

Meeting of Governing Body

Date: Tuesday 2nd October 2018

Time: 1.30pm

Location: The Vassall Centre, Gill Avenue, Downend, BS16 2QQ

Agenda number: 9.2

Report title: Emergency Preparedness Resilience & Response Policy

Report Author: Janette Midda

Report Sponsor: Lisa Manson

1. Purpose

This Policy is for information

2. Recommendations

The Governing Body is asked to approve

3. Executive Summary

The Policy sets out the governance process and resources required for Emergency Preparedness Resilience & Response (EPRR) within BNSSG CCG. The policy identifies the reporting structure and roles identified to meet assurance guidelines within NHS England Core Standards.

4. Financial resource implications

There is a budget code appointed to Emergency Preparedness Resilience & Response should additional monies / resources be required. This budget code has no funding allocated but allows monies to be audited and reclaimed, as appropriate.

5. Legal implications

- As a Category 2 responder under the Civil Contingencies Act, 2004, as a Clinical Commissioning Group we have a duty to ensure we have a business continuity management structure in place and so do our commissioned provider organisations.
- Health & Social Care Act, 2006,
- Emergency Preparedness Resilience & Response Framework, 2015
- NHS Constitution

6. Risk implications

Risks are identified and tabled in the Business Continuity Policy. Risks are reviewed and mitigation considered and updated on a quarterly basis through assessment of

- National Risk Register
- Local Resilience Forum (LRF) Community Risk Register
- Local Health Resilience Partnership (LHRP) Risk Register

7. Implications for health inequalities

Incident Response and Business Continuity Plans form part of EPRR response enabling Directorates to identify and prioritise critical and first priority services; this may impact certain groups in the short term only until business as usual is re-instated. Following an event, a debrief will follow where any potential inequalities will be highlighted and resolved as part of the recovery phase.

8. Implications for equalities (Black and Other Minority Ethnic/Disability/Age Issues)

An assessment has not been completed as there will be no equality issues during an incident response phase. Throughout any incident response the impacts to patients will be discussed as part of any decision making process. If identified a review of patient harm will follow as per serious incident review.

9. Implications for Public Involvement

The Policy is an organisation response and the public will be communicated with as part of the response should that need arise. Communications Team are sighted on the need for support in responding to any incident.

Recommendations

For this Policy to be approved

Glossary of terms and abbreviations

Civil Contingencies Act	The Civil Contingencies Act, and accompanying non-legislative measures, delivers a single framework for civil protection in the UK. The Act is separated into 2 substantive parts: local arrangements for civil protection (Part 1); and emergency powers (Part 2).
Emergency Preparedness Resilience & Response	This is a programme of work referred to in the health community as emergency preparedness, resilience and response (EPRR).

Local Resilience Forum	A 'Local Resilience Forum' (LRF) is a forum formed in a police area of the United Kingdom by key emergency responders and specific supporting agencies. It is a requirement of the Civil Contingencies Act 2004.
Local Health Resilience Partnership	Local Health Resilience Partnerships (LHRPs) are established to deliver national EPRR strategy in the context of local risks. They bring together the health sector organisations involved in EPRR at the Local Resilience Forum (LRF) level. Building on existing arrangements for health representation at LRFs, the LHRP will be a forum for coordination, joint working and planning for emergency preparedness and response by all relevant health bodies. The LHRPs' footprint will map to the LRFs. It will offer a coordinated point of contact with the LRF and reflect a national consistent approach to support effective planning of health emergency response.

Appendices

EPRR Policy

Bristol North Somerset and South Gloucestershire CCG Emergency Preparedness Resilience & Response (EPRR) Policy



Please complete the table below:

To be added by corporate team once policy approved and before placing on website

Policy ref no:	EPRR V1
Responsible Executive Director:	Director of Commissioning
Author and Job Title:	Janette Midda, EPRR Manager
Date Approved:	October 2018
Approved by:	Governing Body
Date of next review:	October 2019

Policy Review Checklist

	Yes/ No/NA	Supporting information
Has an Equality Impact Assessment Screening been completed?	No	
Has the review taken account of latest Guidance/Legislation?	Yes	
Has legal advice been sought?	No	
Has HR been consulted?	No	
Have training issues been addressed?	Yes	
Are there other HR related issues that need to be considered?	No	
Has the policy been reviewed by JCC?	No	
Are there financial issues and have they been addressed?	Yes	Budget Code available should additional resource

	Yes/ No/NA	Supporting information
		be required. This enables governance and audit
What engagement has there been with patients/members of the public in preparing this policy?	NA	
Are there linked policies and procedures?	Yes	Incident Response Plan Business Continuity Policy and Plan
Has the lead Executive Director approved the policy?	Yes	
Which Committees have assured the policy?	Yes	Commissioning Exec
Has an implementation plan been provided?	No	Implementation plans for IRP & BC Plan
How will the policy be shared with		Intranet and Incident Response
Will an audit trail demonstrating receipt of policy by staff be required; how will this be done?	No	

Version Control <i>please remove this box once approved and finalised</i>		
Version	Date	Consultation
1	13/09/2018	Commissioning Executive Group

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EPRR Policy

1 Introduction

The Incident Response Plan NHS needs to plan for, and respond to, a wide range of incidents and emergencies that could affect health or patient care. These could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident. A significant incident or emergency is any event that cannot be managed within routine service arrangements. It requires the implementation of special procedures and involves one or more of the emergency services, the NHS or a local authority.

