

**REPORT TO THE TRUST BOARD – PUBLIC
11 JULY 2018**

Title	Annual Report 2017/18 - Emergency Planning, Resilience and Response (EPRR) and Business Continuity
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Purpose of the Report:

The purpose of this report is to provide an account of ELFT’s Emergency Planning, Resilience and Response (EPRR) and business continuity arrangements for 2017/18 and to review how the Trust meets its statutory and mandatory obligations in relation to EPRR and business continuity.

The progress against the EPRR Work Plan of 2017/18 will also be reviewed and any outstanding actions will be considered and potentially incorporated in the work plan for 2018/19.

Summary of Key Issues:

The Trust’s arrangements for Emergency Planning, Resilience and Response (EPRR) and business continuity continued to be strengthened during 2017/18. This was primarily through creating a framework of plans that address the highest risks and carrying out exercises to test plans.

Based on the 2017/18 annual assurance submission to NHS England, the Trust received a score of substantial for its compliance of assurance against NHS England Core standards for Emergency Preparedness, Resilience and Response (2015). Only one standard was rated amber relating to HazMat training this has since been met.

The Trust fully participated in multi-agency working by participating in Borough Resilience Forums and the London Resilience Health Partnership including attending joint exercises.

The number of Decision Loggists remains at a constant high level of 20.

Links within Luton and Bedfordshire local EPRR are now firmly established with full participation in their Local resilience Forum by the Governance Facilitator who leads operationally for Luton and Bedfordshire.

The Trust has made limited progress in developing and maintaining up to date business continuity plans clinical services. Exercises and training shown in the original work plan for 2017/18 were not delivered in all areas mainly due to limited resources whilst EP manager was on long-term absence. An interim EP Manager was employed for part of this period.

Strategic priorities this paper supports

Improved patient experience	<input checked="" type="checkbox"/>	Through identifying risk and providing the control measure to remove or reduce them to ensure service user safety.
Improved health of the communities we serve	<input checked="" type="checkbox"/>	Ensuring business continuity throughout any emergency or major incident.
Improved staff experience	<input checked="" type="checkbox"/>	Empowering and supporting staff in providing them with the tools, correct policies and procedures and training to carry out their roles safely.
Improved value for money	<input checked="" type="checkbox"/>	Ensuring the Trust meets its statutory obligations of The Civil contingencies Act 2004 and is compliant with NHS England EPRR Core Standards 2015.

Committees / Meetings where this item has been considered:

Date	Committee / Meeting

Implications:

Equality Analysis	This report has no direct impact on equalities.
Risk and Assurance	The Trust has a statutory duty to comply with the Civil Contingencies Act 2004 and may be subject to penalties if found not to be compliant. Mitigating actions are in place in relation to the risks identified within the report.
Service User / Carer / Staff	Implications for service users, carers and staff. Consider implications of the paper across all directorates and service groups in the Trust, and explain if any directorates/services are excluded from the scope of the paper.
Financial	There are no financial implications relating to the EPRR activity of 2017/18. In general terms, poorly controlled emergencies or lack of business continuity planning may have financial implications for the Trust in the event of emergencies.
Quality	There are no implications for Quality Improvement raised in this report.

Supporting Documents and Research material

a. NHS England - EPRR North East North Central London Assurance Report 2017/18
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Glossary

Abbreviation	In full
EPRR	Emergency Preparedness, Resilience and Response
LHRP	Local Health Resilience Partnership
IRP	Incident Response Plan
NENC	North East North Central London
CBRNe	Chemical, Biological, Radiological and Nuclear Emergencies
IOR	Initial Operational Response
HazMat	Hazardous materials
DSN	Duty Senior Nurse
MTPAS	Mobile Telecommunication Privileged Access

1.0 Background/Introduction

1.1 The Trust under the Civil Contingency Act 2004 as a Category 1 Responder and Department of Health 'Emergency Planning' Regulations, has the following responsibilities:

- Carry out a risk assessment
- Have in place plans to respond to emergencies
- Have in place business continuity plans
- Collaboration and co-operation with other agencies
- Warn and inform the public and other agencies
- Training and exercising.

