

South Yorkshire Emergency Preparedness, Resilience and Response (EPRR) Assurance 2014-15

Governing Body meeting

C

6 November 2014

Author(s)	Tim Furness, Director of Business Planning and Partnerships
Sponsor	Tim Furness, Director of Business Planning and Partnerships
Is your report for Approval / Consideration / Noting	
Approval of the attached self assessment and proposed statement of compliance with national EPRR standards.	
Are there any Resource Implications (including Financial, Staffing etc)?	
No	
Audit Requirement	
<u>CCG Objectives</u>	
<i>Which of the CCG's objectives does this paper support?</i>	
All, although not explicitly. A failure to respond appropriately to an emergency could put at risk any of the CCG's four key objectives.	
<u>Equality impact assessment</u>	
<i>Have you carried out an Equality Impact Assessment and is it attached?</i> No	
There are no equality impacts arising from this self assessment	
<u>PPE Activity</u>	
<i>How does your paper support involving patients, carers and the public?</i>	
It does not, as it addresses internal arrangements for responding to emergencies.	
Recommendations	
<p>The Governing Body is asked to:</p> <ul style="list-style-type: none"> • Note the self assessment, detailed on the attached spreadsheet • Approve the proposed statement of compliance, attached 	

South Yorkshire Emergency Preparedness, Resilience and Response (EPRR) Assurance 2014-15

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1. Background and Introduction

CCGs, along with all other NHS bodies, were asked to provide assurance to NHS England of our readiness to respond to emergency situations in the attached letter, received in August. In summary, we are asked to:

1. Undertake a self-assessment against the relevant core standards identifying the level of compliance for each standard - red, amber, green (excel spreadsheet detailing instructions for completion, core standards and compliance definitions -attached)
2. Review the improvement plans developed as part of the 2013/14 assurance process, if applicable, and include further actions required from this year's self-assessment (template attached)
3. Complete the Statement of Compliance (attached) identifying our organisation's overall level of compliance - full, substantial, partial, non
4. Present the above outcomes to our board (or equivalent)
5. Submit the board paper to the LHRP secretariat (by email to england.syb-epr@nhs.net)

2. Self Assessment Process

The South Yorkshire and Bassetlaw CCGs have agreed to collaborate on emergency preparedness and business continuity matters, with, for example, a common policy for both issues being agreed and submitted to Governing Bodies for approval last year.

The attached self assessment was completed collaboratively, as it follows that if we have common policies we should have achieved the same level of compliance. We believe that our arrangements are fully compliant. The document contains brief description of our rationale.

There will be a NHS England review and challenge meeting in December at which our assessments will be discussed and tested, prior to the Area Team submitting assurance to the NHS England North Region Team. We are required to submit our self assessments and statement of compliance in advance of that meeting – by 28 November.

3. Recommendations

The Governing Body is asked to:

- Note the self assessment, detailed on the attached spreadsheet
- Approve the proposed statement of compliance, attached

Paper prepared by Tim Furness, Director of Business Planning and Partnerships
27 October 2014

From the Director of Operations and Delivery's Office

Direct Dial: 0113 8253355
Our ref: BH/KC
E-mail: brianhughes1@nhs.net
Date: 14 August 2014

Oak House
Moorhead Way
Bramley
Rotherham
South Yorkshire
S66 1YY

To Accountable Emergency Officer:
Barnsley Hospital NHS Foundation Trust
Doncaster and Bassetlaw NHS Foundation Trust
The Rotherham Hospital NHS Foundation Trust
Rotherham, Doncaster and South Humber NHS Foundation Trust
Sheffield Children's Hospital NHS Foundation Trust
Sheffield Health and Social Care NHS Foundation Trust
Sheffield Teaching Hospitals Foundation Trust
Yorkshire Ambulance Service NHS Trust
Barnsley CCG
Bassetlaw CCG
Doncaster CCG
Rotherham CCG
Sheffield CCG

By email

Dear colleague

Re: 2014/15 Emergency Preparedness, Resilience and Response (EPRR) assurance process

Further to discussions at the LHRP meeting on 29th July 2014, I am writing to inform you that the details in respect of the 2014/15 EPRR assurance process have been published in a letter from Dr Sarah Pinto-Duschinsky, National Director of NHS Operations and Delivery, which is attached for your information. The process is based on the NHS England Core Standards for Emergency Preparedness, Resilience and Response which were revised in July 2014 and are available on the NHS England internet site <http://www.england.nhs.uk/ourwork/eprp> .

The 2014/15 assurance process builds on the 2013/14 process and this year includes acute, community, mental health and ambulance service providers, clinical commissioning groups and NHS England area, regional and national teams.

To comply with the national requirements in the attached letter Accountable Emergency Officers are required to;

6. Undertake a self-assessment against the relevant core standards identifying the level of compliance for each standard - red, amber, green (excel spreadsheet detailing instructions for completion, core standards and compliance definitions - attached)
7. Review the improvement plans developed as part of the 2013/14 assurance process, if applicable, and include further actions required from this year's self-assessment (template attached)

8. Complete the Statement of Compliance (attached) identifying your organisation's overall level of compliance - full, substantial, partial, non
9. Present the above outcomes to your board (or equivalent) or through appropriate governance arrangements where the board has delegated its responsibility for EPRR
10. Submit the board paper to the LHRP secretariat (by email to england.syb-epr@nhs.net) by (date to be confirmed, see later in this letter)

Following discussions with the NHS England North Region Team a regional approach in respect of the self-assessment requirement has been agreed as follows. Organisations subject to the 2013/14 assurance process should undertake a self-assessment against those standards that are new or substantially changed; organisations that were not subject to the 2013/14 assurance process should undertake a self-assessment against all of the applicable standards. The core standards template is attached. New / changed standards are in white; unchanged standards are shaded in grey.

