

<b>Report to:</b>	Trust Board (Public)	<b>Agenda item:</b>	SFT4151
<b>Date of Meeting:</b>	6 December 2018		

<b>Report Title:</b>	Emergency Preparedness Resilience & Response (EPRR) Annual Report 2018			
<b>Status:</b>	<b>Information</b>	<b>Discussion</b>	<b>Assurance</b>	<b>Approval</b>
			X	
<b>Prepared by:</b>	Ian Robinson – EPRR Lead			
<b>Executive Sponsor (presenting):</b>	Andy Hyett – EPRR Accountable Officer			
<b>Appendices (list if applicable):</b>	None			

<b>Recommendation:</b>
<p><b>Recommendations:</b> The Trust Board is asked to support the ongoing work required to fulfil our EPRR duties and responsibilities, and to sign off this annual EPRR assurance report as part of the NHS England assurance process.</p> <p><b>Purpose of Report:</b> To provide assurance to the Trust Board as part of the National EPRR Assurance process. The Trusts self-assessment against the National EPRR Core Standards has been confirmed by Wiltshire CCG and approved by NHS England, as delivering FULL assurance.</p> <p>This report, through a summary of EPRR activity, including the assurance process and training and exercising demonstrates our compliance.</p> <p><b>Background:</b> The Trust is defined as a category 1 responder under the Civil Contingencies Act and is subject to civil protection duties discharged through the EPRR assurance process.</p>

<b>Executive Summary:</b>
<p>Based on the National RAG status for EPRR compliance SFT have been rated by Wiltshire CCG and NHS England as 'Fully' compliant for the second consecutive year. As a category One responder we are meeting our civil protection duties under the Civil Contingencies Act (2004).</p> <p>Fully compliant means that arrangements are in place that appropriately addresses all the core standards that the organisation is expected to achieve.</p>

## **1. Purpose**

This paper provides an annual report on the Trust's emergency preparedness in order to meet our statutory requirements of the Civil Contingencies Act (CCA) (2004) and the NHS England Emergency Preparedness Resilience and Response (EPRR) Framework 2015 and NHS England Business Continuity Framework.

## **2. Background & Statutory Framework**

The Civil Contingencies Act outlines a single framework and establishes clear roles and responsibilities. SFT are defined as a category 1 responder in the CCA and is subject to the following civil protection duties:

- Assess the risk of emergencies occurring and use this to inform contingency planning
- Put in place Emergency Plans;
- Put in place Business Continuity Arrangements;
- Put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency
- Share information with local responders to enhance co-ordination;
- Co-operate with other local responders to enhance coordination

## **3. National EPRR Framework & Core Standards**

The NHS England EPRR Frameworks contain principles for health emergency planning for the NHS in England and the NHS Core Standards for EPRR provides the minimum standards that an NHS organisation must meet.

It is expected that the level of preparedness will be proportionate to the role of the organisation and the services provided:

- SFT must meet the minimum core standards and provide evidence these standards are being met
- SFT must identify an Accountable Office (Chief Operating Officer) who is responsible for ensuring these standards are met

## **4. Wiltshire and Swindon EPRR Assurance process 2018-19**

The responsibility for undertaking the local assurance process for SFT was undertaken by the Wiltshire Clinical Commissioning Group (CCG). SFT provided the CCG with a core standard spreadsheet with each standard RAG rated with supporting evidence to support this rating.

Our self-assessment stated (August 2018): As part of the national EPRR assurance process for 2018/19, Salisbury NHS Foundation Trust has been required to assess itself against these core standards. The outcome of this self-assessment shows that against 64 of the core standards which are applicable to the organisation, Salisbury NHS Foundation Trust:

- Is substantially compliant with 63 of these core standards; - the overall rating is 'Substantial'

The CCG conducted the 'confirm and challenge' meeting on 15th August 2018 and SFT agreed the recommendation of 'substantial' compliance based on discussions that core standard 50 be declared as partial compliance. This standard relates to compliance with the newly introduced Data Security & Protection (DSP) Toolkit (replacing IG toolkit).

Following a meeting between CCG and NHSE on 28<sup>th</sup> September to share the findings of SFT confirm and challenge meeting, in relation to our self-assessment submission, NHSE have advised that the declaration for core standard 50 is to be marked as fully compliant based on information sought nationally and as the direction demonstrated a commitment to the assurance process and integrity, therefore giving an overall rating of 'Full'.

