

# NHS England Core Standards for Emergency Preparedness Resilience and Response (EPRR)

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Trust Board paper H2

## Purpose of report:

This paper is for:	Description	Select (X)
Decision	To formally receive a report and approve its recommendations OR a particular course of action	X
Discussion	To discuss, in depth, a report noting its implications without formally approving a recommendation or action	
Assurance	To assure the Board that systems and processes are in place, or to advise a gap along with treatment plan	
Noting	For noting without the need for discussion	

## Previous consideration:

Meeting	Date	Please clarify the purpose of the paper to that meeting using the categories above
Executive Board	27/08/2019	This paper was discussed and approved at EQPB before being sent on to the Trust Board

## Executive Summary

### Context

On 8<sup>th</sup> July 2019, Stephen Groves, National Head of EPRR, wrote to all NHS Accountable Emergency Officers to inform them of the emergency preparedness, resilience and response (EPRR) annual assurance process for 2019/20. This requires all providers of NHS funded care to complete a self-assessment against a set of core standards for EPRR and to report the outcomes to their respective Trust Boards.

### Questions

1. How has UHL performed in its annual self-assessment against NHS England's core standards for EPRR?
2. Is the Board assured that the Trust has satisfactory arrangements in place to improve performance against the NHS England core standards for EPRR?

### Conclusion

1. UHL is 'substantially compliant' against NHS England's core standards for EPRR. This marks a significant improvement on the previous self-assessment undertaken in 2018/19 which achieved an outcome rating of 'partially compliant.'
2. The Trust's EPRR Board will continue to oversee the implementation and delivery of its 3-work year programme to ensure all gaps identified as part of this self-assessment are fully addressed, so to ensure full compliance can be achieved in 2021/22.

## Input Sought

The Trust Board is asked to:

- Note the content of this report and the attached EPRR work programme
- Approve the outcome of the Trust's self-assessment against NHS England's core standards for EPRR

### **For Reference:**

**This report relates to the following UHL quality and supporting priorities:**

#### **1. Quality priorities**

Safe, surgery and procedures	No
Safely and timely discharge	No
Improved Cancer pathways	No
Streamlined emergency care	No
Better care pathways	No
Ward accreditation	No

#### **2. Supporting priorities:**

People strategy implementation	No
Estate investment and reconfiguration	No
e-Hospital	No
More embedded research	No
Better corporate services	No
Quality strategy development	No

#### **3. Equality Impact Assessment and Patient and Public Involvement considerations:**

An Equality Impact Assessment (EIA) was completed for this report and no impacts were identified

#### **4. Risk and Assurance**

##### **Risk Reference:**

<b>Does this paper reference a risk event?</b>	<b>Select (X)</b>	<b>Risk Description:</b>
<b>Strategic:</b> Does this link to a <b>Principal Risk</b> on the BAF?		
<b>Organisational:</b> Does this link to an <b>Operational/Corporate Risk</b> on Datix Register	X	If the Trust fails to improve its emergency preparedness, resilience and response (EPRR) arrangements... caused by a lack of appropriate time and resources to develop them... then there is a risk that the Trust is not adequately prepared to respond to a business continuity, critical or major incident.

5. Scheduled date for the **next paper** on this topic: September 2020

6. Executive Summaries should not exceed **5 sides** My paper does comply

**REPORT TO:** UHL TRUST BOARD

**DATE:** 05 SEPTEMBER 2019

**REPORT BY:** REBECCA BROWN – CHIEF OPERATING OFFICER

**SUBJECT:** NHS ENGLAND CORE STANDARDS FOR EMERGENCY PREPAREDNESS, RESILIENCE AND RESPONSE 2019/20

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## **1 INTRODUCTION**

- 1.1 As part of the NHS England Emergency Preparedness, Resilience and Response (EPRR) Framework, providers and commissioners of NHS funded services must show they can effectively respond to business continuity, critical and major incidents whilst maintaining services to patients.
- 1.2 NHS England has an annual statutory requirement to formally assure itself of both its own, and of the NHS in England's, EPRR readiness. This assurance is provided through a four-stage process and includes:
1. EPRR self-assessment by commissioners and providers of NHS-funded care;
  2. Local Health Resilience Partnership (LHRP) confirm and challenge;
  3. NHS England and NHS Improvement Regional EPRR confirm and challenge;
  4. NHS England and NHS Improvement National EPRR confirm and challenge;
- 1.3 Based on this process, NHS England and NHS Improvement will submit a national EPRR assurance report to the NHS England and NHS Improvement Board. The report will then be shared with the Department of Health and Social Care (DHSC) and the Secretary of State for Health and Social Care.

