

QUALITY IMPROVEMENT AND SAFETY COMMITTEE

Title:	EPRR CORE STANDARDS ASSURANCE 2018-2019
Action:	FOR NOTING
Meeting:	29 August 2018

Purpose:

- The Emergency Preparedness Resilience and Response (EPRR) Core Standards 2018/2019 provide an assurance that Cambridgeshire Community Services NHS Trust (the Trust) is meeting its EPRR statutory duties and obligations for this year.
- The EPRR self-assessment also provides a gap analysis which informs a constructive approach to a continuous cycle of improvement in corporate resilience for the Trust.
- The EPRR Operational Committee has reviewed the EPRR self-assessment, the assurance and its subsequent work streams for 2018/2019. This work has been reviewed and signed off by the Trust's Accountable Emergency Officer.

Recommendation:

The Committee is asked to note the:

- EPRR Core Standards self- assessment statement of compliance for 2018/2019 which is **substantially compliant**. This assurance report will be subject to two peer reviews which will be undertaken on the 7th September and 12th October 2018 with the Cambridgeshire & Peterborough & Bedfordshire & Luton local resilience partnerships respectively. The final outcomes will be reported to Trust Board in October 2018.
- CCS NHS Trust EPRR Core Standards Work Plan & Schedule (attached below).

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Executive sponsor:	Julia Sirett	Chief Nurse

Trust Objectives

Objective	How the report supports achievement of the Trust objectives:
Provide outstanding care	The EPRR standards gives good assurance to service users that the Trust has plans in situ which aims to provide care to staff and patients in the event of an emergency and recovery to a new normality.
Collaborate with other organisations	The EPRR Standards are dependent upon working with partnership agencies i.e. Local Health Resilience Partnerships & Forums and relevant sub- groups, whose shared goal is to ensure safe and improved care for service users.
Be an excellent employer	EPRR standards recognise the requirement of providing care to staff pre, throughout and post emergency.
Be a sustainable organisation	

Trust risk register

Legal and Regulatory requirements:

- The Civil Contingencies Act 2004 (“CCA”)
- Health & Social Care Act 2012 (England)
- Control of Major Accident Hazards Regulations 1999
- Radiation (Emergency preparedness & Public Information) Regulations 2001
- Health & safety at Work 1974
- Management of Health & Safety at Work Regulations 1999
- The Counter Terrorism and Security Act 2015
- Health Protection Legislation (England) Guidance 2010
- Data Protection Act 1998
- HMG Security Policy Framework
- Emergency Preparedness – Statutory Guidance to the CCA
- Emergency Response and Recovery – non statutory guidance CCA
- NHS England Emergency Preparedness Framework 2.0 Nov 2015
- NHS England Core Standards for Emergency Preparedness, Resilience and Response
- NHS England Business Continuity Management Framework (Service Resilience)
- Care Quality (Registration)Regulations 2009
- Caldicott Principles
- Government Security Classifications 2014

Previous Papers:

Title:	Date Presented:
EPRR Core Standards Assurance 2017-2018	August 2017

Equality and Diversity implications:

Objective	How the report supports achievement of objectives:							
Achieve an improvement in the percentage of service users who report that they are able to access the Trust services that they require	n/a							
To introduce people participation in our diversity and inclusion initiatives to capture the experience of hard to reach/seldom heard/varied community groups.	n/a							
To introduce wider diversity on recruitment selection panels.	n/a							
To deliver customised training and development for staff to further improve awareness of diversity and inclusion.	n/a							
Are any of the following protected characteristics impacted by items covered in the paper No								
Age <input type="checkbox"/>	Disability <input type="checkbox"/>	Gender Reassignment <input type="checkbox"/>	Marriage and Civil Partnership <input type="checkbox"/>	Pregnancy and Maternity <input type="checkbox"/>	Race <input type="checkbox"/>	Religion and Belief <input type="checkbox"/>	Sex <input type="checkbox"/>	Sexual Orientation <input type="checkbox"/>

1. Executive Summary

- 1.1 The Trust is assessed annually on its emergency planning and preparedness by completing the Emergency Preparedness Resilience & Response Core Standards (EPRR).

The Trust has rated itself as **substantially compliant** for 2018-2019 with the integral gap analysis identifying areas for improvement.

2. Introduction

- 2.1 The Trust has a responsibility to be able to plan for and respond to a wide range of emergencies and business continuity incidents that could affect health or patient safety. These could be anything from severe weather to an infectious disease outbreak or a major transport accident.