You will not be required to submit all your evidence in respect of each individual standard. However, following receipt of your submission, it may be necessary to request further evidence against specific standards.

Building on the local process established last year, it is my intention that the LHRP will peer-review all organisations evidence of compliance in the form of your board paper (or equivalent) including your Statement of Compliance, the results of your organisation's self-assessment against the core standards and the resulting Improvement Plan. You, as the Accountable Emergency Officer will be required to be in attendance. Should you be unable to attend, it is important that your organisation is represented at Executive level, not only to report on your organisation's resilience, but also to participate in the assurance of partner organisations.

Statements of compliance and improvement plans will form part of the assurance to the NHS England Board and the Department of Health that robust and resilient EPRR arrangements are established and are maintained within NHS Organisations.

The timeframe for the 2014/15 assurance process is outlined in Dr Sarah Pinto-Duschinsky's letter. The LHRP element of the process must be completed by 31st December which does not fit easily into our scheduled LHRP meetings on 28th October and 27th January. Given the importance of this piece of work, it would seem reasonable to consider re-scheduling our planned meetings in order to give partner organisations sufficient time to complete the process effectively. In the next few days my team will contact all organisations to determine the preferred option from the following;

- Use the planned meeting on 28th October and undertake the peer review process as the major agenda item – can this time frame be accommodated within existing board (or equivalent) meeting dates?
- Re-schedule the 28th October meeting (this falls in half term week, all organisations will also be involved in Exercise Cygnus on 14th and 15th) to mid-December
- Keep the scheduled meeting on 28th October and bring the January meeting forward to mid-December
- Keep both scheduled meetings and add a single item extraordinary meeting for the peer review in mid-December.

In the meantime if you have any queries or concerns regarding this letter please contact my acting Head of EPRR, Karen Chaplin (Karen.chaplin@nhs.net) in the first instance.

Yours sincerely

A handwritten signature in black ink, appearing to read 'B. Hughes', written in a cursive style.

BRIAN HUGHES
Director of Operations and Delivery
NHS England (South Yorkshire and Bassetlaw)



NHS England Core Standards for Emergency preparedness, resilience and response

v2.0

The attached EPRR Core Standards spreadsheet has 3 tabs:

EPRR Core Standards tab - with core standards nos 1 - 37.

HAZMAT/ CBRN core standards tab: with core standards 38- 51. Please note this is designed as a stand alone tab.

HAZMAT/ CBRN equipment checklist: designed to support acute and ambulance service providers in core standard 43.

Amended on behalf of NHS England North Region by the West Yorkshire EPRR team by comparing the 2014/15(v2.0) core standards with the 2013-/14core standards. The results of this comparison are shown in the extra column (Column P on the main tab, J on the CBRN core standards tab).

Please note the following:

NHS Commissioning organisations need to complete only the main 'EPRR Core Standards' tab. NHS Trusts should complete both the EPRR Core Standards tab and the HAZMAT CBRN core standards tab.

NHS England South Yorkshire & Bassettlaw Area Team and all Foundations Trusts should self-assess against only the core standards on a white (not grey) background that include a 'Y' in the column for their organisation type. CCGs should self assess against all the Core Standards on the EPRR Core Standards tab that includes a 'y' in the column for CCGs.

