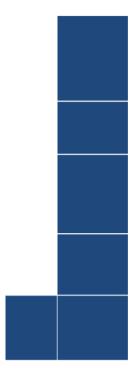
# **Standards Self Review Tool** By completing this Security Management Self Review Tool and Work Plan as Security Management Director I declare that the security management provision completed during the financial year 2012/13 has been self reviewed against the NHS Protect standards and that the levels detailed here have been achieved. The Security Management Self Review Tool and work plan must be returned to securitymanagementqa@nhsprotect.gsi.gov.uk by the Security Management Director or, if this is not possible, they must be copied into the email with the document. Only if this is done will it be regarded as being provided with the appropriate level of assurance and signed off by the organisation. Please complete this sheet in as much detail as possible. To 'Select from list', click on the relevant field, then click on the arrow button, which will reveal a drop down menu. Staff headcount including contracted employees Total days used for security management Cost of security management staffing Cost of security equipment (including physical systems) Organisation code Region (select from list) Organisation/provider type (select from list) If other please state organisation type: STRATEGIC GOVERNANCE

Select Level

Comment

Standard



		GREEN	
		STRATEGIC GOVERNANC	E LEVEL
1.5	The organisation has a security management strategy aligned to NHS Protect's strategy. The strategy has been approved by the executive body or senior management team and is reviewed, evaluated and updated as required.	, Green	
	The organisation reports annually to its board on how it has met the standards set by NHS Protect in relation to security management, and its local priorities as identified in its work plan.	Green	
	The organisation allocates resources and investment to security management in line with its identified risks.	Green	
	The organisation employs or contracts in a qualified person to undertake the full range of security management work.	Green	
1.1	A member of the executive board is responsible for overseeing and providing strategic management and support for all security management work within the organisation.	Green	

### OVERALL LEVEL

1

High<br/>0Medium<br/>0Low<br/>5

: GREEN

Note: If Q1.2 is "Red" then this will be "Red" regardless of the rating here

		Red	<u>Amber</u>	Green
GREEN		0	0	1
GREEN		0	0	1
GREEN		0	0	1
GREEN		0	0	1
		0	0	4
		4		
	0	0		
	0	0		
	1	1		
	1			
	GREEN GREEN	GREEN GREEN GREEN 0 0	GREEN 0 GREEN 0 GREEN 0 GREEN 0 0 4 0 0 1 1	GREEN 0 0 0 GREEN 0 0 0 GREEN 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

## **Standards Self Review Tool**

Please complete this sheet in as much detail as possible.

To 'Select from list', click on the relevant field, then click on the arrow button, which will reveal a drop down menu.

#### INFORM & INVOLVE Standard Select Level Comment 2.1 The organisation undertakes risk assessments in relation to: a) protecting NHS staff and patients b) security of premises c) protecting property and assets d) security preparedness and resilience. The organisation uses its identified risks to Green develop inclusive policies in respect of the above (a-d) and can demonstrate implementation of these policies. The policies are monitored, reviewed and communicated across the organisation. 2.2 Local memorandums of understanding, concordats and agreements are in place with the police and the Crown Prosecution Service Green (CPS) to help protect and secure NHS staff, premises, property and assets. This can be evidenced. 2.3 The organisation participates in all national and local publicity initiatives, as required by NHS Green Protect, to raise security awareness.



0	0	1
0	0	1

Red Amber Green

0 0 1

2.4	The organisation demonstrates effective communication between risk management, capital projects management, estates, security management and external agencies to discuss security weaknesses and to agree a response.	Green	
2.5	All new staff, permanent and temporary, receive information about security measures and security management. Staff induction programmes include a security management component and learning outcomes can be evidenced.	Green	
	All staff know how to report a violent incident, theft, criminal damage or security breach. Their knowledge and understanding in this area is regularly checked and improvements in staff training are made where necessary.	Green	
2.7	All staff who have been a victim of a violent incident have access to support services should they require it.	Green	

