

TRUST BOARD

Title:	EPRR CORE STANDARDS ASSURANCE 2019-2020
Action:	FOR NOTING
Meeting:	18 SEPTEMBER 2019

Purpose:

- The Emergency Preparedness Resilience and Response (EPRR) Core Standards 2019/2020 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 resilience for the Trust.
- The EPRR Operational Committee has reviewed the EPRR self-assessment, the assurance and its subsequent work streams for 2019/2020. This work has been reviewed and signed off by the Trust's Accountable Emergency Officer.

Recommendation:

The Board is asked to note the:

- EPRR Core Standards self- assessment statement of compliance for 2019/2020 which is **substantially compliant**.
- This assurance report has been subject to review and challenge by the Trust EPRR Operational Committee on the 27th August 2018 and the Trust's three Clinical Operational Boards in August 2019. In addition, it has been peer reviewed by the Cambridgeshire & Peterborough local resilience partnership on the 4th September and will be reviewed again on the 11th October 2019 with the Bedfordshire & Luton local resilience partnership.
- CCS NHS Trust EPRR Core Standards Work Plan & Schedule (attached below).

	Name	Title
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Executive sponsor:	Gill Thomas	Director of Governance & Accountable Emergency Officer

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

Risk 2470: There is a risk that the localised Business Continuity Plans for new services to the Trust are not current or in situ which may result in a failure of the service provision.

Risk 2844: There is a risk that due to adverse weather conditions there may be an impact on the Trust's ability to deliver services leading to a negative impact on patients

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
EPRR Core Standards Assurance 2018-2019	August 2018

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							
Introduce Disability Passport Scheme to record agreed reasonable adjustments.	n/a							
To utilise the diverse experience and backgrounds of our Trust Board members in promoting an inclusive culture.	n/a							
Are any of the following protected characteristics impacted by items covered in the paper								
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 2019-2020 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 is 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 2019/2020

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 was peer reviewed and accepted on 4th September by Cambridgeshire & Peterborough. The Bedfordshire & Luton resilience partnership will review the self assessment on the 11th October 2019.

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 51 standards, at this given time.

The Trust has assessed itself as substantially compliant for 2019/2020, 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	Fully compliant	Business as usual
Command & Control	Fully compliant	Business as usual
Training and Exercising	Partially compliant. 2 out of 3 standards are fully compliant.	See Appendix A below for the action plan & detail
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 for the action plan & detail
HAZMAT/CBRN	Fully compliant	Business as usual

5. Assurance

5.1 Governance – fully compliant

The Trust has a Critical & Major Incident Plan v11.0 which has been reviewed and updated to reflect learning from incidents, guidance and training events. These plans have been approved via the following governance route:

- EPRR Operational Committee: 21/05/2019
- Quality, Improvement & safety Committee: 26/6/2019
- Trust Board: 10/07/2019

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 in Bedfordshire & Luton and Cambridgeshire & Peterborough. Our Risk Management Policy 1.2 and the Corporate Risk Register also support this process.

5.3 Duty to maintain plans –fully compliant

The Trust continues to improve its suite of EPRR documents. 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
Critical & Major Incident Plan (includes critical incident) 10.02	<ul style="list-style-type: none"> • EPRR Operational Grp: 21/05/2019 • Quality, Improvement & safety Committee: 26/6/2019 • Trust Board: 10/07/2019 	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 period of July 2019
Corporate Business Continuity Policy & Plan v8.0	• EPRR Operational Grp: 21/05/2019	Tested by the national waste management incident from

	<ul style="list-style-type: none"> • Quality, Improvement & safety Committee: 26/6/2019 • Trust Board: 10/07/2019 	September 2018 – March 2019
Cold weather (PHE)	Adoption of the Public Health England Cold weather plan, with supporting documents including action cards, posters etc.	Tested during the Cold weather period of 2018/2019
Pandemic Influenza	To be reviewed in Oct 2019	Tested in a multi -agency exercise on 24 July 2018 and 2016.
Mass Vaccination Plan	The Trust Mass Vaccination plan is being formatted and will be ratified by the EPRR Operational Committee in September 2019. 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 on 18 October 2018.
Evacuation Plan	The Trust has an Evacuation Framework for its 4 freehold sites. It is in accordance with local arrangements and addresses local risks for each of the 4 sites. A testing schedule of this framework has begun and will continue until March 2020.	A training and exercising schedule has begun for the 4 community hospital sites.
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 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 will be adopted for an EU Exit and is reviewed by the members of the On-Call Team.