Core standard	Clarifying information	Acute healthcare providers	Specialist providers	Ambulance service providers	Community services providers	Mental healthcare providers	NHS England Area teams	NHS England Regional & national	CCGs	CSUs (business continuity only)	Primary care (GP, community pharmacy)	Other NHS funded organisations	Evidence of assurance	Self assessment RAG	
														Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months. Amber = Not compliant but evidence of progress and in the EPRR work plan for the next 12 months. Green = fully compliant with core standard.	
Governance															
1	Organisations have a director level accountable emergency officer who is responsible for EPRR (including business continuity management)	Y	Y	Y	Y	Y	Y	Y	Y			Y	An Accountable Emergency Officer is in place for each of the South Yorkshire & Bassetlaw CCGs: - Barnsley: Vicki Peverelle, Chief of Corporate Governance - Bassetlaw: Phil Mettam, Chief Officer - Doncaster: Chris Stainforth, Chief Officer, with operational delegation to Sarah Atkins Whatley, Chief of Corporate Services - Rotherham: Chris Edwards, Chief Officer, with operational delegation to Sarah Whittle, Assistant Chief Officer - Sheffield: Tim Furness, Director of Business Planning and Partnerships The South Yorkshire & Bassetlaw CCGs' annual EPRR work programmes respond to the hazard analysis and risk assessment undertaken by the Local Health Resilience Partnership (LHRP). Like anywhere in the UK, South Yorkshire and Bassetlaw has a number of natural and manmade hazards. To ensure we are prepared for these hazards the South Yorkshire Local Resilience Forum (LRF) has created a Community Risk Register which identifies the wide range of risks and emergencies we could potentially face. A number of specific risks that the CCGs may potentially have are listed in our EPRR policies (developed jointly across the South Yorkshire & Bassetlaw CCGs) alongside the planned response. Assurance is obtained through the contracting route with commissioned services by the Head of Contracting or equivalent, and also via local partnership emergency planning fora within our local geographic areas. The South Yorkshire & Bassetlaw CCGs' Emergency Preparedness Resilience & Response (EPRR) Policies confirm the processes following an EPRR incident in order to ensure that lessons are learned. We take responsibility for debriefing and providing support to staff where required following an emergency via individual line managers coordinated by the Emergency Accountable Officer. De-briefing may also be on a multi-agency footprint. Any lessons learned from the incident will be fed back to staff and actioned appropriately. The South Yorkshire & Bassetlaw CCGs' Emergency Preparedness Resilience & Response Policies cover all the core standards required of CCGs and are published on our websites. The Policies: • Have a change control process via the Corporate Governance Teams which includes version control (see coversheet and following page). • Take account of changing business objectives and processes via annual review by the Accountable Emergency Officer and refresh if needed (delegated on coversheet). • Take into account any changes in our functions and/or organisational structural and staff changes by listing job titles rather than individuals (action cards). • Make clear our contracting responsibilities (section 3.2 of procedure). • Take account of any updates to risk assessment(s) by the LHRP or LRF (sections 3.4, 3.5 & 3.6 of procedure). • Have a maximum 3-year review schedule (section 5.3.2 of the policy). • Use consistent EPRR terminology throughout. • Make clear the policy dissemination and review arrangements (section 5 of the policy). • Are published on our websites. • Include the requirement to review following an incident and learn lessons (section 6 of the procedure). • Include references to other sources of information and supporting documentation (section 2 of the policy). Corporate Governance/Assurance Reports received by the South Yorkshire & Bassetlaw CCGs' Governing Bodies capture EPRR assurance, including any response to incidents (no incidents to date). Operational managers within the South Yorkshire & Bassetlaw CCGs support both the EPRR and Business Continuity agendas. The Communications Leads are part of the resilience arrangements. The corporate communications budgets and the CCG 0.5% contingency reserves cover any unforeseen EPRR costs.	GREEN	
2	Organisations have an annual work programme to mitigate against identified risks and incorporate the lessons identified relating to EPRR (including details of training and exercises and past incidents) and improve response. Lessons identified from your organisation and other partner organisations. NHS organisations and providers of NHS funded care treat EPRR (including business continuity) as a systematic and continuous process and have procedures and processes in place for updating and maintaining plans to ensure that they reflect: - the undertaking of risk assessments and any changes in that risk assessment(s) - lessons identified from exercises, emergencies and business continuity incidents - restructuring and changes in the organisations - changes in key personnel - changes in guidance and policy	Y	Y	Y	Y	Y	Y	Y	Y			Y	The South Yorkshire & Bassetlaw CCGs' Emergency Preparedness Resilience & Response (EPRR) Policies confirm the processes following an EPRR incident in order to ensure that lessons are learned. We take responsibility for debriefing and providing support to staff where required following an emergency via individual line managers coordinated by the Emergency Accountable Officer. De-briefing may also be on a multi-agency footprint. Any lessons learned from the incident will be fed back to staff and actioned appropriately. The South Yorkshire & Bassetlaw CCGs' Emergency Preparedness Resilience & Response Policies cover all the core standards required of CCGs and are published on our websites. The Policies: • Have a change control process via the Corporate Governance Teams which includes version control (see coversheet and following page). • Take account of changing business objectives and processes via annual review by the Accountable Emergency Officer and refresh if needed (delegated on coversheet). • Take into account any changes