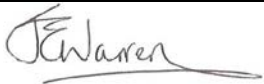


Date:	11 th October 2018
Meeting:	Governing Body
Item Number:	Item 10.1
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

Author: (Name, Title)	Gary Johnson Risk Manager
GB Lead: (Name, Title)	Julie Warren Interim Chief Operating Officer
Director approval (Name)	Julie Warren
Director Signature	

Report Title:
Statement of Compliance for NLCCG Emergency Preparedness, Resilience and Response [EPRR] 2018/19 and Annual report
Decisions to be made:
<ul style="list-style-type: none"> To note the contents of the report 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 To approve the core standards improvement plan

Link to a Strategic Objective?	<input type="checkbox"/>	
Link to a Strategic Risk	<input type="checkbox"/>	

Continue to improve the quality of services	<input type="checkbox"/>	Improve patient experience	<input type="checkbox"/>		
Reduced unwarranted variations in services	<input type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire	<input type="checkbox"/>		
Deliver the best outcomes for every patient	<input type="checkbox"/>	Statutory/Regulatory	<input checked="" type="checkbox"/>		
Purpose (tick one only)	Approval <input checked="" type="checkbox"/>	Information <input type="checkbox"/>	To note <input type="checkbox"/>	Decision <input type="checkbox"/>	Assurance <input checked="" type="checkbox"/>

Executive Summary (Question, Options, Recommendations):
<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 2018/19</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 2018/19 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>In 2018 the following actions have been implemented / occurred:</p> <ul style="list-style-type: none"> - A Band 7 Lead is now in place and took the lead for EPRR therefore strengthening the focus and increasing the resource of the CCG on the EPRR action plan. - A Non-Executive Director has been appointed to provide oversight and a link into the Governing body to strengthen the CCGs delivery of EPRR requirements. - There is now an EPRR forum where the current arrangements and preparedness plans will be reviewed and monitored. 	
Recommendations	<p>1. To note the contents of the report</p> <p>2 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</p> <p>3 To approve the core standards improvement plan</p>
Report history	
Equality Impact	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
Sustainability	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>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.</p>
Risk	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>EPRR assurance/compliance mitigates the impact of identified risks to service delivery/disruption to the organisations to ensure critical functions are maintained.</p>
Legal	<p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>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.</p>
Finance	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

<i>Patient, Public, Clinical and Stakeholder Engagement to date</i>									
	<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>		<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>
Patient:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Clinical:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Public:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Other:	<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 2018/19 National assurance process.

Background

In summary, as a Category 2 responder the CCG remains 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.

There are a number of changes to this year's standards, which have now been split into ten key domains. The Governing Body will note that a number of the requirements identified in the 2017-18 deep dives are now core content in the EPRR core standards and are embedded within the domains of governance and cooperation. As such the importance of Strategic representation at the Local Health Resilience Partnerships (LHRP's) by organisations Accountable Emergency Officers is, as ever, a key requirement of our organisations self-assessment.

NHS England will once again be facilitating a confirm and challenge process through a number of Face to Face meetings in November 2018 to further discuss the themes and trends relating to EPRR across the Yorkshire & Humber footprint.

Emergency Preparedness, Resilience and Response (EPRR) Policy

The EPRR Policy was ratified in January 2017 and will be reviewed following lessons learnt from any EPRR exercises and through the review process detailed in the policy. The CCG remains a Category 2 Responder, and is formally required to support NHS E in the coordination and control of an incident. As a result of these previous changes the Boardroom was delegated to meet the requirements of an incident control room and a secondary location secured with NHS property services as the Ironstone Centre in Scunthorpe, 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 as well as the Major Incident Plan which

ratified and approved at the Quality, Performance & Finance Committee in September 2018. All policies will again 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 Quality Performance & finance committee in June 2018. 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.

A CCG staff communication exercise was undertaken as part of Exercise Trent ex in February 2018 and a Provider Communication Exercise undertaken in August 2018 with any lessons learnt being fed into the CCG EPRR group.

Pandemic Influenza/infectious Disease Plan

The pandemic plan for NL CCG was approved in September 2018; and would be reviewed again following any activation of the plan, or in light of new guidance being published.

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.

On-call

North Lincolnshire CCG Directors are now fully engaged (from April 2018) in the three CCG (Hull, ERY and NLCCG) on-call arrangement that are in place to ensure 24 hour cover across the three CCGs and their providers.

All CCG on-call directors have their own on-call pack and have had training on Resilience Direct to ensure they have access to relevant contact information to ensure timely escalation of issues to the relevant personnel during an Incident.

To further enhance business continuity arrangements during a Major Incident NLCCG Heads of Service have also been given Resilience Direct training access to Major Incident plans and Keys to Health Place to support the Directors on Call.

Local Health Resilience Partnership/LRF

NL CCG is represented on the North Yorkshire and Humber Health Group (NY&H HG) which provides a route of escalation to NHS England for the Local Health Resilience Partnership (LHRP) should a provider fail to maintain necessary EPRR capacity and capability.

In addition, NL CCG has representation (through the EPRR lead) at the Local Resilience Forum (LRF) 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 exercises also receiving feedback and lessons learnt from exercises that have taken place across the Humber footprint.

Testing and Training

The CCG is involved in planning which tests/exercises events taking place during 18/19, to test different elements of the local health response system.