1.2 The Trust has statutory obligation to train and exercise with a live exercise every three years, and annual table top exercise and a six monthly test of the communication cascade.

1.3 The NHS England Core Standards for EPRR 2015 set out how NHS organisations are to meet their responsibilities and the NHS England EPRR Framework (2015) states that NHS provider organisations are required to have appropriate systems in place.

1.4 With the implementation of the Health and Social Care Act 2012, the responsibility for overseeing EPRR arrangements passed from Primary Care Trusts to NHS England. Local Health Resilience Partnership Groups (LHRP) were established.

1.5 The Trust's EPRR responsibilities are managed and overseen by:

- Health, Safety, Security and Emergency Planning Manager – adopted the emergency management role as a permanent post from February 2016 and achieved the Diploma in Health Emergency Planning.
- Emergency planning and business resilience for Luton and Bedfordshire is currently managed by the Governance Manager for L&B.
- Accountable Emergency Officer – part of the role of the Deputy Chief Executive.
- Associate Director of Governance & Risk Management – overseeing the work of the Emergency Planning Manager.

2.0 Report

2.1 Incident Response Plan (IRP) is modelled against the NHS England Core Standards for EPRR and was evaluated as part of the NHS England annual assurance process. Very minor amendments were suggested as part of the annual NHS England Assurance process and these will form part of the forthcoming work plan for 2018-19.

2.2 The Trust Business Continuity Plan has been created, with focus on infrastructure.

2.3 The following plans were reviewed as part of the annual review cycle:

- Heatwave Plan
- Business Continuity Policy
- Community Health Newham Accelerated Discharge Plan
- Surge Plan
- Severe Weather Plan
- Fuel shortage Plan
- Identifying Vulnerable People Plan
- Pandemic Flu Plan
- Emergency contacts List
- Communication during Major Incident Strategy and Plan

2.4 Business Continuity

Business continuity plans were last refreshed prior to London 2012 consistently across the Trust. During 2017/18 the Emergency Planning Manager has liaised with all Directorates to create plans based on business impact analysis and produce plans using the new templates. This work continues in to 2018/19.