- 0 0 1
- 0 0 1
- 0 0
- 0 0 1
- Red 0 Amber Green 0

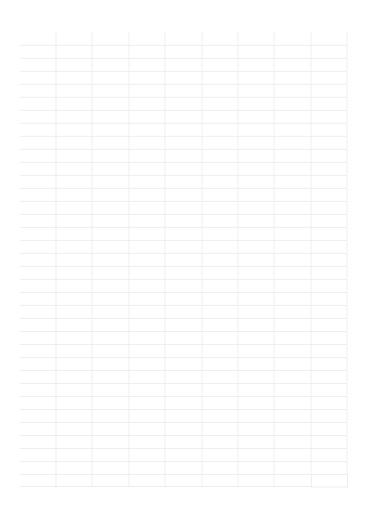
### <u>Calculation of risk</u> Max value:

7 0 0 0 0 1 1 HIGH MEDIUM LOW

1 Risk

#### GREEN

Note: If Q1.2 is "Red" then this will be "Red" regardless of the rating here



### **Standards Self Review Tool**

Please complete this sheet in as much detail as possible.
To 'Select from list', click on the relevant field, then click on the arrow button, which will reveal a drop down menu.

#### PREVENT & DETER Standard Select Level Comment 3.1 The organisation provides prevention of violence training or conflict resolution training (CRT) to all its front line staff in accordance with NHS Green Protect's guidance. The training is monitored. reviewed and evaluated. 3.2 The organisation has arrangements in place for post incident' learning in relation to a) security breaches/incidents b) acts of violence c) thefts d) Green criminal damage and a mechanism for feeding this back into the development of policies. 3.30000 The organisation issues national and regional NHS Protect alerts to relevant staff and action is taken to raise awareness of security risks and incidents. Green The process is controlled, monitored reviewed and evaluated. 3 40000 The organisation ensures that the provision of a secure environment is a key criterion for any new build projects, or the modification and alteration Green (e.g. refurbishment or refitting) of existing premises. The organisation has arrangements in place to manage access and control the movement of Green people within its premises, buildings and any associated grounds. 3.6 The organisation has systems in place to protect its assets from the point of procurement to the Green point of decommissioning or disposal. The organisation has clear policies and procedures in place for the security of medicines and Green controlled drugs (CDs). 3.800000he organisation operates a corporate asset Green register for assets worth £5,000 or more. The organisation has in place departmental asset registers and records for assets worth less than Green £5,000. 3.10 Staff and patients have access to safe and secure facilities for the storage of their personal Green property. 3.11 The organisation maintains a detailed record of security incidents affecting its property and assets that involve theft and/or criminal damage and this Green is used to help inform security management priorities.

<u>High</u>	<u>Medium</u>	Low		
0	0	1		
0	0	1		
0	0	1		
0	0	1		

	The organisation takes a risk-based approach to identifying and protecting its critical assets and infrastructure. This is embedded in policy and can be evidenced.	Green	
Ĭ	In the event of an increased security threat level, the organisation is able to increase its security resources and responses.	Green	
	The organisation has in place suitable lockdown arrangements for each of its sites, or for other specific buildings/areas of priority.	Green	
	Where applicable, the organisation has clear policies and procedures in place in relation to preventing a potential child or infant abduction, and these are regularly tested, monitored and reviewed.	Green	
	PRE	VENT & DETER	LEVEL

0	0	1
0	0	1
0	0	1
0	0	1

<u>High</u>	<u>Medium</u>	Low
0	0	15

#### Calculation of risk

 Max value:
 15

 HIGH
 0
 0

 MEDIUM
 0
 0

 LOW
 1
 1

 Risk
 1

#### 1

#### Note: If Q1.2 is "Red" then this

GREEN

will be "Red" regardless of the rating here

### **Standards Self Review Tool**



Please complete this sheet in as much detail as possible.

To 'Select from list', click on the relevant field, then click on the arrow button, which will reveal a drop down menu.

#### HOLD TO ACCOUNT Standard Select Level Comment 4.1 The organisation is committed to applying all appropriate sanctions against those responsible Green for acts of violence, security breaches, theft and criminal damage. 4.2 The organisation has arrangements in place to ensure that allegations of violence, theft and criminal damage are investigated in a timely and Green proportionate manner and these arrangements are monitored, reviewed and evaluated. 4.3 Where appropriate, the organisation publicises successful prosecutions of cases relating to a) denying unnecessary access to premises b) the Green consequences of assaulting NHS staff c) breaching the security of NHS premises and property d) acts of theft and criminal damage. 4.4 The organisation has a clear policy on the recovery of financial losses incurred due to theft of, or Green criminal damage to, its assets and can demonstrate its effectiveness.