5.5 Training & exercising – partially compliant

The EPRR Lead has addressed business continuity exercising for the Trust's Services via a table top exercise for EU Exit planning however a more structured approach would be beneficial to the Trust in meeting its statutory obligations. The addition of an EPRR project officer, now in situ, will deliver bespoke table-top training to Services, which will support testing that come from live incidents. The 2019/2020 exercise schedule is due to be signed off in December 2019 by the EPRR Operational Grp.

Debrief reports from the training & live incidents guide the Trust in areas for improvement including training needs. Any identified themes are published on the staff intranet and in the EPRR annual report.

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 to Incident Control centre staff. The Trust has also provided loggist training on 19 December 2017 and provides refresher training via e-learning 13/08/2019. The Trust currently has 10 loggists.

5.7 Warning & Informing – fully compliant

The Trust has a Communications Protocol (annex J to Critical & Major Incident Plan v.11.0) alongside digital communications and social media policy and guidelines (July 2019). The Trust also embeds learning from incidents by collating information from debrief questionnaires and reports. The Trust is an integral part of the system-wide Communication Networks e.g. Cambridgeshire & 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 Joint Emergency Services Interoperability 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.58 operational business continuity plans. The BC Audit 2019 identified the need for these plans to adopt a comprehensive supplier/provider contacts lists. The EPRR Team are liaising with Services to ensure their business continuity plans are being updated to address this recommendation.

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

The EPRR Lead with the Infection, Prevention & Control Matron put together CBRN kits which have been distributed across CCS sites (sites determined by the risk assessment policy). Action cards, assurance paperwork and communications cascade to staff have supported this project.

6. Deep Dive Exercise 2019/2020 –partially 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 on the Trust's ability to cope with severe weather. The Trust is fully compliant with all 15 standards, bar 1. This partial compliance standard relates to business continuity by suppliers/providers, which has also been identified within the body of the Core Standards. This work has begun with preparations around EU Exit but requires enhancement. The Trust will take a pragmatic approach to this substantial piece of work area, in the event of a 'no deal' EU Exit.

7. Trust EPRR 2019/20

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 2019/20 are detailed below:

- Prepare and manage, to the best of it's capability, any disruptions to Trust Services in the event of a no deal EU Exit
- Continue to ensure that the Trust fulfils its duties under the Civil Contingencies Act 2004 and accompanying legislative and non-legislative guidance.
- The EPRR Operational Committee 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 EPRR Lead will maintain membership of local and regional EPRR groups to enhance coordination and efficiency. The EPRR Lead 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
EPRR & Prevent Manager
18 August 2019

Appendix A

CCS NHS Trust Work Plan & Schedule for EPRR Core Standards 2019 -2020

Ref	Domain	Action to be taken	Lead	Timescale	Comments
27	EPRR exercising and testing programme	Training & Exercising schedule currently being drafted and meeting times arranged	EPRR Project officer	01/12/2019	The Trust now has an additional resource in addition to the EPRR lead, an EPRR project officer who can undertake a systematic and scheduled approach to testing and exercising the Trust's operational business continuity plans across its Services. In addition, the Trust will continue to use live incidents as evidence of business continuity testing.
51	Business Continuity plans	To enhance operational business continuity plan with supplier/provider details and BC Audit recommendations 2019	EPRR Team	31/03/2020	The Trust's operational Business Continuity Plans in place across the Trust 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 however the BC Audit highlighted that the BC plans requires lists of provider/suppliers list for each Service. This work has started with the EU exit preparations but requires more detail and subsequently assurance in this area.
55	Business Continuity: Contractors and commissioned services	Continuation of EU Exit work for BC assurance from contractors..	Contracts Team and EPRR Lead	March 2020	The Trust has agreements with its main contractors, sub contractors however the Trust is currently reviewing this area for other commissioned suppliers in the event of a no deal EU Exit. However, this work requires additional BC assurance for other types of risk. The Trust will take a pragmatic and appropriate approach to this substantial review in light of EU Exit preparations and limited resources.