

**NHS DORSET CLINICAL COMMISSIONING GROUP**  
**GOVERNING BODY MEETING**  
**EMERGENCY PREPAREDNESS, RESILIENCE AND RESPONSE (EPRR)**  
**ASSURANCE REPORT 2016**

<b>Date of the meeting</b>	18/01/2017
<b>Author</b>	S Walker, Emergency Planning Lead
<b>Sponsoring Board Member</b>	T Goodson, Chief Officer
<b>Purpose of Report</b>	To provide an overview of EPRR Assurance 2016-2017.
<b>Recommendation</b>	The Governing Body is asked to <b>note</b> the report.
<b>Stakeholder Engagement</b>	Accountable Emergency Officers and Emergency Planners from Dorset NHS Provider Organisations
<b>Previous GB / Committee/s, Dates</b>	N/A

**Monitoring and Assurance Summary**

<b>This report links to the following Strategic Principles</b>	<ul style="list-style-type: none"> <li>• Services designed around people</li> <li>• Preventing ill health and reducing inequalities</li> <li>• Sustainable healthcare services</li> <li>• Care closer to home</li> </ul>		
	<b>Yes</b> [e.g. ✓]	<b>Any action required?</b>	
		<b>Yes</b> Detail in report	<b>No</b>
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	✓		✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	✓		

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 2016-2017. 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 2016-2017 EPRR assurance process required NHS England (at national regional and local level), Clinical Commissioning Group's (CCG's), Acute, Community and Mental Health providers of NHS care to complete the core standards self-assessment matrix. 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. Additionally for 2016-2017 Non-Emergency Patient Transport Services and NHS 111 providers were also required to submit assurance via NHS Dorset CCG.
- 1.4 Between Wednesday 7<sup>th</sup> and Monday 19<sup>th</sup> September 2016 the CCG Accountable Emergency Officer (Mike Wood) and the Emergency Planning Lead (Sarah Walker) met with each of the acute providers, Dorset Healthcare, NHS 111 and Non-Emergency Patient Transport Services 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 providers.
  - Poole Hospital NHS Foundation Trust (PH) highlighted that their Trust Board take an active interest in EPRR and over the last year have requested detailed assurance. Consequently there are embedded reporting mechanisms to ensure they are kept up to date with EPRR developments.
  - Dorset County Hospital NHS Foundation Trust (DCH) outlined that they have created a dedicated Share Point site for EPRR which provides a central location for all relevant documentation to be stored for staff to access.

- Dorset Healthcare University NHS Foundation Trust (DHC) reported that they have an internal Emergency Planning Group which meet bi-monthly. The membership of the group extends to all departments which have an involvement in EPRR ensuring those staff are up to date on developments and enables EPRR to become embedded in DHC.
- In recognition that this was NHS 111's first year of submitting EPRR assurance they provided an example from a previous year which related to when the St Leonard's hub had an electrical outage and it was necessary to transfer sites. They felt that the transition went smoothly because a physical walk through major incident exercise had taken place the previous year.

### **3. Dorset NHS Overall Compliance Levels**

- 3.1 Overall compliance levels can be found in Appendix 3.

### **4. Key themes and challenges**

- 4.1 Whilst in general it was felt that the standard of EPRR had increased since the assurance process was introduced three years ago, it was noted that moving forward this would be in an ever more challenging climate.
- 4.2 There was a consistent gap in relation to formal plan consultation with partners and so this will be taken forward and monitored by the Local Health Resilience Partnership (LHRP) and its subgroup.
- 4.3 Acute providers reported some training gaps and this has been discussed and agreed to be taken forward by the LHRP subgroup.

### **5. CCG EPRR Assurance**

- 5.1 The CCG's Accountable Emergency Officer and Emergency Planning Lead met with their counterparts at NHS England – South (Wessex) on Friday 14<sup>th</sup> October 2016 to discuss provider assurance returns and the CCG's own submission.
- 5.2 The CCG has three items listed on its EPRR improvement plan (Appendix 1). Key areas of work listed on this plan include CCG Fuel Strike planning in line with the CCG's existing Business Continuity Plan and drop in sessions for Senior Managers on-call which will cover On-call and Incident Coordination Centre training.
- 5.3 NHS England – South (Wessex) have formally agreed that as, at the time of the meeting, the CCG has four outstanding amber core standards it is currently substantially compliant (Appendix 2).

## 6. Next steps

- 6.1 NHS England – South (Wessex) have formally written to the CCG to summarise discussions from the meeting on Friday 14<sup>th</sup> October. Following this, the CCG has written to each provider summarising their specific feedback. A copy of this letter will also be sent to each providers' contract review meeting.
- 6.2 Provider's improvement plans will then be reviewed on a quarterly basis ahead of LHRP meetings. These review meetings will take place in January, April and July 2017.

## 7. Conclusion

- 7.1 The Governing Body is asked to note this report as a requirement of the 2016-2017 assurance process for EPRR.

