

Board of Directors' Meeting Report – 4 September 2018

Agenda item 56/18a

Title	Emergency Preparedness, Resilience and Response (EPRR) Core Standards 2018/19 Self-Assessment
Sponsoring Director	Yvonne Blucher – Managing Director
Author(s)	Paul Hepworth, Emergency Planning Officer
Purpose	To give assurance against EPRR Core Standards for 2018/19 to NHS England and provide a framework for the Trust to plan for operational resilience to deliver services to patients throughout the year.
Executive Summary	
EPRR is defined by a series of statutory responsibilities under the Civil Contingencies Act 2004. The Health and social Care Act (2012) also requires NHS Funded Organisations to maintain robust capabilities to plan for, and respond to incidents or emergencies that could impact on health or services to patients.	
Related Trust Objective	Excellent Patient Outcomes Excellent Patient Experience Engaged and Valued Staff Financial and Operational Sustainability – Financial, Operational, Estate
Related Risk	All BAF Risks
Legal implications / regulatory requirements	Statutory Requirement
Quality impact assessment	N/A
Equality impact assessment	As far as can be ascertained this paper has no detrimental impact for the 9 protected characteristics under the Equality Act 2010.
Recommendations:	
The Board is asked to approve the 'Declaration' supported by the Self-Assessment which states that the Trust's overall level of compliance against the NHS England Core Standards for EPRR is Substantial. This means that the Trust has an effective emergency planning framework and programme in place.	

REPORT TO: Board of Directors

DATE: 4th September 2018

SUBJECT: Letter of Declaration and Self-Assessment against the NHS Core Standards for Emergency Preparedness, Resilience and Response (EPRR)

REPORT FROM: Emergency Planning and Liaison Officer

PURPOSE: Approval

EPRR is defined by a series of statutory responsibilities under the Civil Contingencies Act (2004) and the Health and Social Care Act (2012), which requires NHS, funded organisations to maintain robust capabilities to plan for, and respond to incidents or emergencies that could impact on health or services to patients.

The Civil Contingencies Act 2004 delivers a legislative framework for the provision of civil protection in the United Kingdom, ensuring consistency of planning, whilst setting clear responsibilities for frontline responders for responding and recovering from incidents.

It is a requirement of NHS funded organisations to annually complete a self-assessment against the NHS Core Standards for EPRR, along with an additional section on a specific aspect in order for HNS England to carry out a deep dive exercise.

This year's deep dive sections are:

- Incident Coordination Centres
- Command structures

The deep dive results are separate and are not included in the overall organisational compliance rating.

Organisational are expected to state an overall assurance rating as to whether they are Fully, Substantially, Partially or Non-Compliant with the NHS ERPP Core Standards.

Compliance Level	Evaluation and Testing Conclusion
Full	Arrangements are in place that appropriately addresses 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 in place do not appropriately address 11 or more 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.

Acute health providers should calculate their overall organisation compliance level by using the 'EPRR Core Standards' and Hazardous Materials (HAZMAT) Chemical, Biological, Radiological Nuclear and explosive (CBRNe) Core Standards' tabs together (standards 1-66 as a single rating).

The separate Hazmat CBRNe section of the audit is around equipment held by the organisation, and the specific requirements, all of which we are fully compliant

The Core standards self-assessment is divided into the following:

Core Standards	Total standards applicable	Fully compliant	Partially compliant	Non compliant
Governance	6	6	0	0
Duty to risk assess	2	2	0	0
Duty to maintain plans	14	14	0	0
Command and control	2	2	0	0
Training and exercising	3	3	0	0
Response	7	7	0	0
Warning and informing	3	3	0	0
Cooperation	4	4	0	0
Business Continuity	9	8	1	0
CBRN	14	14	0	0
Total	64	63	1	0

Deep Dive	Total standards applicable	Fully compliant	Partially compliant	Non compliant
Incident Coordination Centres	4	4	0	0
Command structures	4	4	0	0
Total	8	8	0	0

EPRR Core Standards Compliance

Overall assessment:	Substantially compliant
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Recommendations

The Trust Board is asked to approve:

- The level of EPRR assurance achieved
- The results of the self-assessment
- The on-going action plan working towards full assurance

Signed

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Clive Walsh, Accountable Emergency Officer

Appendix 1, Action Plan

Ref	Domain	Standard	Detail	Evidence - examples listed below	Self assessment RAG Red = Not compliant with core standard. In line with the organisation's EPRR work programme, compliance will not be reached within the next 12 months. Amber = Not compliant with core standard. The organisation's EPRR work programme demonstrates an action plan to achieve full compliance within the next 12 months. Green = Fully compliant with core standard.	Action to be taken	Lead	Timescale			
55	Business Continuity	Assurance of commissioned providers/suppliers BCPs	The organisation has in place a system to assess the business continuity plans of commissioned providers or suppliers; and are assured that these providers arrangements work with their own.	Questionnaires for suppliers, BCP under construction by Percument	Amber	Procurement are in the process of sending questionnaires to the organisations top 100 suppliers	Paul Hepworth EPLO	Jan-19	<ul style="list-style-type: none"> EPRR policy document or stand alone Business continuity policy Provider/supplier assurance framework Provider/supplier business continuity arrangements 	Partially compliant	The Trust Purchasing department is in the process of undertaking a review of providers and business continuity plans to ensure they meet our requirements

