

**NHS DORSET CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING
EPRR ASSURANCE REPORT 2016**

Date of the meeting	20/01/2016
Author	S Walker - Emergency Planning Lead
Sponsoring Board Member	T Goodson – Chief Officer
Purpose of Report	To provide an overview of EPRR Assurance 2015-2016.
Recommendation	The Governing Body is asked to note the report.
Stakeholder Engagement	Accountable Emergency Officers and Emergency Planners from Dorset NHS Provider Organisations
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Strategic Principles	<ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
I confirm that I have considered the implications of this report on each of the matters above, as indicated	✓		

Initials : SW

1. Introduction

- 1.1 The NHS needs to plan for, and respond to, a wide range of incidents and emergencies that could affect health or patient care. These incidents could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident. The Civil Contingencies Act (2004) requires NHS organisations, and providers of NHS-funded care, to show that they can deal with such incidents while maintaining safe and quality services.
- 1.2 NHS England has published updated NHS core standards to assess Emergency Preparedness, Resilience and Response (EPRR) arrangements for 2015-2016. These are the minimum standards which NHS organisations and providers of NHS funded care must meet. The Accountable Emergency Officer in each organisation is responsible for making sure these standards are met.
- 1.3 The 2015-2016 EPRR assurance process required NHS England (at national regional and sub-regional level), Clinical Commissioning Group's (CCG's), Acute, Community and Mental Health providers of NHS care to complete the core standards self-assessment matrix by rating each item red (not compliant and cannot be achieved over next 12 months), amber (not compliant but can be achieved over next 12 months) or green (fully compliant). An improvement plan was then drawn up by each organisation to outline how the amber or red core standards would be addressed over the next 12 months. Additionally their Accountable Emergency Officer was also required to sign a statement of compliance which outlined their commitment to delivering the improvement plan.
- 1.4 Between 7th and 23rd October 2015 the CCG Accountable Emergency Officer (Mike Wood) and the Emergency Planning Lead (Sarah Walker) met with each of the acute providers and Dorset Healthcare University Foundation Trust (DHC) to discuss their assurance returns. The outcomes of these meetings are discussed below.

2. Examples of EPRR good practice across the provider system

- 2.1 Whilst the assurance focusses on key areas of improvement/development in EPRR there were a number of good practice examples put forward by each provider which it is important to recognise.
 - Poole Hospital NHS Foundation Trust (PH) highlighted that they were working hard to enhance existing business continuity plans throughout the trust, ensuring that these plans are tested through exercises. Additionally PH invited external auditors to assess the trust's EPRR assurance returns and the trust received positive feedback on accuracy of their returns.
 - Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust (RBCH) highlighted that EPRR training is now part of their induction training for all staff and that they are working to introduce a programme of

mandatory update training for all staff every three years. They are also working to introduce EPRR e-learning modules within the trust.

- Dorset County Hospital NHS Foundation Trust (DCH) have held a number of EPRR training sessions this year which have been well received within the trust. Additionally during a recent Chemical Biological Radiological and Nuclear (CBRN) equipment audit carried out by South West Ambulance Service NHS Foundation Trust (SWASFT) DCH were rated exemplary and will be used as an example of best practice.
- Dorset Healthcare University NHS Foundation Trust (DHC) explained that there has been a focus on clarifying the structure of the trust's EPRR plans and policies ensuring that DHC staff are aware of the top level legislation and national guidance and how this fits with trust plans locally. Staff now have a clear understanding of how their role in an emergency response or business continuity incident fits with the higher level guidance and legislation.

3. Key themes and challenges

- 3.1 Providers highlighted that it would be beneficial for the Local Health Resilience Partnership (LHRP) to work together to plan and deliver live exercises. Trusts are required to carry out a live exercise once every three years and these exercises can be expensive to run. Providers felt that by pooling resources a more realistic exercise can be created. This feedback will be taken back to the LHRP to action.
- 3.2 Providers also agreed that it would be beneficial to have a secure document sharing platform for LHRP members so that trusts can view each other's EPRR documents and share best practice. Again this will be taken back to the LHRP as an action.