## **2 NHS ENGLAND CORE STANDARDS FOR EPRR**

- 2.1 The NHS England core standards for EPRR are the minimum requirements that commissioners and providers of NHS-funded services must meet and are the basis of the EPRR annual assurance process.
- 2.2 For 2019/20, NHS England's core standards for EPRR are split into ten domains and include:
1. Governance;
  2. Duty to risk assess;
  3. Duty to maintain plans;
  4. Command and control;
  5. Training and exercising;
  6. Response;
  7. Warning and informing;

8. Cooperation;
9. Business Continuity; and
10. Chemical, Biological, Radiological, Nuclear (CBRN).

2.3 In addition to the ten domains listed above, NHS England also uses the self-assessment process to undertake a deep dive into a specific area. For 2019/20, there are two deep dive topics and they are:

1. Severe weather response;
2. Long term adaptation planning;

2.4 The self-assessment against the deep dive topics do not contribute to the Trust's overall EPRR assurance rating and are reported separately.

### 3 CORE STANDARDS AND DEEP DIVE SELF-ASSESSMENT

3.1 The first stage of the NHS England assurance process is for all commissioners and providers of NHS-funded care to complete a self-assessment against the core standards for EPRR.

3.2 For 2019/20, there were a total of 64 applicable core standards which UHL had to self-assess against and a further 20 standards applicable under the deep dive. For each standard, the Trust had to determine if it is:

- a) Fully compliant, whereby it is fully compliant with the core standard;
- b) Partially compliant, whereby it is not compliant with the core standard, however, the Trust's EPRR work programme demonstrates sufficient evidence of progress and an action plan to achieve full compliance within the next 12 months; or
- c) Not compliant, whereby it is not compliant with the core standard and the Trust's EPRR work programme shows compliance will not be reached within the next 12 months.

3.3 The Trust's Emergency Planning Office undertook the self-assessment in August 2019, the results of which are outlined in table 1 below.

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	9	4	1
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	7	2	0
CBRN	14	14	0	0
<b>Total</b>	<b>64</b>	<b>57</b>	<b>6</b>	<b>1</b>

Deep Dive	Total standards applicable	Fully compliant	Partially compliant	Non compliant
Severe weather response	15	13	2	0
Long term adaptation planning	5	1	4	0
<b>Total</b>	<b>20</b>	<b>13</b>	<b>6</b>	<b>0</b>

**Table 1: UHL Self-Assessment Outcomes**

- 3.4 As of the 30<sup>th</sup> August 2019, UHL is fully compliant with 89% of the core standards which it is expected to achieve. Based on the outcomes of the self-assessment, UHL will be assigned an overall assurance rating of ‘substantially compliant’ as it is compliant with 89 – 99% of the core standards it is expected to achieve.
- 3.5 In line with the agreed assurance process, the Trust submitted the following information to NHS England on 30<sup>th</sup> August 2019:
- UHL’s self-assessment against NHS England’s core standards for EPRR; and
  - UHL’s up-to-date 3-year EPRR work programme.

#### **4 ADDRESSING GAPS IN COMPLIANCE**

- 4.1 Where the Trust has identified any gaps in its compliance, it must demonstrate plans to address these.
- 4.2 The Trust is currently mid-way through a 3-year EPRR work programme which was signed off by the Trust Board in October 2018. This EPRR work programme already includes work which will address all of the non-conformities which have been identified in the 2019/20 self-assessment against NHS England’s core standards for EPRR. An up-to-date copy of the 3-year EPRR work programme as of the 30<sup>th</sup> August is attached to this report.
- 4.3 The deep dive self-assessment into long-term adaptation planning identified 4 actions which are not part of the EPRR work programme. These actions will instead be managed and overseen by Estates and Facilities, with regular updates on progress provided to the EPRR Board, made via the Estates and Facilities representative who sits on the EPRR Board.