Board of Directors Meeting Report – 4 September 2018

Agenda item 56/18b

Title	Annual Report of Emergency Preparedness and Business Continuity and Forward Work Plan
Sponsoring Director	Clive Walsh, Interim Director of Operations
Author(s)	Paul Hepworth, Emergency Planning and Liaison Officer Mandy Brokenshow, Emergency Planning Liaison Officer
Purpose	To provide assurance to Trust Board that the Trust has robust and resilient Emergency and Business Continuity plans
Previously considered at	SLT 23 August 2018
Executive Summary This report provides an account of the Emergency Preparedness, Resilience and Response activities undertaken in 2017/18. It provides evidence of Trust plans, training and procedures to ensure the Trust is compliant with the NHS England Emergency Preparedness, Resilience and Response (EPRR) core standards and relevant statutory obligations under the Civil Contingencies Act (CCA) 2004. It sets out the Trusts state of readiness and provides assurance to the Board of the Trusts continued effective resilience programme.	
Related Trust Objective	Excellent Patient Outcomes Excellent Patient Experience Engaged and Valued Staff
Related Risk	Risk 1 - Failure to provide adequate patient safety , quality of care and patient experience due to capacity, demand and external agency stakeholder engagement Risk 2 - Failure to meet constitutional and national performance targets Risk 6 - Lack of robust IT infrastructures, Business Continuity Plans and digital defences against cyber security Risk 8 - Failing to meet CQC Health & Social Care regulations
Essex Success Regime	The report provides an overview of the EPRR joint working partnership across msb and external partners.
Legal implications / regulatory requirements	Compliance with the Civil Contingencies Act (2004) and Health and Social care Act 2012.
Quality impact assessment	N/A
Equality impact assessment	As far as can be ascertained this paper has no detrimental impact for the 9 protected characteristics under the Equality Act 2010.
Recommendations: The Board is asked to note and receive assurance from the report.	

EMERGENCY PREPAREDNESS AND BUSINESS CONTINUITY ANNUAL REPORT 2017-18

1.0 Introduction

- 1.1 This Annual report provides an outline of the Trust's emergency preparedness in order to meet the statutory requirements of the Civil Contingencies Act 2004 and the NHS England Emergency Preparedness, Resilience and Response Framework 2015.
- 1.2 The Trust has numerous plans to deal with significant Incidents and Business Continuity issues. These conform to the CCA (2004) and, ISO 22301 and current NHS-wide guidance. All plans have been developed in consultation with regional and local stakeholders to ensure cohesion with their plans.
- 1.3 The report covers the following activities to ensure the Trust's resilience in the event of a major incident or severe disruption.
- Review & update of a variety of Emergency Plans
 - Business Continuity Management
 - Training & Exercising
 - Response – Live Incident & events
 - Partnership working
 - Assurance & Obligations under the CCA 2004
 - Priorities for 2018/2019

2.0 Background

- 2.1 The Civil Contingencies Act 2004 (CCA) outlines a single framework for civil protection in the United Kingdom. Part 1 of the Act establishes a clear set of roles and responsibilities for those involved in emergency preparedness and response at a local level. The Trust as a category 1 responder is subject to the following civil protection duties:
- Assess the risk of emergencies occurring and use this to inform contingency planning
 - Put in place emergency and major incident plans
 - Put in place for business continuity management arrangements
 - Put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency
 - Share information with other local responders to enhance co-ordination
 - Co-operate with other local responders to enhance co-ordination and efficiency
- 1.2 The Health & Social Care Act 2012 made significant changes to the health system in England in April 2013 including changes to the arrangements for Health Emergency Preparedness, Resilience and Response (EPRR). As a 'Provider Organisation', the Trust is required to fulfil relevant legal and contractual EPRR requirements, including the Civil Contingencies Act (CCA) 2004 statutory requirements placed upon Category 1 responders and ensure a robust and sustainable 24/7 response to emergencies and disruptions.
- 1.3 NHS England Core Standards for Emergency Preparedness Resilience and Response (2018) are the minimum standards which NHS organisations and providers of NHS funded care must meet. The Trust is now required to comply with the Emergency Preparedness, Resilience and Response (EPRR) framework (November 2015) and delivery of the NHS England Core Standards.

