

Item 2.7c Cheshire & Merseyside EPRR Core Standards Improvement Plan 2017-18

Organisation: Liverpool Heart and Chest Hospital

ACTIONS AND PROGRESS FROM 2016 / 2017

Core standard reference	Core standard description	Improvement required to achieve compliance	Action to deliver improvement	Update on progress since last year
	Nil			

Add further rows as required

ACTIONS ARISING FROM 2017 / 2018 ASSURANCE PROCESS

Core standard reference	Core standard description	Improvement required to achieve compliance	Action to deliver improvement	Deadline
DD2	The organisation has published the results of the 2016/17 NHS EPRR assurance process in their annual report.	To publish the results in 2017/18 Annual report	To meet with the team compiling the annual report to ensure EPRR assurance is included	31 st March 2018
DD3	The organisation has an identified, active Non-executive Director/Governing Body Representative who formally holds the EPRR portfolio for the organisation.	EPRR assurance to be discussed in the Board of Director meetings which are attended by Non Executive Directors.	The organisation prefers to bring the annual statement of the processes used to declare compliance against the EPRR standards once per year. EPRR assurance to be discussed in the Board of Director meetings which are attended by Non Executive Directors.	31 st March 2018
DD6	The organisations accountable emergency officer regularly	Accountable Emergency Officer to attend LHRP strategic meetings	Wherever possible the Accountable Emergency Officer will attend the LHRP	31 st March 2018

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	attends the LHRP meetings		meetings. Some difficulty encountered in 2016/17 due to diary clashes with Executive meetings	

Add further rows as required

Please attach a copy of the responses to the governance deep dive standards