

Primary care trusts  
Corporate management team  
Self assessment





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# Introduction

## Background

The Commission for Health Improvement (CHI) has developed a number of self assessment tools to help NHS organisations review their clinical governance arrangements. These tools have been designed for use by specific teams and modified to meet the needs of different care sectors.

The three different types of tools available are:

- a corporate management team tool focusing on issues of strategic capacity
- a senior management team tool focusing on issues of strategic capacity
- a clinical / care team tool focusing on issues of patient experience

For primary care trusts (PCTs), CHI has developed a **corporate management team self assessment** tool to enable teams to:

- identify their own clinical governance strengths and weaknesses
- share information, take stock and reflect, and challenge colleagues
- identify and take forward areas for improvement
- understand more clearly the issues that are of interest to CHI

CHI acknowledges that NatPaCT has also produced a series of helpful tools for PCTs including the organisational maturity competency framework. [www.natpact.nhs.uk](http://www.natpact.nhs.uk)

## About this self assessment tool

This primary care trust corporate management team self assessment tool has been developed to be completed by the trust board and the professional executive committee (PEC) within a primary care trust setting. It has been designed to encourage participants to meet together and discuss issues relating to strategic capacity such as leadership, policy and strategy, organisational integration, performance review, systems that support learning and improvement, and partnership working.

The tool provides an opportunity for members of the corporate management team to reflect on their clinical governance progress, think about areas for improvement and focus their improvement activity on areas that are relevant and important to the trust. The tool can also be used on an ongoing basis to look at progress over time.

CHI acknowledges that PCTs are complex organisations and whose functions extend beyond provision of healthcare (health improvement, developing primary and community care services and commissioning). During the piloting of this tool, some PCTs considered it would be helpful to have separate assessments in each question to account for services directly provided and managed by the PCT, services commissioned by the PCT and contractor services. After careful consideration however, the tool has not been structured in this way (although it is perfectly feasible to organise your discussions along these lines). CHI's approach, reflected in this tool, is to form an overall assessment of the organisation drawing on evidence from the PCT as a whole and its functions.



# Introduction

## How this self assessment tool is constructed

This self assessment tool contains a number of sections.

A **series of statements** have been written to encourage you to reflect on how things actually happen within the team and the organisation overall and in relation to commissioned and contractor services, rather than focusing on the existence of formal structures, policies and processes.

There are **guidance points**, which you may like to consider when reflecting on the statement. These are fairly extensive, but they may not all be applicable to your team.

A **comments section** gives you space to record the assessment of your progress, highlighting strengths and weaknesses and noting examples.

There are two **six point rating scales** which ask you to (1) agree where the organisation is with respect to the issues underlying the statement, and (2) reflect on your organisation's capacity for improvement, considering any internal and external constraints. The rating scales may help you think about where to concentrate your improvement efforts. If you repeat the self assessment in the future, the rating scales may also help you to monitor the progress you have made over time.

The **key areas for action** section enables you to record the most relevant and important areas for improvement that you have identified as a result of completing the self assessment tool.

## Who should complete this self assessment tool?

This corporate management team tool is aimed at executive and non executive members of the trust board, and members of the professional executive committee. You may wish to involve others in the completion of the tool, such as those members of staff leading on risk, complaints, controls assurance, and so on.

## How should you complete this self assessment tool?

The following few paragraphs outline ways in which you might like to use this tool in order to get the best out of it.

### Preparation for the self assessment

Your team should ideally complete the tool collectively, having met and discussed it fully. You may find the following useful:

- sharing the tool in advance and encouraging members of the team to think about some or all of the statements before the meeting
- completing the tool during an existing meeting, for example, turn over a regularly scheduled meeting to the self assessment
- setting up a series of shorter meetings
- nominating a scribe (ideally someone who is familiar with the terminology and work of the team, but who is not part of the team or actively contributing to the discussion)
- nominating a facilitator (to monitor time and make sure that everyone is encouraged to contribute)



# Introduction

## Completing the self assessment tool

The tool should take you two to four hours to complete but some PCTs may wish to spend more time on it to explore the statements in more depth.