NHS funded organisations must also be able to maintain continuous levels in key services when faced with disruption from identified local risks such as severe weather, fuel or supply shortages or industrial action. This is known as business continuity management (BCM).

2 Aim and Objectives

The aim of this policy is to ensure Bristol North Somerset South and South Gloucestershire(BNSSG) Clinical Commissioning Group (CCG) has a documented framework for staff to invoke during incident response

The objectives of the EPRR Policy are to ensure the CCG:

- a. has adequate plans to prepare for, respond to and recover from incidents as a Category 2 responder
- b. gains assurance that local NHS funded health services and the local health system has adequate plans to prepare for, respond to and recover from incidents
- c. operates within the legal framework for
 - i. civil contingencies
 - ii. health & social care act
- d. meets its obligations under the NHS England Framework and Core Standards for EPRR

3 Policy Statement

The CCG will co-operate with Category 1 responders to support the development of appropriate multi-agency EPRR policies and plans.

This will be achieved by:

- Membership and engagement with
 - a. Avon and Somerset Local Health Resilience Partnership
 - b. Avon and Somerset Local Resilience Forum
 - c. Health & Wellbeing Boards (Bristol, North Somerset, South Gloucestershire)
- Supporting the planning, response and recovery phases of incidents
- Participating in EPRR exercises organised at national, regional and local level.

The CCG will share information appropriately with partner organisations to support management of and recovery from incidents in accordance with information sharing protocols.

The CCG will develop and test its own plans as required by NHS England EPRR Framework,

- a. Incident Response Plan
- b. Business Continuity Plan
 - i. Fuel Disruption
 - ii. Severe weather
 - iii. Infectious Disease
 - iv. Utilities (Gas, electric, water) failure
 - v. Informatics
- c. Pandemic Influenza

The CCG will operate a robust Emergency Preparedness Resilience & Response (EPRR) Strategy.

The CCG will work to maintain “Substantial Compliance” with NHS England Core Standards for EPRR as assessed annually in the NHS England assurance process.

The CCG will seek assurance that NHS funded services it commissions are delivered by organisations that maintain and give assurance through the EPRR process.

This will be achieved through:

- a. NHS England Core Standards assurance process
- b. NHS Standard Contract and contract monitoring processes.

The CCG will establish and maintain an Incident Control Centre in South Plaza to provide the appropriate space and equipment to enable the CCG to support the response to an incident.

4 Duties and responsibilities

Chief Executive Officer

The Chief Officer has delegated authority to approve the CCG’s EPRR and BCM policies and procedures.

Director of Commissioning

The Director of Commissioning is the designated Accountable Emergency Officer and is responsible for ensuring that the CCG has appropriate EPRR and BCM policies, plans and procedures in place.

The Accountable Emergency Officer is a member of the Local Health Resilience Partnership.

Deputy Director of Commissioning, Planning & Performance

Nominated deputy to Accountable Emergency Officer and line management for EPRR

On-Call Director

The CCG Director on-call is responsible for the management of capacity pressures affecting operational performance across BNSSG.

CCGs have a duty to support NHS England in any response to an incident. The Director on-call is responsible for the management of capacity arising as a consequence of system escalation and/or major incident.

Emergency Preparedness Resilience & Response Manager

The EPRR Manager is responsible:

Documenting EPRR policies, plans and procedures and ensuring that they are appropriately embedded through testing, validation and lessons identified/learned.

Ensuring that employees are trained to deliver defined roles in major incident and business continuity plans, including the role of loggist and are encouraged to practice these skills.

Ensuring that support is provided to CCG staff during and after an incident

Ensuring that appropriate hot and cold de-briefs are carried out after an incident and the learning is shared with other organisations.

Updating major incident and business continuity plans following an exercise or incident.

Managing the CCG's response to NHS England EPRR assurance process

Preparing reports to various committees to ensure appropriate governance.

The Emergency Preparedness Manager is a member of the Avon and Somerset Local Resilience Partnership Tactical Planning Group.

Head of Communications

The CCG Head of Communications is responsible for managing the communication strategy during incident response and recovery to staff, patients and the public. This is through coordination with communication leads in other organisations.

Commissioning Administration Team

The Administration Team supports the EPRR Manager in their responsibility for the maintenance of the Incident Coordination Centre room.

Maintaining an EPRR training register of all CCG staff.

Employees

All employees are responsible for ensuring that they are aware of the CCG's EPRR and BCM policies, plans and procedures and that they have sufficient training to be able to effectively carry out their defined roles in major incident and business continuity plans.

5 Training requirements

Employees with a role in EPRR and BCM will be trained according to their level of need following a training needs analysis.

6 Governance

EPRR and BCM policies and plans will be approved by the Chief Officer following discussion at the EPRR Oversight Delivery Group, Commissioning Execs and / or Governing Body meetings.

7 Implementation and Monitoring Compliance and Effectiveness

Through Internal Governance process and NHSE Core Standards assurance

8 References, acknowledgements and associated documents

- The Civil Contingencies Act (2004) (as amended)
- The Health and Social Care Act (2012)
- NHS Constitution
- NHS England Emergency Planning Framework (2013)
- ISO:22301 Societal Security
- BSI PAS 2015 - Framework for Health Services Resilience
- The Health and Safety at Work Act (1974)
- Cabinet Office, Emergency Preparedness⁶ (2006) (as amended)