MANCHESTER UNIVERSITY NHS FOUNDATION TRUST

BOARD OF DIRECTORS

Report of:	Chief Operating Officer
Paper prepared by:	Rachel Bayley, Director of Performance and Resilience
Date of paper:	01 November 2017
Subject:	2016/17 CMFT & UHSM Emergency Preparedness Resilience and Response Core Standards Self-Assessment
Purpose of Report:	Indicate which by ✓ • Information to note ✓ • Support • Resolution • Approval
Consideration of Risk against Key Priorities	To achieve high standards of patient safety and clinical quality across the Trust demonstrated through performance outcome measures
Recommendations	To note the contents of the report
Contact:	Name: Rachel Bayley Tel: 0161 276 6718

2016/17 CMFT & UHSM Emergency Preparedness Resilience and Response Core Standards Self Assessment

1. Introduction

The purpose of this report is to provide the Board of Directors with the legacy organisations: CMFT and UHSM, self-assessments against the NHS England Core Standards for Emergency Preparedness Resilience and Response (EPRR).

Context

The NHSE EPRR Framework (Gateway ref: 04295) sets out the requirements of all NHS funded organisations in England to meet the requirements of the Civil Contingencies Act 2004. Under the CCA 2004 Acute Providers are a category 1 responder, which are recognised as being at the core of emergency response and are subject to the full set of civil protection duties including: risk assessment of emergencies, to have in place emergency plans and business continuity management arrangements and a requirement to share information and cooperate with other agencies.

The minimum requirements Acute Providers must meet are set out in the NHSE Core Standards for EPRR, which are in accordance with the CCA 2004 and the Health and Social Care Act 2012. In line with contractual requirements the Trust is required to provide annual assurance of compliance with the Core Standards, with a 2017/18 submission deadline of 31/10/17 comprising key documents of:

- Statement of compliance
- Associated action plan
- EPRR Core Standards Spreadsheet, which outlines the evidence and RAG rating against each individual standard.

There are a total of 60 standards, furthermore a deep dive was undertaken against the 6 EPRR Governance standards although these do not contribute towards the overall Trust compliance level. The compliance period is based on 2016/17; therefore two separate declarations have been made for the legacy organisations of CMFT and UHSM. There are 4 levels of compliance:

Full	Substantial	Partial	Non-Compliant
Compliant with **all** standards	**1-5** standards Non-compliant	**6-10** standards Non-compliant	**11** or more standards Non-compliant

2. Compliance

CMFT - the legacy organisation of CMFT has declared a compliance level of **substantial**, this is the same level of compliance as in 2016/17.

UHSM - the legacy organisation of UHSM has declared a compliance level of **Partial**, this is the same level of compliance as in 2016/17.

The full statements of compliance have been provided in Appendix A and B.

3. Next Steps

The EPRR Core Standards declarations will form the basis of the integration plan for MFT, and both Emergency Planning teams are working collaboratively to provide mutual support and expertise. Progress against both action plans will be monitored through the Trust Emergency Planning Steering Committee, with external oversight provided through the Local Health Economy Resilience Groups.

The Board of Directors are asked to note the contents of the report.

Appendix A – CMFT

2017-18 Emergency Preparedness, Resilience and Response (EPRR) Assurance

STATEMENT OF COMPLIANCE

CMFT has undertaken a self-assessment against the NHS England Core Standards for EPRR (v5.0).

After self-assessment, and in line with the definitions of compliance stated below, the organisation declares itself as demonstrating the following level of compliance against the 2017-18 standards: **Substantial**

Compliance Level	Evaluation and Testing Conclusion
Full	Arrangements are in place that appropriately address **all** the Core Standards that the organisation is expected to achieve. The Board has agreed with this position statement.
Substantial	Arrangements are in place, however, they do not appropriately address **one to five** of the Core Standards that the organisation is expected to achieve. A work plan is in place that the Board has agreed.
Partial	Arrangements are in place, however, they do not appropriately address **six to ten** of the Core Standards that the organisation is expected to achieve. A work plan is in place that the Board has agreed.
Non-compliant*	Arrangements are in place, however, they do not appropriately address **eleven or more** of the Core Standards that the organisation is expected to achieve. A work plan has been agreed by the Board and will be monitored on a quarterly basis in order to demonstrate future compliance.