To complete the self assessment, it may help if you carry out the following steps for every statement:

- 1 Read the statement and the underlying guidance. Ensure that you are clear about what the statement is looking for.
- 2 Discuss as a team where you think you are in relation to the statement, using the guidance to structure your discussions. Include in your discussions all aspects of the PCT's functions including services directly provided and managed by the PCT, services commissioned by the PCT and contractor services. Identify your key strengths and areas where progress is most needed, and think about any constraints you face.
- 3 Note down the key points of your discussions in the space where you are asked for your comments. This will be a helpful reference in the future, if you decide to repeat the self assessment.
- 4 Reflecting on your discussions, agree your position on the rating scales provided. Indicate the box that most closely represents your views.

Once you have completed all the statements, you may like to:

- 5 Review all of your responses and identify three key actions to take forward. These could then be integrated into other action planning cycles.
- 6 Name all the participants on the final page. This will help you to keep a record of who has been involved and may be useful if you wish to repeat the self assessment in the future.

## Ongoing development of the self assessment tools

CHI is very keen to update and improve these tools on a regular basis. If you have any comments on structure, format or content we would be delighted to hear from you. Please email us at the following address: [pctselfassessment@chi.nhs.uk](mailto:pctselfassessment@chi.nhs.uk)



# Rating scales

## The six point rating scales

The generic description for each part of the two scales is shown below. It may help you to complete the ratings more easily if you keep this page visible while you complete the tool.

### To what extent is this statement met for your organisation?

	There are few, if any, examples where this is true, and there is no corporate approach to address this issue or plans to develop one.
<b>Slightly</b>	There are few, if any, examples where this is true, but a corporate approach is being developed, OR There are examples of this being addressed, but these are isolated and not part of corporate strategy.
<b>Somewhat</b>	There are increasing numbers of examples of this being addressed, and evidence of enthusiasm for development in teams delivering services, but corporate strategy is still being developed, OR A corporate approach has been developed, but with the exception of a few enthusiasts there has been little uptake on the ground.
<b>Substantially</b>	The issue is increasingly widely being addressed and is part of corporate policy. The area is still relatively new, and the methods for dealing with it have not yet been fully evaluated. Local and corporate behaviour is not always integrated.
<b>Strongly</b>	This issue is addressed widely through, though not throughout, the organisation and in corporate policy. The methods are now evaluated and mature and we increasingly look for further development and adaptation for specific services. This is increasingly seen by staff (and independent contractors) as 'part of the job'. Local and corporate behaviour is usually, though not always, integrated.
<b>Fully</b>	This is integral to what we do. Our staff (and independent contractors) recognise and are committed to the importance of the issue and it is always considered as part of the services we offer.

### How much influence do you have to improve this situation?

<b>None</b>	We have no influence. We are told what to do, how to do it and are performance managed on both results and adherence to prescribed process.
<b>Marginal</b>	We do not have corporate authority for this issue, and we have few channels of influence over those who could improve this situation.
<b>Some</b>	We have nominal corporate authority for this issue, but this is not universally recognised and individual parts of the organisation tend to follow their own agenda, OR We have no corporate authority for this issue, but we have channels to influence those who do.
<b>De facto</b>	We do not have corporate authority for this issue, but effectively we are able to influence most of what we do.
<b>Strong</b>	It is generally recognised that we have corporate authority for this issue. However, this is tempered by the need to negotiate practical solutions with individuals or teams who may exert significant influence.
<b>Full</b>	It is recognised that we have corporate authority for this issue and are able to ensure that improvements are implemented and monitored.



Primary care trusts  
Corporate management team  
The self assessment statements





# The self assessment statements

1

## Statement 1

**Managers and leaders (clinical and non clinical within the PCT and amongst independent contractors) understand and are taking forward the key clinical governance priorities within each service delivery area.**

### Guidance

Consider, for example:

- how have clinical governance issues been identified and negotiations handled?
- what are two way communications like between your team and your service delivery areas, and between service delivery areas? What are these like between the PCT and commissioned services and independent contractors?
- how well are your clinical governance plans supported by your business/local delivery and financial plans?
- how has this impacted on the work of all the trust board members, including those of the non executive directors, and members of the professional executive committee (PEC)?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

### To what extent is this statement met in your organisation?

Scarcely if at all	Slightly	Somewhat	Substantially		
--------------------	----------	----------	---------------	--	--

### How much influence do you have to improve this?

None		Some		Strong	
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# The self assessment statements

