

<b>Date:</b>	13 <sup>th</sup> October 2016
<b>Meeting:</b>	Governing Body
<b>Item Number:</b>	8.7
<b>Public/Private:</b>	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

<b>Author:</b> (Name, Title)	Julie Killingbeck
<b>GB Lead:</b> (Name, Title)	

<b>Report Title:</b>
Annual Report to the Governing Body: Emergency Planning, Resilience, Response Assurance
<b>Decisions to be made:</b>
<p>The Governing Body is asked to: -</p> <ul style="list-style-type: none"> <li>To note the contents of the report</li> <li>Confirm the Governing Body are assured that sufficient plans are in place to meet the statutory requirements of the CCG as a Category 2 Responder</li> <li>To approve the core standards improvement plan</li> </ul>

<b>Continue to improve the quality of services</b>	<input checked="" type="checkbox"/>	<b>Improve patient experience</b>	<input checked="" type="checkbox"/>
<b>Reduced unwarranted variations in services</b>	<input type="checkbox"/>	<b>Reduce the inequalities gap in North Lincolnshire</b>	<input type="checkbox"/>
<b>Deliver the best outcomes for every patient</b>	<input checked="" type="checkbox"/>	<b>Statutory/Regulatory</b>	<input checked="" type="checkbox"/>

<b>Executive Summary (Question, Options, Recommendations):</b>
<p>Under the Health and Social Care Act 2012, the CCG is required to develop sufficient plans to ensure that the organisation and all commissioned provider services are well prepared to respond effectively to major incidents/emergencies, so that they can mitigate the risk to public and patients and maintain a functioning health service.</p> <p>The purpose of this paper is to report to the Governing Body on the current position of North Lincolnshire CCG in relation to an assessment against core standards in emergency preparedness, resilience and response (EPRR) as part of the national EPRR assurance process for 2016/17</p> <p>Following assessment, the organisation has been self-assessed as demonstrating substantial compliance level against the core standards.</p> <p>Areas requiring on-going action throughout 2016/17 are highlighted in the associated action plan/core standards improvement plan; this document will be reviewed in line with the organisation's EPRR governance arrangements.</p> <p>The Governing Body is asked to: -</p> <ul style="list-style-type: none"> <li>To note the contents of the report</li> <li>Confirm the Governing Body are assured that sufficient plans are in place to meet the statutory requirements of the CCG as a Category 2 Responder</li> <li>To approve the core standards improvement plan</li> </ul>

<b>Equality Impact</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<b>Sustainability</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	The EPRR self-assessment report North Lincolnshire Clinical Commissioning Group supports the sustainability of the organisation through having robust plans and policies in place to respond to and mitigate the impact any incident that may threaten the delivery of key critical

		services.
<b>Risk</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	EPRR assurance/compliance mitigates the impact of identified risks to service delivery/disruption to the organisations to ensure critical functions are maintained.
<b>Legal</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	The EPRR self-assessment is part of the statutory requirements as set out in the Health and Social Care Act 2012 and the Civil Contingencies Act 2004 for NHS North Lincolnshire CCG to fulfil its duties as a Category 2 Responder.
<b>Finance</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<i><b>Patient, Public, Clinical and Stakeholder Engagement to date</b></i>									
	<i><b>N/A</b></i>	<i><b>Y</b></i>	<i><b>N</b></i>	<i><b>Date</b></i>		<i><b>N/A</b></i>	<i><b>Y</b></i>	<i><b>N</b></i>	<i><b>Date</b></i>
<b>Patient:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<b>Clinical:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>Public:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<b>Other:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

## **North Lincolnshire Clinical Commissioning Group**

### **ANNUAL REPORT TO THE BOARD:**

#### **Emergency Preparedness, Resilience and Response (EPRR)**

##### **Introduction**

The purpose of this report is to update the Governing Body on the current position of North Lincolnshire CCG in relation to emergency preparedness, resilience and response arrangements to comply with national core standards requirements as part of the 2016/17 national assurance process.