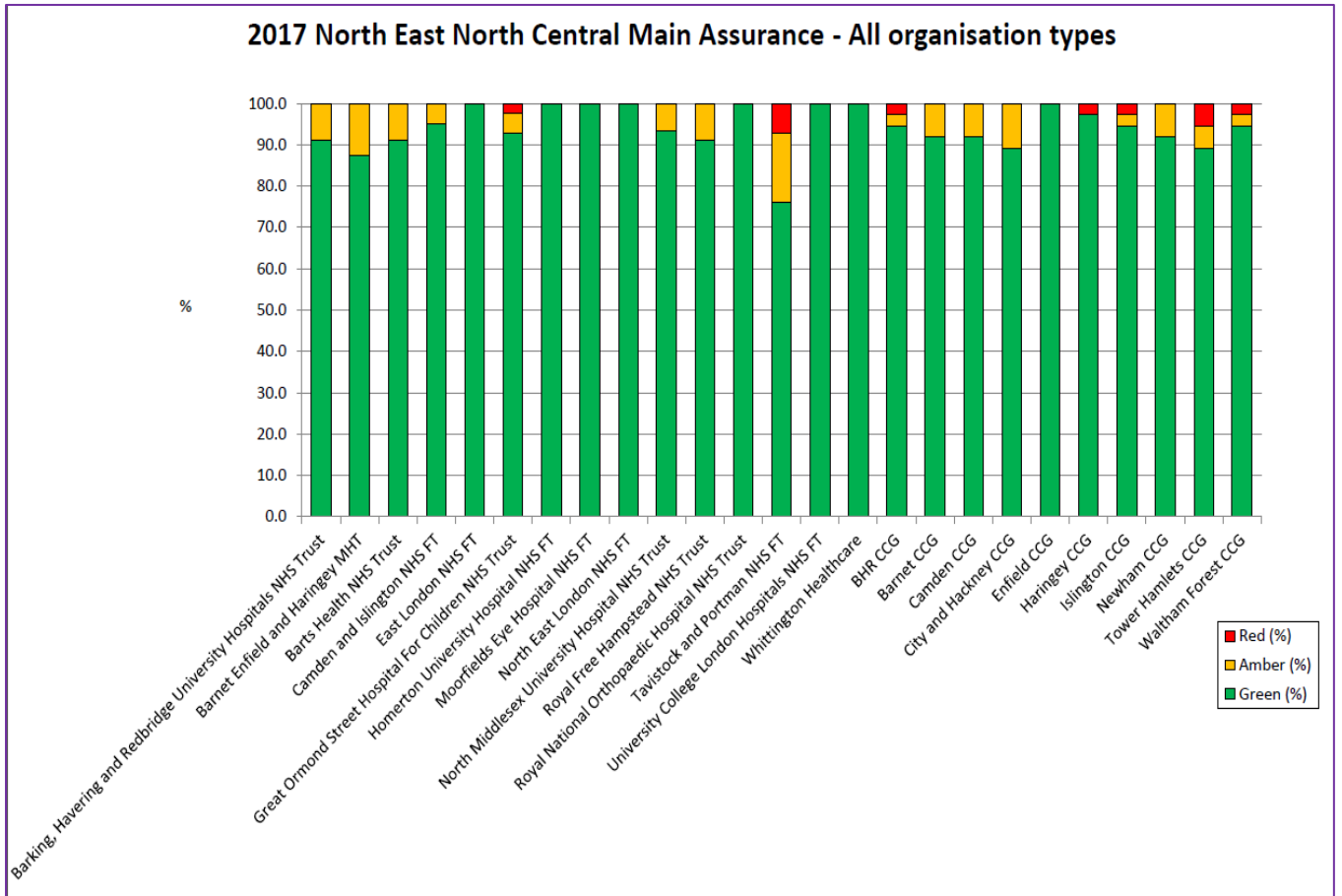
2.5 Assurance

The Trust participated in the Assurance exercise carried out by NHS England (London) EPRR Team in October 2017. This annual assurance process marks compliance against the NHS England Core Standards for EPRR. In respect of ELFT, there was one (1) Amber rated standard, therefore substantial compliance score was recorded for the Trust.

ELFT remains in a positive position and continues to maintain robust EPRR processes and is actively engaging in the wider EPRR community. The Trust has identified some areas for improvement such as training of frontline staff in the use of the IOR procedures whilst only minor edits were suggested to enhance the response documents submitted as evidence.