Therefore the final compliance rating for SFT for EPRR Core Standards 2018/19 based on the National RAG status for EPRR compliance is that SFT are rated in the 'Fully' category. See figure 1 below for compliance levels:

Overall EPRR assurance rating	Criteria
Fully	The organisation is 100% compliant with all core standards they are expected to achieve. The organisation's Board has agreed with this position statement.
Substantial	The organisation is 89-99% compliant with the core standards they are expected to achieve. For each non-compliant core standard, the organisation's Board has agreed an action plan to meet compliance within the next 12 months.
Partial	The organisation is 77-88% compliant with the core standards they are expected to achieve. For each non-compliant core standard, the organisation's Board has agreed an action plan to meet compliance within the next 12 months.
Non-compliant	The organisation compliant with 76% or less of the core standards the organisation is expected to achieve. For each non-compliant core standard, the organisation's Board has agreed an action plan to meet compliance within the next 12 months. The action plans will be monitored on a quarterly basis

Figure 1:

The CCG informed NHS England that based on the National RAG status for EPRR compliance and the SFT self-assessment that SFT are rated in the Fully compliant category. Further to this no EPRR monitoring will be required this year through the Wiltshire CCG contract meetings.

## 5. Training & Exercising

Statutory requirement set out that the Trust will undertake:

- Live Exercise – Every 3 years
- Table Top Exercise – Yearly
- Communication Test – Every 6 months

A variety of training and exercising and live events have taken place in the last 10 months, including the two live major incident responses, whereby we have been responding to the longest running major incident in NHS history; a total of 97 days in response mode and an ongoing recovery response with multi-agency partners.

See tables below in relation to training and awareness and exercises and live incidents:

**Table 1: Training Completed**

Type of Training/Awareness	Audience/Description	Date
Loggist (refresher)	7 loggists attended refresher training	21 <sup>st</sup> February 2018
CBRN (Chemical, Biological, Radiological, Nuclear) & PRPS (Powered Respirator Protective Suit) Train the Trainer session	7 staff attended	18 <sup>th</sup> January 2018
NPAG (National Performance Advisory Group) – Resilience Group	1 member of staff attends	27 <sup>th</sup> February 2018 & 2 <sup>nd</sup> October 2018
Cyber Crime Awareness Session	Trust-wide	3 <sup>rd</sup> October 2018 (rescheduled as postponed from April 2018)
PREVENT (WRAP)	Pre-determined staff groups identified on individuals MLE learning plan	Monthly and ad-hoc as requested, 2018 launched MLE package for PREVENT WRAP level 3

**Table 2: Training planned but postponed due to incident responses**

Type of Training/Awareness	Audience/Description	Date
Loggist (New)		Cancelled 14 <sup>th</sup> March & 24 <sup>th</sup> September due to MI response and recovery
Loggist (refresher)	7 loggists attended refresher training	Sessions 26 <sup>th</sup> April, 16 <sup>th</sup> July cancelled due to MI response and recovery
Prevent Conference	Prevent Lead and one WRAP Facilitators	Apologies sent - 21 <sup>st</sup> March
NPAG – Resilience Group	1 member of staff attends	Apologies sent to 10 <sup>th</sup> July meeting due to MI response
CBRN Live Exercise	ED, & Rapid Response Team	Cancelled 13 <sup>th</sup> June
Internal Business Continuity Confirm and Challenge	Bowel Screening, MDMS, Pharmacy, Sarum, SLT,	Cancelled meetings scheduled from March –

meetings with departments	Catering, Housekeeping, Respiratory, Whiteparish, Amesbury/Chilmark, Cleft Services, Rheumatology, Central Booking, Stoma IT, OH	October 2018
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**Table 3:**

Type of Exercise/Live	Audience/Description	Date
Internal Incident – Power Outage Live	Incident Management Team (IMT)	24 <sup>th</sup> January 2018
Beast from the East (Snow) Live	Incident Management Team (IMT),	1 <sup>st</sup> & 2 <sup>nd</sup> March 2018
Mini Beast (snow) Live	Incident Management Team (IMT),	17 <sup>th</sup> March 2018
MI March Response Live	Incident Management Team (IMT), ED & ITU	5 <sup>th</sup> March 2018
MI July Response Live	Incident Management Team (IMT), ED & ITU	3 <sup>rd</sup> July 2018
Internal Incident Power failure	Incident Management Team (IMT)	17 <sup>th</sup> August
MI response Live	On call- Executive, COO & Deputy & Security	16 <sup>th</sup> September – stood down within hours
SWAST MI Everbridge Cascade test / Exercise Connecting Exercise	Main Switchboard & Duty Managers	Week Commencing 27 <sup>th</sup> August 2018 Commencing 1 <sup>st</sup> October 2018 for five weeks

All exercises and live events are debriefed so lessons learnt and action plans can be captured, and plans updated/modified as required.