in our functions and/or organisational structural and staff changes by listing job titles rather than individuals (action cards). • Make clear our contracting responsibilities (section 3.2 of procedure). • Take account of any updates to risk assessment(s) by the LHRP or LRF (sections 3.4, 3.5 & 3.6 of procedure). • Have a maximum 3-year review schedule (section 5.3.2 of the policy). • Use consistent EPRR terminology throughout. • Make clear the policy dissemination and review arrangements (section 5 of the policy). • Are published on our websites. • Include the requirement to review following an incident and learn lessons (section 6 of the procedure). • Include references to other sources of information and supporting documentation (section 2 of the policy). Corporate Governance/Assurance Reports received by the South Yorkshire & Bassetlaw CCGs' Governing Bodies capture EPRR assurance, including any response to incidents (no incidents to date). Operational managers within the South Yorkshire & Bassetlaw CCGs support both the EPRR and Business Continuity agendas. The Communications Leads are part of the resilience arrangements. The corporate communications budgets and the CCG 0.5% contingency reserves cover any unforeseen EPRR costs.	GREEN	
3	Organisations have an overarching framework or policy which sets out expectations of emergency preparedness, resilience and response. Arrangements are put in place for emergency preparedness, resilience and response which: • Have a change control process and version control • Take account of changing business objectives and processes • Take account of any changes in the organisations functions and/ or organisational and structural and staff changes • Take account of change in key suppliers and contractual arrangements • Take account of any updates to risk assessment(s) • Have a review schedule • Use consistent unambiguous terminology, • Identify who is responsible for making sure the policies and arrangements are updated, distributed and regularly tested; • Key staff must know where to find policies and plans on the intranet or shared drive. • Have an expectation that a lessons identified report should be produced following exercises, emergencies and/or business continuity incidents and share for each exercise or incident and a corrective action plan put in place. • Include references to other sources of information and supporting documentation	Y	Y	Y	Y	Y	Y	Y	Y			Y	The South Yorkshire & Bassetlaw CCGs' Emergency Preparedness Resilience & Response Policies cover all the core standards required of CCGs and are published on our websites. The Policies: • Have a change control process via the Corporate Governance Teams which includes version control (see coversheet and following page). • Take account of changing business objectives and processes via annual review by the Accountable Emergency Officer and refresh if needed (delegated on coversheet). • Take into account any changes in our functions and/or organisational structural and staff changes by listing job titles rather than individuals (action cards). • Make clear our contracting responsibilities (section 3.2 of procedure). • Take account of any updates to risk assessment(s) by the LHRP or LRF (sections 3.4, 3.5 & 3.6 of procedure). • Have a maximum 3-year review schedule (section 5.3.2 of the policy). • Use consistent EPRR terminology throughout. • Make clear the policy dissemination and review arrangements (section 5 of the policy). • Are published on our websites. • Include the requirement to review following an incident and learn lessons (section 6 of the procedure). • Include references to other sources of information and supporting documentation (section 2 of the policy). Corporate Governance/Assurance Reports received by the South Yorkshire & Bassetlaw CCGs' Governing Bodies capture EPRR assurance, including any response to incidents (no incidents to date). Operational managers within the South Yorkshire & Bassetlaw CCGs support both the EPRR and Business Continuity agendas. The Communications Leads are part of the resilience arrangements. The corporate communications budgets and the CCG 0.5% contingency reserves cover any unforeseen EPRR costs.	GREEN	
4	The accountable emergency officer will ensure that the Board and/or Governing Body will receive as appropriate reports, no less frequently than annually, regarding EPRR, including reports on exercises undertaken by the organisation, significant incidents, and that adequate resources are made available to enable the organisation to meet the requirements of these core standards. After every significant incident a report should go to the Board/ Governing Body (or appropriate delegated governing group). Must include information about the organisation's position in relation to the NHS England EPRR core standards self assessment.	Y	Y	Y	Y	Y	Y	Y	Y			Y	The South Yorkshire & Bassetlaw CCGs' Emergency Preparedness Resilience & Response Policies cover all the core standards required of CCGs and are published on our websites. The Policies: • Have a change control process via the Corporate Governance Teams which includes version control (see coversheet and following page). • Take account of changing business objectives and processes via annual review by the Accountable Emergency Officer and refresh if needed (delegated on coversheet). • Take into account any changes in our functions and/or organisational structural and staff changes by listing job titles rather than individuals (action cards). • Make clear our contracting responsibilities (section 3.2 of procedure). • Take account of any updates to risk assessment(s) by the LHRP or LRF (sections 3.4, 3.5 & 3.6 of procedure). • Have a maximum 3-year review schedule (section 5.3.2 of the policy). • Use consistent EPRR terminology throughout. • Make clear the policy dissemination and review arrangements (section 5 of the policy). • Are published on our websites. • Include the requirement to review following an incident and learn lessons (section 6 of the procedure). • Include references to other sources of information and supporting documentation (section 2 of the policy). Corporate Governance/Assurance Reports received by the South Yorkshire & Bassetlaw CCGs' Governing Bodies capture EPRR assurance, including any response to incidents (no incidents to date). Operational managers within the South Yorkshire & Bassetlaw CCGs support both the EPRR and Business Continuity agendas. The Communications Leads are part of the resilience arrangements. The corporate communications budgets and the CCG 0.5% contingency reserves cover any unforeseen EPRR costs.	GREEN	
