

Meeting of BNSSG ICB Board

Date: Thursday 7th December 2023

Time: 12:15 – 15:00

Location: Virtual, via Microsoft Teams

Agenda Number:	6.3	
Title:	Emergency Preparedness Resilience & Response (EPRR) Core Standards assurance annual review 2022-2023	
Confidential Papers	Commercially Sensitive	No
	Legally Sensitive	No
	Contains Patient Identifiable data	No
	Financially Sensitive	No
	Time Sensitive – not for public release at this time	No
	Other (Please state)	No
Purpose: Decision/Discussion/For Information		
Key Points for Discussion:		
<p>The NHS England Board has a statutory requirement to formally assure its own and the NHS in England’s readiness to respond to emergencies. This is provided through the EPRR annual assurance process and assurance report. This report is submitted to the Department of Health and Social Care and the Secretary of State for Health and Social Care.</p> <p>As the NHS core standards for EPRR provide a common reference point for all organisations, they are the basis of the EPRR annual assurance process.</p> <p>Providers and commissioners of NHS-funded services complete an assurance self-assessment based on these core standards. This assurance process is led nationally and regionally by NHS England and locally by Integrated Care Boards (ICBs)</p> <p>NHS BNSSG ICB receive a self-assessment and evidence for between 54-68 core standards dependent on type of organisation. The EPRR reviews each submission and supported evidence and agrees with the self-assessment or requests further information. Confirmation is through a confirm and challenge meeting with each provider.</p> <p>NHSE then review the ICBs process to confirm or challenge the process.</p>		
Recommendations:	<ul style="list-style-type: none"> To note the increase in compliance status of BNSSG ICB. To note the increased compliance of our commissioned providers: Sirona care & health and UHBW. To note PPG (111) and SWASfT were assessed by Gloucester and Dorset ICBs respectively and met fully compliant status 	

<p>Previously Considered By and feedback:</p>	<ul style="list-style-type: none"> • Discussed at internal EPRR Operating Delivery Group • Approved by NHS England 30 October 2023 following ICB confirm and challenge meetings with all providers. • For discussion at: <ul style="list-style-type: none"> ○ BNSSG Local Health Resilience Partnership Business Management and Executive Group meetings ○ NHSE SW Regional Health Resilience Partnership • For information at Local Resilience Forum Business Management Group
<p>Management of Declared Interest:</p>	<p>None declared</p>
<p>Risk and Assurance:</p>	<p>Risks are reviewed and mitigation considered and updated monthly through.</p> <ul style="list-style-type: none"> • Performance & Delivery Directorate Risk Register • Local Health Resilience Partnership (LHRP) Risk Register <p>And through assessment of the National Risk Register to inform the Local Resilience Forum (LRF) Community Risk Register</p>
<p>Financial / Resource Implications:</p>	<p>There is a budget code appointed to Emergency Preparedness Resilience & Response should additional monies / resources be required. This budget code has no funding allocated but allows monies to be audited and reclaimed, as appropriate.</p>
<p>Legal, Policy and Regulatory Requirements:</p>	<p>NHS BNSSG ICB is a Category 1 responder under the Civil Contingencies Act, 2004, and as system leaders for the BNSSG Integrated Care System (ICS) we have a duty to ensure we have plans and processes in place to deal with any emergency and ensure our commissioned provider organisations comply. All incident response staff require training to deliver system leadership and exercises are available for staff to embed knowledge and skills.</p> <ul style="list-style-type: none"> • Health & Social Care Act, 2012, • Emergency Preparedness Resilience & Response Framework, 2022 • NHS Constitution
<p>How does this reduce Health Inequalities:</p>	<p>Incident Response and Business Continuity Plans form part of EPRR response enabling BNSSG ICB Directorates and individual organisations to identify and prioritise critical services; this could have an impact on certain groups in the short term only until business as usual is re-instated.</p> <p>The assurance process enables plans, including recovery, processes and lessons learned to be assessed ensuring all organisations are substantially compliant against all core standards. Following the process all organisations are requested to update the ICB on a quarterly basis against those standards not achieved as fully compliant.</p>