A Live Exercise was completed as part of the LRF flooding arrangements in the Humber with the CCG opening up the Incident room to test staff competencies and further learning. The CCG has been involved in Two Control of Major Accidents Hazards (COMAH) exercises testing the Local Steel works and an Oil refineries major incident plans. Members of the CCG joined a combined team of CCG's to complete a NHS E/PHE regional table top exercise across the Yorkshire and Humber health community in relation to a deliberate incident that caused a large number of casualties.

De-briefs are held and lessons were learnt from those events and shared through the organisation.

NHS England EPRR Assurance Process 2018/19

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.

Training

All CCG staff participates in EPRR awareness; this includes details of what will be expected from staff in the event of an emergency/major incident. All available staff was called to the Incident room (Boardroom) in June 2018 and the EPRR lead ran through expectations and duties within the Incident room for staff awareness. The organisation encourages a number of different staff to attend incidents/table top exercises to enhance their understanding of EPRR responsibilities. A future training event will be in early 2019.

Current Directors on call have undertaken the 'Strategic Leadership in Crisis' training.

A further training needs audit will take place during 2018/19 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 2018/19 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 CCG is aware that it continues to need to strengthen arrangement and monitoring of readiness and the need to review the Business Continuity Plans and increased participation in regional awareness.

An action plan for 2018/19 has been developed to meet full compliance and strengthen EPRR across the organisation during 2018/19 (Appendix 2).

October 2018.

Author: Gary Johnson

(EPRR lead)

**Yorkshire and the Humber Local Health Resilience Partnership (LHRP)
Emergency Preparedness, Resilience and Response (EPRR) assurance 2018-2019**

STATEMENT OF COMPLIANCE

North Lincolnshire CCG has undertaken a self-assessment against required areas of the EPRR Core standards self-assessment tool v1.0

Where areas require further action, North Lincolnshire CCG will meet with the LHRP to review the attached core standards, associated improvement plan and to agree a process ensuring non-compliant standards are regularly monitored until an agreed level of compliance is reached.

Following self-assessment, the organisation has been assigned as an EPRR assurance rating of Substantial (from the four options in the table below) against the core standards.

Overall EPRR assurance rating	Criteria
Fully	The organisation is 100% compliant with all core standards they are expected to achieve. The organisation's Board has agreed with this position statement.
Substantial	The organisation is 89-99% compliant with the core standards they are expected to achieve. For each non-compliant core standard, the organisation's Board has agreed an action plan to meet compliance within the next 12 months.
Partial	The organisation is 77-88% compliant with the core standards they are expected to achieve. For each non-compliant core standard, the organisation's Board has agreed an action plan to meet compliance within the next 12 months.
Non-compliant	The organisation compliant with 76% or less of the core standards the organisation is expected to achieve. For each non-compliant core standard, the organisation's Board has agreed an action plan to meet compliance within the next 12 months. The action plans will be monitored on a quarterly basis to demonstrate progress towards compliance.

I confirm that the above level of compliance with the core standards has been agreed by the organisation's board / governing body along with the enclosed action plan and governance deep dive responses.



Signed by the organisation's Accountable Emergency Officer

03/10/2018

Date signed

11/10/2018

Date of Board/governing body meeting

11/10/2018

Date presented at Public Board

10/06/2019

Date to be published in organisations Annual Report

Trust: North Lincolnshire Clinical Commissioning Group
Core Standard Improvement Plan 2018/19

Ref	Domain	Standard	Detail	Evidence – Examples listed below	Self-Assessment RAG	Action to be taken	Lead	Timescale
4	Governance	EPRR Work Programme	The Organisation has an Annual EPRR work programme, informed by lessons learnt from: Incidents & Exercises Identified Risks Outcomes from assurance processes	Process explicitly described in the EPRR Policy. Annual Work Programme	Partially Compliant	The CCG has an annual work programme informed by lessons learnt however the Process is not explicitly described in the EPRR Policy. To be included in the updated CCG Policy	EPRR Lead	Feb 2019
25	Command and Control	Trained on Call Staff	On call staff are trained and competent to perform their role and are in a position of delegated authority on behalf of the Chief executive/CCG Accountable officer.	Process explicitly described in the EPRR policy	Partially Compliant	All on call Directors are trained to NHS E EPRR competencies however the process is not explicitly described in the EPRR Policy. To be included in the updated CCG Policy	EPRR Lead	Feb 2019
37	Warning and Information	Communication with Partners and Stakeholders	The organisation has arrangements in place to communicate with partners and stakeholders during and after a major incident or business continuity incident	<ul style="list-style-type: none"> • Have emergency communications response arrangements in place • Social Media Policy specifying advice to staff on appropriate use of personal social media accounts whilst the 	Partially Compliant	NLCCG Social Media Policy being created to include all relevant evidence	Head of Comms & Engagement	Oct 2018

				<p>organisation is in incident response</p> <ul style="list-style-type: none">• Using lessons identified from previous major incidents to inform the development of future incident response communications• Having a systematic process for tracking information flows and logging information requests and being able to deal with multiple requests for information as part of normal business processes• Being able to demonstrate that publication of plans and assessments is part of a joined-up communications strategy and part of your organisation's warning and informing work				
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40	Cooperation	LHRP Attendance	The Accountable Emergency Officer, or an appropriate director, attends (no less than 75%) of Local Health Resilience Partnership (LHRP) meetings per annum.	Minutes of meetings	Partially Compliant	The LHRP is attended by the EPRR lead currently, not fully compliant as suggested in the standard- the meeting to be Incorporated into the Chief Operating Officers role	Chief operating Officer	Nov 2018
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