- 2.2 Under the Civil Contingencies Act (2004), all NHS organisations and providers of NHS funded care must show that they can effectively respond to emergencies and business continuity incidents while maintaining services to patients.

This work is referred to in the health service as 'emergency preparedness, resilience and response' (EPRR).

3. NHS EPRR Core Standards

- 3.1. The NHS EPRR Core Standards were first introduced in 2013 and clearly set out the minimum standards expected of NHS organisations and providers of NHS funded care with respect to EPRR.
- 3.2 This national annual review aims to co-ordinate a cohesive multi-agency response to domestic emergencies. It also facilitates a framework for self-assessment, peer review and assurance processes. In addition, it incorporates lessons learnt from testing, national legislation and guidance changes and updates to the NHS England governance programme.
- 3.3 The Trust is required to undertake an annual assurance process on these standards and ensure the Trust Board are sighted on the level of compliance achieved. This includes the results of the self-assessment and any work plan to address areas of improvement.

4. EPRR Core Standards 2018/2019

- 4.1 The Trust reports its annual cycle of self-assessment to both Bedfordshire & Luton and Cambridgeshire & Peterborough Local Health Resilience Partnerships. The Trust's self-assessment will also be peer reviewed on the 12th October and 7th September respectively.
- 4.2 The Core Standards has 54 assessment standards (not including the Deep Dive, please see below) which are divided into ten domains. Each domain has a list of questions. The Trust is compliant with 49 standards, at this given time.

The Trust has assessed itself as substantially compliant for 2018/2019, with a work plan to address the work areas identified below. Please see Appendix A for a detailed explanation.

Domain	Compliance level	Workplan
Governance	Fully compliant	Business as usual
Duty to access risk	Fully compliant	Business as usual
Duty to maintain plans	Partially compliant - 10 out of 13 standards are fully compliant.	See Appendix A below
Training and Exercising	Fully compliant	Business as usual
Command and Control	Fully compliant	Business as usual
Response	Fully compliant	Business as usual
Warning and informing	Fully compliant	Business as usual
Cooperation	Fully compliant	Business as usual
Business Continuity	Partially compliant - 7 out of 9 standards are fully compliant	See Appendix A below
HAZMAT/CBRN	Fully compliant	Business as usual

5. Assurance

5.1 Trust Major Incident Plan – fully compliant

The Trust has a Major Incident Plan v10.02 which has been reviewed and updated to reflect learning from incidents, guidance and training events. It is anticipated that these plans will be updated following the EPRR Operational Committee's first sitting in October and agreement of its terms of reference.

The Trust Major Incident plan remains an Official Sensitive document and will not be in the public domain but is available to all Trust staff on the intranet.

5.2 Risk assessment – fully compliant

The Trust by attending the Local Health Resilience Partnerships assesses national, regional and local risks which forms an integral part of its emergency planning. Our Risk Management Policy 1.1 and the Corporate Risk Register also support this process.

5.3 Duty to maintain plans – partially compliant

The Trust now benefits from a suite of EPRR documents and is continually improving in this area. However, the Trust has rated itself as partially compliant in this area until both the Mass Vaccination Plan and its Evacuation Plans are both ratified and tested and the Lockdown Policy v2.3 has been tested.

Listed below are the Trust's plans, the date or due date of ratification and the date the plan was tested or is due to be tested.

Plan	Review date	Testing & exercising
Major Incident Plan (includes critical incident) 10.02	Reviewed in March 2018	Tested on 27 January 2017
Heatwave Plan (PHE)	Adoption of the Public Health England Heatwave plan, with supporting documents including action cards, posters etc.	Tested during the recent heatwave of 2018
Corporate Business Continuity Plan v7.2	Reviewed in March 2018	Tested on 16 August 2018
Cold weather (PHE)	Adoption of the Public Health	Tested during the cold weather

	England Cold weather plan, with supporting documents including action cards, posters etc.	period of 2017/2018
Pandemic Influenza	Reviewed on Oct 2017	Tested in a multi -agency exercise on 24 July 2018 and 2016.
Mass Vaccination Plan	The Trust Mass Vaccination plan is in draft and is expected to be ratified by the EPRR Operational Committee meeting on 18 October. It adheres to national and local guidance and risk assessments. It has been initially tested by a table top walkthrough in July 2018.	Initial table top walk through and training and development will be determined on 18 October 2018.
Evacuation Plan	The Trust Evacuation Plan for its 4 freehold sites has been drafted and due to be ratified in September 2018 at the Estates Committee. It is in accordance with local arrangements and addresses local risks for each of the 4 sites. A walkthrough and test is planned starting in October 2018 which will then be rolled out to the other freehold sites in turn.	A walkthrough and test is planned starting October 2018.
Lockdown Policy	The Trust has a Lockdown Policy 2.3. It is in line with current guidance and risk assessment.	The plan has been tested in live incidents however this does not include every site. The Trust will review an interim training schedule in October 2018. The Trust is also currently exploring new alternatives to support the lockdown process at its sites.