How does this impact on Equality & diversity	An assessment has not been completed, as there should be no equality issues during any planning for or during incident response. Throughout any incident response the impacts to patients will be discussed as part of any decision-making process. If identified a review of patient harm will follow as per serious incident review.
Patient and Public Involvement:	BNSSG ICB Communications Team are aware of the need to support in planning for and responding to any incident.
Communications and Engagement:	BNSSG ICB Communications Teams are key in incident response and are a part of the Incident Response Team. BNSSG ICB Communications Team will liaise with NHS England, commissioned provider organisations and multi-agency teams to inform staff, patients, and the public.
Author(s):	Janette Midda; EPRR Manager Caroline Dawe; Deputy Director Performance & Delivery
Sponsoring Director / Clinical Lead / Lay Member:	David Jarrett, Chief Delivery Officer

Briefing Paper

Date: 7th December 2023

Title: Emergency Preparedness Resilience & Response (EPRR) Core Standards assurance for ICB and Providers

Author: Janette Midda

1 Purpose

The purpose of this paper is to inform the Board of the EPRR core standards assurance process for 2022-23 to:

- provide an update on NHS Bristol North Somerset and South Gloucestershire Integrated Care Board (BNSSG ICB) status.
- provide an update on provider services commissioned by BNSSG ICB against NHSE EPRR core standards.

2022-23 deep dive concentrated on additional standards linked to training and exercising.

All organisations assessed achieved substantial or fully compliant.

2 Background

The NHS needs to be able to plan for and respond to a wide range of incidents and emergencies which could affect health or patient care. These could be anything from extreme weather conditions, an infectious disease outbreak, a major transport accident, a cyber security incident or a terrorist act. This is underpinned by legislation contained in the CCA 2004, the NHS Act 2006 and the Health and Care Act 2022. This work is referred to in the health service as emergency preparedness, resilience, and response or EPRR.

From 1 July 2022 NHS BNSSG ICB became a Category 1 responder:

Category 1 responders are required to comply to six duties.

- assess the risk of emergencies occurring and use this to inform contingency planning,
- put in place emergency plans,
- put in place business continuity management arrangements,
- put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency,
- share information with other local responders to enhance co-ordination,
- co-operate with other local responders to enhance co-ordination and efficiency,

- provide advice and assistance to businesses and voluntary organisations about business continuity management (Local Authorities only).

3 Key Points/Issues of Concern

EPRR facilitated the Incident Coordination Centre (ICC) and System Control Centre (SCC) from 4 March 2020 until 11 May 2023 when the function transferred to Urgent Emergency Care. During this time the ICC team supported strategic and tactical on-call 7 days per week.

The EPRR team provide and support emergency preparedness, including business continuity, for the ICB, the Integrated Care System (ICS), the Local Health Resilience Partnership (LHRP), and the Local Resilience Forum (LRF).

4 Risk and Mitigations

National Risk Register high risks are:

- Terrorism
- Cyber
- Mass casualty incident
- Pandemic and / or other Communicable Disease
- Provider failure – Health / Social Care / NHS Supply Chain
- National Power Outage
- Extreme weather events; flooding, heatwave, snow & ice
- Fuel disruption

5 Summary and Recommendations

The EPRR Team have ensured processes are in place to deliver all aspects of Incident Response including plans, command & control, documentation version control, records management.

Debriefs post events have taken place and lessons identified implemented and signed off as lessons learned.

The ICB have supported module 3 of the Covid-19 public inquiry (Preparedness) and are prepared to respond to the request for module 4 (vaccination).

The Team has an annual work programme identified through lessons learned and the EPRR Core Standards assurance relating to compliance and any gaps / events requiring action.

To approve this paper

Our Reference: BNSSG/NOV23

To: Caroline Dawe, Deputy Director
Performance and Delivery, NHS BNSSG ICB

Keith Grimmett
NHS England
Head of EPRR

Copy: Janette Midda, EPRR Manager and
Jack Robison, EPRR Officer

Tel: 07783 816496
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Sent by email

08 November 2023

Dear Caroline,

Emergency Preparedness, Resilience and Response (EPRR) annual assurance outcome for 2023/24.

