

# Document Control

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| <b>Approved By: Paediatric and ACHD RT&amp;FG's on behalf of the North West CHD Operational Delivery Network Board</b><br><b>Date: 24<sup>th</sup> February 2025</b>  |                    |   |   |
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# Self-Assessment Against NHSE Congenital Heart Disease National Standards (Standard Operating Procedure)

Date 24<sup>th</sup> February 2025



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## Purpose

The purpose of this Standard Operating Procedure (SOP) is to outline the approach that the North West, North Wales, and the Isle of Man Operational Delivery Network (NW CHD ODN) will take to regularly meet with CHD providers within its footprint to review progress against the delivery of nationally recognized CHD standards.

## Introduction

Congenital heart disease (CHD) is the most common type of congenital anomaly, affecting the normal functioning of the heart. The CHD National Standards, published by NHS England in 2016, ensure that individuals with CHD receive high-quality, sustainable care. These standards provide a comprehensive framework for effective assessment of the provision of treatment, and person-centred care across the entire patient pathway, including paediatric and adult services.

The key documents included in the CHD standards are:

1. **[Adult Congenital Heart Disease \(ACHD\) Specification](#)**
  - Adult CHD Standards: [Level 1 – Specialist ACHD Surgical Centres](#)
  - Adult CHD Standards: [Level 2 – Specialist ACHD Centres](#)
  - Adult CHD Standards: [Level 3 – Local ACHD Centres](#)
2. **[Paediatric Congenital Heart Disease Specification](#)**
  - Paediatric CHD Standards: [Level 1 – Specialist Children’s Surgical Centres](#)
  - Paediatric CHD Standards: [Level 2 – Specialist Children’s Cardiology Centres](#)
  - Paediatric CHD Standards: [Level 3 – Local Children’s Cardiology Centres](#)

To encompass the whole patient pathway each set of standards is subdivided into categories A to M outlined below:

- A. The Network Approach
- B. Staffing and skills
- C. Facilities
- D. Interdependencies
- E. Training and education
- F. Organisation, governance and audit
- G. Research
- H. Communication with patients
- I. Transition
- J. Pregnancy and contraception
- K. Fetal diagnosis
- L. Palliative care and bereavement
- M. Dental

## Self-Assessment of CHD Standards

The self-assessment process is led and coordinated by CHD networks and completed by CHD centres within their geographical boundaries. This process aims to evaluate the extent to which centres are delivering the CHD standards, highlight areas of excellence, identify gaps or concerns, and request necessary support from the network and commissioners.

Self-assessments follow a 3–5 year cycle for full assessments, with annual reviews of the agreed action plans. Objectives include updating progress, understanding key achievements and challenges, escalating risks, engaging between networks and local teams, raising awareness, and providing assurance on the delivery of CHD standards.

## Roles & Responsibilities

The roles and responsibilities of key stakeholder groups required for the self-assessment process are outlined in the table below.

| Group   | Role  | Responsibilities  |
|---|---|---|
| NW CHD ODN  | Lead and coordinate the self-assessment process | <ul style="list-style-type: none"> <li>• Organise self-assessment</li> <li>• produce reports</li> <li>• report findings</li> <li>• provide support</li> </ul>   |
| CHD Teams   | Team involved in the self-assessment process    | <ul style="list-style-type: none"> <li>• Complete self-assessment</li> <li>• attend self-assessment visit</li> <li>• present update on CHD service</li> <li>• develop and implement action plan</li> <li>• report progress</li> </ul> |
| Providers   | Support CHD centre team                         | <ul style="list-style-type: none"> <li>• Support delivery of standards</li> <li>• incorporate action plan into contracts</li> <li>• assist with implementation</li> </ul>   |
| Commissioners (WHSSC / NHS England / local commissioners) | Attend assessments and annual reviews           | <ul style="list-style-type: none"> <li>• Ensure action plans are included in contracts</li> <li>• Support ODN and local CHD teams to complete actions arising from the assessment process</li> </ul>                                  |

## Self-Assessment Process

It is recommended that the full self-assessment process is completed every 3-5 years, as agreed with commissioners with an annual review of the agreed action plans.

