

Title of paper:	Emergency Planning, Resilience and Response (EPRR) Assurance
Author name and job title:	Jonathan Perrott, Business Manager
Date of paper:	10 th November 2015
Exec Lead:	Karen Parsons, Chief Operating Officer
Meeting name and date:	Governing Body 27 th November 2015
Agenda item & attachment number:	Agenda Item 16 Attachment 12
Attachments – please list or state “none”	SDCCG EPRR core standards self-assessment November 2015
Purpose of Paper (tick one only):	
For information only (to note)	<input checked="" type="checkbox"/>
Requires discussion and Feedback	<input type="checkbox"/>
For decision	<input type="checkbox"/>

Executive Summary:

NHS England has issued revised core standards for Emergency Planning, Resilience and Response (EPRR). As a CCG we are required to benchmark ourselves against these standards and put in place an action plan to meet them.

The key desired outcomes in this area are:

- Ability to respond to a business continuity incident (e.g. flooding)
- Ability to respond to a major incident (e.g. mass casualty, pandemic flu, terrorist incident)
- Ability to maintain services during peak stresses (e.g. winter, heatwave)

The supporting requirements are:

- Adequate plans (over-arching and local) – e.g. Incident Response Plan, Pandemic Influenza Plan, business continuity plans
- Systems and infrastructure – e.g. resilient IT, telecoms, remote working capability, mutual aid, communications
- Competent staff – based on training and incident simulations

The attached document gives our benchmarked position now and over the next three months, by which time we should be fully compliant. This document was submitted to NHS England on 24th September 2015, and presented at an assurance meeting on 9th October. A similar formal assurance process took place last year.

In overall terms based on RAG ratings, progress has been as follows:

	2013	2014	2015
Red	44%	32%	0%
Amber	34%	47%	13%
Green	22%	21%	87%

Some specific areas of improvement include:

- We now have in place an EPRR Policy, an Incident Response Plan, a Pandemic Influenza Plan, an EPRR Risk Register
- Our EPRR documentation has been reviewed by South East Commissioning Support Unit (SECSU) Business Continuity team who have confirmed that it is in line with NHS guidance and is ISO 22301 compliant
- We have undertaken a review of and updated our On Call documentation and carried out a training needs survey.

The **amber areas** in the RAG rating relate to:

- Development of training and exercises plan which is in progress
- Review of possible additional telecoms resilience

Compliance section

Please identify any significant issues relating to the following

Risk Register and Assurance Framework	A number of these areas are on or are linked to the CCG risk register and / or assurance framework.
Patient and Public Engagement	None
Patient Safety & Quality	None
Financial implications	None
Conflicts of interest	None
Information Governance	None
Equality and Diversity	None
Any other legal or compliance issues	None
Accompanying papers (please list): SDCCG EPRR Core Standards Self-Assessment November 2015	
Summary: What is the Governing Body being asked to do and why? The Governing Body is asked to NOTE the report	

Emergency Preparedness, Resilience and Response Core Standards - Surrey Downs CCG Self-Assessment