Thank you for preparing and submitting your self-assessment, supporting evidence and your engagement prior to and during the review meeting held on October 30th, 2023. This letter summarises the outcome of this year's process, capturing any agreed actions.

ICB Outcome Summary

Organisation	2021	2022	2023
NHS BNSSG ICB	Full	Substantial	Full

Your agreed organisational compliance level for 2023 is Full, with the assessment showing full compliance against 100% of applicable standards (47 of 47). See annex 1 for descriptors.

Throughout the 2023 process and as summarised during the confirm and challenge session, you demonstrated comprehensive EPRR and Business Continuity Management Systems alongside recognition of the need for continual review and further development opportunities.

Deep Dive review

The focus of the deep dive for 2023 was EPRR Responder Training. Whilst these additional standards are subject to the same assessment processes as the 47 Core Standards, they are not included directly in your overall outcome scoring.

Your agreed organisational compliance level for the deep dive review is Full, with the assessment showing full compliance against 100% of the standards (10 of 10). See annex 1 for descriptors.

Advisories

NHSE provided comments against several fully compliant standards to support maintenance, general development and to achieve good practice. These comments are broadly termed 'advisories' and apply to the following standards.

Core Standard:

- 2: EPRR Policy
- 6: Continuous Improvement

The detailed narrative outlining suggested actions for standards with advisory comments has been discussed with your EPRR leads. A plan to support these actions should now be developed and form part of the 2024 Core Standards monitoring and support programme beginning in January.

BNSSG System Outcome Summary

You provided a full and concise overview of the approach you have used to undertake the EPRR Core Standards confirm and challenge process for 2023, demonstrating a close working relationship with your providers.

NHSE South-West did not have any observations or advisories to raise in relation to the confirm and challenge process you adopted to assess your providers and acknowledge the high level of support provided to them by your EPRR practitioners. With regards to your partially compliant providers, we noted that progress had been made and that the areas requiring improvement were different to those identified in 2022.

Organisation	2021	2022	2023
AWP	Full	Full	Full
NBT	Substantial	Substantial	Substantial
Sevenside (Brisdoc)	Full	Full	Substantial
Sirona	Substantial	Partial	Substantial
UHBW	Substantial	Partial	Substantial

Additionally, you confirmed that providers operating in BNSSG but covering multiple geographies are assessed by an agreed lead ICB. You confirmed you were engaged in that process for input and have been sighted on both the submission and the outcome as outlined below.

Organisation	2021	2022	2023
Sevenside (PPG)	Full	Substantial	Full
SWASFT	Full	Full	Full

Next Steps

The outcome of this assurance review will be included in the annual EPRR Regional assurance summary letter which is reviewed and endorsed by NHSE South West's Senior Leadership Team before being presented to the NHSE National Team for wider scrutiny.

New ways of working were trialled for 2023 to complete the EPRR annual assurance process, NHSE will now conduct a regional review to capture successes and challenges. We welcome your local reflections on this and will provide feedback via your EPRR practitioners.

If you would like to discuss any elements of the confirm and challenge process and/or the contents of this letter, please do not hesitate to contact me directly.

Finally, thank you again for the hard work put into this year's assurance process while contending with significant system pressures, issues and incidents.

Yours Sincerely,

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

Keith Grimm
Head of EPRR
NHS England South West

Annex 1: Compliance Levels

Organisational rating	Criteria
Full compliance	The organisation is fully compliant against 100% of the relevant NHS EPRR Core Standards
Substantial compliance	The organisation is fully compliant against 89-99% of the relevant NHS EPRR Core Standards
Partial compliance	The organisation is fully compliant against 77-88% of the relevant NHS EPRR Core Standards
Non-compliance	The organisation is fully compliant up to 76% of the relevant NHS EPRR Core Standards