The key steps in the self-assessment process are outlined below:

### • Preparation and Initiation

- NW CHD ODN notifies centres of the self-assessment process and visit schedule.
- At least 12 weeks' notice should be given for the assessment review visit to make allowance for clinical commitments

### • Data Collection and Analysis

- Centres complete self-assessment and initial action plans using templates provided by the ODN.
- Centres assess service status against standards using the following RAG rating

|       |  |
|-------|--|
| Green | Standard is being fully delivered/no issue                       |
| Amber | Standard is partially delivered or plans in place to deliver     |
| Red   | Standard is not being delivered and no plans in place to deliver |
| N/A   | Standard is not for this organisation to deliver                 |

- NW CHD ODN can support centres to complete assessment if requested

### • Feedback and Action Plan

- NW CHD ODN will organise self-assessment visit with local CHD centre and commissioners.
- Centres present findings and proposed action plans.
- Agree on timelines for next steps.

| Organisation                | Representatives who should be present   |
|-----------------------------|---|
| NW CHD ODN                  | Lead Clinician (Lead Nurse and/or Clinical Director(s))<br>ODN Manager (Network manager / deputy)   |
| CHD centre / Acute provider | Clinical Lead<br>Consultant Paediatrician with Expertise in Cardiology/Consultant with Special Interest in ACHD<br>Operational Manager<br>Matron/Lead Nurse<br>Link Nurse for CHD (if in place) |
| Commissioners               | NHS England / WHSSC representative and/or<br>ICB / Health Board representative  |

## • Assurance and Reporting

- Centres finalise self-assessment and action plans post-visit and send final version to the Network and commissioners.
- Commissioners/providers incorporate action plans into provider contracts.
- NW CHD ODN produces overall progress report for review by centres, ODN Board and commissioners.

## • Review Cycle

- Annual review of action plans and progress updates.
- Full self-assessment every 3-5 years.

## Timeline of Key Events

The table below sets out an indicative timeline for key events in the self-assessment process. The initial full assessment will take approximately 17 weeks from initiation to the final documents being produced by the CHD centre.

| Action  | Timeline                           |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | Date (e.g.)              |
|---|------------------------------------|--------|--------|--------|--------|--------|--------|--------|---------|---------|---------|---------|---------|---------|---------|---------|--------------------------|
| Send letter to Centre   | Start                              |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | 24 <sup>th</sup> May 24  |
| Week 1  | Week 2                             | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 | Week 11 | Week 12 | Week 13 | Week 14 | Week 15 | Week 16 | Week 17 |                          |
| Centre acknowledges invite letter                                       | Within 1 week of receiving letter  |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | 31 <sup>st</sup> May 24  |
| Week 1  | Week 2                             | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 | Week 11 | Week 12 | Week 13 | Week 14 | Week 15 | Week 16 | Week 17 |                          |
| Centre returns self-assessment  | Within 9 weeks of receiving letter |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | 26 <sup>th</sup> Jul 24  |
| Week 1  | Week 2                             | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 | Week 11 | Week 12 | Week 13 | Week 14 | Week 15 | Week 16 | Week 17 |                          |
| Network returns self-assessment with pre-populated action plan template | Within 1 week of receipt           |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | 2 <sup>nd</sup> Aug 24   |
| Week 1  | Week 2                             | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 | Week 11 | Week 12 | Week 13 | Week 14 | Week 15 | Week 16 | Week 17 |                          |
| Centre completes action plan and prepares presentation for visit        | Prior to visit                     |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | 16 <sup>th</sup> Aug 24  |
| Week 1  | Week 2                             | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 | Week 11 | Week 12 | Week 13 | Week 14 | Week 15 | Week 16 | Week 17 |                          |
| Self-assessment visit   | 14 weeks after letter sent         |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | 30 <sup>th</sup> Aug 24  |
| Week 1  | Week 2                             | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 | Week 11 | Week 12 | Week 13 | Week 14 | Week 15 | Week 16 | Week 17 |                          |
| Final documents provided by centre to ODN and commissioners             | Within 2 weeks of visit            |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | 13 <sup>th</sup> Sept 24 |
| Week 1  | Week 2                             | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 10 | Week 11 | Week 12 | Week 13 | Week 14 | Week 15 | Week 16 | Week 17 |                          |
| Action plan included in contract  | Next contract review               |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | Apr 25                   |
| Annual review of action plan  | 12 months after visit              |        |        |        |        |        |        |        |         |         |         |         |         |         |         |         | Sept 25                  |