

Emergency Preparedness, Resilience and Response (EPRR) Annual Report 2018/19

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Trust Board paper G

Executive Summary

Context

NHS England requires that the Trust Board is updated at least annually on the Trust's EPRR arrangements and this paper supports that requirement.

Questions

1. What are the key outcomes for the Trust relating to EPRR in the 12 month period to August 2018?
2. Is the Board satisfied with the governance arrangements in place to support EPRR?

Conclusion

1. The Trust has undertaken a comprehensive review of its EPRR arrangements and developed a new 3-year work programme to improve performance against the NHS England core standards for EPRR.
2. The Trust has made significant improvements to the governance arrangements which support EPRR. These are now sufficiently robust to drive the delivery of the EPRR work programme.

Input Sought

The Trust Board is asked to note the content of this report and support the delivery of the new 3-year EPRR work programme.

For Reference

1. The following **objectives** were considered when preparing this report:
Safe, high quality, patient centred healthcare [Not applicable]

- Effective, integrated emergency care [Yes]
- Consistently meeting national access standards [Not applicable]
- Integrated care in partnership with others [Not applicable]
- Enhanced delivery in research, innovation & ed' [Not applicable]
- A caring, professional, engaged workforce [Not applicable]
- Clinically sustainable services with excellent facilities [Yes]
- Financially sustainable NHS organisation [Yes]
- Enabled by excellent IM&T [Yes]

2. This matter relates to the following **governance** initiatives:

a. Organisational Risk Register [Yes]

Datix Risk ID	Operational Risk Title(s) – add new line for each operational risk	Current Rating	Target Rating	CMG
3289	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.	15	8	Operations

b. Board Assurance Framework [Not applicable]

If YES please give details of risk No., risk title and current / target risk ratings.

Principal Risk	Principal Risk Title	Current Rating	Target Rating
No.	There is a risk ...		

3. Related **Patient and Public Involvement** actions taken, or to be taken: N/A

4. Results of any **Equality Impact Assessment**, relating to this matter: N/A

5. Scheduled date for the **next paper** on this topic: September/October 2019

6. Executive Summaries should not exceed **4 sides** My paper does comply

7. Papers should not exceed **7 sides.** My paper does comply

REPORT TO: UHL TRUST BOARD
DATE: 4 OCTOBER 2018
REPORT BY: REBECCA BROWN – CHIEF OPERATING OFFICER
SUBJECT: EMERGENCY PREPAREDNESS, RESILIENCE AND RESPONSE ANNUAL REPORT 2018/19

1. INTRODUCTION

- 1.1 The patients and communities we serve expect us to be there for them, irrespective of the circumstances we face.
- 1.2 University Hospitals of Leicester (UHL) is working hard to ensure that plans are in place to support:
- a) the response to a major emergency or disaster (i.e. a major transport accident or terrorist attack); and
 - b) the continuation of both critical and essential services during a disruptive event (i.e. loss of utilities).
- Collectively, this programme of work is referred to in the NHS as emergency preparedness, resilience and response (EPRR).
- 1.3 NHS England requires that the Trust Board is updated at least annually on the Trust's EPRR arrangements and this paper supports that requirement.
- 1.4 This report sets out, for the period of August 2017 – August 2018, details of the Trust's:
- Internal review to its EPRR arrangements;
 - EPRR Work Programme;
 - Governance and resource arrangements;
 - Incidents of note;
 - Existing emergency and business continuity plans;
 - Training; and
 - Tests and exercises.
- 1.5 This paper is presented to the Trust Board alongside the "EPRR Core Standards" report which provides the Trust Board with full details on the outcomes of the annual self-assessment by which the EPRR programme is assessed.

2. INTERNAL REVIEW

2.1 In quarter 1 of 2018/19, the Trust's emergency planning office undertook a comprehensive review of the Trust's EPRR arrangements. The purpose of this review was to:

- Identify the requirements of the Trust relating to EPRR;
- Establish a clear position statement for each requirement; and
- Where the Trust's current position fell short of what is required, identify what action(s) are required to address the gaps.