### **HOLD TO ACCOUNT LEVEL**

<u>High</u>	Medium	Low
0	0	1
0	0	1
0	0	1
0	0	1
<u>High</u>	<u>Medium</u>	Low

#### $\underline{\text{Calculation of risk}}$

0

0

4

 Max value:
 4

 HIGH
 0
 0

 MEDIUM
 0
 0

 LOW
 1
 1

 Risk
 1

### GREEN

Note: If Q1.2 is "Red" then this will be "Red" regardless of the

Note: If Q1.2 is "Red" then this

	Socurit	v Management Work Plan for		<date></date>			
	3ecunt.	y Management Work Plantol	tes	Completed Date	Days/Time Allocated	Actual Days	0
		STRATEGIC GOVERNANCE		<u>'</u>	•		Green
overseeing a and support	nd providing strategic management for all security management work						
1.2 The organisa qualified per	ition employs or contracts in a son to undertake the full range of						Amber
1.3 The organisa investment t	ition allocates resources and o security management in line with it	s					Red Not Appl
how it has m relation to se	net the standards set by NHS Protect in ecurity management, and its local						
strategy alig strategy has or senior ma	ned to NHS Protect's strategy. The been approved by the executive body nagement team and is reviewed,						
		INFORM & INVOLVE					
relation to: a security of p assets d) sec The organisa inclusive pol can demons The policies	a) protecting NHS staff and patients b) remises c) protecting property and urity preparedness and resilience. Ition uses its identified risks to develogicies in respect of the above (a-d) and trate implementation of these policies are monitored, reviewed and						
	overseeing a and support within the or and support within the or 1.2 The organisa qualified per security mar 1.3 The organisa investment to identified ris 1.4 The organisa how it has more relation to see priorities as 1.5 The organisa strategy alignstrategy has or senior man evaluated ar 1.5 The organisa or senior man evaluated ar 1.5 The organisa relation to: a security of phassets d) security of phase d) security of phassets d) security of phase d) s	<ul> <li>1.1 A member of the executive board is responsible for overseeing and providing strategic management and support for all security management work within the organisation.</li> <li>1.2 The organisation employs or contracts in a qualified person to undertake the full range of security management work.</li> <li>1.3 The organisation allocates resources and investment to security management in line with it identified risks.</li> <li>1.4 The organisation reports annually to its board on how it has met the standards set by NHS Protect in relation to security management, and its local priorities as identified in its work plan.</li> <li>1.5 The organisation has a security management strategy aligned to NHS Protect's strategy. The strategy has been approved by the executive body or senior management team and is reviewed, evaluated and updated as required.</li> <li>2.1 The organisation undertakes risk assessments in relation to: a) protecting NHS staff and patients b) security of premises c) protecting property and assets d) security preparedness and resilience. The organisation uses its identified risks to develouinclusive policies in respect of the above (a-d) and</li> </ul>	1.1 A member of the executive board is responsible for overseeing and providing strategic management and support for all security management work within the organisation.  1.2 The organisation employs or contracts in a qualified person to undertake the full range of security management work.  1.3 The organisation allocates resources and investment to security management in line with its identified risks.  1.4 The organisation reports annually to its board on how it has met the standards set by NHS Protect in relation to security management, and its local priorities as identified in its work plan.  1.5 The organisation has a security management strategy aligned to NHS Protect's strategy. 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The organisation uses its identified risks to develop inclusive policies in respect of the above (a-d) and can demonstrate implementation of these policies The policies are monitored, reviewed and	Security Management Work Plan for  tes Completed Date  STRATEGIC GOVERNANCE  1.1 A member of the executive board is responsible for overseeing and providing strategic management and support for all security management work within the organisation.  1.2 The organisation employs or contracts in a qualified person to undertake the full range of security management work.  1.3 The organisation reports annually to its board on how it has met the standards set by NHS Protect in relation to security management, and its local priorities as identified in its work plan.  1.5 The organisation near security management strategy aligned to NHS Protect's strategy. The strategy has been approved by the executive body or senior management team and is reviewed, evaluated and updated as required.  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	2.2	Local memorandums of understanding, concordats			
	2.2				
		and agreements are in place with the police and			
		the Crown Prosecution Service (CPS) to help			
		protect and secure NHS staff, premises, property			
		and assets. This can be evidenced.			
Green					
	2.3	The organisation participates in all national and			
		local publicity initiatives, as required by NHS			
Green		Protect, to raise security awareness.			
Green	2.4	The organisation demonstrates effective			
	2.4	communication between risk management, capital			
		projects management, estates, security			
		management and external agencies to discuss			
Green		security weaknesses and to agree a response.			
	2.5	All new staff, permanent and temporary, receive			
		information about security measures and security			
		management.			
		Staff induction programmes include a security			
		management component and learning outcomes			
		can be evidenced.			
Green					
	2.6	All staff know how to report a violent incident,			
		theft, criminal damage or security breach. Their			
		knowledge and understanding in this area is			
		regularly checked and improvements in staff			
		training are made where necessary.			
Green					
3.3311	2.7	All staff who have been a victim of a violent			
		incident have access to support services should			
		they require it.			
Green		and, require it.			
			PREVENT & DETER		
	3.1	The organisation provides prevention of violence			
		training or conflict resolution training (CRT) to all			
		its front line staff in accordance with NHS Protect's			
		guidance. The training is monitored, reviewed and			
		evaluated.			