##### **Background**

In summary, as a Category 2 responder the CCG is a 'co-operating body'. As category 2 responders CCGs are less likely to be involved in the heart of planning, but will be heavily involved in incidents that affect their sector, through co-operation in response and sharing of information. Specifically CCGs are required to:

- Ensure contracts with provider organisations contain relevant emergency preparedness, resilience (including business continuity) and response elements(EPRR)
- Support NHS England (NHS E) in discharging its EPRR functions and duties locally;
- Provide a route of escalation for the Local Health Resilience Partnership (LHRP) should a provider fail to maintain necessary EPRR capacity and capability;
- Fulfil the responsibilities as a Category two responder under the Civil Contingencies Act 2004 (CCA 2004) including maintaining business continuity plans for their own organisation;
- Be represented at the Local Health Resilience Partnership (LHRP) either on their own behalf or through representation by a 'lead' CCG
- Seek assurance provider organisations are delivering their contractual obligation

North Lincolnshire CCG will seek annual assurance from provider organisations that they are compliant with NHS EPRR core standards via formal processes, to assure the CCG that the organisation is making the timely and necessary progress to become compliant with all the EPRR Core Standards. This assurance will be sought through contract compliance route.

## **Emergency Preparedness, Resilience and Response (EPRR) Policy**

The EPRR Policy was reviewed in October 2016 and is in the process of being ratified and approved. The review was undertaken to reflect the changes in EPRR responsibilities outlined in the EPRR Framework November 2015. The CCG remains a Category 2 Responder, but is now formally required to support NHS E in the coordination and control of an incident. As a result of these changes the Boardroom has been re-operationalised to meet the requirements of an incident control room and a Major Incident Plan is the process of being ratified and approved. The EPRR policy provides an overview of key functions, roles and responsibilities of the EPRR system and details the North Lincolnshire CCG's arrangements for EPRR response; it should be read in conjunction with NL CCG Business Continuity Plan. Once formally ratified the policy will be reviewed following lessons learnt from any EPRR exercises and through the review process detailed in the policy.

### **Business Continuity**

NL CCG Business Continuity Plan (BCP) was approved by the Governing Body in April 2014. The plan includes escalation and stand down processes for activating the business continuity plan to ensure business critical functions can be maintained as necessary.

The plan has action cards to ensure that any activation of the BCP is systematically recorded in order for any lessons learnt to be captured in the de-brief process and inform future reviews of the plan.

The plan is currently under review to take account of the new CCG structures.

### **Fuel Plan**

The Fuel Plan was approved in January 2016. The plan will be reviewed in January 2018, or following any activation of the plan, or in the light of new guidance being issued.

### **Pandemic Influenza/infectious Disease Plan**

The pandemic plan for NL CCG was approved in January 2016. The plan details the responsibilities of the CCG and details the response to a pandemic/ infectious disease outbreak.

As required by national guidance, the plans are proportionate to the size of the organisation and our status as a Category 2 responder; they also reflect the need to be flexible and proportionate in response plans.

The Pandemic Influenza/Infectious Disease Outbreak plan was subjected to system wide test at the Pandemic Influenza event in Beverly in November 2015.

The plan is due to be reviewed in January 2018, but will be reviewed following any activation of the plan, or in light of new guidance being published.

### **On-call**

The CCG has an on-call arrangement in place to ensure 24/7 cover. The on-call number is tested on six monthly basis and response times monitored.

All on-call directors have access to an on-call pack with relevant contact information to ensure timely escalation of issues to the relevant personnel.

The on-call process is required to be tested every 6 months as minimum, the table below details tests undertaken from 1<sup>st</sup> April 2016.

### **On-call test and response**

Date	Time	Response time	Notes
12/04/16	2.30 pm	Call picked up within 3 rings	CCG test
04/10/16	12.00	Picked up within 2 rings	NHSE test

### **Local Health Resilience Partnership/LRF**

NL CCG is represented on the LHRP and provides a route of escalation for the Local Health Resilience Partnership (LHRP) should a provider fail to maintain necessary EPRR capacity and capability.

In addition, NL CCG is represented (through the EP lead) at the LHRP/LRF Humber Health Group, and is actively involved in planning and sharing information in this multi-agency forum. NL CCG has engaged in discussions to inform future tests and also receives feedback and lessons learnt from exercises that have taken place across the Humber footprint.

The Humber Health sub-group also provides the CCG with up-dates on any potential developing incidents, locally, regionally and nationally.

### **Testing and Training**

The CCG is involved in planning which tests/exercises will take place during 15/16, to test different elements of the local health response system. A table top exercise to test EPRR policy/MIP for NL CCG will take place in December 2016. The planned table top exercise includes players from NLaGFT, EMAS, Community Services and Adult Social Care.