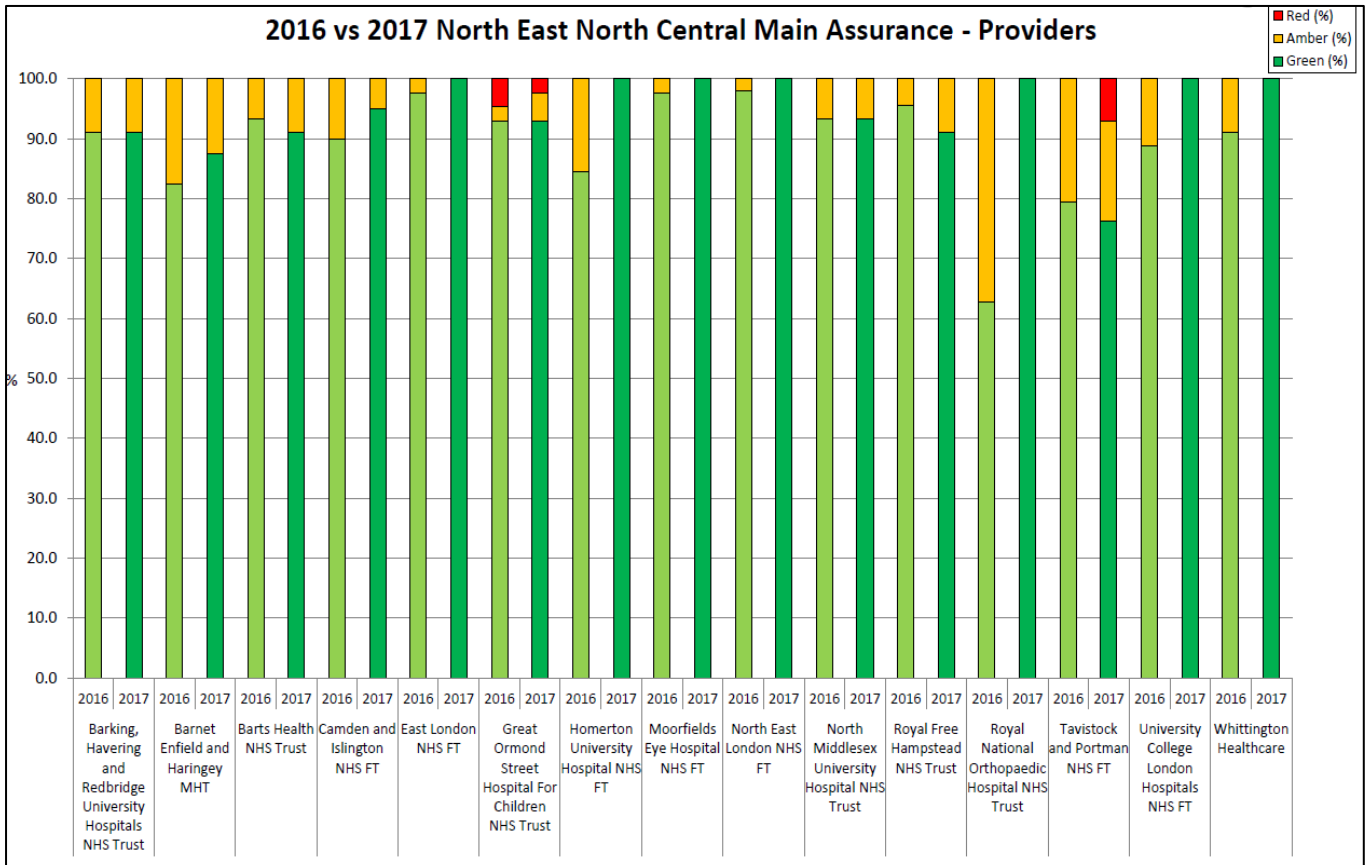
Graph 1 - comparable scores of NENC

Graph 1 below shows comparable scores of NENC trusts for the main assurance process with ELFT scoring 100% compliance.



