

HSI22/039

GOVERNING BODY

Title of paper	Emergency Preparedness Resilience and Response (EPRR) Annual Report 2021		
Agenda item	13	Date of meeting	4 May 2022
Director lead	Jenny Erwin, HloW ICS Director of Mental Health Transformation and Delivery COVID-19 – Incident Commander and Deputy Accountable Emergency Officer.		
Clinical lead (if applicable)	N/A		
Author	Bev Grantham, EPRR Operational Delivery Manager		

Purpose	For decision	<input type="checkbox"/>
	To ratify	<input type="checkbox"/>
	To discuss	<input type="checkbox"/>
	To note/receive	<input checked="" type="checkbox"/>

Link to strategic objective	This paper has links to Objectives:
	<ul style="list-style-type: none"> • 1 – Operational Delivery • 2 – People and Teams, and • 4- Strategy and Planning

Executive Summary	
<p>This is the Emergency Planning Resilience and Response (EPRR) annual report to the Governing Body which details how EPRR corporate responsibilities under the Civil Contingencies Act 2004 are met and provides assurance that the CCG complies with relevant legislation and guidance (as summarised by the NHS England's core standards for EPRR).</p> <p>As part of this process the Accountable Emergency Officer of the CCG must ensure that the Governing Body receive reports as appropriate, no less frequently than annually, regarding EPRR, including reports on exercises undertaken by the organisation, significant incidents, and provide assurance that adequate resources are made available to enable the organisation to meet the requirements of the core standards.</p> <p>This report contains the final outcome of the 2021/22 EPRR Core Standards Assurance process for Hampshire, Southampton & Isle of Wight CCG.</p>	
Recommendations	The recommendation to the governing bodies is to note the report.

Publication	Include on public website <input type="checkbox"/>
--------------------	---

Please provide details on the impact of following aspects	
Equality and quality impact assessment	The CCG EPRR Policy contains a full EQIA.
Patient and stakeholder engagement	EPRR Plans and Policies are coproduced with input from key stakeholders in each local system and are shared with mutli-agency partners.
Financial and resource implications / impact	There are no financial implications arising from this paper.
Legal implications	The CCG has a statutory obligation to meet the expectations within the 2004 Civil Contingencies Act as a category 2 responder and accepts delegated responsibilities from NHS England & Improvement as a category 1 responder. From 1 st July 2022 the Integrated Care Board (ICB) will be a category 1 responder and much of the current NHS England and NHS Improvement role will transition to the ICB.
Principal risk(s) relating to this paper	
Key committees / groups where evidence supporting this paper has been considered.	Not Applicable

Governance and Reporting – other meetings where <u>this paper</u> been discussed		
Committee Name	Date discussed	Outcome

CONTENT – MEETING PAPERS

1. Summary

1.1. This report provides an EPRR update for Hampshire, Southampton & Isle of Wight CCG. The Governing Body is asked to note the update.

1.2. Hampshire, Southampton & Isle of Wight CCG continues to have an agreement with Portsmouth CCG to work together to deliver their responsibilities under the Civil Contingencies Act 2004 using a single service level agreement.

As detailed in the NHS England Emergency Planning Resilience and Response Framework (2015), the Accountable Emergency Officer of the CCG must ensure that they provide assurance to the Board that strategies, systems, training, policies and procedures are in place to ensure an appropriate response for their organisation in the event of an incident.

1.3. This report will:

- Summarise the final outcome of the EPRR annual core assurance process
- Provide an update on EPRR exercises, training and events
- Set out next steps

2. Accountable Emergency Officers/Non-Executive Directors

2.1. Each CCG is required to appoint a board level officer/director as Accountable Emergency Officer (AEO). Maggie MacIsaac is the AEO for both Hampshire, Southampton & Isle of Wight, and Portsmouth CCGs. She is supported in her role by Deputy AEO's:

- Jenny Erwin, Director of Mental Health Transformation and Delivery & COVID-19 – Incident Commander
- Jo York, Managing Director, Health, and Care Portsmouth

2.2. Additionally, CCGs are required to have a Non-Executive Director (NED) which can be a Lay Member who is an independent member of the Board who can support the AEO's but also hold them to account. The independence/impartiality of this person is essential. The CCG's have appointed:

- Simon Garlick, Hampshire Southampton, and Isle of Wight CCG
- Andrew Silvester, Portsmouth CCG

3. Governance

3.1. The AEO is responsible for the overall provision of EPRR and for reporting to the Governing Body and to NHS England & NHS Improvement through the Local Health Resilience Partnership meeting.