**Should an organisation be non-compliant the LHRP will regularly monitor progress throughout the year until it has attained an agreed level of compliance*

The self-assessment results were as follows:

Number of applicable standards	Standards rated as **Red**[1]	Standards rated as **Amber**[2]	Standards rated as **Green**[3]
60	0	3	57
Acute providers: **60**** Specialist providers: **51**** Community providers: **50**** Mental health providers: **48**** CCGs: **38**	*[1] Not compliant with Core Standard and not in the EPRR Work Plan within the next 12 months*	*[2]Not compliant but evidence of progress and in the EPRR Work Plan for the next 12 months*	*[3]Fully compliant with Core Standard*

Includes **HAZMAT/CBRN standards** applicable to providers i.e. Acutes **14**; Specialist, Community, Mental health **7

Where areas require further action, this is detailed in the attached *EPRR Work Plan* and will be reviewed in line with the organisation's governance arrangements.

I confirm that the above level of compliance with the EPRR Core Standards has been confirmed to the organisation's board / governing body.

Julia Bridgewater

Signed by the organisation's Accountable Emergency Officer

08/01/2018	31/10/2017
Date of board / governing body meeting	*Date signed*

Appendix B – UHSM

2017-18 Emergency Preparedness, Resilience and Response (EPRR) Assurance

STATEMENT OF COMPLIANCE

Manchester University Foundation Trust (Wythenshawe Site – UHSM as was) has undertaken a self-assessment against the NHS England Core Standards for EPRR (v5.0).

After self-assessment, and in line with the definitions of compliance stated below, the organisation declares itself as demonstrating the following level of compliance against the 2017-18 standards: **Partial**

Compliance Level	Evaluation and Testing Conclusion
Full	Arrangements are in place that appropriately address **all** the Core Standards that the organisation is expected to achieve. The Board has agreed with this position statement.
Substantial	Arrangements are in place, however, they do not appropriately address **one to five** of the Core Standards that the organisation is expected to achieve. A work plan is in place that the Board has agreed.
Partial	Arrangements are in place, however, they do not appropriately address **six to ten** of the Core Standards that the organisation is expected to achieve. A work plan is in place that the Board has agreed.
Non-compliant*	Arrangements are in place, however, they do not appropriately address **eleven or more** of the Core Standards that the organisation is expected to achieve. A work plan has been agreed by the Board and will be monitored on a quarterly basis in order to demonstrate future compliance.

**Should an organisation be non-compliant the LHRP will regularly monitor progress throughout the year until it has attained an agreed level of compliance*

The self-assessment results were as follows:

Number of applicable standards	Standards rated as **Red**[1]	Standards rated as **Amber**[2]	Standards rated as **Green**[3]
Choose total below	3	6	51
Acute providers: **60**** Specialist providers: **51**** Community providers: **50**** Mental health providers: **48**** CCGs: **38**	*[1] Not compliant with Core Standard and not in the EPRR Work Plan within the next 12 months*	*[2]Not compliant but evidence of progress and in the EPRR Work Plan for the next 12 months*	*[3]Fully compliant with Core Standard*

Includes **HAZMAT/CBRN standards** applicable to providers i.e. Acutes **14**; Specialist, Community, Mental health **7

Where areas require further action, this is detailed in the attached *EPRR Work Plan* and will be reviewed in line with the organisation's governance arrangements.

I confirm that the above level of compliance with the EPRR Core Standards has been confirmed to the organisation's board / governing body.

(Jayne Wood) (Julia Bridgewater)

Signed by the organisation's Accountable Emergency Officer

11/12/2017	07/11/2017
Date of board / governing body meeting	*Date signed*