Graph 2 – comparable scores of NENC 2016 and 2017

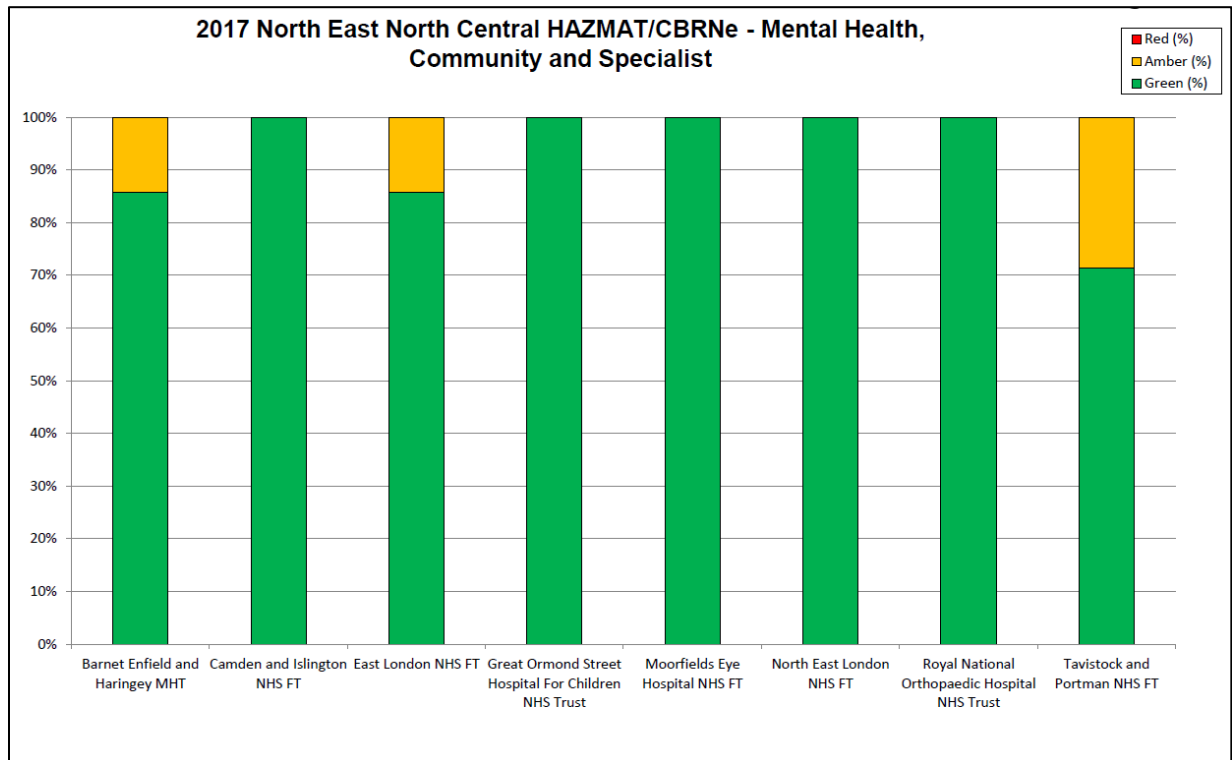
Graph 2 below shows comparative scores with the previous year for the main assurance process.



Graph 3 – comparable scores for HazMat/CBRNe

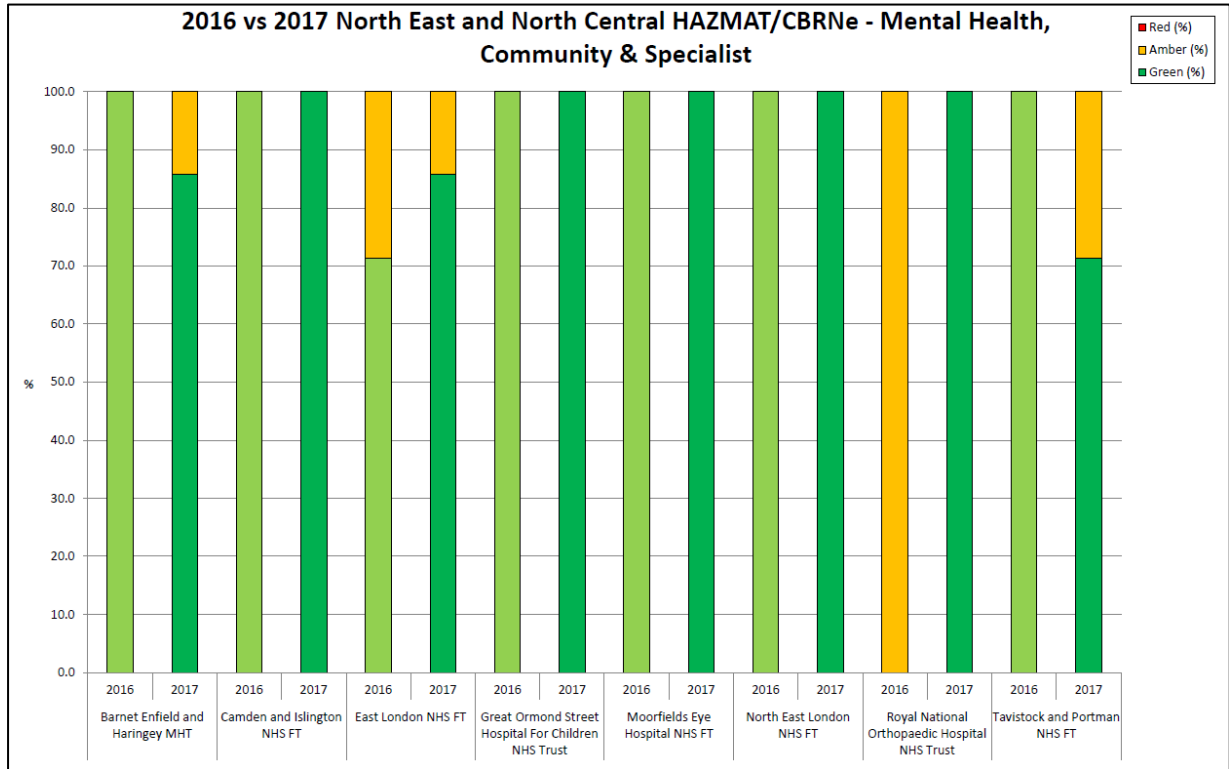
Graph 3 below shows comparable scores of NENC trusts for the HazMat/CBRNe assurance process.