Duty to assess risk															
5	Assess the risk, no less frequently than annually, of emergencies or business continuity incidents occurring which affect or may affect the ability of the organisation to deliver it's functions. Risk assessments should take into account community risk registers and at the very least include reasonable worst-case scenarios for: • severe weather (including snow, heatwave, prolonged periods of cold weather and flooding); • staff absence (including industrial action); • the working environment, buildings and equipment (including denial of access); • fuel shortages; • surges and escalation of activity; • IT and communications; • utilities failure; • response a major incident / mass casualty event • supply chain failure; and • associated risks in the surrounding area (e.g. COMAH and iconic sites)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' EPRR risk assessments take account of the community risk register including: • Fuel shortage • Flooding • Evacuation & Shelter • Pandemic • Heatwave • Severe winter weather	GREEN	
6	There is a process to ensure that the risk assessment(s) is in line with the organisational, Local Health Resilience Partnership, other relevant parties, community (Local Resilience Forum/ Borough Resilience Forum), and national risk registers. There is a process to consider if there are any internal risks that could threaten the performance of the organisation's functions in an emergency as well as external risks eg. Flooding, COMAH sites etc. Other relevant parties could include COMAH site partners, PHE etc.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' organisational Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	GREEN	
7	There is a process to ensure that the risk assessment(s) is informed by, and consulted and shared with your organisation and relevant partners. The South Yorkshire & Bassetlaw CCGs' processes to consider if there are any internal risks that could threaten the performance of the organisation's functions in an emergency are via the Assurance Framework and Risk Register. There are mutual aid arrangements in place with local CCGs to mitigate loss of premises. We have shared our Policies with the LHRP for peer review and comment, and through the Director of Public Health representative we have also shared policies with our local Category 1 Responders - the Local Authorities.	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' processes to consider if there are any internal risks that could threaten the performance of the organisation's functions in an emergency are via the Assurance Framework and Risk Register. There are mutual aid arrangements in place with local CCGs to mitigate loss of premises. We have shared our Policies with the LHRP for peer review and comment, and through the Director of Public Health representative we have also shared policies with our local Category 1 Responders - the Local Authorities.	GREEN	
Duty to maintain plans – emergency plans and business continuity plans															
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. Incidents and emergencies (Incident Response Plan (IRP) (Major Incident Plan))	Y	Y	Y	Y	Y	Y	Y	Y			Y	The South Yorkshire & Bassetlaw CCGs' Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	GREEN	
	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): corporate and service level Business Continuity (aligned to current nationally recognised BC standards)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	GREEN
	HAZMAT/ CBRN - see separate checklist on tab overleaf	Y	Y	Y	Y	Y					Y		Y	The South Yorkshire & Bassetlaw CCGs' Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	N/A
	Severe Weather (heatwave, flooding, snow and cold weather)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	GREEN
	Pandemic Influenza	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	GREEN
	Mass Countermeasures (eg mass prophylaxis, or mass vaccination)	Y	Y	Y	Y		Y	Y					Y	The South Yorkshire & Bassetlaw CCGs' Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	N/A
	Mass Casualties	Y	Y	Y	Y		Y	Y					Y	The South Yorkshire & Bassetlaw CCGs' Business Continuity Contingency Plans include plans and mitigation for the short term (under 72 hours) and the longer term for: • Fire • Flood • Terrorist or criminal attack • Significant chemical contamination • IT failure / loss of data • Loss of power • Loss of water • Loss of telephone (landline) • Simultaneous resignation of a number of key staff • Staff illness / epidemic • Commissioning Support Unit (CSU) unable to deliver • Travel disruption • Widespread industrial actions • Theft or damage to assets (will include fraud)	N/A
	Fuel Disruption	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' Systems Resilience Groups (previously Unplanned Care Groups) ensure system alignment during seasonal and other pressures and are chaired by CCG Leads. The Unplanned Care commissioning leads have responsibility for effectively managing Surge and Escalation within the area (section 4 of EPRR policy). The System Resilience Groups and associated leads manage any required situation reports.	GREEN
	Surge and Escalation Management (inc. links to appropriate clinical networks e.g. Burns, Trauma and Critical Care)	Y	Y	Y	Y	Y	Y	Y	Y	Y		Y	Y	The South Yorkshire & Bassetlaw CCGs' Systems Resilience Groups (previously Unplanned Care Groups) ensure system alignment during seasonal and other pressures and are chaired by CCG Leads. The Unplanned Care commissioning leads have responsibility for effectively managing Surge and Escalation within the area (section 4 of EPRR policy). The System Resilience Groups and associated leads manage any required situation reports.	GREEN
	Infectious Disease Outbreak	Y	Y	Y	Y	Y	Y	Y	Y	Y		Y	Y	Section 4.6 of the South Yorkshire & Bassetlaw CCGs' EPRR procedures note that the Civil Contingencies Act 2004 places the duty upon Category 1 and 2 Responders to have regard for the needs of vulnerable people. It is not easy to define in advance who are the vulnerable people to whom	GREEN