Core standard		Self assessment RAG Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months. Amber = Not compliant but evidence of progress and in the EPRR work plan for the next 12 months. Green = fully compliant with core standard.	Status	Action to be taken	By end Dec 2015	By end Jan 2016	By end Feb 2016
Governance							
1	Organisations have a director level accountable emergency officer who is responsible for EPRR (including business continuity management)	Green	This is the Chief Operating Officer who is the Accountable Emergency Officer	None	Green	Green	Green
2	Organisations have an annual work programme to mitigate against identified risks and incorporate the lessons identified relating to EPRR (including details of training and exercises and past incidents) and improve response.	Green	SDCCG maintains a combined assurance plan and action plan. This is updated on an on-going basis to take account of changes in risk assessments, lessons learned from incidents, emergencies, exercises, plus changes in organisation, staff and policy.	The action plan will be updated on further development of training and exercises plans	Green	Green	Green
3	Organisations have an overarching framework or policy which sets out expectations of emergency preparedness, resilience and response.	Green	The CCG has an overarching combined Major Incident Policy and Plan. This will be superseded by a separate EPRR Policy and an Incident Response Plan. Key staff have been informed where to find policies and plans.	EPRR Policy and Incident Response Plan to be submitted to Executive Committee for approval	Green	Green	Green
4	The accountable emergency officer will ensure that the Board and/or Governing Body will receive as appropriate reports, no less frequently than annually, regarding EPRR, including reports on exercises undertaken by the organisation, significant incidents, and that adequate resources are made available to enable the organisation to meet the requirements of these core standards.	Green	Reporting on EPRR is taken to the Governing Body at least annually and is also included in the Annual Report. More frequent reports on EPRR including on exercises, incidents and resources are taken to the Executive Committee	Regular reporting to be maintained	Green	Green	Green
Duty to assess risk							
5	Assess the risk, no less frequently than annually, of emergencies or business continuity incidents occurring which affect or may affect the ability of the organisation to deliver it's functions.	Green	EPRR risks are included on the SDCCG Corporate risk register which is reviewed every 4-6 weeks. SDCCG maintains a EPRR risk register which is aligned to the Local Resilience Forum Community Risk Register. Arrangements in place to deal with local risks e.g. flooding of River Mole	None	Green	Green	Green
6	There is a process to ensure that the risk assessment(s) is in line with the organisational, Local Health Resilience Partnership, other relevant parties, community (Local Resilience Forum/ Borough Resilience Forum), and national risk registers.	Green	Risks aligned with Partners as part of on-going dialogue in Local Health Resilience Partnership Executive Group and Local Health Resilience Partnership Delivery Group meetings and through other meetings with partners	None	Green	Green	Green
7	There is a process to ensure that the risk assessment(s) is informed by, and consulted and shared with your organisation and relevant partners.	Green	SDCCG risk assessments shared with partners through Local Health Resilience Partnership forum, bringing specific SDCCG issues to partners who may be affected	None	Green	Green	Green
Duty to maintain plans – emergency plans and business continuity plans							
	Effective arrangements are in place to respond to the risks the organisation is exposed to, appropriate to the role, size and scope of the organisation, and there is a process to ensure the likely extent to which particular types of emergencies will place demands on your resources and capacity.	Green	SDCCG Incident Response Plan in place	Incident Response Plan to be submitted to Executive Committee for approval	Green	Green	Green
	Have arrangements for (but not necessarily have a separate plan for) some or all of the following (organisation dependent) (NB, this list is not exhaustive): - incidents and emergencies	Green	Internal Audit reviewed SDCCG Business Continuity Plans in 2014 and made recommendations to the Audit Committee which were accepted and have now been implemented. Overarching CGG and departmental Business Continuity Plans in place which are in line with NHS guidance and are ISO 22301 compliant	Business Continuity plans to reviewed regularly and updated to take account of incidents, and changes in organisation and personnel	Green	Green	Green
	- corporate and service level business continuity	Green	SDCCG uses national and Surrey Local Resilience Forum Adverse Weather plans. Business Continuity Plans are in place.	Will monitor forecast El Nino severe weather risk and respond appropriately	Green	Green	Green
	- severe weather	Green			Green	Green	Green

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8	- pandemic influenza	Green	SDCCG Pandemic Influenza Plan is in place which aligns with the Surrey Local Resilience Forum and Surrey Local Health Resilience Partnership pandemic influenza plans. SDCCG held a pandemic influenza exercise for staff in 2014	SDCCG will participate in Surrey wide pandemic influenza training and exercises	Green	Green	Green
	- fuel disruption	Green	SDCCG does not qualify for fuel priority arrangements. For disruption caused by fuel shortage see Business Continuity Plans	None	Green	Green	Green
	- surge and escalation management	Green	SDCCG Urgent Care Lead participates in SDCCG Systems Resilience Group and provides surge guidance to On Call Managers	None	Green	Green	Green
	- infectious diseases outbreak	Green	Infectious disease outbreak may lead to staff shortages. See Business Continuity Plans	None	Green	Green	Green
	- evacuation	Green	SDCCG has an evacuation plan in place including personal evacuation plans. Periodic evacuation drills are arranged and implemented by landlord.	None	Green	Green	Green
	- utilities, IT and telecoms failure	Green	Utilities, IT and telecoms failure may lead to IT and building occupancy disruption. See Business Continuity Plans	None	Green	Green	Green
9	Ensure that plans are prepared in line with current guidance and good practice which includes:	Green	South East Commissioning Support Unit Business Continuity Team have confirmed that SDCCG EPRR plans align with current guidance and good practice	SDCCG will continue to horizon scan for revised guidance and examples of good practice which will be implemented as appropriate	Green	Green	Green
10	Arrangements include a procedure for determining whether an emergency or business continuity incident has occurred. And if an emergency or business continuity incident has occurred, whether this requires changing the deployment of resources or acquiring additional resources.	Green	Included in Incident Response Plan	None	Green	Green	Green
11	Arrangements include how to continue your organisation's prioritised activities (critical activities) in the event of an emergency or business continuity incident insofar as is practical.	Green	Business Continuity Plans in place for all departments/services with particular focus on support for acute service and integrated care for elderly	None	Green	Green	Green
13	Preparedness is undertaken with the full engagement and co-operation of interested parties and key stakeholders (internal and external) who have a role in the plan and securing agreement to its content	Green	This is done through Surrey Local Health Resilience Partnership and other meetings	None	Green	Green	Green
14	Arrangements include a debrief process so as to identify learning and inform future arrangements	Green	Included in Incident Response Plan	None	Green	Green	Green
Command and Control (C2)							
15	Arrangements demonstrate that there is a resilient single point of contact within the organisation, capable of receiving notification at all times of an emergency or business continuity incident; and with an ability to respond or escalate this notification to strategic and/or executive level, as necessary.	Green	SDCCG has resilient single point of contact via JAM media answering service linked to On Call rota of First On Call managers with access to Second On Call and executive support including Accountable Emergency Officer	None	Green	Green	Green
16	Those on-call must meet identified competencies and key knowledge and skills for staff.	Amber	On-call staff have received on-call training (internal and via Local Resilience Forum training) and have completed a training needs questionnaire. On call staff (8a and above) have NHS emergency and local area knowledge pertinent to on call situations	Formal training development plan for on-call staff to be put in place.	Amber	Green	Green
17	Documents identify where and how the emergency or business continuity incident will be managed from, ie the Incident Co-ordination Centre (ICC), how the ICC will operate (including information management) and the key roles required within it, including the role of the loggist .	Green	Incident Control Room procedures included in Incident Response Plan. SDCCG has trained loggists	Plan to set up a virtual Incident Control Room for further resilience	Green	Green	Green