## **NHS England EPRR Assurance Process 2016/17**

As a commissioning organisation NL CCG must assure itself that all providers of NHS funded care have contracts that contain relevant emergency preparedness, resilience (including business continuity) and response elements. This is achieved through contract compliance monitoring and assurance from NHS E following the national assurance process.

In addition, locally, wider system resilience has been managed through the local System Resilience Group (SRG) with a remit to manage capacity and demand; this includes winter planning and participation in regular telephone conferences /sitrep reporting, DTOC monitoring etc... as necessary to meet the monitoring and assurance processes required by NHS England. The North Lincolnshire Escalation and De-escalation plan is currently under revision to bring it into line with the draft national Operational Pressures Escalation Framework. Going forward, the SRG is being replaced by the Northern Lincolnshire A&E Delivery Board which will oversee the monitoring and assurance process of delivery of A&E targets and wider system resilience.

### **Training**

All CCG staff receive EPRR training/ awareness raising; this includes details of what will be expected from staff in the event of an emergency/major incident. The next training event will be in January 2017.

Current Directors on call and senior staff have undertaken the 'Strategic Leadership in Crisis' training. Due to staff changes, the 2 new Directors will also undertake this training in October 2016.

A further training needs audit will take place during 2017 to ascertain any further training by staff with active roles in EPRR within NL CCG.

### **Conclusion**

In conclusion, North Lincolnshire CCG has completed the national 2016/17 EPRR assurance process through self- assessment against the core standards. As a result of this process, North Lincolnshire CCG has been assessed as 'substantially compliant'.

The change in compliance level for 2016/17 is largely due to the need to review the Business Continuity Plan in response to organisational changes as a result of the re-structure process that has taken place. In addition, due to the changes in CCG responsibilities, a Major Incident Plan has been developed and is currently awaiting ratification.

An action plan for 16/17 has been developed to meet full compliance and strengthen EPRR across the organisation during 2017/18 (Appendix 2).

October 2016.

Author: Julie Killingbeck  
(EPRR lead)

## Appendix 1: Statement of Compliance

### Emergency Preparedness Resilience and Response (EPRR) Assurance 2016-17

#### STATEMENT OF COMPLIANCE

North Lincolnshire Clinical Commissioning Group has undertaken a self-assessment against required areas of the NHS England Core Standards for EPRR.

Organisations are required to state an overall assurance rating as to whether they are fully, substantially, partially or non-compliant with the NHS EPRR Core Standards. The definitions of these ratings have been amended for the 2016/17 process and are detailed below:

Following assessment, North Lincolnshire CCG has been self-assessed as demonstrating 'Substantial Compliance' level (from the four options in the table below) against the core standards.

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.

Where areas require further action, this is detailed in the attached core standards improvement plan and will be reviewed in line with the Organisation's EPRR governance arrangements.

I confirm that the above level of compliance with the core standards has been or will be confirmed to the organisation's board / governing body.

---

Signed by the organisation's Accountable Emergency Officer

-----  
Liane Langdon  
Chief Officer  
North Lincolnshire CCG

13/10/2016  
Date of board / governing body  
meeting

\_\_\_\_\_  
Date signed



# Yorkshire & Humber EPRR core standards improvement plan

Trust: North Lincolnshire Clinical Commissioning Group  
Core Standard Improvement Plan 2016/17

Core standard reference	Core standard description	Improvement required to achieve compliance	Action to deliver improvement	Deadline
8	Duty to maintain plans – emergency plans and business continuity plans	Major Incident Plan to be ratified and approved	Finalise Plan – Date for Quality Group to ratify and then Governing Body for approval.(Plan to be tested in December 16)	Test Plan December 2016  Governing Body approval February y 2017
8	Duty to maintain plans – emergency plans and business continuity plans	Review of current BCP following CCG restructure.	Review BCP in line with latest guidance to identify critical functions and develop separate directorate plans (	January 2017
8	Utilities, IT and Communications	Review EMBED BCP critical functions analysis meets CCG requirements	Review EMBED BCP and align to CCG reviewed plan	January 2017
11	Critical Activities	Undertake a critical business analysis that includes prioritisation process for critical functions	Link to review of BCP	January 2017
37	System in place for recording training exercise participation for senior and on-call staff	Ensure all senior and on-call staff systematically record training in relation to EPRR and participation in exercises to inform identification of training needs.	Develop system and template – link to training and exercise programme for 16/17	November 2016