The one amber score above referred to the fact that all reception staff had not received the IOR training. This was incorporated in the EPRR work plan 2017-18 and has now been met.



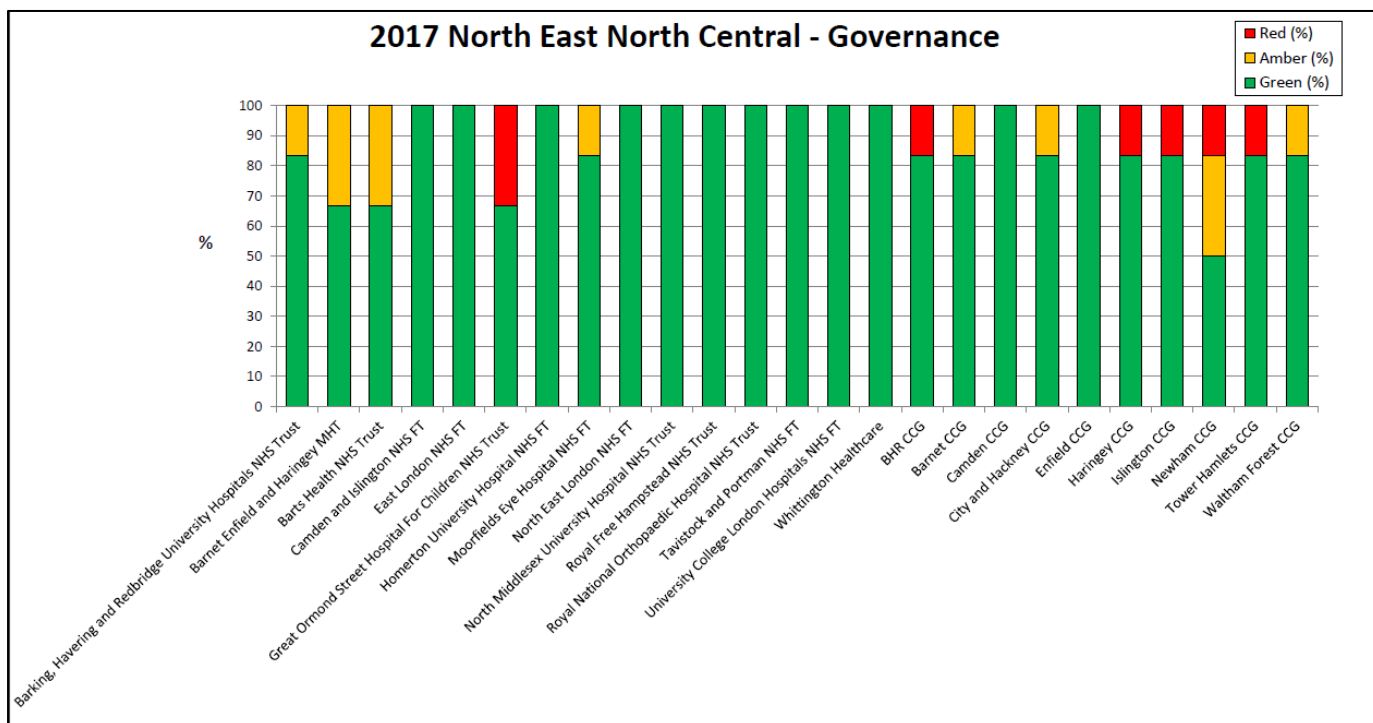
Graph 4 – comparable scores for HazMat/CBRNe 2016 and 2017