3.2. The CCG has an EPRR Policy in place which outlines the requirements for Emergency Preparedness, Resilience and Response (EPRR) detailing the minimum requirements for planning and responding to a major incident across the Hampshire, Southampton, and Isle of Wight CCG. This was updated in 2021 during the re-organisation and will be further amended in July 2022 to reflect the change to the Integrated Care Board.

3.3. EPRR plans and policies are co-produced and reviewed by stakeholders within local each system and shared with multi-agency partners.

- 3.4. Hampshire Southampton and Isle of Wight policies and plans are ratified at the Audit and Risk Committee.
- 3.5. From November 2021, a quarterly EPRR working group has been established with representation from each local system to discuss internal resilience and business continuity issues impacting the CCG. Task and finish groups will be established as required to progress specific EPRR projects as they arise.

4. On Call

- 4.1. The EPRR team maintains a CCG on-call rota for each of the four local health systems in HIOW.
- 4.2. There is also an executive HIOW rota which provides an escalation point for local system on call managers. This enables multi-system escalations to be managed in a coordinated way.
- 4.3. Each local system rota comprises of an on call manager and a buddy, except for the Isle of Wight who, due to resource constraints, cannot operate a buddy system. The role of the buddy is to take over the on call manager role in the event of short notice sickness or absence.
- 4.4. A review of the On Call Policy took place in November 2021 to ensure the rotas are sustainable and adequately resourced. As part of this review, it was agreed that all staff members banded 8c and above would be expected to join the rotas. A comprehensive training package has been offered to those who are less familiar with operational pressures, which includes shadowing a proficient On Call Manager, buddy arrangements for first periods on call, and 1:1 on call training.
- 4.5. The majority of calls to on call managers have been regarding:
 - Pressure in the local health system particularly related to ambulance queuing.
- 4.6. An on-call pack is issued to all on call staff and details the system escalation process, contacts list, major incident action cards, site risk action cards and the health protection process. There is a training package in place for on-call managers to ensure they are supported to undertake their role. This training comprises of three separate sessions annually including Surge and escalation, Major Incident Response, and Legislation and record keeping. The EPRR team are also developing a scenario-based training package to be offered to on call staff from June 2022.

5. Local Health Resilience Partnership (LHRP)

- 5.1. The LHRP is a strategic emergency planning meeting of all the NHS organisations from across Hampshire and Isle of Wight. It is co-chaired by the Deputy AEO for Hampshire Southampton and Isle of Wight CCG and the Portsmouth City Council Director of Public Health.
- 5.2. The CCGs Associate Director of EPRR co-chairs the subgroup (Business Management Group – BMG) with a consultant from Hampshire County Council Public Health team which supports the LHRP, and the EPRR team have attended all meetings.
- 5.3. The LHRP Three-Year Strategy 2022-2025 has been drafted and circulated for consultation. Final approval will be sought at the next LHRP Executive meeting on the 4th May 2022. The LHRP plans its preparedness, resilience and response based on HIOW Local Resilience

Forum Community Risk Register culminating in a collaborative annual training and exercising work programme. The workplan is completed by ensuring detailed milestones, deadlines to improve and enhance EPRR interoperability across the local health and social care community.

6. Training

- 6.1. All on call staff are expected to have completed at least one training session in the year.
- 6.2. On call training sessions on Surge and Escalation, Major Incident Response and Legislation and Record Keeping took place throughout 2021 via MS Teams.
- 6.3. For 2022 the EPRR team are developing a scenario-based training session to be delivered from June onwards. This will include simulated sitreps, reports and injects to test the CCG response to incidents.
- 6.4. The LRF have resumed delivery of Strategic and Tactical Coordinating Group training following cancellations due to Covid related IPC constraints in the previous two years. The Associate Director of EPRR works closely as part of the LRF Training and Exercising Group and facilitates some of these sessions. The EPRR team also provide a tactical advisor to support HIOW on call staff attending the sessions.
- 6.5. A loggist training programme has been re-established virtually in 2022, offering both full and refresher loggist courses. All on call staff are also aware of their responsibilities to log their decisions and actions and are trained in best practice.

7. Events

- 7.1. The EPRR team maintain strong connections with multi-agency partners to ensure awareness of local events that may impact the health system, and the team are represented at local council lead Safety Advisory Groups.

8. Exercises

- 8.1. In the last year the CCG has participated in the three yearly statutory exercises for testing the local Control of Major Accident Hazards (COMAH) site plans for both BP Hamble and Defence Munitions Gosport (DMG).
- 8.2. The CCG is also involved in the planning of a multi-agency CBRN exercise, Neon Mist, due to take place in October which follows on from the CBRN awareness session held in 2021.

