

# Emergency Preparedness Resilience & Response (EPRR) Policy



**Please complete the table below:**

*To be added by corporate team once policy approved and before placing on website*

<b>Policy ref no:</b>	17
<b>Responsible Executive Director:</b>	Director of Commissioning
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<b>Date Approved:</b>	October 2019
<b>Approved by:</b>	Governing Body
<b>Date of next review:</b>	October 2021

**Policy Review Checklist**

	Yes / No / NA	Supporting information
Has an Equality Impact Assessment Screening been completed?	No	
Has the review taken account of latest Guidance/Legislation?	Yes	
Has legal advice been sought?	No	
Has HR been consulted?	No	
Have training issues been addressed?	Yes	
Are there other HR related issues that need to be considered?	No	
Has the policy been reviewed by Commissioning Executive	Yes	
Are there financial issues and have they been addressed?	Yes	Budget Code available should additional resource be required. This enables governance and audit

	Yes / No / NA	Supporting information
What engagement has there been with patients/members of the public in preparing this policy?	NA	
Are there linked policies and procedures?	Yes	Incident Response Plan Business Continuity Policy and Plan
Has the lead Executive Director approved the policy?	Yes	
Which Committees have assured the policy?	Yes	Commissioning Exec
Has an implementation plan been provided?	No	Implementation plans for IRP & BC Plan
How will the policy be shared with		Intranet and Incident Response
Will an audit trail demonstrating receipt of policy by staff be required; how will this be done?	No	

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# Emergency Preparedness Resilience and Response Policy

## 1 Introduction

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.

A significant incident or emergency is any event that cannot be managed within routine service arrangements. It requires the implementation of special procedures and involves one or more of the emergency services, the NHS or a Local Authority.

NHS funded organisations must also be able to maintain continuous levels in key services when faced with disruption from identified local risks such as severe weather, fuel or supply shortages or industrial action. This is known as business continuity management (BCM).

## 2 Aim and Objectives

The aim of this policy is to ensure Bristol North Somerset and South Gloucestershire (BNSSG) Clinical Commissioning Group (CCG) has a documented framework for staff to invoke during incident response

The objectives of the EPRR Policy are to ensure the CCG:

- a. has adequate plans to prepare for, respond to and recover from incidents as a Category 2, co-operating responder and to support NHS England / Improvement as a Category 1, core responder
- b. gains assurance that local NHS funded health services and the local health system has adequate plans to prepare for, respond to and recover from incidents
- c. operates within the legal framework for
  - i. civil contingencies
  - ii. health & social care act
- d. meets its obligations under the NHS England Framework and Core Standards for EPRR

### 3 Policy Statement

**The CCG will co-operate with Category 1 responders** to support the development of appropriate multi-agency EPRR policies and plans.

This will be achieved by:

- Membership and engagement with
  - a. Avon and Somerset Local Health Resilience Partnership
  - b. Avon and Somerset Local Resilience Forum
  - c. Health & Wellbeing Boards (Bristol, North Somerset, South Gloucestershire)
- Supporting the planning, response and recovery phases of incidents
- Participating in EPRR exercises organised at national, regional and local level.
- Identifying lessons learned through the debrief process to improve planning and response and inform future training needs.

**The CCG will manage and review a work programme based on risk**

This will be achieved by reviewing identified and emerging risks:

- National Risk and Threat Registers
- Avon and Somerset Local Resilience Forum Community Risk Register
- Local Health Resilience Partnership Health based risk register
- BNSSG CCG Corporate and Commissioning Directorate Risk Registers

**The CCG will share information appropriately** with partner organisations to support management of and recovery from incidents in accordance with information sharing protocols.

**The CCG will develop and test its own plans** as required by NHS England EPRR Framework, these include:

- a. Incident Response Plan
- b. Business Continuity Plan
  - i. Fuel Disruption
  - ii. Severe weather
  - iii. Infectious Disease
  - iv. Utilities (Gas, electric, water) failure
  - v. Informatics

c. Pandemic Influenza

**The CCG will operate a robust Emergency Preparedness Resilience & Response (EPRR) Strategy.** This will include the suite of on-call documents including system leadership and EPRR command and control structures.