1.4 This report provides assurance of the joint partnership working with Emergency planning colleagues across Mid Essex, Southend and Basildon (MSB), which provides a more resilient approach to health in the event of an incident or emergency impacting on key trust services.

3.0 Responsibility and Accountability

3.1 The Trusts Interim Director of Operations is the designated Accountable Emergency Officer (AEO) to take executive responsibility and leadership, and provides support to the Emergency Planning and Liaison Officer (EPLO) who has delegated responsibilities for ensuring that emergency preparedness requirements are met within the organisation.

4.0 Risk Assessment

4.1 The Civil Contingencies Act 2004 places a legal duty on responders to undertake risk assessments and document their risks on a risk register.

4.2 The current identified local risks relating to EPRR are as follows:

- Southend Airport
- Southend central and Victoria Rail Network
- SS Montgomery
- Pandemic Influenza

5.0 Business Continuity Management

5.1 The Trust has a legal and contractual duty to develop robust business continuity management plans and arrangements which sets out how the Trust will maintain critical functions in response to a major incident or disruption to Trust services.

5.2 The implementation of the Trusts business continuity management system has been supported by Mandy Brokenshow, EPLO at Basildon and Thurrock University Hospitals, which consists of the design of generic templates for completion by directorate representatives and champions for their service. All Business Impact analysis and Business Continuity plans are reviewed by Mandy Brokenshow, to ensure consistency of content.

5.3 Currently the business continuity implementation program has resulted in the completion of the business impact analysis (BIA) s and a number of service business continuity plans. The target for the completion of all plans is by the end of September 2018.

5.4 A business continuity exercise will take place by the end of this year to enable plans to be tested through a realistic scenario which will assist with the sign off of plans and also highlight any shortfalls in existing arrangements.

6.0 Power Respirator Protective Suits (PRPS)

6.1 The Trust currently holds 24 suits in line with national requirements, in order to respond in the event of an incident involving contaminated casualties. The suits have a 10 year shelf life from manufacture, and are required to have shelf life extensions throughout this period, in line with manufacturers set programme at specified set periods.

6.2 The current extension programme requires 20 suits to be shelf life extended in November 2018, which is booked to take place on the 6th and 7th November 2018, the remaining 4 suits will be replaced as part of the national procurement programme sometime in 2018/19.

7.0 Plans, reviewed, revised or developed

10.1 The following plans have been either reviewed or created:

Corporate Business Continuity Plan	Extensive business continuity management system being developed across the Trust in partnership with Mandy Brokenshow, EPLO at Basildon and Thurrock University Hospitals	Ongoing for completion by 30 th September 2018 Trust policy under review
Major Incident Plan	Reviewed in 2017	Current
Mass Casualties Plan	Reviewed in 2018	Current
Corporate Business Continuity Plan	Due for review 2019 following a trust wide business continuity exercise	Current
Divisional / Departmental Service Business Continuity Plans	Business Impact Analysis (BIAs) completed for the majority of trust services. Business continuity plans continued to be developed and signed when completed. This will complete the current phase of an expensive implementation of the Trusts business continuity management system.	Ongoing for completion by 30 th September 2018
Lockdown Plan	Currently under review	Ongoing
Pandemic Influenza Policy & Plan	Reviewed as part of MSB, EPRR joint planning and localised plan	Trust policy under review
Evacuation & Sheltering Plan	Reviewed 2017	Current
Hazmat / CBRNE	Reviewed 2017	Current
Adverse Weather plan	Reviewed 2017 as	Current

	part of MSB, EPRR joint planning and localised plan	
Mass Prophylaxis Plan	Plan developed for the Olympic Games 2012	No NHS England requirement to have up to date plan in place, but retained as a developed plan.
VIP Plan	Plan developed for the Olympic Games 2012	Will be reviewed as part of the MSB, EPRR joint partnership working.

8.0 Partnership Working

The Trust actively participates in the following health and multi-agency groups to ensure a proactive and co-ordinated approach to warning, informing and sharing best practice. The groups encourage a joint approach to emergency preparedness in terms of planning, responding and recovery.

- Local Health Resilience Partnership (LHRP) Strategic Group
- Local Health Resilience Partnership (LHRP) Operational Group for Emergency Planning Officers.
- ERF Warning and Informing (Be Safe) – community planning and resilience information
- ERF Health Surge Planning
- London Southend Airport Emergency planning meeting

9.0 Exercise

The Trust has a rolling programme of live, table top and communication exercises that are designed to test and develop our plans. The Trust is required to carry out the following in relation to exercises as a minimum.