Graph 4 below shows comparative scores with the previous year for the HazMat/CBRNe assurance process.



Graph 5 – comparable scores for governance 2017

Graph 5 below shows comparative scores for the governance area of the assurance process with ELFT again scoring 100% compliance.



3.0 Training

3.1 Training was delivered against the 2017/18 training plan.

3.2 An audit of current trained loggists has been carried out and those requiring refresher training have been booked on the online blended course by Public Health England. All Directorates, including Trust HQ have now a number of trained loggists.

3.3 Immediate Operational Response (HAZMAT) train the trainer was delivered for Tower Hamlets CHS on 14th December 2017 and for Newham CHS on 25th January 2018. Cascading of this training to all receptionists has been overseen by the administrative leads in the Directorates.

3.4 Incorporated in this training was advice on responding to a presentation of an acid attack. This was given due to the recently publicised increase in such attacks in the community.

3.5 On completing this training, the Trust is now fully compliant with its obligations under the NHS England Core Standards for EPRR.

4.0 Testing and Exercising

4.1 Exercise Quadro took place at Trust HQ, 9 Alie Street, London, on Friday 5th May 2017. It allowed fifteen directors across the Trust to come together to test how effectively the Trust responds to a major incident. The exercise would seek to evidence effective working in such a setting and to identify any gaps in emergency preparedness.

The opening scenario involved a number of patients barricading themselves on Crystal ward, using broken furniture as weapons. Meanwhile, a patient on an adjoining ward has used the disturbance as a cover to start a fire in the laundry room.

This table-top exercise provided a realistic and very worthwhile exercise with each director playing a pivotal part in the exercise. All of the objectives were met, and it gave improved confidence to all directors and useful lessons were learnt through a hot de-brief with a subsequent action plan being developed to improve future preparedness.

Taking into account the exercise feedback received, the following lessons and actions were identified and have been incorporated into the work plan.

- Conduct DSN (bronze) training to include outside agencies
- Conduct manager on call (silver) training to include outside agencies.
- Enable on call staff to be able to access ESR in the case of staff going missing.
- Conduct director on call induction and training
- Carry out live mock-up annual exercise to involve all levels of staff and outside agencies e.g. police.

4.2 With effect from July 2013, NHS England (London) EPRR has been conducting communication exercises whereby the Director on call is contacted for a response to a pager message within ten minutes or as soon as is practicable. The Trust's response had been variable with there being three occasions when the response was outside the 10 minutes required.

5.0 Major Incidents and Activation of Emergency or Business Continuity Plans

5.1 The Trusts major incident arrangements were further tested when a major incident was declared on Friday 12th May 2017 in response to the worldwide cyber-attack. ELFT saw a few instances of the cyber virus infection which hit other Trusts more significantly across the country. As a precautionary measure and in line with best practice to prevent further spread of the virus the Trust decided to shut down all operational IT services at 5pm on that Friday. Our updated software ensured that the Trust was soon able to start bring services back online with a full service resumed the following Monday afternoon.

6.0 Multi-agency Working

6.1 Emergency Planning Network Forums

The Emergency Planning Manager is a member of the following meetings and attends regularly, contributing accordingly.