2

## Statement 2

**We are creating a dynamic culture; empowering staff and facilitating positive changes where required.**

### Guidance

Consider a recent example of significant cultural change within the organisation, for example: new ways of working; increased patient/staff involvement/empowerment, developing working relationships with commissioned services and independent contractors and think about:

- how did you recognise the need for change, and realise it was a cultural issue?
- how did you lead and manage the change?
- how did you involve staff and/or patients/service users/commissioned services/independent contractors?
- how did you ensure the change was sustained?
- what did you learn from the experience?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

**To what extent is this statement met in your organisation?**

Scarcely if at all		Somewhat		Strongly	Fully
--------------------	--	----------	--	----------	-------

**How much influence do you have to improve this?**

None		Some	De facto	Strong	Full
------	--	------	----------	--------	------



# The self assessment statements

3

## Statement 3

**Managers, clinical leaders and practitioners across the PCT are working well together and with our commissioned services and with independent contractors to lead all aspects of clinical governance.**

### Guidance

Consider, for example:

- how do you perceive the quality of manager/clinician working relationships?
- how do you perceive the quality of inter-organisational relationships e.g. primary and secondary care and relationships with social services?
- how much involvement do clinical practitioners have in management decision making that affects patient care?
- how much influence do managers have in decision making?
- how do you perceive the relationships with your commissioned services and independent contractors?
- what is the role of the professional executive committee (PEC) in influencing patient care?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

### To what extent is this statement met in your organisation?

Scarcely if at all				Strongly	Fully
--------------------	--	--	--	----------	-------

### How much influence do you have to improve this?

None			De facto	Strong	Full
------	--	--	----------	--------	------



# The self assessment statements

4

## Statement 4

**We have integrated all aspects of clinical governance across this organisation.**

### Guidance

Consider, for example:

- do all your clinical governance strategies and plans link together and are they coherent?
- are there areas where you have created links between different components, such as complaints/incidents, risk, competence, audit, and so on?
- how well is learning and good practice shared across your organisation and between other organisations? (including services commissioned by the PCT, contractor services and shared services)

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

### To what extent is this statement met in your organisation?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
--------------------	----------	----------	---------------	----------	-------

### How much influence do you have to improve this?

None	Some	Strong	Full
------	------	--------	------



## The self assessment statements

5

### Statement 5

**We use our clinical performance monitoring mechanisms to bring about improvements to the patient experience.**

#### Guidance

Consider all of the ways in which you make yourselves aware of your clinical performance, for example: assessment against internal or external targets; benchmarking in relation to other relevant organisations; the involvement of external bodies/organisations in helping the organisation monitor and review performance; trends in comments, complaints, incidents and litigation; feedback from staff and patients/service users.

- how have you used the results to make changes to services?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

### Overall organisational rating

#### To what extent is this statement met in your organisation?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
--------------------	----------	----------	---------------	----------	-------

#### How much influence do you have to improve this?

None	Some	Strong	Full
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# The self assessment statements

6

## Statement 6

**We know the extent to which all areas of our organisation and services for which we are responsible comply with mandatory clinical standards and requirements.**

### Guidance

Consider, for example:

- what is the range of clinical standards and requirements that will impact on your organisation, such as National Institute for Clinical Excellence (NICE) guidelines, national service frameworks (NSFs), high level performance indicators, other national clinical guidelines?
- how do you get information about relevant standards and requirements?
- how do you ensure that relevant parts of your organisation are aware of their responsibilities?
- how do you monitor ongoing compliance?
- how do you share information about your relevant standards and requirements with your commissioned services and independent contractors?
- how do you ensure that your commissioned services and independent contractors are complying with relevant standards and requirements?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

### To what extent is this statement met in your organisation?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
--------------------	----------	----------	---------------	----------	-------

### How much influence do you have to improve this?

None	Some	De facto	Strong	Full
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# The self assessment statements

7

## Statement 7

**Within this organisation we have a culture of open and honest reporting and management of any situation that may threaten the quality of the patient experience.**

### Guidance

Consider recent examples of situations that have actually or potentially compromised patient care, for example: clinical incidents; near misses; whistle blowing situations; complaints; breaches of privacy/confidentiality. Consider relatively minor or local issues as well as major incidents, since local problems may stay hidden but result in a greater cumulative impact on the organisation.