Core standard	Clarifying information	Acute healthcare providers	Specialist providers	Ambulance service providers	Community services providers	Mental healthcare providers	NHS England Area teams	NHS England Regional & national	CCGs	CSUs (business continuity only)	Primary care (GP, community pharmacy)	Other NHS funded organisations	Evidence of assurance	Self assessment RAG Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months. Amber = Not compliant but evidence of progress and in the EPRR work plan for the next 12 months. Green = fully compliant with core standard.														
	Evacuation	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	special considerations should be given in emergency plans. Those who are vulnerable will vary depending on the nature of the emergency. For planning purposes our policies confirm that there are broadly three categories that should be considered: • Those who for whatever reason have mobility difficulties, including people with physical disabilities or a medical condition and pregnant women; • Those with mental health conditions or learning difficulties; • Others who are dependent, such as children or very elderly. The policies note that the CCGs need to ensure that in an incident people in the vulnerable people categories can be identified via contact with other healthcare services such as GPs and Social Services.	GREEN														
	Lockdown	Y	Y	Y	Y	Y	Y	Y		Y	Y			N/A														
	Utilities, IT and Telecommunications Failure	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		GREEN														
	Excess Deaths/ Mass Fatalities	Y	Y	Y				Y	Y					N/A														
	having a Hazardous Area Response Team (HART) (in line with the current national service specification, including a vehicles and equipment replacement programme) firearms incidents in line with National Joint Operating Procedures;			Y										Y	N/A													
9	Ensure that plans are prepared in line with current guidance and good practice which includes:	<ul style="list-style-type: none"> • Aim of the plan, including links with plans of other responders • Information about the specific hazard or contingency or site for which the plan has been prepared and realistic assumptions • Trigger for activation of the plan, including alert and standby procedures • Activation procedures • Identification, roles and actions (including action cards) of incident response team • Identification, roles and actions (including action cards) of support staff including communications • Location of incident co-ordination centre (ICC) from which emergency or business continuity incident will be managed • Generic roles of all parts of the organisation in relation to responding to emergencies or business continuity incidents • Complementary generic arrangements of other responders (including acknowledgement of multi-agency working) • Stand-down procedures, including debriefing and the process of recovery and returning to (new) normal processes • Contact details of key personnel and relevant partner agencies • Plan maintenance procedures (Based on Cabinet Office publication Emergency Preparedness, Emergency Planning, Annexes 5B and 5C (2006))											The South Yorkshire & Bassetlaw CCGs' EPRR Policies and Business Continuity Plans are refreshed upon changing circumstances or changing national guidance and are based on NHS England guidance. • The South Yorkshire & Bassetlaw CCGs' EPRR Policies have been shared with the LHRP for peer review and comment, and through the representative Director of Public Health with our local Category 1 Responders - the Local Authorities. • The South Yorkshire & Bassetlaw CCGs' EPRR Policies have been prepared to encompass our commissioning role and our role as statutory NHS Bodies. Policies include an activation flowchart (Action Card 2), and action cards for key roles and actions of incident response team and support staff including Communications and Loggists (action card 1) . • The location of incident co-ordination centres (ICCs) are noted in policies from which emergency or business continuity incidents will be managed. If the building is compromised, mutual aid via partner CCGs has been agreed. • Generic roles of all parts of the organisations in relation to responding to emergencies or business continuity incidents are captured in our business continuity plan. • Stand-down procedures, including debriefing and the process of recovery and returning to normal processes are captured in both EPRR and Business Continuity policies. • Contact details of key personnel and relevant partner agencies are held separately in 'pick-up packs'. The South Yorkshire & Bassetlaw CCGs' EPRR Policies are approved by Governing Bodies. Approval of the Business Continuity Policy & Plan is may be delegated through organisational structures.	GREEN														
10	Arrangements include a procedure for determining whether an emergency or business continuity incident has occurred. And if an emergency or business continuity incident has occurred, whether this requires changing the deployment of resources or acquiring additional resources.	Enable an identified person to determine whether an emergency has occurred - Specify the procedure that person should adopt in making the decision - Specify who should be consulted before making the decision - Specify who should be informed once the decision has been made (including clinical staff)											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs have activation action cards and incident manager action cards in place in the event of incidents.	GREEN	
11	Arrangements include how to continue your organisation's prioritised activities (critical activities) in the event of an emergency or business continuity incident insofar as is practical.	Decide: - Which activities and functions are critical - What is an acceptable level of service in the event of different types of emergency for all your services - Identifying in your risk assessments in what way emergencies and business continuity incidents threaten the performance of your organisation's functions, especially critical activities											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' critical activities are captured in our Business Continuity Plans. Teams have clear plans in place for how these are managed.	GREEN		