- Tower Hamlets, Newham, Hackney and Bedfordshire Local Resilience Forums
- NHS England (London) NENC Network Meetings

6.2 The London Local Health Resilience Partnership (LHRP) Patch Meetings were disbanded in July 2017. Now the Associate Director of Governance & Risk Management and the Deputy Chief Executive attend the London wide Local Health Resilience Partnership meetings.

7.0 EPRR Arrangements at ELFT

7.1 EPRR arrangements for communication during an emergency were reviewed and refreshed.

7.2 Mobile Telecommunication Privileged Access Scheme (MTPAS) – the mobile phones of directors and key managers are registered with the MTPAS so that calls can be made or received during mobile network restrictions.

7.3 All plans and guidance are shown both on the intranet and on the external Trust website.

7.4 A generic email address has been established to be used in the event of a major incident or emergency.

8.0 External Events Affecting Service Delivery

8.1 The London Marathon and Prudential RideLondon 2017 passed through Newham and Tower Hamlets with minimal impact on service delivery.

9.0 ELFT EPRR progress against work plan 2017/18

KEY ACTION	STATUS AT 31/03/2018
Review all plans relating to emergencies and business continuity to ensure they reflect current guidance and legislation.	Completed
Update emergency contact list to ensure it is up to date.	Completed
Continue multi-agency working (LHRPs, Luton and Bedfordshire patch LHRP, Borough Resilience Forums, NHS England (London) NENC Network Meetings)	Completed
Audit of all Trust Incident Control Centres and their emergency boxes.	Carried forward
Review and updating of all service business continuity plans	Carried forward
Strategic Leadership in a Crisis update training for identified on-call Directors	Re-assessed and no longer required
Assess competencies of on-call Directors, create and deliver training	Carried forward
Undertake Immediate Operational response training (Hazmat) to community health centres.	Completed
Undertake DSN emergency planning induction training.	Carried forward
Command, control and communication exercise for directors	Completed
Annual table top exercise to include strategic (gold), tactical (silver) and operational (bronze)	Carried forward
Quarterly reports to Quality Committee	Completed

10.0 Work plan for 2018/19

10.1 The work plan is designed to ensure compliance with the EPRR Core Standards for EPRR (2015).

10.2 Emergency Planning and Business Continuity Action Plan

Table 1 - Key actions to be taken forward during 2018-19

Key Action	Outcome measure	TCD	Lead
Review all Trustwide plans relating to emergencies and business continuity to ensure they reflect current guidance and legislation.	Approved Trustwide policies and plans in place.	March 2019	Emergency Planning Manager
Continue to review and develop local business continuity plans.	Local plans in place.	March 2019	Service Directors / Senior Managers
Review emergency contact list to ensure it is up to date.	Maintained contact list in place and available to key staff.	Bi-Monthly	Emergency Planning Manager
Continue multi-agency working (LHRPs, Luton and Bedfordshire patch LHRP, Borough Resilience Forums, NHS England (London) NENC Network Meetings)	Partnership relationships effective.	Quarterly	Emergency Planning Manager
Annual audit of all Trust Incident Control Centres and their emergency boxes.	All boxes complete.	March 2019	Emergency Planning Manager with senior managers
Training to be delivered in line with Trust Policy.	DSN (bronze) training to potentially include outside agencies completed. Manager on call (silver) training to include outside agencies completed Director on call induction and training completed.	March 2019	Emergency Planning Manager with senior managers
Conduct six monthly communication exercise – trust wide and directorate level	Completed communication exercise with lessons learnt.	March 2019	Emergency Planning Manager with senior managers

Carry out live mock-up annual exercise to involve all levels of staff and outside agencies e.g. police	Completed exercise and lessons learnt	March 2019	Emergency Planning Manager with senior managers
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10.3 Reporting

Regular reporting takes place and key updates are presented to the following committees;

- Quarterly reports to the Quality Committee
- Annual Report to The Board

11.0 Action being requested

11.1 The Board is asked to **RECEIVE** and **APPROVE** report and the associated work plan for 2018/19 set out in section 10.2.