matrix

- Job Descriptions – each role

- Qualifications Matrix

WELCOME TO OUR WARD(BAH)   County Durham and Darlington NHS Foundation Trust

		Date cleaned and signature
A	Suction, and Oxygen	
B	Chair	
C	Bedframe/handset	
D	Mattress	
E	Bedside table	
F	Bedside locker	
G	Patient entertainment system	
H	Pillows	
I	Patient document holder	
J	Floor	
K	Foam sanitiser check and replenish	
L	Nurse call bell	
M	Wall light	
N	Curtain rail	
O	Bed Base	

Dear patient this bed space has been checked to ensure that it is cleaned and prepared for your arrival as shown above. If you have any queries or concerns please ask for the nurse in charge.

Bed space Number..

Date and Time..

V3IC Sept 13
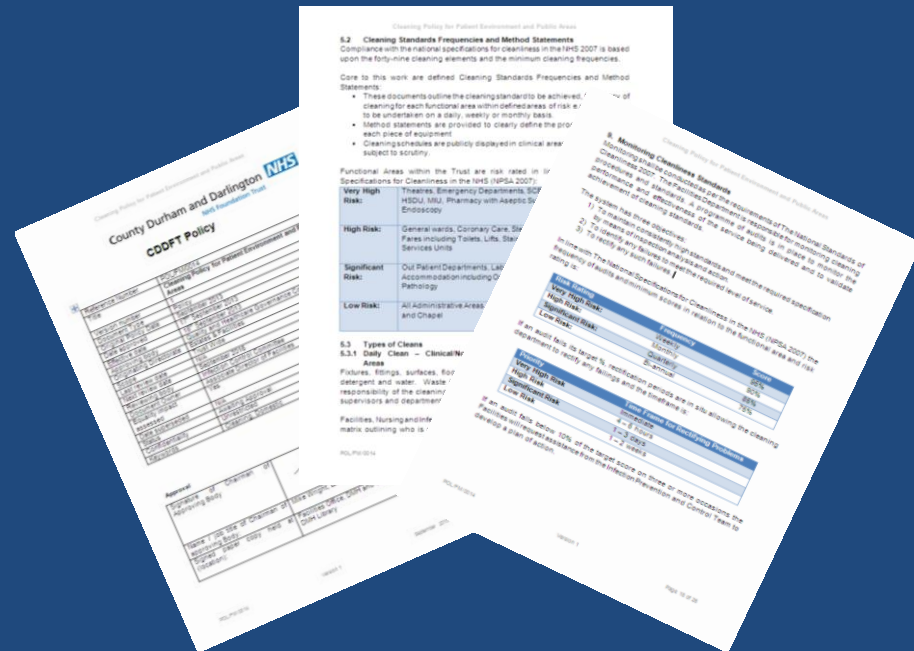
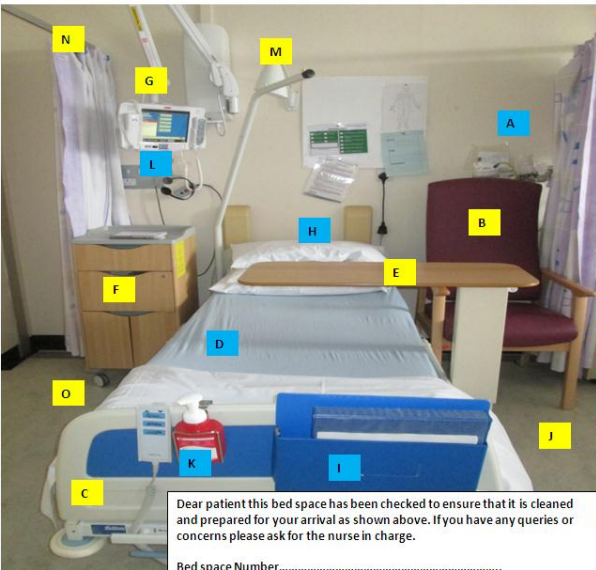| Self Assessment Questions (SAQ)	Is your organisation safe and compliant with well managed systems in relation to: Cleanliness and Infection Control applying to Premises and Facilities

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 3	**Statutory Requirements and Guidance -** Has there been a review of all relevant **Statutory** requirements and **guidance**, a **risk assessment** undertaken and any necessary **risk mitigation strategies** applied and regularly reviewed?

- Cleaning Standards

- Risk Register

- Risk Assessments

- Health and Safety Awareness

- COSHH Awareness

- COSHH Assessments

- Incident Reporting

NHS
National Patient Safety Agency

Safer practice notice 15

Colour coding hospital cleaning materials and equipment

Colour coding of hospital cleaning materials and equipment ensures that these items are not used in multiple areas, therefore reducing the risk of cross-infection.

The National Patient Safety Agency (NPSA) has developed a National Colour Coding Scheme for cleaning materials. The recommendation is that all NHS organisations adopt this code as standard in order to improve the safety of hospital cleaning, ensure consistency and provide clarity for staff.

There is currently no single colour code in use across the NHS. The National Colour Coding Scheme is designed to standardise, and in some cases streamline, existing schemes. It will have minimal resource implications for the service.

Cleaning materials and equipment that should be colour coded

All cleaning materials and equipment, for example, cloths (re-usable and disposable), mops, buckets, aprons and gloves, should be colour coded. The method used to colour code items should be clear, permanent and in accordance with existing local practice. The NPSA is happy to advise as necessary.