**The CCG will work to maintain “Substantial Compliance” and look to increase to Full Compliance as resilience increases** with NHS England Core Standards for EPRR as assessed annually in the NHS England assurance process.

**The CCG will seek assurance** that NHS funded services it commissions are delivered by organisations that maintain and give assurance through the EPRR process.

This will be achieved through:

- a. NHS England Core Standards assurance process
- b. NHS Standard Contract and contract monitoring processes.

The CCG will establish and maintain an Incident Coordination Centre in South Plaza, or identified secondary location, to provide the appropriate space and equipment to enable the CCG to support the response to an incident.

## 4 Duties and responsibilities

### ***Chief Executive Officer***

The Chief Officer has delegated authority to approve the CCG’s EPRR and BCM policies and procedures.

### ***Director of Commissioning***

The Director of Commissioning is the designated Accountable Emergency Officer and is responsible for ensuring that the CCG has appropriate EPRR and BCM policies, plans and procedures in place.

The Accountable Emergency Officer is a member of the Local Health Resilience Partnership.

### ***Deputy Director of Commissioning, Planning & Performance***

This post is the nominated deputy to Accountable Emergency Officer and line management for the EPRR team

### ***On-Call Director***

The CCG Director on-call is responsible for the management of capacity pressures affecting operational performance across BNSSG.

CCGs have a duty to support NHS England in any response to an incident. The Director on-call is responsible for the management of capacity arising as a consequence of system escalation and/or major incident.

### ***Emergency Preparedness Resilience & Response Manager***

The EPRR Manager is responsible for:

Documenting EPRR policies, plans and procedures and ensuring that they are appropriately embedded through testing, validation and lessons identified/learned.

Ensuring that employees are trained to deliver defined roles in major incident and business continuity plans, including the role of Loggist and are encouraged to practice these skills.

Ensuring that support is provided to CCG staff during and after an incident

Ensuring that appropriate hot and cold de-briefs are carried out after an incident and the learning is shared with other organisations.

Updating major incident and business continuity plans following an exercise or incident.

Managing the CCG's response to NHS England EPRR assurance process

Preparing reports to various committees to ensure appropriate governance.

The Emergency Preparedness Manager is a member of the Avon and Somerset Local Resilience Partnership Tactical Planning Group.

### ***Head of Communications***

The CCG Head of Communications is responsible for managing the communication strategy during incident response and recovery to staff, patients and the public. This is through coordination with communication leads in other organisations.

### ***Commissioning Administration Team***

The Administration Team supports the EPRR Manager in their responsibility for the maintenance of the Incident Coordination Centre room. This includes:

Maintaining an EPRR training register of all CCG staff.

Role of Loggist during Incident response supported by corporate administration team.

### ***Employees***

All employees are responsible for ensuring that they are aware of the CCG's EPRR and BCM policies, plans and procedures and that they have sufficient training to be able to effectively carry out their defined roles in major incident and business continuity plans.



## **5 Funding**

A CCG budget code is available to assign additional resources required (on-call document). There are no monies within this code but enables an audit of additional spend.

## **6 Training requirements**

Employees with a role in EPRR and BCM will be trained according to their level of need following a training needs analysis.

## **7 Governance**

EPRR and BCM policies and plans will be approved by Commissioning Executive following discussion at the EPRR Oversight Delivery Group, Commissioning Executive and / or Governing Body meetings.

## **8 Implementation and Monitoring Compliance and Effectiveness**

Through Internal Governance process and NHSE Core Standards assurance

## **9 References, acknowledgements and associated documents**

- The Civil Contingencies Act (2004) (as amended)
- The Health and Social Care Act (2012)
- NHS Constitution
- NHS England Emergency Planning Framework (2013)
- ISO:22301 Societal Security
- BSI PAS 2015 - Framework for Health Services Resilience
- The Health and Safety at Work Act (1974)
- Cabinet Office, Emergency Preparedness<sup>6</sup> (2006) (as amended)