5.4 Command & Control – fully compliant

The Trust has a robust 24/7 Command & Control process in place, which has the flexibility to adapt to incidents. The Trust provides on call training and a supporting training needs analysis for its On Call team. It also operates a ‘buddy system’ whereby Directors with a particular expertise may be asked to support the On call Executive if an incident or anticipated incident requires it e.g. the Medical Director supported the On call executive during the junior doctors industrial action. This process is reviewed by the members of the On-Call & Resilience Forum.

5.5 Training & exercising – fully compliant

The Resilience Manager delivers bespoke table-top training to Services along with testing from live incidents. The debrief reports from these live incidents guide the Trust in areas for improvement including training needs. The report themes are published on the staff intranet and in the EPRR annual report. The 2018/2019 exercise schedule is due to be signed off in October 2018 by the EPRR Operational Committee.

5.6 Response – fully compliant

The Trust has two fully operational Incident Control Centres located at The Meadows, St Ives and The Poynt in Luton. Training is delivered annually for the Incident Control centre

walkthroughs. The Trust has also provided loggist training on 19 December 2017 to increase its number of loggists from 3 to 12.

5.7 Warning & Informing – fully compliant

The Trust has a Communications Protocol (annex J to MIP v.10.02 and s.7 within the MIP) alongside digital communications and social media policy and guidelines (February 2018). The Trust also embeds learning from incidents by collating information from debrief questionnaires and reports. The Trust is also part of the system-wide Communication Networks e.g. Cambs & Peterborough multi-agency warn and inform communication strategy and working group.

5.8 Co-operation – fully compliant

The Trust is a signatory to multi agency working under the Local Health Resilience Partnerships. Examples of JESIP planning include the East of England Memorandum of Understanding for Incident Outbreaks which sits alongside a whole suite of documents. The Trust engages in both Cambridgeshire & Peterborough LHRP planning and Bedfordshire & Luton LHRP planning by ensuring the appropriate officer attends the LHRP meetings.

5.9 Business Continuity – partially compliant

In addition to a Corporate Business Continuity Plan, the Trust also has Operational Business Continuity Plans. The Trust has approx. 65 operational business continuity plans out of a total of. 72. Work is currently being undertaken by the Estates Team to complete business continuity plans for the Trust's 5 main sites (4 freehold sites and one as the main tenant) by September 2018. The other remaining business continuity plans are being updated.

5.10 Chemical Biological, Radiological & Nuclear (CBRN) work programme- fully compliant.

The Trust has developed its portfolio in this work area following a white powder incident at one of its sites on the 21st May 2018. The incident was concluded safely with a debrief report and lessons learnt were cascaded via the Trust's communications cascade on 14 June 2018, which also influenced regional guidelines. This was also tested in the recent suspect package incident on 6 August 2018 which affected 22 NHS organisations, but not the Trust. In this instance, the Trust alerted its staff quickly on how to respond by distributing an action card which gave guidance to staff on how to deal with suspect packages should they receive one. The action cards and PHE CBRN Handbook are also published on the staff intranet.

The Resilience Manager with the Infection, Prevention & Control Matron have put together CBRN kits which will be distributed across CCS sites. A risk assessment was used for determining which sites require the kits. These will be evaluated by staff before they are distributed from September 2018.

This project work is now being shared with Cambridgeshire & Peterborough Foundation Trust as part of collaborative working.

6. **Deep Dive Exercise 2018/2019** – fully compliant

The Core Standards also feature a 'Deep Dive' Exercise each year which are **not** included in the overall rating framework. This year, NHS England has decided to request information and assurance on Incident Control Centres within the Trust. The Trust is fully compliant with all 8 standards within the deep dive which includes training, set up sessions, policy and operational guidelines.

7. Trust EPRR 2018/19

The Trust is committed to continually improving its EPRR strategies. The threat of terrorism, new and emerging infectious disease, industrial action, protest and the likelihood of severe weather remain key risks to the UK and it is essential that we strive to continually improve and enhance our capacity and capability to effectively deal with these events.