Materials and equipment that do not need to be colour coded

Cleaning products such as bleach and disinfectants do not need to be colour coded. Also, the code does not extend to catering equipment (for example, chopping boards and knives) where there is already a well-recognised and well-established procedure to ensure food hygiene and food separation issues are addressed.

Action for the NHS

The NPSA recommends that all NHS organisations providing inpatient services in England and Wales should:

- make a policy decision to adopt the National Colour Coding Scheme where existing practice differs. The national scheme is on page three of this notice.

- develop an action plan for introducing the National Colour Coding Scheme.

- raise awareness of any revised practice amongst healthcare staff.

Notice
10 January 2007

Immediate action ☐
Action ☑
Update ☐
Information request ☐

Ref: NPSA/2007/15

Safer practice notice 15
Colour coding hospital cleaning materials and equipment
Page 3 of 4

National Colour Coding Scheme

Red
Bathrooms, washrooms, showers, toilets, basins and bathroom floors

Blue
General areas including wards, departments, offices and basins in public areas

Green
Catering departments, ward kitchen areas and patient food service at ward level

Yellow
Isolation areas

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 4	**Maintenance, Record Keeping and Asset Register -** Are **assets**, **equipment** and **plant** adequately maintained with all **relevant records** (maintenance manuals, procedures, test certificates, etc.) available, up to date and kept in an appropriate manner including, where relevant, an up to date **asset register**?

- Asset register – List of Cleaning equipment

- Signed off Cleaning Schedules

- Completed Water Flushing Records

- Documented Cleaning Audits/Action plans

Self Assessment Questions (SAQ)	Is your organisation safe and compliant with well managed systems in relation to: Cleanliness and Infection Control applying to Premises and Facilities

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 5	**Training -** Does the Organisation have an up to date **training plan** in place covering all **relevant roles** and **responsibilities** of staff, that meets all **safety, technical** and **quality requirements**?

- Training Needs Analysis

- Training Plan

- Training Records

- Appraisal

- Personal Development Plans

- Career Pathways

Remember ……There is only one thing worse than training staff and have them leave, which is not training staff and have them stay

Self Assessment Questions (SAQ)	Is your organisation safe and compliant with well managed systems in relation to: Cleanliness and Infection Control applying to Premises and Facilities

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 6	**Building and Maintenance work** - Where **building** and **maintenance** work impacts on existing systems are risks assessments undertaken and the work designed, undertaken and commissioned to the appropriate standards?

MAINTENANCE LOG

DEPARTMENT	ROOM NAME/ NUMBER	JOB REQUEST	DATE LOGGED	LOGGED BY	JOB NUMBER	DATE RE-CHECKED	DATE COMPLETED

Self Assessment Questions (SAQ)	Is your organisation safe and compliant with well managed systems in relation to: Cleanliness and Infection Control applying to Premises and Facilities

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 7	**Resilience, Emergency & Contingency Planning -** Does the Organisation have **resilience, emergency, contingency** and **escalation** plans which have been formulated and tested with the appropriately **trained** staff?

- Trust Resilience Forum

- Major incident plan – action cards

- Business continuity plan – action cards

- Quarterly Estates and Facilities Business Continuity Meeting

- Tested BCPs - Supply Chain Resilience

Self Assessment Questions (SAQ)	Is your organisation safe and compliant with well managed systems in relation to: Cleanliness and Infection Control applying to Premises and Facilities

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 8	**Review Process -** Is there a robust **annual review** process to assure compliance and effectiveness of relevant **standards, policies** and **procedures**?

- Policy Review every three years

- Annual Review of Procedures

- National Standards Cleanliness Results

- PLACE Results

- Commissioner Inspections

- CQC Inspection

Self Assessment Questions (SAQ)	Is your organisation safe and compliant with well managed systems in relation to: Cleanliness and Infection Control applying to Premises and Facilities

With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence the following :

Prompt Question No 9	**Action Plans -** If the organisation/site has any **INADEQUATE** or requires **MINIMAL** or **MODERATE** improvement ratings in this SAQ, are there **risk assessed action plans** in place to achieve compliance?

ACTION PLAN					
No	Level	Action	LEAD	COMPLETION DATE	IMPACT
1					
2					
3					
4					

NHS PAM - Metrics

NHS PAM Metrics use the following data collected from the NHS to allow comparison between peer NHS organisations allowing areas of strengths and weakness to be identified

- **Estates Return Information Collection**
- Health Episode Statistics (HES)
- **In-patient Survey**
- **Patient Led Assessment of the Care Environment (PLACE)**

Trust Chart: ACUTE -LARGE - 2013/2014				
Code	Organisation Name	Cleaning services costs (£)	Total Occupied floor area (m²)	£/m²
RW6	PENNINE ACUTE HOSPITALS NHS TRUST	7,325,619	252,870	28.97
RXP	COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	5,391,470	167,252	32.24
RTF	NORTHUMBRIA HEALTHCARE NHS FOUNDATION TRUST	4,404,467	136,366	32.30
RXF	MID YORKSHIRE HOSPITALS NHS TRUST	6,097,251	183,655	33.20
RLN	CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST	3,990,362	118,527	33.67
RTR	SOUTH TEES HOSPITALS NHS FOUNDATION TRUST	5,674,299	158,334	35.84
RCB	YORK TEACHING HOSPITAL NHS FOUNDATION TRUST	7,381,234	175,495	42.06

Conclusion

- Open and honest conversation with your team
- Be realistic when completing the assessment
- Challenge
- Use the assessment to inform where to focus energy/resource
- Use the process to play your part in making the experience better for patients
- Yearly return or just the day job?