

**Clinical Commissioning Group (CCG) Governing Body 2019/2020 – Part 1**

<b>Date of Meeting:</b>	17 January 2020
<b>Agenda Item:</b>	2.1
<b>Subject:</b>	Emergency Preparedness, Resilience & Response (EPRR) core standards assurance 2019/20
<b>Reporting Officer:</b>	Karen Hurley (Author: Andrew Bidolak)
<b>Aim of Paper:</b>	To update Governing Body on the compliance level of HMR CCG following the 2019/20 EPRR core standards assurance process

Governance route prior to Governing Body	Meeting Date	Objective/Outcome
Governing Body	Select date of meeting.	Click to Select
Audit Committee	Select date of meeting.	Click to Select
Corporate Governance Committee	Select date of meeting.	Click to Select
Health and Wellbeing Board	Select date of meeting.	Click to Select
Integrated Commissioning Board	Select date of meeting.	Click to Select
Locality Engagement Group	Select date of meeting.	Click to Select
Patient and Public Engagement Committee	Select date of meeting.	Click to Select
Quality and Safeguarding Committee	Select date of meeting.	Click to Select
Remuneration Committee	Select date of meeting.	Click to Select
Clinical and Professional Advisory Panel	Select date of meeting.	Click to Select
System Transformation Committee	Select date of meeting.	Click to Select
Primary Care Commissioning Committee	Select date of meeting.	Click to Select
Other	Click here to enter text.	

<b>Governing Body Resolution Required:</b>	Approval/Decision
<b>Recommendation</b>	Governing Body is requested to note the Core Standards assurance process and the outcome of the EPRR self-assessment for HMR CCG.

Link to Strategic Objectives	Contributes to: (Select Yes or No)
<b>SO1:</b> To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population.	Yes
<b>SO2:</b> To deliver on the outcomes of the Locality Plan in respect of <b>Prevention and Access</b> (Prevention and Self Care)	Yes
<b>SO3:</b> To deliver on the outcomes of the Locality Plan in respect of <b>Neighbourhoods &amp; Primary Care</b> (Getting help in the Community)	Yes
<b>SO4:</b> To deliver on the outcomes of the Locality Plan in respect of <b>In Hospital - Planned</b> (Getting more help)	Yes
<b>SO5:</b> To deliver on the outcomes of the Locality Plan in respect of <b>In Hospital - Urgent Care</b> (Getting more help)	Yes
<b>SO6:</b> To deliver on the outcomes of the Locality Plan in respect of <b>Children, young people and families</b>	Yes
<b>SO7:</b> To deliver on the outcomes of the Locality Plan in respect of <b>Mental Health</b>	Yes

<b>Risk Level:</b> (To be reviewed in line with Risk Policy)	Not Applicable
<b>Comments</b> (Document should detail how the risk will be mitigated)	Click here to enter text.

<b>Content Approval/Sign Off:</b>	
<b>The contents of this paper have been reviewed and approved by:</b>	Director of Operations / Executive Nurse, Karen Hurley
<b>Clinical Content signed off by:</b>	Not applicable
<b>Financial content signed off by:</b>	Not Applicable

	<b>Completed:</b>
Clinical Engagement taken place	Not Applicable
Patient and Public Involvement	Not Applicable
Patient Data Impact Assessment	Not Applicable
Equality Analysis / Human Rights Assessment completed	Not Applicable

## Executive Summary

### 1. Introduction

The 2019/20 EPRR Core Standards were issued in July 2019. As in previous years, the assurance process requires NHS organisations to undertake a self-assessment against applicable standards. Within GM, the assurance process is once again being coordinated by the Greater Manchester Shared Services (GMSS) Resilience Team.

NHS commissioners and providers within GM were required to undertake a self-assessment by the 31 October 2019. Following self-assessment, GM NHS providers were expected to share their self-assessment tool – including, if applicable, an action plan – with the GMSS Resilience Team so that outcomes could be collated and reported to the appropriate NHS commissioner(s).

The 2019/20 assurance process requires an organisation's Accountable Emergency Officer (AEO) to confirm the organisation's overall assurance rating has been/will be:

- signed off by the governing body/senior management team
- presented at a public Board meeting and
- published in the organisation's annual report.

This paper seeks to address the requirement to gain sign off by the governing body. The requirements to present the assurance rating at a public Board meeting and to publish it within the annual report will be addressed in due course.

### 2. CCG overall compliance

For Heywood, Middleton and Rochdale (HMR) CCG, the self-assessment outcome indicates a '**substantial**' level of compliance, which corresponds to the organisation being **88-99% compliant** with the Core Standards it is expected to achieve.

For CCGs, there are 43 applicable standards. HMR CCG is rated as 'green' (fully compliant) against 42 standards and 'amber' (not compliant but with an action plan to achieve full compliance in the next 12 months) against 1 standard.

HMR CCG is rated as amber for the following standard:

**Standard 27** (EPRR exercising and testing) – a health economy exercise is overdue but planning is underway for an exercise – some of the uncertainties associated with EU exit have limited the scope for the intended delivery of an exercise in November 2019.

### 3. Provider Core Standards self-assessment

Collation of the self-assessment tools for NHS provider organisations within the HMR health economy indicates organisations have declared either '**substantial**' or '**partial**' compliance against the standards they are expected to achieve.

The table below provides a breakdown of the number of standards rated as 'amber' or 'red' by each provider:

NHS provider	Overall assessment	Rated 'P'	Rated 'N'
Northern Care Alliance: Pennine Acute	Substantial compliance	1	0
Pennine Care Foundation Trust	Partial compliance	10	0

**Key:** 'P' = number of standards rated 'Partially compliant' / 'N' = number of standards rated 'Non-compliant'

### 4. Oversight and scrutiny of Core Standards assurance/action plans

The Greater Manchester position for this year's assurance process, that included the overall rating for HMR CGG, was reported at the meeting of GM Local Health Resilience Partnership (LHRP) on 3 December 2019. This reporting forms part of the regional 'confirm and challenge' process being implemented by NHS North. HMR CCG's Director of Operations and Executive Nurse attended this meeting.

Organisations that have an overall assurance rating of less than 100% are expected to progress action plans for those standards they have self-assessed themselves as being less than fully compliant with.

Monitoring of the Core Standards action plans for NHS organisations in the HMR health economy will be undertaken through the North East Sector Health Economy Resilience Group (HERG), which is chaired by the HMR CCG's Director of Operations and Executive Nurse.

**Andrew Bidolak, Senior Resilience Manager**