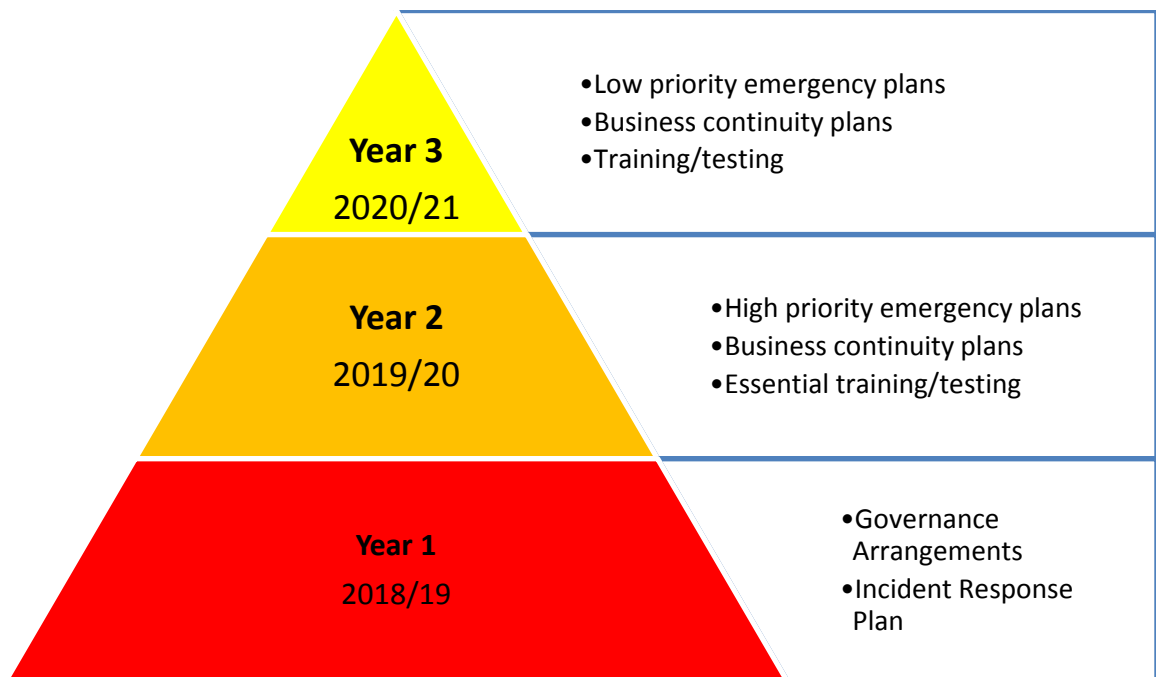
2.2 As an outcome of this work, the emergency planning office has developed a new EPRR Work Programme which aims to address all of the gaps which were identified as part of the review.

3. EPRR WORK PROGRAMME

3.1 The aim of the EPRR Work Programme is to ensure UHL is meeting all of its requirements, as per NHS England's core standards for EPRR.

3.2 Based on the current available resources to commit to the work programme, the timescale for completing this work is 1st April 2021.

3.3 The order of priority on the work programme has been well considered to ensure we focus on what matters most and adopt a risk-based approach.



3.4 The new EPRR Work Programme was signed off by the Trust's EPRR Board on the 16th May 2018.

4. GOVERNANCE ARRANGEMENTS

4.1 Introduction

In line with the new EPRR Work Programme, the Trust has carried out extensive work to improve the governance arrangements which are in place to support EPRR. Consequently, as of the 1st September 2018, the Trust now has in place a robust set of governance and resource arrangements to ensure it can suitably meet all its statutory and non-statutory EPRR requirements.

4.2 EPRR Board

4.2.1 As part of the review into the Trust's EPRR governance arrangements, the terms of reference for the Emergency Planning & Business Continuity Committee were re-written and the committee was renamed the EPRR Board. These changes became effective from 17th May 2018.

4.2.2 The aim of the EPRR Board is to ensure that the Trust delivers against its statutory and non-statutory obligations, including

- Civil Contingencies Act 2004;
- Health and Social Care Act 2012;
- Care Quality Commission Regulations 9 and 24 (regulated activities) outcomes 4 and 6;
- Trust Development Authority (TDA) Planning Framework;
- NHS England Core Standards for EPRR;
- International Standard (ISO) 22301.

4.3 The EPRR Board is chaired by the Trust's Accountable Emergency Officer and its membership is made up of senior members of staff from across the organisation. This includes all clinical management groups (CMGs) as well as key stakeholders from within corporate services.

4.4 The EPRR Board reports directly to the Trust Board via the EPRR Annual Report.

4.5 Accountable Emergency Officer

The Trust is required to have an Accountable Emergency Officer with the strategic responsibility for EPRR and for providing assurance to the Trust Board that the organisation meets its statutory and legal requirements. This role is fulfilled by the Chief Operating Officer, which as of July 2018 is carried out by Rebecca Brown.

4.6 Non-Executive Director

The Non-Executive Director with EPRR added to their portfolio is Ian Crowe.

4.7 Director of Safety and Risk

The Director of Safety and Risk provides strategic management support to the emergency planning office and is fulfilled by Moira Durbridge.

4.8 Risk Manager

The Risk Manager provides day-to-day management support to the emergency planning office and is currently fulfilled by Richard Manton.

4.9 Emergency Planning Office

4.9.1 The emergency planning office leads on the delivery of the Trust's EPRR Work Programme and includes the emergency planning officer and emergency planning assistant.

4.9.2 The emergency planning officer is a full-time position and reports directly to the Risk Manager. This post was filled by Aaron Vogel until August 2017 and was then vacant until it was appointed to Ben Collins who began working with the Trust on 12th March 2018.

4.9.3 The emergency planning assistant role is a part-time position and fulfilled by Katie Leah.



Figure 1: EPRR Governance Structure

4.10 Emergency Planning Budget

The EPRR work programme is provided an annual budget of £20,281. This sum includes funding for:

- The emergency notification cascade system (Everbridge);
- The Trust's required contribution to the Leicester, Leicestershire & Rutland (LLR) Local Resilience Forum (LRF)
- Equipment maintenance costs;
- Training and exercising.