12	Arrangements explain how VIP and/or high profile patients will be managed.	This refers to both clinical (including HAZMAT incidents) management and media / communications management of VIPs and / or high profile management											Y	Y	Y	Y	Y									N/A		
13	Preparedness is undertaken with the full engagement and co-operation of interested parties and key stakeholders (internal and external) who have a role in the plan and securing agreement to its content												Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' EPRR Policies were developed as a framework across the South Yorkshire & Bassetlaw CCGs to support mutual aid arrangements and consistency in the local patch. The template was peer-reviewed by the LHRP. Once localised, Policies were consulted on and approved by our Governing Bodies. The South Yorkshire & Bassetlaw CCGs' Business Continuity Policies and Plans were developed by our staff teams supported by the Corporate Governance Leads and approved within our governance structures.	GREEN	
14	Arrangements include a debrief process so as to identify learning and inform future arrangements	Explain the de-briefing process (hot, local and multi-agency, cold)at the end of an incident.											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Section 6 of the South Yorkshire & Bassetlaw CCGs' EPRR procedures capture de-brief arrangements.	GREEN	
Command and Control (C2)																												
15	Arrangements demonstrate that there is a resilient single point of contact within the organisation, capable of receiving notification at all times of an emergency or business continuity incident; and with an ability to respond or escalate this notification to strategic and/or executive level, as necessary.	Organisation to have a 24/7 on call rota in place with access to strategic and/or executive level personnel											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Incidents within Providers are noted through the South Yorkshire & Bassetlaw CCGs' normal switchboard number in-hours. The South Yorkshire & Bassetlaw CCGs have empowered our Providers through clear policies (e.g. Divert Policy) to take whatever action is necessary to manage an incident if they cannot contact the named CCG Leads, and then advise the CCG when practicable after the event. Incidents which occur out of hours should therefore not require CCG intervention. If they do require CCG intervention, a Memorandum of Understanding (MOU) is in place between the South Yorkshire & Bassetlaw CCGs and the Area Team as agreed by Mr Phil Storr from NHS England. The MOU confirms how the South Yorkshire & Bassetlaw CCGs would act in the event of an emergency. Key contacts from the South Yorkshire & Bassetlaw CCG have been provided to NHS England as part of this Memorandum of Understanding, with further enhanced on-call arrangements for specific local events such as the Tour de France and EDL marches. The South Yorkshire & Bassetlaw CCGs have generic EPRR email addresses used routinely for EPRR communications and these accounts are checked daily. We have access to the Resilience Direct service.	GREEN		
16	Those on-call must meet identified competencies and key knowledge and skills for staff.	NHS England published competencies are based upon National Occupation Standards .											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	As Category 2 organisations, the South Yorkshire & Bassetlaw CCGs have evaluated that further training beyond that already accessible through peer support within local areas and through the LHRP is not necessary. All those key contacts for the South Yorkshire & Bassetlaw CCGs whose contact details are logged with the Area Team have significant experience at Executive Level.	GREEN	
17	Documents identify where and how the emergency or business continuity incident will be managed from, ie the Incident Co-ordination Centre (ICC), how the ICC will operate (including information management) and the key roles required within it, including the role of the loggist .	This should be proportionate to the size and scope of the organisation.											Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	The South Yorkshire & Bassetlaw CCGs' Incident Control Centres are supplied with hard copies of all relevant EPRR / Business Continuity documents and activation / action cards alongside useful contact lists. Remote IT working has been enabled. IT Providers have continuity systems in place which are assessed and reported through the Information Governance Toolkit. Mutual aid arrangements with partner CCGs provide for additional or replacement Incident Control Centres if required.	GREEN	
18	Arrangements ensure that decisions are recorded and meetings are minuted during an emergency or business continuity incident.												Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	An action card is included in the South Yorkshire & Bassetlaw CCGs' EPRR procedures for a Loggist. Loggists will participate in local training e.g. Exercise Cygnus in October 2014.	GREEN		
19	Arrangements detail the process for completing, authorising and submitting situation reports (SITREPs) and/or commonly recognised information pictures (CRIP) / common operating picture (COP) during the emergency or business continuity incident response.												Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Situation report arrangements for the South Yorkshire & Bassetlaw CCGs are determined by the Incident Lead Executive in line with the escalation action card and the Incident Lead Executive action card.	GREEN		
20	Arrangements to have access to 24-hour specialist adviser available for incidents involving firearms or chemical, biological, radiological, nuclear, explosive or hazardous materials, and support strategic/gold and tactical/silver command in managing these events.	Both acute and ambulance providers are expected to have in place arrangements for accessing specialist advice in the event of incidents chemical, biological, radiological, nuclear, explosive or hazardous materials											Y		Y												N/A	
21	Arrangements to have access to 24-hour radiation protection supervisor available in line with local and national mutual aid arrangements;	Both acute and ambulance providers are expected to have arrangements in place for accessing specialist advice in the event of a radiation incident											Y		Y													N/A
Duty to communicate with the public																												