- A live exercise every three years
- A table top exercise every year
- A communications cascade every six months

7 th July 2017	Trust wide table top exercise (Mass Casualty) based on a vehicle bourn attack
15 th November 2017	Public Health England Emergo live exercise (North East London and Essex Trauma Network Mass Casualty response) exercise involving all hospitals within the network and the London Ambulance Service,
14 th August 2018	MSB table top exercise (Cyber Security) IT and Cyber security leads from the Trusts looking at a staff bourn attack to systems.
31 st August 2017	Major Incident Communications Exercise

23 rd October 2017	Major Incident Communications Exercise
12 th February 2018	Major Incident Communications Exercise
24 th May 2018	Major Incident Communications Exercise
31 st August 2018	Major Incident Communications Exercise

9.1 Table 1 details the training undertaken in 2017/18.

10.0 Incidents and events

10.1 **Critical Internal Declared** – 1st August 2018 as a result of the loss of water to the tower block and Hillsborough wing.

11.0 Assurance and Obligations under the Civil Contingencies Act (2004)

11.1 The NHS England Core Standards were published on Tuesday 31st July 2018. The core standards are the minimal standards that Health Trusts must comply with.

11.2 The core standards require a self-assessment of the Trusts position in relation to the following headings:

- Business Continuity Management
- Governance arrangements in relation to EPRR
- Duty to maintain plans
- Cooperation in relation to attendance at key meetings e.g. Local health resilience partnership (LHRP) Strategic and operational. Essex Resilience Forum (ERF) working on Tuesday events.
- Command and Control
- Training and Exercising
- Response and recovery
- Warning and informing
- CBRNE / Hazmat (equipment inventory)

11.3 The core standards are required to be signed off by the Trusts Accountable officer by 31st August and by Trust Board in September 2018. The final submission is due to be submitted to NHS England by 31st October 2018. The Trusts current EPRR compliance against the core standards will provide a substantially compliant level of compliance.

11.4 A peer review of the Trusts EPRR arrangements was undertaken by NHS England Head of EPRR (Midlands & East) and Head of EPRR for Essex CCGs on 23rd November 2017. The primary review centred around the Emergency Department, Mortuary, Hospital Incident Control room and a review of emergency plans.

13.0 Work Programme and Priorities 2018/19

- Completion of the Trust wide Business Continuity plans and processes
- Work towards ensuring the Trust is fully compliant to the EPRR core standards
- Deliver a Trust wide business continuity exercise to test the corporate and services plans
- Continued engagement through the MSB, EPRR joint working partnership

- Ensure attendance of senior leadership team on the Integrated Strategic Incident Management for Health (Gold) Course.
- Ongoing awareness training for SMOCs in line with the required National Occupational Standards
- Ensure that the Trusts Risk Register aligns itself with the National Risk Assessment (NRA) and Community Risk Register (CRR).
- To ensure EPRR risks are identified and documented on risk registers

14.0 SUMMARY

- 14.1 There has been excellent partnership working between MSB, EPRR leads and external partners.
- 14.2 The Board can be assured that the Trust has robust plans and arrangements in place to respond to the challenges of threats, hazards and major disruptive events and Civil Protection duties.

15.0 RECOMMENDATIONS

- 15.1 It is recommended that the Board note the current preparedness for Emergency Preparedness and Business Continuity Management within the Trust and accept the contents of this report.

Paul Hepworth
Emergency Planning & Liaison Officer

Mandy Brokenshow
Emergency Planning Liaison Officer

August 2018

Table 1 – Training

Month / Year	Training Name / Details	Type	Description	Led by	Required to Attend
25 th October 2017	Emergency Department Major Incident	In-house training	Awareness EPRR training	EPLO	Junior ED Doctors
09 th November 2017	Loggist Refresher Training	In-house training	Existing loggist training update	MEHT Emergency Planning and safety Project Manager	Existing trained loggist
16 th November 2017	Silver Command Training	In-house training	Mandatory Senior Managers EPRR and on-call training	EPLO and Mandy Brokenshow, BTUH EPLO	Senior managers on-call
27 th November 2017	Emergency Department Major Incident and Decontamination Training	In-house training	Whole day CBRNE, Hazmat awareness training	EPLO	Emergency department Nursing and receptionist staff
18 th December 2017	Emergency Department Major Incident and Decontamination Training	In-house training	Whole day CBRNE, Hazmat awareness training	EPLO	Emergency department Nursing and receptionist staff
19 th March 2018	Emergency Department Major Incident and Decontamination Training	In-house training	Whole day CBRNE, Hazmat awareness training	EPLO	Emergency department Nursing and receptionist staff
26 th March 2018	Emergency Department Major Incident and Decontamination Training	In-house training	Whole day CBRNE, Hazmat awareness training	EPLO	Emergency department Nursing and receptionist staff
11 th May 2018	Loggist Training Course	In-house training	New loggist training course	MEHT Emergency Planning and safety Project Manager	Trust wide volunteer staff
6 th June 2018	Emergency Department Major Incident Training (SHO's)	In-house training	Awareness EPRR training	EPLO	Senior ED staff