4.11 Internal Audit

There were no internal audits carried out on the Trust's EPRR arrangements during the period of August 2017 – August 2018. The date of the next internal audit is currently under discussion and will take place in the next 12 months.

4.12 NHS England's Core Standards for EPRR

4.12.1 On 30th July 2018, the National Head of EPRR, Stephen Groves, wrote to all Accountable Emergency Officers to inform them of the annual assurance process for

EPRR which requires Trusts to undertake a self-assessment against NHS England's core standards for EPRR.

4.12.2 NHS England's Core Standards for EPRR are the minimum standards which NHS organisations and providers of NHS funded care must meet to comply with the requirements of the NHS England's planning framework, NHS Contract and the Civil Contingencies Act 2004.

4.12.3 The Trust's emergency planning office undertook the self-assessment process in August 2018 which showed that UHL is fully compliant with 77% of the core standards it is expected to achieve. Based on the outcomes of the self-assessment, UHL will be assigned an overall assurance rating of 'partially compliant' against NHS England's core standards for EPRR as it is compliant with 77 – 88% of the core standards the organisation is expected to achieve.

4.12.4 Full details of the NHS England Core Standards for EPRR are detailed in a separate report to the Trust Board.

4.13 **Multi-Agency Working**

The Trust works closely with multi-agency partners to ensure all of our emergency plans are joined up and best able to meet the needs of the local communities we serve. As part of this, the Trust is represented at a number of local and regional groups, including:

- Leicester, Leicestershire & Rutland (LLR) Local Health Resilience Partnership (LHRP) Executive Committee
- Leicester, Leicestershire & Rutland (LLR) Local Health Resilience Partnership (LHRP) Sub-Group
- Leicester, Leicestershire & Rutland (LLR) Prepared Executive Board
- Leicester, Leicestershire & Rutland (LLR) Prepared Governance & Delivery Group
- Leicester, Leicestershire & Rutland (LLR) Prepared People and Communities
- Leicester, Leicestershire & Rutland (LLR) Prepared Practice Group
- Leicester, Leicestershire & Rutland (LLR) Prepared Media & Communications

5. **INCIDENTS OF NOTE**

The Trust did not declare any business continuity, critical or major incidents in the period August 2017 – August 2018.

6. **EMERGENCY AND BUSINESS CONTINUITY PLANS**

6.1 As of 1st September 2018, the Trust has the following approved emergency and business continuity plans:

- Business Continuity Management Policy;
- Major incident policy (section A and section B);

- Internal incident plan;
- Relative's reception centre plan **[updated July 2018]**;
- Chemical, biological, radiological, nuclear (CBRN) plan;
- Evacuation and shelter plan;
- Influenza pandemic plan;
- Heatwave plan **[new plan created July 2018]**;
- Cold weather plan **[new plan created August 2018]**;
- Operation consort (VIP/High profile patient) **[updated February 2018]**;
- Lockdown plan;
- Bomb threat response plan;

6.2 As the Trust updates or develops new emergency or business continuity plans, a new standard template will be applied. The new template is designed to ensure all emergency and business continuity plans are simple and easy for staff to use.

7. EPRR TRAINING

7.1 Introduction

EPRR training was limited during the 12 months to August 2018 due to the emergency planning officer role being vacant for 6½ months. As a result, the Trust carried out the following limited training:

- Joint Emergency Services Interoperability Programme (JESIP) - 5 members of staff attended 3 separate dates between November 2017 and May 2018;
- 8 members of staff were trained as Loggists on 19th January 2018;
- 7 members of staff attended NHS England Director On-Call training on 26th January 2018.

8. TESTS AND EXERCISES

8.1 NHS emergency planning guidance and NHS England core standards for EPRR require that the Trust regularly tests its emergency arrangements through:

- Live, or simulated live exercises at least every 3 years;
- Tabletop exercises at least every year; and
- communication tests at least every 6 months.

8.2 During the period August 2017 – August 2018, the Trust:

- Did not carry out any live or simulated exercise as its previous live exercise was undertaken in July 2017 (Exercise Soteria);

- Participated in Exercise Tartar on 1st March. The aim of Exercise Tartar was to test and train the Trauma Network in response to a mass casualty incident involving traumatic injuries in the Midlands and East Trauma Network, in collaboration with partner agencies;
- Did not carry out any communication tests.

9. CONCLUSION

- 9.1 In the 12 months to August 2018, there have been a number of changes to how the Trust discharges its responsibilities under EPRR.
- 9.2 The Trust has undertaken a comprehensive review into its existing level of resilience and identified a number of areas where improvements are required.
- 9.3 The Trust has developed a significant programme of work to be delivered in the three years to April 2021. Upon completion, the Trust will become fully compliant against all of NHS England's core standards for EPRR.
- 9.4 In the 6 months to August 2018, the Trust has already undertaken several key pieces of work due to be completed in 2018/19 and as a result the governance arrangements in place to support EPRR are now robust and fit for purpose.