The key EPRR priorities for the Trust in 2018/19 are detailed below:

- Continue to ensure that the Trust fulfils its duties under the Civil Contingencies Act 2004 and accompanying legislative and non-legislative guidance.
- The introduction of the EPRR Operational Committee in 2018 (first sitting October 2018) will continue to monitor EPRR risks and hazards to ensure that the Civil Contingencies Act 2004, accompanying statutory requirements and work streams of the EPRR Core Standards are fulfilled by the Trust.
- The Accountable Emergency Officer and Resilience Manager will maintain membership of local and regional EPRR groups to enhance coordination and efficiency. The Resilience Manager and key staff in the Trust's Command & Control structure will continue to participate in regular internal and multi-agency table top, live exercises and workshops to further improve corporate resilience.
- To ensure compliance with guidance published by NHS England on 1 April 2015 (Chemical incidents: Planning for the management of self-presenting patients in healthcare settings) across all NHS funded sites, the IPAC, Estates and EPRR Committees and their respective representatives will continue with their plans and the response arrangements required.
- Lessons learned from internal incidents and emergencies will be continue to be used to strengthen the Trust's emergency planning processes, in conjunction with health and social care partners within both Bedfordshire & Luton and Cambridgeshire & Peterborough Resilience fora.
- In line with EPRR core standards the EPRR operational team will seek to continually improve its EPRR training resource and explore new training opportunities to enhance delivery of training across tactical, operational and strategic levels.

Jo Downey, Resilience & Prevent Manager
10 August 2018

Appendix A

CCS NHS Trust Work Plan & Schedule for EPRR Core Standards 2018 -2019

Ref	Domain	Action to be taken	Lead	Timescale	Comments
17	Duty to maintain plans : Mass Vaccination Plan	The document to be completed and ratified at the sitting of the EPRR Operational Committee in October 2018.	EPRR Operational Committee members	Oct-18	A Trust Mass Vaccination plan is expected to be ratified by October 2018 at the EPRR Operational Committee meeting. It adheres to national and local guidance and risk assessments. It has been initially tested by a table-top walkthrough in July 2018. Additional training needs will be assessed and addressed. Equipment and staff training is covered within the central document.
20	Duty to maintain plans: Evacuation Plan	The Evacuation plan is to be ratified at the Estates Committee meeting, sitting in September 2018. The estates committee is to agree a training schedule of its 4 sites, beginning Oct 2018.	Estates Committee. Site Managers at 4 key sites	Sept 18 & Oct 18	A Trust Evacuation Plan for its 4 freehold sites (and 1 site as main tenant) has been drafted and due to be ratified in September 2018. It is in accordance with local arrangements and addresses local risks for each of the 4 sites. A walkthrough and test is planned starting October 2018 and then to be rolled out accordingly.
21	Duty to maintain plans: Lockdown Policy	The Estates Committee will consider lockdown training requirements within the interim period (see comments section)	Estates Lead	Oct 2018, March 2018. Training schedule to be discussed at Sept 18.	The Trust has a Lockdown Policy 2.3. It is in line with current guidance and risk assessment. It has been signed off by QISComm. It is published on the Trust intranet, which is accessible by all staff. The plan has been tested in live incidents however this is not across piste. The Trust is currently looking at an electronic alert system for its 4 major community hospital sites. The initial assessment and cost analysis for this option will be completed by October 2018 and if appropriate, then started in March 2019. The Estates Committee will review training requirements in the interim.

51	Business Continuity plans	Completion of the main 4 freehold sites (and 1 main tenant leasehold) business continuity plans/site books. The other remaining are being updated.	Estates manager & Site Managers	Sep-18	The Trust has approx. 65 out of 72 operational Business Continuity Plans in place across the Trust. These are supported by Business Impact Analyses, Risk Assessments and Service Team details which detail priority staff. The BCP lists response to staffing, IT and paper templates and alternative premises. The IT department are also currently running a programme to facilitate further IT business continuity planning. The Trust is currently in the process of developing business continuity planning for its community hospital sites and is due for completion by the end of Sept 2018.
55	Business Continuity: Contractors and commissioned services	The Trust is currently reviewing this and will take a pragmatic and appropriate approach to this review beginning Oct 18.	Contracts Team and EPRR Lead	Jan-19	The Trust has agreements with its main contractors/sub contractors however the Trust is currently reviewing this area for other commissioned suppliers, and it's application therein. The Trust will take a pragmatic and appropriate approach to this review.