


Agenda Item: 11.0

<p>Governing Body Meeting <i>held in public</i></p>	<p>Report</p> <p>Date of Meeting: 8 November 2018</p>
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Report Title	EPRR Core Assurance Audit Results		
Report Author	Presented By	Responsible Director	
Mark Meekins	Jane Meggitt (Accountable Emergency Officer)	Jane Meggitt Director of Director of Planned and Unplanned Care	
		<p>Signature:</p> 	
Purpose for presenting report	This report outlines the progress with regards Emergency Preparedness Resilience and Response (EPRR)		
Action Required:	For noting		
Approval Route:	Exec		
Further Assurance:	No		
Which Strategic Objectives does this report provide evidence for?			Please Tick √
We will commission high quality, safe and sustainable models of care that deliver effective clinical outcomes and patient experience using evidence based decisions and best practice			
We will ensure that there is a financially sustainable and affordable healthcare system in Bedfordshire.			
We will lead, engage and operate as an effective place based and STP wide system partner to achieve greater integration of care delivery.			
We will support local people and stakeholders to have an influence on services we commission to ensure our decisions are informed and shaped by local views and insights.			
We will operate and manage our Governing Body to the highest standards of accountability and transparency.			√
Implications/Assessments	Yes	No	N/A
Have any financial implications been signed off by the Chief Finance Officer?			√
Have any quality implications been signed off by the Director of Nursing & Quality?			√
Have any privacy implications been signed off by the Head of Information Governance?			√
Have any conflicts of interest implications been signed off by the Corporate Office?			√
Have any public engagement implications been signed off by the Head of Communications & Engagement?			√
Has an Equality Impact Assessment been carried out?			√

Key Risks	Primary Care Business Continuity
Executive Summary	<p>In accordance with the NHS England Emergency Planning Framework 2015, the CCG is required complete a self-assessment yearly of the NHS Core Standards. In recent years, we have provided varying levels of compliance, but this year we are able to assure the Governing Body that we have secured full compliance.</p> <p>2015 Partial Compliance Status 2016 Substantial Compliance Status 2017 Full Compliance 2018 Full Compliance</p> <p>Bedfordshire CCG has successfully coordinated the NHS response to the following incidents over the previous year:</p> <ul style="list-style-type: none"> • Wannacry Ransomware attack coordinating the response for our providers and Primary Care • The rise in the National Alert Level to Critical on two occasions that necessitated appropriate communications to our providers and partners • Severe weather and snow in December, February and March. <p>Additional information pertaining to lessons learned from major incidents and training are available on request.</p> <p>To ensure Bedfordshire CCG remains compliant with NHS England's Core Standards for EPRR and the Civil Contingencies Act 2004 the following has been identified as the priorities for the coming year:</p> <ul style="list-style-type: none"> • Review and update the Incident Response Plan • Undertake the statutory exercises stated in the Civil Contingencies Act 2004 and NHS England EPRR Framework. These are: <ul style="list-style-type: none"> • Twice yearly communications exercise • Yearly table top exercise • Review and update and exercise the Local Resilience Forum Pandemic Flu Plan, on receipt of the updated guidance • Develop and lead a business continuity exercise for GP Practice Managers • Continuous training for on-call managers and directors • Plan in partnership with Public Health England, an exercise to review the NHS response in Bedfordshire to incidents involving outbreaks of Meningitis, Hepatitis A and Invasive Group A Streptococcus

1. Introduction

1.1 NHS organisations and providers of NHS funded care must:

- Nominate a director level accountable emergency officer who will be responsible for EPRR;
- Contribute to area planning for EPRR through local health resilience partnerships (LHRPs) and other relevant groups.

1.2 The NHS needs to plan for, and respond to, a wide range of incidents and emergencies that could affect health or patient care. These could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident. The Civil Contingencies Act (2004) requires NHS organisations, and providers of NHS-funded care, to show that they can deal with such incidents while maintaining services. This programme of work is referred to in the health community as Emergency Preparedness, Resilience and Response (EPRR).

2. Background

2.1 All commissioners and providers of NHS funded care and services are expected to comply with the standards and principles for emergency planning laid down in the:

- The Civil Contingencies Act 2004;
- Section 252A of the National Health Service Act 2016 as amended by Section 46 of the Health and Social Care Act 2012;
- NHS England Emergency Preparedness Framework 2015;
- Other applicable NHS England EPRR guidance; and
- The 2015/16 NHS Standard Contract.

2.2 In addition, the CCG should produce, review and validate up-to-date incident response plans, in accordance with current NHS England guidance, in order to:

- a) provide training and support during planned exercises for staff as well as working in close cooperation with the Bedfordshire Local Resilience Forum;
- b) ensure that communication strategies and procedures are in place to deal with any event within the scope of a major incident and service continuity planning;
- c) implement internal organisational incident response plans and maintain the local health economy response in support of NHS England requirements as appropriate;
- d) effectively contribute to the combined response of all emergency services and other agencies, including by mutual aid;
- e) support the delivery (as appropriate) of primary and community health services, including the mobilisation of community resources and supporting designated receiving hospitals where appropriate;

- f) assist NHS England to compile an annual report for the regional director on the health sector's emergency planning, capability and capacity in responding to national, regional or Local Resilience Forum (LRF) level incidents;
- g) participate in NHS England's annual review of compliance against EPRR Core Standards;
- h) encourage the vaccination of staff against seasonal influenza;
- i) send appropriate representation to the LRF, Local Health Resilience Partnership (LHRP) or sub-groups when required to do so; and
- j) liaise with local authority and voluntary agencies in the provision and receipt of wider assistance during major incidents.
- k) give due consideration to potential impacts of any proposed service change on the ability of the NHS to effectively plan for / or respond to an emergency.

Recommendation

The Governing Body are asked to note that we have secured full compliance.