- how did such incidents come to light? How are you confident that incidents are always reported?
- what actions were taken in response, and what was done to ensure the whole organisation learnt?
- how do you share lessons learnt and actions with relevant commissioned services, shared services and independent contractors?
- how do you learn of relevant incidents that may occur in commissioned, shared and independent contractor services? What is done to work in partnership to identify risks and action changes as a result?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

### To what extent is this statement met in your organisation?

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
--------------------	----------	----------	---------------	----------	-------

### How much influence do you have to improve this?

None	Some	Strong	Full
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# The self assessment statements

8

## Statement 8

**We know the extent to which all our staff (clinical and non clinical and independent contractors) demonstrate competence and appropriate standards of performance.**

### Guidance

Consider, for example:

- how well do your performance management systems keep you informed about this, and are they effective in ensuring development needs are addressed?
- how good is your organisation at identifying competence issues? These might relate to changing service requirements such as new evidence, new techniques, or to individuals/teams such as length of time in post, introduction of new/extended roles, degree of autonomy/supervision

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

**To what extent is this statement met in your organisation?**

Scarcely if at all	Slightly	Somewhat	Substantially	Strongly	Fully
--------------------	----------	----------	---------------	----------	-------

**How much influence do you have to improve this?**

None		Some		Strong	Full
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## The self assessment statements

9

### Statement 9

Where our staff (and staff working in services for which we are responsible) are working in extended clinical roles, we have robust mechanisms to manage any additional risks to patients, staff and the organisation.

#### Guidance

Consider, for example:

- how much are you aware of the existence of these activities?
- how are such activities authorised by the trust board and professional executive committee (PEC), so that individuals and the organisation are indemnified?
- how are you assured about the robustness of protocols? How are the relevant risks assessed?
- how are you assured about the ongoing competence of the staff involved?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

### Overall organisational rating

#### To what extent is this statement met in your organisation?

Scarcely if at all				Strongly	Fully
--------------------	--	--	--	----------	-------

#### How much influence do you have to improve this?

None			De facto	Strong	Full
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# The self assessment statements

10

## Statement 10

**Our organisation works well with other relevant organisations in the planning, delivery and evaluation of patient care and in health improvement.**

### Guidance

Consider, for example:

- how do you assess the needs and characteristics of the local population when planning services?
- which organisations do you have to work with on a regular basis?
- what is your track record of working together like, and have you done anything to improve the quality of your working relationships?
- what examples do you have of shared processes such as in prevention and improving health, commissioning and training and development?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

### To what extent is this statement met in your organisation?

Scarcely if at all				Strongly	Fully
--------------------	--	--	--	----------	-------

### How much influence do you have to improve this?

None			De facto	Strong	Full
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# The self assessment statements

10

## Statement 11

**Our organisation has robust mechanisms to ensure the appropriateness and quality of commissioned services and to manage the associated risks.**

### Guidance

Consider, for example:

- do you know which organisations you commission from and what services?
- are commissioning mechanisms with other PCTs clear i.e. lead commissioning arrangements?
- what assessment have you made of the need for commissioned or other services and are you meeting those needs?
- how do you balance issues of choice, financial flows and needs of the population?
- how do you involve patients and the public in the commissioning process?
- how do you ensure that your commissioning mechanisms link in with your partners in social services and the voluntary sector (i.e. local strategic partnerships and local compact)?
- do you have clear agreements on the standards and quality of such services and are they met?
- do you have clear arrangements to manage and share risk with your commissioning partners?
- what is your track record of monitoring and performance managing these?

Use this space to record your discussions. You may find it helpful to think about areas of good practice and areas where progress is particularly needed.

## Overall organisational rating

### To what extent is this statement met in your organisation?

Scarcely if at all				Strongly	Fully
--------------------	--	--	--	----------	-------

### How much influence do you have to improve this?

None			De facto	Strong	Full
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## Key areas for action

### What three key areas for action have arisen from this self assessment?

It may help to identify your key areas for action by selecting the statements where the extent to which you meet the statement is low, and your influence to improve in this area is high.

Key area 1

Key area 2

Key area 3



## Participants

Do keep a note of the people who participated in this self assessment. This will be helpful information for your team if you carry out the self assessment again in the future.

Name

Position

Date completed:

Date to be reviewed:

Name of main lead:

Now that you have completed the self assessment, CHI would be very pleased to hear what you think so that we can continually update and improve the tool. Please email us at the following address:  
[pctselfassessment@chi.nhs.uk](mailto:pctselfassessment@chi.nhs.uk)