

Meeting of Governing Body

Date: Tuesday 8th January 2019

Time: 1.30pm

Location: The Weston College, Knightstone Road, Weston-super-Mare, North Somerset,
BS23 2AL

Agenda number: 9.7

Report title: Emergency Preparedness Resilience & Response (EPRR) assurance

Report Author: Janette Midda

Report Sponsor: Lisa Manson

1. Purpose

This paper outlines the CCG compliance with NHS England EPRR core standards assurance and that of our commissioned providers.

2. Recommendations

The Governing Body is asked to review and approve

3. Executive Summary

The NHS England EPRR Framework, 2015, states that all NHS funded services must ensure they have robust and well tested arrangements in place to respond to and recover from an incident or an emergency. This paper outlines our improved compliance rating over the past twelve months and the action plan to address residual areas of non-compliance. In addition, it outlines the compliance of our main commissioned providers and high level actions to address areas of non-compliance.

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 plans in place to enable the CCG to maintain commissioned services within system escalation.

- 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

None

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

None

9. Implications for Public Involvement

None

Recommendations

For this assurance to be noted

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	Preparedness is: the extent to which emergency planning enables effective and efficient prevention, reduction, control, mitigation of, and response to emergencies. Resilience is: the ability of services, area or infrastructure to detect, prevent and, if necessary, withstand, handle and recover from disruptive challenges. Response is: decisions and actions taken in accordance with the strategic, tactical and operational objectives of each organisation.

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.
Business Continuity	Business continuity, is the capability of an organisation to continue delivery of products or services at acceptable pre-defined levels following a disruptive incident. (Source: Business Continuity Institute)
Business Impact Analysis	To provide a high-level analysis of the organisation's critical functions that can be used to develop a framework for more detailed BIAs.

Appendices

- EPRR core standards assurance review of CCG and commissioned providers
- NHSE letter confirming compliance rating.

Briefing Paper

Date: 8th January 2019

Title: Emergency Preparedness Resilience & Response (EPRR) Core Standards Assurance Assessment 2017/18

Author: Janette Midda / Claire Thompson: EPRR Manager / Deputy Director of Commissioning (Planning & Performance)

1. Purpose

The purpose of this paper is to inform the Governing Body of this year's EPRR assurance process to:

- provide an update on NHS Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (BNSSG CCG) status
- provide an update on provider services commissioned by BNSSG CCG against NHSE EPRR core standards.

The standards are reviewed against evidence of previous year's planning and response.

2. Background

The updated NHS England EPRR Framework, 2015, states that all NHS funded services must ensure they have robust and well tested arrangements in place to respond to and recover from an incident or an emergency.

The Civil Contingencies Act (CCA) 2004 specifies that responders will be either Category 1 (primary responders) or Category 2 responders (supporting agencies). CCGs are Category 2 responders, and are expected to work closely with partners. They are required to cooperate with, and support other Category 1 and Category 2 responders. CCGs are also expected to provide support to NHS England in relation to the coordination of their local health economy.

The EPRR role and responsibilities of CCGs are to:

- Ensure contracts with all commissioned provider organisations (including independent and third sector) contain relevant EPRR elements, including business continuity
- Monitor compliance by each commissioned provider organisation with their contractual obligations in respect of EPRR and with applicable Core Standards
- Ensure robust escalation procedures are in place so that if a commissioned provider has an incident the provider can inform the CCG 24/7
- Ensure effective processes are in place for the CCG to properly prepare for and rehearse incident response arrangements with local partners and providers
- Be represented at the Local Health Resilience Partnership (LHRP), either on their own behalf or through a nominated lead CCG representative
- Provide a route of escalation for the LHRP in respect of commissioned provider EPRR preparedness

- Support NHS England in discharging its EPRR functions and duties locally, including supporting health economy tactical coordination during incidents (Alert Level 2-4)
- Fulfil the duties of a Category 2 responder under the CCA 2004 and the requirements in respect of emergencies within the NHS Act 2006 (as amended).

The EPRR core standards for 2017-18 were revised but the fundamental content remains the same as in previous years. This year's EPRR assurance deep dive topic was command and control in particular, Incident Coordination Centre (ICC) capabilities and command structures.

NHS England South – South West have set the following criteria for assessing organisation's overall preparedness:

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.

3. Key Points / Issues of Concern

Organisation	2016/17 rating	2017/18 rating	%	Actions
BNSSG CCG	Partial	Substantial	93%	Outstanding Standards for 2018/19 work programme <ul style="list-style-type: none"> • Business Continuity; review of service level BIAs; • Incorporate service level BIAs into Corporate BC Plan • Training; development of a training programme for staff involved in system and / or incident response.
UHB	Substantial	Substantial	89%	Internal work programme in place
NBT	Substantial	Substantial	89%	Internal work programme in place
WAHT	Substantial	Substantial	94%	Internal work programme in place
Bristol Community Health	Substantial	Partial	83%	BCH EPRR manager was seconded to NHSE for a year to support the LHRP training programme. There was no backfill so BCH have reduced compliance as a consequence. The EPRR manager is back in post and it is anticipated BCH will return to substantial compliance in 18/19.
Sirona	Substantial	Substantial	89%	Internal work programme in place
North Somerset Community Partnership	Substantial	Substantial	96%	Internal work programme in place
AWP	Partial	Partial	78%	Quarterly review meetings through Integrated Contract & Quality Performance group. EPRR manager post has been advertised.
Care UK	Non-compliant	Non-compliant	59%	To note: 2016/17 compliance was 24% so an improving situation Focused support to deliver improvement given by CCG EPRR team through quarterly review meetings. Care UK have now appointed a dedicated EPRR manager commencing January 19. Contract manager aware for contractual notice as required.

4. Risk and Mitigations

Risk assessment and register for EPRR are held within the Commissioning Directorate.

5. Summary and Recommendations

The Governing Body is asked to receive the statement of compliance as assurance from 2017/18 NHSE Core Standard self-assessment of the CCG and commissioned providers of healthcare

- BNSSG CCGs compliance against the EPRR Core Standards;
- BNSSG Provider assurance against the EPRR Core Standards;