	The organisation has arrangements in place for 'post incident' learning in relation to a) security breaches/incidents b) acts of violence c) thefts d) criminal damage and a mechanism for feeding this back into the development of policies.			
3.3000	Othe organisation issues national and regional NHS Protect alerts to relevant staff and action is taken to raise awareness of security risks and incidents. The process is controlled, monitored reviewed and evaluated.			
3. 4000	Othe organisation ensures that the provision of a secure environment is a key criterion for any new build projects, or the modification and alteration (e.g. refurbishment or refitting) of existing premises.			
3.5	The organisation has arrangements in place to manage access and control the movement of people within its premises, buildings and any associated grounds.			
3.6	The organisation has systems in place to protect its assets from the point of procurement to the point of decommissioning or disposal.			
3.7	The organisation has clear policies and procedures in place for the security of medicines and controlled drugs (CDs).			
3.8000	Othe organisation operates a corporate asset register for assets worth £5,000 or more.			
3.9	The organisation has in place departmental asset registers and records for assets worth less than £5,000.			
	Staff and patients have access to safe and secure facilities for the storage of their personal property.			
3.1:	The organisation maintains a detailed record of security incidents affecting its property and assets that involve theft and/or criminal damage and this is used to help inform security management priorities.			

3.12 The organisation takes a risk-based approach identifying and protecting its critical assets an infrastructure. This is embedded in policy and be evidenced.	d can		
3.13 In the event of an increased security threat le the organisation is able to increase its securit resources and responses.	У		
3.14 The organisation has in place suitable lockdow arrangements for each of its sites, or for othe specific buildings/areas of priority.			
3.15 Where applicable, the organisation has clear policies and procedures in place in relation to preventing a potential child or infant abductic and these are regularly tested, monitored and reviewed.	on, i		
	HOLD TO ACCOUNT		
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4.4 The organisation has a clear policy on the reco of financial losses incurred due to theft of, or criminal damage to, its assets and can demonstrate its effectiveness.	overy		
Cignature of the least security was a	n and	Date	
Signature of the local security manager specialist:	nent	Date:	
Print name:			

Signature of the director with responsibility for	Date:		
security management:			

Risk (3 selections)	Risk (2 selections)	Risk (2 selection
Green	Green	Green
Amber	Amber	Red
Red	Red	
Not Applicable		
Region	Org type	
North East	Special Health Author	ity
North West	Community Care Trus	t
South East	Acute	
South West	Ambulance	
Eastern	Care Trust	
West Midlands	Mental Health	
East Midlands		
London		