

EPRR (Emergency Planning Resilience and Response)

Trust Board Report

Meeting Date:	22 November 2013
Title:	Emergency Planning Resilience & Response (EPRR)
Executive Summary:	This report covers the following area: <ul style="list-style-type: none"> Emergency Preparedness, Response & Resilience Core Standards
Action Requested:	Endorsement of EPRR Core Standards Self-Assessment: Improvement Plan.
Report of:	Director of Planning & Contracting
Author: Contact Details:	Head of Emergency Planning & Business Continuity Diane.preston@nhs.net
Resource Implications:	Nil
Public or Private: (with reasons if private)	Public session
References: (eg from/to other committees)	Emergency Planning Group
Appendices/ References/ Background Reading	Appendix 1: EPRR Core Standards Self- Assessment: Improvement Plan.
NHS Constitution: (How it impacts on any decision-making)	
Background Details	
1	As part of the new health changes (April 2013) Trusts now have to follow the Emergency Preparedness, Resilience and Response (EPRR) Framework. In October NHS England Birmingham, Solihull and the Black Country Area Team issued a matrix of standards which they expect all 'Providers' to provide assurance against.
Emergency Preparedness, Resilience & Response: Core Standards	
2	A set of core standards for EPRR have been published which is an underpinning requirement for NHS funded organisations. All organisations must demonstrate that they have plans in place, and can deal with a wide range of incidents and emergencies that could impact on health or patient care.

Self-Assessment of the assurance framework

- 3** The Trust was requested to undertake a self-assessment of each of the EPRR Core Standards and provide an improvement plan.
- The self-assessment has been submitted to NHS England; Birmingham, Solihull & the Black Country Area Team (25 October 2013) which was approved by the Trust's Accountable Emergency Officer (AEO) and the Emergency Planning Group.
- Those areas identified as requiring improvement have been noted on the self-assessment and an improvement plan developed which is at Appendix 1.
- The Board is asked to endorse the proposed improvement plan which will be monitored by the Emergency Planning Group, as the designated group to provide Board assurance.

Appendix 1 – EPRR Core Standards Self- Assessment: Improvement plan.

Standard Number			Detail of standard	Existing Evidence		Improvement Plan	Timelines
			All NHS organisations and providers of NHS funded care must have plans which set out how they plan for, respond to and recover from disruptions, significant incidents and emergencies. Incident response plans must:				
5	.	26	It must be clear how awareness of the plan will be maintained amongst all staff (for example, through ongoing education and information programmes or e-learning).	In order for the Trust to maintain its resilience a training & exercising programme is produced on a yearly basis, with information being shared on the EP intranet site. All new staff attending Trust induction are given a session on emergency preparedness, along with any temporary or locum staff. There is however a requirement for the development of ongoing learning for all staff.		Development of an e learning package for all staff for ongoing learning	End of December 2013
5	.	42	Explain how to communicate with partners, the public and internal staff based on a formal communications strategy. This must take into account the FOI Act 2000, the Data Protection Act 1998 and the CCA 2004 'duty to communicate with the public'. Social networking tools may be of use here.	The Trust's response plan includes a communication plan which outlines the processes in the event of informing the public. There is an agreement in place for information sharing across agencies in Wolverhampton in line with national guidance. The Trust's communication strategy is due to be updated to including social networking.		Trust's Communication strategy is to be updated to include the role and use of social media in communicating to the public and staff in the event of a major incident.	End of December 2013
5	.	43	Have agreements in place with local 111 providers so they know how they can help with an incident	No formal agreement in place at present. This would be reviewed once the interim arrangements with WMAS are in place.		This action will be considered once the interim arrangements are put in place.	TBA
5	.	57	Severe weather.	The Trust has an inclement weather policy HR07 in place for staff. An approved winter surge plan was agreed in September 2013.		Develop a severe weather plan which outlines escalation plan and guidance for staff, in	End of December 2013

				The Trust has an approved Heatwave plan and Cold Weather Alert Plan. (These are annually updated in line with national guidance). The Trust is to develop a severe weather plan.		line with the Trust's policy for inclement weather. Ensuring that there is a clear plan in place to maintain services during severe weather.	
7			All NHS organisations and providers of NHS funded care must develop, maintain and continually improve their business continuity management systems. This means having suitable plans which set out how each organisation will maintain continuity in its services during a disruption from identified local risks and how they will recover delivery of key services in line with ISO22301. Organisations must:	The Trust has a Business Continuity Strategy and Appendices in place which is aligned to BS 25999. The plan includes the Trust's response structure to recovering critical activities and an escalation process in the event of a severe disruption. Each of the local services have their own plan to maintain business continuity. The Trust is currently reviewing the transition from BS 25999 to ISO 22301.		Action plan to be developed for the transition from BS 25999 to ISO 22301 standards.	End of November 2013
7	.	12	Plans must be maintained based on risk-assessed worst-case scenarios.	Business continuity plans include worst case scenarios; a further refresh of the risk is required.		Complete refresh of BC assessments.	End of December 2013
7	.	13	Risk assessments must take into account community risk registers and at very least include worst-case scenarios for: <ul style="list-style-type: none"> • severe weather (including snow, heatwave, prolonged periods of cold weather and flooding); • staff absence (including industrial action); • the working environment, buildings and equipment; • fuel shortages; • surges in activity; • IT and communications; 	Trust Risk assessment process is undertaken. The Trust Risk Register contains high level operational or strategic risks. The Risk Register is reviewed by the designated Trust level Committee /Group. A further refresh of the risks is required.		Complete refresh of BC assessments.	End of December 2013

			<ul style="list-style-type: none"> • supply chain failure; and • associated risks in the surrounding area (e.g. COMAH and iconic sites). 				
7			<p>All NHS organisations and providers of NHS funded care must develop, maintain and continually improve their business continuity management systems. This means having suitable plans which set out how each organisation will maintain continuity in its services during a disruption from identified local risks and how they will recover delivery of key services in line with ISO22301. Organisations must:</p>	The Trust has a Business Continuity Strategy and Appendices in place which is aligned to BS 25999. The plan includes the Trust's response structure to recovering critical activities and an escalation process in the event of a severe disruption. Each of the local services have their own plan to maintain business continuity. The Trust is currently reviewing the transition from BS 25999 to ISO 22301.		Action plan to be developed for the transition from BS 25999 to ISO 22301 standards.	End of November 2013
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			<ul style="list-style-type: none"> associated risks in the surrounding area (e.g. COMAH and iconic sites). 				
7	.	25	how the independent healthcare sector may help if required; and	No formal agreements in place. The Trust's pandemic flu plan reflects how an independent health care sector can help.		A review of the role of the Independent health care sector will take place as and when BC plans are refreshed.	
7	.	35	Details of a surge plan to maintain critical services.	Local surge plans are in place but these need to be refreshed. These were produced in line with Pandemic flu planning.		Local Surge Plans to be refreshed.	By end of December 2013
7	.	42	details of the tools that will be used to make sure staff remain aware through ongoing education and information programmes (for example, e-learning and induction training); and	Business continuity awareness week undertaken annually and promoted via the intranet. Exercises and local testing of plans are used to update staff skills. A DVD has been developed for Induction and ongoing refreshment of the dedicated EP site on staff intranet.		Development of an e-learning package for all staff.	End of December 2013