9. Communications exercise

- 9.1. On Thursday 3rd June 2021, the EPRR team undertook a communications test to confirm emergency contact numbers for partners were up to date, as well as to test the response from CCG staff to emergency communications. Following feedback from the last exercise, staff were pre-warned via StayConnected that a comms test would be completed over the coming weeks. This helped to reassure staff that the message was not a scam. The communications test highlighted twenty eight staff who have left the organisation and encouraged sixteen additional staff to sign up to TextAnywhere (the chosen method of emergency communication). The EPRR team will continue to work with Business Managers and attend the CCG corporate inductions to capture leavers and joiners.
- 9.2. The CCG also participated in Exercise Talk Talk by NHS England and NHS Improvement on 7th March, as well as a communications test completed by Defence Munitions Gosport, on 20th April. In addition to these, the CCG is also part of a monthly multi-agency emergency response test initiated by SCAS using their automated 'Everbridge' system.

10. Incidents

10.1. The CCG's Operations Coordination Centre (OCC) remains in place as a single point of contact to manage incidents as well as operational delivery.

10.2. An operating framework to support health and social care has remained in place throughout the Covid 19 response with the objectives to:

- Identify problems that cannot be resolved locally which would benefit from a wider focus and additional support and take action
- Ensure resilience coordination across the whole system by responding to surge needs due to specific factors (e.g., bank holidays, winter)
- Respond to known drivers of high demand and capacity need in a whole system coordinated manner.

10.3. The CCG has also been involved in responses to the Afghan Resettlement Assistance Programme (from Aug 21), Salisbury Train Derailment (Dec 21), Portsmouth Hospital water outage (Jan 22), and currently the Ukrainian refugee programme. The CCG has also responded to a number of smaller severe weather related and water supply issues throughout the county in 2021. For all of these incidents, the CCG has participated in post-incident debriefs to identify lessons and best practice and the EPRR team maintains a lessons identified tracker.

10.4. The draft terms of reference for the Covid19 Public Inquiry have now been published. The CCG continues to run a Public Inquiry Working Group which is meeting monthly and reporting into the Risk and Audit Committee and have recruited to two new roles dedicated to the collation and management of evidence for the inquiry.

11. EPRR Core Standards

11.1. In September 2021 NHS organisations including the CCG carried out a self-assessment of their state of readiness against the NHS England published EPRR core standards.

11.2. Hampshire Southampton & Isle of Wight CCG were fully compliant with 26 of the 29 core standards. The following core standards were rated as only partially compliant and formed part of the improvement plan for the remainder of 21-22. These have now been completed as below:

Core standard	CCG	Update
39 –Media Strategy	Hampshire Southampton & Isle of Wight CCG	Media policy published December 2021
51 – Business Continuity Plans	Hampshire Southampton & Isle of Wight CCG & Portsmouth CCG	Business continuity plans are in place for each site. CCG team plans (finance, CHC etc) have been reviewed and will be collated into a CCG central BC plan where appropriate. All locality senior leadership teams have attended a business continuity awareness and refresher session. This work will continue as the CCG transitions into the Integrated Care Board.
55 - Assurance of commissioned providers /	Hampshire, Southampton & Isle of Wight CCG &	Business continuity assurance with all providers, with a particular focus on supporting one provider with actions. Each local systems had three GP surgery plans audited, with feedback presented to CCG primary care teams. During April and May all practice managers/BC

suppliers BCPs	Portsmouth CCG	leads will be invited to a BC training session (one per local system) facilitated by the EPRR team.
-------------------	-------------------	---

12. Next Steps

- 12.1. Subject to the Health and Care Bill being passed by Parliament and Integrated Care Boards (ICBs) being legally established on 1 July 2022, the Bill is expected to amend the Civil Contingencies Act to designate ICBs as Category 1 responders. Previously, CCGs have been category 2 responders, so this change will mean additional responsibilities and accountabilities for ICBs in comparison to the current duties placed upon CCGs. This will mean ICBs will be subject to the full set of civil protection duties. These duties are set out in the CCA (section 2, paragraph 1) and Chapter 8 of the EPRR framework.
- 12.2 A checklist, developed by NHS England and NHS Improvement supports ICBs to ensure that they meet their civil protection duties and explains what measures should be in place before 1 July 2022 as well as other long-term steps and actions that should be implemented. There are twenty four objectives with only seven remaining in progress with an expected completion before 1st July. These are being reported to the Safe Transfer Board.
- 12.3 The EPRR team will continue to report bi- annually to the Governing Body of the future ICB as well as reporting to the relevant committee on the progress of the Public Inquiry Working Group. The next EPRR assurance round commences in the summer 2022 and will be reported in October 2022.