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**Date : 22/12/2016**  
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<b>APPENDICES</b>	
<b>Appendix 1</b>	<b>Dorset CCG EPRR Improvement Plan</b>
<b>Appendix 2</b>	<b>NHS Dorset CCG Signed Statement of Compliance</b>
<b>Appendix 3</b>	<b>Dorset NHS Overall Compliance Level</b>

## Appendix 1: EPRR Improvement Plan: NHS Dorset CCG

Version: V2 22/12/2016

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 2016/17. 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
<p>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.</p> <p>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): Fuel Disruption</p>		The CCG's Critical functions are outlined in the CCG's Business Continuity Plan. Those staff who work in critical functions would be the priority fuel users. Work to be carried out to identify remote working options for those members of staff and usual transport to work etc. This will be formally written up as an annex to the CCG's Business Continuity Plan	March 2017	Sarah Walker/Tree Larby	This planning will take place following the launch of the Dorset LRF Fuel Plan
<p>24) Arrangements contain information sharing protocols to ensure appropriate communication with partners.</p>		Vulnerable people action card to be reviewed in light of Dorset CCG getting full delegation of primary care commissioning.	November 2016	Sarah Walker (linking with Jon Malley at NHS E)	The on-call action card for vulnerable people identification has been updated to reflect the CCG having full primary care delegation.

# 9.8

<p>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</p>		<p>Training pathway details training which different levels of staff should undertake. Loggists have this year carried been on or are booked on refresher training and have attended an internal 'Supporting a Major Incident' training sessions. A major incident E-learning package has been launched to all staff and will be mandatory for induction. A number of On-call staff have attended Tactical Responders training and will be receiving internal update training sessions in relation to the ICC shortly.</p>	<p>Jan 2017</p>	<p>Sarah Walker</p>	<p>Two On-call staff attended the Tactical Responders Training course in December with a further three due to attend a session in February. Drop in sessions to be held in January for on-call staff covering ICC and On-call processes.</p>
<p>37) Preparedness ensures all incident commanders (on-call directors and managers) maintain a continuous personal development portfolio demonstrating training and/or incident /exercise participation.</p>		<p>Training pathway details training which different levels of staff should undertake. Loggists have this year carried been on or are booked on refresher training and have attended an internal 'Supporting a Major Incident' training sessions. A major incident E-learning package has been launched to all staff and will be mandatory for induction. A number of On-call staff have attended Tactical Responders training and will be receiving internal update training sessions in relation to the ICC shortly.</p>	<p>Jan 2017</p>	<p>Sarah Walker</p>	<p>Two On-call staff attended the Tactical Responders Training course in December with a further three due to attend a session in February. Drop in sessions to be held in January for on-call staff covering ICC and On-call processes.</p>

## Appendix 2: NHS Dorset CCG Signed Statement of Compliance

**Example 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 2016/17, [NHS Dorset CCG](#) has been required to assess itself against these core standards by Friday 30<sup>th</sup> September 2016. The outcome of this self-assessment shows that against 35 of the core standards which are applicable to the organisation, NHS Dorset CCG:

- is fully compliant with 31 of these core standards; and
- will become fully compliant with 4 of these core standards by March 2017.

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

Mike Wood  
Accountable Emergency Officer

NHS Dorset CCG  
16/09/2016

A handwritten signature in black ink that reads 'Michael Wood'. The signature is written in a cursive style and is underlined with a single horizontal stroke.

### Appendix 3: EPRR Compliance Levels Table and Dorset NHS Organisations Overall Compliance Levels

EPRR Assurance Compliance Levels 2016/2017

Compliance Level	Evaluation and Testing Conclusion
<b>Full</b>	Arrangements are in place that appropriately addresses all the core standards that the organisation is expected to achieve. The Board has agreed with this position statement.
<b>Substantial</b>	Arrangements are in place however they do not appropriately address one to five of the core standards that the organisation is expected to achieve. A work plan is in place that the Board has agreed.
<b>Partial</b>	Arrangements are in place, however they do not appropriately address six to ten of the core standards that the organisation is expected to achieve. A work plan is in place that the Board has agreed.
<b>Non-compliant*</b>	Arrangements in place do not appropriately address 11 or more core standards that the organisation is expected to achieve. A work plan has been agreed by the Board and will be monitored on a quarterly basis in order to demonstrate future compliance.

Organisation	Number of outstanding core standards	Overall Compliance Level
Dorset County Hospital	2	Substantially compliant
Dorset Healthcare	1 and 1 Chemical Biological Radiological and Nuclear (CBRN) item	Substantially compliant
Poole Hospital	2	Substantially compliant
Royal Bournemouth Hospital	7	Partially Compliant
NHS 111	1	Substantially Compliant
E-zec Medical	7	Partially Compliant
NHS Dorset CCG	3	Substantially Compliant