Core standard	Clarifying information	Acute healthcare providers	Specialist providers	Ambulance service providers	Community services providers	Mental healthcare providers	NHS England Area teams	NHS England Regional & national	CCGs	CSUs (business continuity only)	Primary care (GP, community pharmacy)	Other NHS funded organisations	Evidence of assurance	Self assessment RAG
														Red = Not compliant with core standard and not in the EPRR work plan within the next 12 months. Amber = Not compliant but evidence of progress and in the EPRR work plan for the next 12 months. Green = fully compliant with core standard.
22	Arrangements demonstrate warning and informing processes for emergencies and business continuity incidents.												<p>An Action Card for the Communications Lead is included in the South Yorkshire & Bassetlaw CCGs' EPRR Procedures. The majority of communications will be via Providers or via Category 1 Responders, who the CCGs shall support as required.</p> <p>In respect of EPRR for incidents/risks that affect all multi-agency partners, the South Yorkshire & Bassetlaw Area Team provides strategic co-ordination of the local health economy and represents the NHS at the South Yorkshire Local Resilience Forum (LRF). The initial communication of an incident alert is to the first on-call officer of the South Yorkshire & Bassetlaw Area Team.</p> <p>The Loggist action card and recording proforma ensures 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.</p> <p>These arrangements are complemented by the South Yorkshire & Bassetlaw CCGs' "business as normal" communications channels.</p>	GREEN
23	Arrangements ensure the ability to communicate internally and externally during communication equipment failures												The South Yorkshire & Bassetlaw CCGs' IT providers have resilience arrangements in place. Back-ups via mobile phones are available.	GREEN
Information Sharing – mandatory requirements														
24	Arrangements contain information sharing protocols to ensure appropriate communication with partners.												<p>These must take into account and include DH (2007) Data Protection and Sharing – Guidance for Emergency Planners and Responders or any guidance which supercedes this, the FOI Act 2000, the Data Protection Act 1998 and the CCA 2004 'duty to communicate with the public', or subsequent / additional legislation and/or guidance.</p> <p>As Category 2 Responders, the South Yorkshire & Bassetlaw CCGs have a duty to share information and cooperate. In the event of an incident, we will use our generic email addresses used for EPRR as the main route of communication and the Incident Control Centre number as the main telephone number. The Communications Leads will coordinate communications.</p> <p>We share information via the Local Health Resilience Partnership and via local Emergency Planning Meetings.</p> <p>We have local Information Sharing Agreements (ISA) / Policies for "business as normal" across our local strategic partnerships which also support EPRR. We also have social media accounts which are useful for rapid dissemination of information.</p> <p>We have a mutual aid agreement for premises with our partner CCGs.</p>	GREEN
Co-operation														
25	Organisations actively participate in or are represented at the Local Resilience Forum (or Borough Resilience Forum in London if appropriate)													GREEN
26	Demonstrate active engagement and co-operation with other category 1 and 2 responders in accordance with the CCA													GREEN
27	Arrangements include how mutual aid agreements will be requested, co-ordinated and maintained.												NB: mutual aid agreements are wider than staff and should include equipment, services and supplies.	GREEN
28	Arrangements outline the procedure for responding to incidents which affect two or more Local Health Resilience Partnership (LHRP) areas or Local Resilience Forum (LRF) areas.													N/A
29	Arrangements outline the procedure for responding to incidents which affect two or more regions.													N/A
30	Arrangements demonstrate how organisations support NHS England locally in discharging its EPRR functions and duties												Examples include completing of SITREPs, cascading of information, supporting mutual aid discussions, prioritising activities and/or services etc.	GREEN
31	Plans define how links will be made between NHS England, the Department of Health and PHE. Including how information relating to national emergencies will be co-ordinated and shared													N/A
32	Arrangements are in place to ensure an Local Health Resilience Partnership (LHRP) (and/or Patch LHRP for the London region) meets at least once every 6 months													N/A
33	Arrangements are in place to ensure attendance at all Local Health Resilience Partnership meetings at a director level													GREEN
Training And Exercising														
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												<ul style="list-style-type: none"> Staff are clear about their roles in a plan Training is linked to the National Occupational Standards and is relevant and proportionate to the organisation type. Training is linked to Joint Emergency Response Interoperability Programme (JESIP) where appropriate Arrangements demonstrate the provision to train an appropriate number of staff and anyone else for whom training would be appropriate for the purpose of ensuring that the plan(s) is effective Arrangements include providing training to an appropriate number of staff to ensure that warning and informing arrangements are effective <p>The South Yorkshire & Bassetlaw CCGs' EPRR Policies (section 5.2) note that all staff will be offered relevant training commensurate with their duties and responsibilities. Staff requiring support are asked to speak to their line manager in the first instance. Support may also be obtained through their HR Department. Training can be accessed via the Local Resilience Forum (LRF).</p> <p>As statutory organisations the South Yorkshire & Bassetlaw CCGs learn lessons from all resilience activities and use the Local Resilience Forum and the Local Health Resilience Partnership and network meetings to share good practice.</p>	GREEN
35	Arrangements include an ongoing exercising programme that includes an exercising needs analysis and informs future work.												<ul style="list-style-type: none"> Exercises consider the need to validate plans and capabilities Arrangements must identify exercises which are relevant to local risks and meet the needs of the organisation type and of other interested parties. Arrangements are in line with NHS England requirements which include a six-monthly communications test, annual table-top exercise and live exercise at least once every three years. If possible, these exercises should involve relevant interested parties. Lessons identified must be acted on as part of continuous improvement. Arrangements include provision for carrying out exercises for the purpose of ensuring warning and informing arrangements are effective <p>Those individuals nominated within the South Yorkshire & Bassetlaw CCGs' policies have been briefed on their roles and offered training via the LRF if desired. Most of the individuals have undertaken a similar role in the past and have not needed further training. All those who may receive action cards in the event of an incident have received a pack with information. We have access to the NHS England guidance on roles and responsibilities to support team members. All training needs and training accessed are recorded in annual Personal Development Reviews.</p> <p>The South Yorkshire & Bassetlaw CCGs are invited by our local Category 1 organisations to participate in exercises and are taking part in Cygnus in October 2014.</p>	GREEN
36	Demonstrate organisation wide (including oncall personnel) appropriate participation in multi-agency exercises													GREEN
37	Preparedness ensures all incident commanders (oncall directors and managers) maintain a continuous personal development portfolio demonstrating training and/or incident /exercise participation.													GREEN

**South Yorkshire Emergency Preparedness, Resilience and
Response (EPRR) assurance 2014-15**

STATEMENT OF COMPLIANCE

NHS Sheffield CCG has undertaken a self-assessment against required areas of the NHS England Core Standards for EPRR 2014-2015 (v2.0).

Following assessment, the organisation has been self-assessed as demonstrating the Full (from the four options in the table below) compliance level against the core standards.

Compliance Level	Evaluation and Testing Conclusion
Full	The plans and work programme in place appropriately address all the core standards that the organisation is expected to achieve.
Substantial	The plans and work programme in place do not appropriately address one or more the core standard themes, resulting in the organisation being exposed to unnecessary risk.
Partial	The plans and work programme in place do not adequately address multiple core standard themes; resulting in the organisational exposure to a high level of risk.
Non-compliant	The plans and work programme in place do not appropriately address several core standard themes leaving the organisation open to significant error in response and /or an unacceptably high level of risk.

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 confirmed to the organisation's board/governing body (or delegated group).

Signed _____ Date Signed _____

Accountable Emergency Officer

Date of Board/governing body/(or delegated group) meeting