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18	Arrangements ensure that decisions are recorded and meetings are minuted during an emergency or business continuity incident.	Green	Arrangements for recording decisions and minuting meetings included in Incident Response Plan	None	Green	Green	Green
19	Arrangements detail the process for completing, authorising and submitting situation reports (SITREPs) and/or commonly recognised information pictures (CRIP) / common operating picture (COP) during the emergency or business continuity incident response.	Green	SDCCG completes SITREP in the forms provided	None	Green	Green	Green
Duty to communicate with the public							
22	Arrangements demonstrate warning and informing processes for emergencies and business continuity incidents.	Green	Comms Team actively communicate with public via website and social media. This process can be used for warning/informing of emergencies Guidance for On Call managers includes direction to discuss public message matters with Comms team SDCCG has staff mobile/email cascade plans in place SDCCG holds contacts details for partner organisations	None	Green	Green	Green
23	Arrangements ensure the ability to communicate internally and externally during communication equipment failures	Amber	Current arrangements include if desk phones fail, move to mobile; if nhs.net email fails move to non secure email if appropriate See Business Continuity plans.	SDSCG considering possible need for further resilience e.g. pagers and/or satellite radios	Amber	Green	Green
Information Sharing – mandatory requirements							
24	Arrangements contain information sharing protocols to ensure appropriate communication with partners.	Green	Arrangements in place for communicating including via SITREP and audio conferencing. We adhere to Caldicott Principles	None	Green	Green	Green
Co-operation							
25	Organisations actively participate in or are represented at the Local Resilience Forum (or Borough Resilience Forum in London if appropriate)	Green	CCGs are represented on Local Resilience Forum by Public Health England	SDCCG will participate in Local Resilience Forum if invited and resources available	Green	Green	Green
26	Demonstrate active engagement and co-operation with other category 1 and 2 responders in accordance with the CCA	Green	Achieved via Local Health Resilience Partnership and other meetings with Category 1 and 2 responders	None	Green	Green	Green
27	Arrangements include how mutual aid agreements will be requested, co-ordinated and maintained.	Green	SDCCG provides office space/IT to SECSU, has offered similar facilities to other CCGs in emergency situations, and offered physical assistance in 2014 to CCGs managing flooding situations. Verbal mutual aid agreement in place with Guildford & Waverley CCG	None	Green	Green	Green
30	Arrangements demonstrate how organisations support NHS England locally in discharging its EPRR functions and duties	Green	This is included in Incident Response Plan. SDCCG holds one to one meetings with NHS England to agree appropriate support, and meets with them through Local Health Resilience Partnership meetings	None	Green	Green	Green
33	Arrangements are in place to ensure attendance at all Local Health Resilience Partnership meetings at a director level	Green	SDCCG Accountable Emergency Officer attends Local Health Resilience Partnership Executive Group meetings	None	Green	Green	Green
Training And Exercising							
34	Arrangements include a training plan with a training needs analysis and ongoing training of staff required to deliver the response to emergencies and business continuity incidents	Amber	Training needs survey completed. EPRR Training record has been established and is in use	Results of training needs survey will be analysed and a training plan put in place	Amber	Green	Green
35	Arrangements include an ongoing exercising programme that includes an exercising needs analysis and informs future work.	Amber	Pandemic Flu desktop exercise carried out 2014 Exercise register is in place and in use	Exercise plan to be developed	Amber	Green	Green
36	Demonstrate organisation wide (including oncall personnel) appropriate participation in multi-agency exercises	Green	SDCCG participates in multi-agency exercises and training	SDCCG to continue to participate in multi-agency exercises	Green	Green	Green

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37	Preparedness ensures all incident commanders (oncall directors and managers) maintain a continuous personal development portfolio demonstrating training and/or incident /exercise participation.	Amber	Training needs survey has been completed	Training needs survey results to be analysed and a training plan developed which will be used for discussion and agreement to incorporate EPRR training into PDP portfolios for senior staff	Amber	Green	Green