#### **5 COMPLIANCE PROGRESS**

- 5.1 The 2019/20 self-assessment shows a significant improvement in compliance from the previous self-assessment which was undertaken in 2018/19. This progress is illustrated in table 2 below:

Year	Self-Assessment Rating	Total standards applicable	Fully compliant	Partially compliant	Non compliant
2018/19	Partially Compliant	64	49	6	9
2019/20	Substantially Compliant	64	57	6	1
Change	-	-	+8	-	-8

**Table 2: 12 Month Progress against NHS England’s Core Standards for EPRR**

5.2 The uplift in compliance reflects the progress being made through the implementation and delivery of the ongoing 3-year EPRR work programme which was signed off by the Trust Board in October 2018.

5.3 Based on NHS England's existing core standards for EPRR, the Trust forecasts:

- In 2020/21, achieving substantial compliance with 63/64 standards being fully compliant;
- In 2021/21, achieving full compliance with all 64 standards being fully compliant.

## **6 NEXT STEPS**

### **6.1 Stage Two: Local Health Resilience Partnership (LHRP) Confirm and Challenge.**

6.1.1 NHS England and NHS Improvement, in conjunction with the LHRP, will host a 'confirm and challenge' process to review and consider the Trust's EPRR self-assessment return.

6.1.2 The confirm and challenge meeting will take place in the autumn and the Trust will be represented by:

- Rebecca Brown, Chief Operating Officer (Accountable Emergency Officer);
- Moira Durbridge, Director of Safety and Risk;
- Richard Manton, Risk Manager;
- Ben Collins, Emergency Planning Officer.

6.1.3 At the end of the confirm and challenge process, the LHRP will provide the NHS England and NHS Improvement local and / or regional Director responsible for EPRR with a report on the preparedness of all organisations in its Partnership.

6.1.4 The deadline for completing stage 2 is the 31<sup>st</sup> October 2019.

### **6.2 Stage Three: NHS England and NHS Improvement Regional EPRR Team Confirm and Challenge Process**

6.2.1 The NHS England and NHS Improvement Regional EPRR team will conduct a 'confirm and challenge' process with the LHRP co-chairs and submit a regional summary assurance return to the NHS England National EPRR team by the 31<sup>st</sup> December 2019.

### **6.3 Stage Four: NHS England and NHS Improvement National EPRR Team Confirm and Challenge Process**

6.3.1 The NHS England and NHS Improvement National EPRR team will hold a 'confirm and challenge' meeting with the NHS England and NHS Improvement Regional EPRR team by the 28<sup>th</sup> February 2020.

6.3.2 A national assurance report will be prepared for the NHS England and NHS Improvement Board by the 31<sup>st</sup> March 2020. This report will also be used to provide national EPRR assurance to central government.

## **7 CONCLUSION AND RECOMMENDATIONS**

- 7.1 The Trust has undertaken the first of four stages in NHS England's core standards for EPRR assurance process. This involved undertaking a self-assessment against all of the applicable standards for an acute trust.
- 7.2 The Trust is 'substantially compliant' against NHS England's core standards for EPRR.
- 7.3 The outcome of the self-assessment is a significant improvement on the previous self-assessment undertaken in 2018/19 and reflects the implementation and delivery of the ongoing 3-year EPRR work programme which was signed off by the Trust Board in October 2018.
- 7.4 Any non-conformities identified in the self-assessment against NHS England's core standards for EPRR will be addressed as part of the ongoing 3-year EPRR work programme. Additional non-conformities which were identified as part of the deep dive into long term adaptation planning will be addressed by Estates and Facilities and reported on regularly to the EPRR Board.
- 7.5 The Trust expects that it will achieve full compliance against NHS England's core standards for EPRR in 2021/22.
- 7.6 The Trust Board is asked to note the content of this report, approve the core standards self-assessment and note the 3-year EPRR work programme to remedy the identified gaps.