## 6. 2018/19 Exercising Schedule – dates planned

Live Exercises	Table Tops	Communications Test	Training
Emergo National Burns Exercise 30 <sup>th</sup> October 2018	Recovery Table Top (TBA 2019)	SWAST Exercise Connecting	PREVENT WRAP
Scheduling of Fire Ward Evacuation exercises for 2019 in line with refurbishment projects	Clinical Science & Engineering Business Continuity Table top Jan 25 <sup>th</sup> 2019	Confirm and Challenge for Departmental Business Continuity Plans (TBA) rolling three year programme to cover Trust-wide	Loggist Refresher Training and Loggist new (TBA for 2019)
			CBRN & PRPS Training (TBA for 2019)
			EPRR Mandatory Refresher training for on-call Duty Manager (TBA 2019)

## 7. Partnership Working

Externally the Trust is embedded in multi-agency planning through the Wiltshire & Swindon Local Health Resilience Partnership (LHRP). This ensures a proactive and coordinated approach to planning and sharing of best practice. The Trust participates on a regular basis on the Everbridge SWAST communications cascade as well as regular Health Community Response Plan activities, and actively works on the LHRP task and finish groups where appropriate and works with partners with the coordinated planning of the modular response tool iRespond which has been implemented across the Health economy in Wiltshire.

This partnership working has been strengthened further during 2018 with the multi-agency partnership working during the live major incident response and recovery phases, where partners have worked together through response groups such as the Strategic Coordinating Group, Tactical Coordinating Group and during recovery through the sub groups within recovery and the Recovery Coordinating Group. The Trust has participated with partners in multi-agency debriefs associated with the two major incident live responses. This partnership working will evolve further in 2018/19 as partners undertake on request of other NHS organisations out of region to share lessons learnt from the major incident responses which provoked national and international attention.

## 8. Identified Gaps in EPRR portfolio & Next Steps

Gaps	Action	Date
Instigate a switchboard automated procedure for our internal cascade procedures	Investigate options e.g. Confirmer, PageOne and Everbridge	2019
Maintain our volunteer pool for Loggists and the Rapid Response Team	Ensure we have scheduled regular refresher training sessions for loggist and our rapid response team. Gap identified to support with loggist training	Sessions to be arranged for 2019 (number of sessions postponed in 2018 due to the sensitivities of the MI response)
Update our MI Plan & CBRN plans	Plans live, require review following lessons learnt from MI responses	2019
FFP3 Fit Testing – formal records and compliance difficult to review, suggestion of utilising MLE as method of recording, due to changes in training groups identified, financial implications for training materials required, no budget yet identified.	Being reviewed through the Winter Resilience Assurance Group. Sept 2019 agreed this training for all front facing clinical staff not just priority groups as in 2018	2018/19
Maintain compliance against the core standards and improve on these minimum standards	To ensure we maintain full compliance at the next Core Standards CCG Confirm and Challenge meeting	August 2019
Forge links with the Wessex network of the LHRP, to ensure a consistent approach for response to an incident linking the Trauma Centre and Units	Continued participation in regional exercising, building on links with partners at other organisations	2019

Formalise Recovery, following a table top exercise to be planned for 2019 at request of Directorate Managers	Recovery Table top	2019
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**9. Summary**

Based on the National RAG status for EPRR compliance SFT have been rated by Wiltshire CCG and NHS England as 'Fully' compliant for the second consecutive year. As a category One responder we are meeting our civil protection duties under the Civil Contingencies Act (2004).

Full compliance means that arrangements are in place that appropriately addresses all the core standards that the organisation is expected to achieve.

**10. Recommendation**

The Trust Board is asked to support the ongoing work required to fulfil our EPRR duties and responsibilities, and to agree this full compliance statement by signing off this annual EPRR assurance report as part of the NHS England assurance process.