4. CCG EPRR Assurance

- 4.1 The CCG's Accountable Emergency Officer and Emergency Planning lead met with their counterparts at NHS England – South (Wessex) on Friday 20th November 2015 to discuss provider assurance returns and the CCG's own submission.
- 4.2 At the time of the meeting the CCG had five items listed on its EPRR improvement plan. Key areas of work listed on this plan include completion and sign off of a Dorset wide NHS mutual aid plan, the release of on-call action cards to guide on-call Senior Managers through the response to specific incidents and sign off and testing of the CCG's pandemic flu action card. Mike Wood (the CCG's Accountable Emergency Officer) has signed the attached statement of compliance (Appendix 2) outlining the CCG's commitment to the improvement plan. The mutual aid plan and on-call action cards have since been launched and the current improvement plan can be found in Appendix 1.

- 4.3 During the meeting with NHS England they confirmed that the CCG were substantially compliant with the EPRR core standards.

5. Next steps

- 5.1 NHS England – South (Wessex) will write to the CCG to formally summarise discussions from the meeting on Friday 20th November. The CCG will then write to each provider summarising their specific feedback. A copy of this letter will also be sent to each provider’s contract review meeting.
- 5.2 Provider’s improvement plans will then be reviewed on a quarterly basis at the LHRP sub-group meetings.

6. Conclusion

- 6.1 The Governing Body is asked to note this report as a requirement of the 2015-2016 assurance process for EPRR.

Author’s name and Title : Sarah Walker
Date : 04/01/2016
Telephone Number : 01305 368068

APPENDICES	
Appendix 1	EPRR Improvement Plan
Appendix 2	NHS Dorset CCG Signed Statement of Compliance

Appendix 1 : EPRR Improvement Plan - NHS Dorset CCG

Version: 1.1 04/01/2016

NHS Dorset CCG has been required to assess itself against the NHS core standards for Emergency Preparedness, Resilience and Response (EPRR) as part of the annual EPRR assurance process for 2015/16. This improvement plan is the result of this self-assessment exercise and sets out the required actions that will ensure full compliance with the core standards.

This is a live document and it will be updated as actions are completed.

Core standard	Current self-assessed level of compliance (RAG rating)	Remaining actions required to be fully compliant	Planned date for actions to be completed	Lead name	Further comments
8) 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.		Link to PHE infectious disease plan via Incident Response Plan (now added). Creation of Fuel action card	November 2015 (Complete) April 2016	Sarah Walker	
24) Arrangements contain information sharing protocols to ensure appropriate communication with partners.		Vulnerable people action card launched in Dec 2015 along with a suite of specific incident response action cards.	December 2015	Sarah Walker	
27) Arrangements include how mutual aid agreements will be requested, co-ordinated and maintained.		Completed and approved at December Systems Resilience Group. This has now gone live	November 2015	Sarah Walker / Julie Brown	
DD3) Organisations have undertaken a pandemic influenza exercise or have one planned in the next six months		LHRP Flu exercise to test plan	April 2016	Work with NHS England - Wessex	
DD4) Organisations have taken their plans to Boards / Governing bodies for sign off		Pan flu action card to be sent to February Directors meeting for sign off.	Feb 2015	Sarah Walker	

Appendix 2: NHS Dorset CCG Signed Statement of Compliance

**EPRR statement of compliance**

The NHS needs to plan for, and respond to, a wide range of incidents and emergencies that could affect health or patient care. These could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident. The Civil Contingencies Act (2004) requires NHS organisations, and providers of NHS-funded care, to show that they can deal with such incidents while maintaining services.

NHS England has published NHS core standards for Emergency Preparedness, Resilience and Response arrangements. These are the minimum standards which NHS organisations and providers of NHS funded care must meet. The accountable emergency officer in each organisation is responsible for making sure these standards are met.

As part of the national EPRR assurance process for 2015/16, [NHS Dorset CCG](#) has been required to assess itself against these core standards by Friday 13th November 2015. The outcome of this self-assessment shows that against [34](#) of the core standards which are applicable to the organisation, [NHS Dorset CCG](#):

- is fully compliant with of these core standards; [29](#) and
- will become fully compliant with [5](#) of these core standards by [April 2016](#)

The attached improvement plan sets out actions against all core standards where full compliance has yet to be achieved.

[Mike Wood](#)

A handwritten signature in black ink that reads 'Mike Wood'. The signature is written in a cursive style and is positioned above the printed name and title.

[NHS Dorset CCG](#)
[23/10/2015](#)